

Equality and Human Rights Commission
Triennial Review 2010

How fair is Britain? Equality, Human Rights and Good Relations in 2010

The First Triennial Review

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PRESENTED TO PARLIAMENT PURSUANT TO
SECTION 12 OF THE EQUALITY ACT 2006.

This version replaces the version presented to the House of Commons on 11 October and to the House of Lords on 5 October 2010. Copies will be provided free of charge to all known recipients of that version.

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Department for Work and Pensions, National Centre for Social Research and Office for National Statistics. Social and Vital Statistics Division, Family Resources Survey, 2007-2008 [computer file]. Colchester, Essex: UK Data Archive [distributor], July 2009. SN: 6252.

Please note that the above named organisations bear no responsibility for the further analysis or interpretation of the data collections.

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Foreword

Britain is a country where we despise prejudice, embrace equality and believe in the fundamental right of the individual to make the most of his or her talents in a free society. We are increasingly at ease with diversity of all kinds, and intolerant of discrimination of any kind.

Yet all too many of us remain trapped by the accident of our births, our destinies far too likely to be determined by our sex or race; our opportunities far too often conditioned by the fact that our age, or disability, our sexual preferences, or deeply held religion or belief make us lesser beings in the eyes of others. And far too many of us are still born into families without the material or social capital to give us the right start in life.

In short, we twenty-first century Britons are a largely fair-minded people. But we are not yet a fair society. And we know that no individual can be truly free to realise their potential, or to exercise their inalienable human rights as long as they are imprisoned by the invisible, many-stranded web of prejudice, inertia and unfairness that holds so many back.

This Review of our society's progress in equality, human rights and good relations is the first comprehensive picture of its kind, enumerating the gaps between our ambitions for fairness and the actuality. There is much here that should make us hopeful; many of the old biases are, if not vanquished, on their way out. But there is also a great deal still to be done; and there are new challenges emerging.

The Review is not a prescription for change. But it does aim to do three things. First, to amass objective evidence that will help us to decide where best to focus our resources and energies as a society, particularly at a time when we need to husband both carefully. Second, to provide a transparent, non-partisan account of where we stand now so we can judge whether decisions taken now might reduce fairness in the future. The Review's findings provide benchmarks against which we can measure the impact of our actions, whether as members of public, private or voluntary bodies, or sometimes just as citizens. And finally, the picture here will, we hope, provide the basis for further debate and concerted action to decrease inequality, and increase fairness throughout our society.

This Review is the work of many people. Aside from those from outside the Commission who are acknowledged elsewhere, the Board would like to thank our own Social Analysis Team, ably led by David Darton and Anna Henry, for their dedicated work in compiling and validating the evidence, particularly Laura Miller and Hannah Stranger-Jones who wrote substantial parts of the Review; Peter Steggle, Will Somerville and Donald Hirsch for their exceptional contribution to shaping the final product; and our executive team, in particular Richard Emmott and Neil Kinghan, the Commission's Director-General, for the effectiveness and efficiency with which they marshalled the resources for this unprecedented task.



A handwritten signature in black ink, which appears to read 'Trevor Phillips'.

Trevor Phillips,
Chair of the Equality and
Human Rights Commission

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Part I: A new landscape

Chapter 1

Introduction

The Equality and Human Rights Commission (the Commission) is a public body set up to challenge discrimination, to protect and promote equality and respect for human rights, and to encourage good relations between people of different backgrounds.

Our vision is of a society at ease with its diversity, where every individual has the opportunity to achieve their potential, and where people treat each other with dignity and respect.

Every three years, under the terms of the Equality Act 2006, the Commission is required to report to Parliament on the progress that society is making towards this vision. This is the first such review, and focuses on equalities. Many issues of relevance to human rights and good relations are covered but fuller reviews of these will be published in 2011 and 2012 respectively.

Measuring the gap between aspirations and outcomes

Attitudes towards equality have changed radically in recent years. As little as half a century ago, sexism, racism and other forms of prejudice pervaded almost every aspect of daily life. In some cases, discriminatory attitudes (towards gay men, for example) were enshrined in law.

Today, we live in a society where overt displays of prejudice are usually unlawful, and almost always socially unacceptable. Surveys suggest that we are more tolerant of difference, and less tolerant of discrimination. This is mirrored in the evolution of new laws which prohibit discrimination and require public bodies to promote equality. It is borne out by our expectations of public figures: a career in the public eye can be cut short by a bigoted comment. Meanwhile, where equality was once contested political ground, all three of the main political parties went into the last election with an explicit commitment to equality in some form.

In other words, the way we talk about ourselves, the standards of conduct that we expect from public figures, and the values that we profess all suggest that we aspire to be a fair society, free from discrimination.

This welcome change for the better has been matched, at least to some extent, by an improvement in the chances and choices in life of people from different backgrounds. Black Caribbean pupils have begun to catch up with the average performance at GCSE. The gender pay gap has narrowed considerably since the

Equal Pay Act 1970 came into force in 1975. And where once individuals who experienced hate crime might have encountered incomprehension or indifference, today they have the right to expect police forces to recognise hate crime for what it is and to provide appropriate support. These changes, and more besides, have made a meaningful difference in the lives of many people who may be subject to disadvantage because of who or what they are. More importantly they have transformed the expectations of most British people about what constitutes reasonable behaviour and what a decent society should look like.

Yet even a summary investigation reveals that in many instances, what happens in the real world falls short of the ideals of equality – from the harassment of disabled people, to homophobic bullying in schools, to stereotypes and arbitrary barriers that prevent older people from giving of their best in the workplace.

The fact is that we are still not, as a society, as fair as we would like to be. We can choose to react to this in two possible ways. The first is to resign ourselves to the mismatch between our ambitions and our achievements, to discount the inequalities around us, and to take solace in our good intentions. The second option is to look unflinchingly at the evidence, and, in doing so, to seek to understand where, and how, we need to focus our efforts if we are to make progress towards being a fairer society.

This Review aims to provide an authoritative compilation of the available evidence about equalities in England, Scotland and Wales against 40 indicators agreed by the Commission, the government and other key agencies. It brings together the facts about the experiences and outcomes in life of different individuals and groups. It draws on a range of sources including censuses, government surveys, academic work, and secondary analysis carried out especially for this Review.

At heart, this Review measures the gap between what we think society should be, and what it actually is: between the ideal and reality, between aspiration and attainment. It provides the raw material to answer the question: how fair is Britain today?

The shape of the Review

The Review is presented in three parts.

Part I sets out the context in which the Review takes place. It reflects on the growing diversity of the British public, our increasing acceptance of different lifestyles, and our high expectations of freedom and fairness. It summarises the development of equality law to date. And it explains why a concern for equality is vitally important at a time of demographic change, economic change and tight public spending.

Part II provides the evidence. It gives the best data available against the 40 indicators of the outcomes in life for groups of people who share common characteristics in terms of:

- age
- disability
- gender
- race and ethnicity
- religion or belief
- sexual orientation
- transgender status

Appendix 4 provides detail for each country where it has been possible to obtain quantitative or qualitative data for each strand group.

Where appropriate, the Review also takes into account the impact of socio-economic background, or class.

The statistics in Part II relate to activities across nine different areas. These encompass the capabilities and freedoms – that is, the things that each of us needs to do and to be – in order to be happy, productive and fulfilled:

- Life
- Legal security
- Physical security
- Health
- Education
- Employment
- Standard of living
- Care and support
- Power and voice

Under each is a set of indicators. For example, under ‘education’, the indicators include, among others, readiness for school, performance at Key Stage 4, and participation in higher education. We give the best available data for detailed measures about how different groups fare in relation to these indicators.

Part III summarises some of the most significant findings from the evidence presented in Part II and sets out some key challenges that we need to respond to if Britain is to move closer to its aspirations for a fair society free from discrimination.

Implications of the Review

The Review has a number of implications.

First, it sets a baseline against which to measure our progress as a society in the years to come. Three years from now, we will be able to look back and identify where things have improved, and where they might have deteriorated, for people of different backgrounds. It will become, over time, a tool to help measure the collective impact of social, economic and legislative change.

Second, the Review highlights those areas where there are gaps in the information about different groups' experiences. It underlines the fact that we lack some basic information about, for example, religion and belief or transgender people. At present, we don't even have a reliable estimate about how many people identify themselves as lesbian, gay or bisexual.

This matters because problems that go unseen go unresolved. It is impossible to tell whether public services are treating a group fairly if that group is, to all intents and purposes, invisible. Where there are such information gaps, we in the Commission will seek to encourage public bodies to collect the data that will enable them to offer services more effectively to all parts of the community. Strategies for improving the evidence base are suggested in Chapter 15.

Third, the Review gives the evidence that helps us begin to pinpoint the most acute disadvantages and the most pressing instances of unfairness in contemporary society. In Part III, we apply a series of filters to the evidence of the Review. We ask a series of questions, including:

- Does this equality gap present a risk to basic human rights?
- Is it caused by social, cultural or economic factors rather than by intrinsic human difference?
- Does it affect many people – and does it impair people's life chances?
- Is the problem persistent; is it becoming more significant, and does it require public intervention to arrest its decline?
- Is it in the public interest to reduce the equality penalty (is the issue trivial; might it be essentially insoluble? and is action now necessary to forestall further social or economic costs later)?

In doing so, we seek to identify the persistent inequalities that are significant challenges for society as a whole. By society we mean not only government and public bodies, but business and civil society too. Government policies may in many cases have a crucial part to play in ending inequalities, but there are limits to the effect of legislation or ministerial dictat when it comes to the behaviour of individuals and organisations. And we know from experience that there is rarely sustainable progress unless a wide range of people and organisations – including individual citizens, businesses, charities and voluntary organisations – also play their part.

The picture provided by the Review will help ensure that society responds to what the problems really are, and not what we think them to be. Respect for the evidence is even more important in a time of budget constraints, as it ensures that public money and energy can be directed to where it is most needed and where it can make the biggest difference.

The Equality and Human Rights Commission of course has a critical role to play. We will take the significant challenges identified by this process into account as we formulate our own strategic and business plans.

Effect of the Review

The Review marks a unique step in the compilation of data on fairness in Britain. It does not make particular recommendations on policies; that is not its function.

Rather, at its heart is the belief that a shared understanding of the issues based on objective evidence, rather than conjecture or assumption, is central to developing a lasting consensus for action. The publication of this Review will make that information more readily available to everyone in society who has to make decisions that could affect the fortunes of different social groupings.

In particular, it will:

- underpin the more effective use of public money by government
- help the voluntary and private sectors understand where they can play their part in promoting equality, and how this might be in their best interests, and
- enable the Equality and Human Rights Commission to use its regulatory powers in a more targeted way.

In sum, it paves the way for a modern and effective approach to tackling inequalities in twenty-first century Britain.

Chapter 2

The legal landscape

Introduction

The Review is published at a turning point for British equality law. In April 2010, Parliament passed the Equality Act 2010, modernising, streamlining and strengthening the law. The Government has confirmed that the majority of the Act's provisions will come into force in October 2010.

The 2010 Act complements and builds on the provisions of the Equality Act 2006, which itself strengthened several aspects of discrimination law and set out the roles and responsibilities of the Equality and Human Rights Commission.

To understand the implications of the Review, and how public, private and voluntary bodies might choose to react to it, it helps to understand what the law says about what they must do, and what they can choose to do, to combat discrimination and promote equality. If the Review is the 'why' and 'where' of combating inequality, the Acts are the 'how'.

This chapter gives a summary of the development of modern British equality law, explains the origins of the 2010 Act, and describes its main provisions.

A long tradition

The British tradition of legislating against discrimination and for equality has deep roots. Throughout much of our history, society imposed restrictions on the civic freedoms (including the right to practice a faith, to vote, or to hold public office) of various different groups. Over the course of centuries, different Acts of Parliament removed or relaxed those restrictions. We do not attempt to describe them here, except to note that major milestones include the Act of Toleration 1689, which granted greater freedom of religious worship to some Nonconformist Protestants; the Catholic Relief Act 1829, which gave Catholics the right to sit in Westminster as MPs; and the Representation of the People Act 1918, which gave women aged over 30 the right to vote.

Britain also has a tradition of concern for the poorest and most vulnerable in society. The 1834 Poor Law sought to alleviate the worst hardships in many ordinary Britons' lives; in the late 19th century sociologists such as Charles Booth drew attention to the gaps between the richest and the poorest living in London; and there was strong public support for the implementation of the recommendations in the Beveridge report after the Second World War, which

would lay the foundations of the Welfare State, seeking to guarantee everyone a basic standard of care and security. This concern for improving the prospects in life of society's poorest strongly conditions our approach to the achievement of greater equality, in as much as some groups of people (including some ethnic minorities, some women, and some disabled people) are more likely than average to be among society's poorest, and therefore more likely to benefit from any increase in equality.¹

For the purposes of this chapter, however, we concentrate on the distinctive body of modern equality law that began to build up after the Second World War.

Modern equality law: from individual redress to institutional reform

After 1945, immigrants were encouraged to come to Britain from Commonwealth countries to fill labour shortages and help rebuild a nation scarred by years of war. Yet despite the important role that these immigrants played in industry and in public services, many faced daily prejudice. They found that the colour of their skin restricted their choice of where to work, where to live, and who their friends could be.²

The government's answer was the first Race Relations Acts of 1965 and 1968. These outlawed direct discrimination on the grounds of race, colour, ethnic group and national origin in some public places. At their heart was the concept of individual redress, which drew on civil rights legislation developed in the United States. It gave individuals who were treated unfairly the right to pursue justice through the courts. In simple terms, anyone who got a rough deal because of their race could sue.

This concept of individual redress has gradually been extended to other groups and other situations over the course of decades. It was applied to sex and equal pay in the 1970s, to disability in the 1990s, and to religion or belief and sexual orientation in the early twenty-first century. In 2006 it also became unlawful to discriminate on the basis of age in employment.

¹ For a contemporary example, see Department for Business, 2009. *The National Minimum Wage Regulations 2009: Final Impact Assessment*: 'the minimum wage is having a greater impact on women's earning than men's.'

² See, for example, Fryer, P., 1984. *Staying Power: A History of Black People in Britain*.

Individual redress has enabled tens of thousands of people to access justice. It has encouraged organisations to put their house in order, at least to some extent, stopping discriminatory practices in order to avoid legal penalties. It has played an important role in making Britain a fairer place.

However, individual redress also has its limitations. It requires one person to challenge an organisation which in many cases will have far greater resources than they to fight the case. Individual redress focuses mainly on making amends when people behave unfairly, and not on preventing that unfairness in the first place. It can take a long time to reach judgments in individual cases. And, crucially, sometimes disadvantage and unfairness arise not because of individual examples of prejudice, but because of the cumulative effect of the way organisations are structured, their workplace practices, social norms and cultural expectations.

Sir William Macpherson, in his report on the inquiry into the Stephen Lawrence's murder, called this phenomenon 'institutional racism'. Today we recognise that this institutional effect is also a feature other kinds of identity-based disadvantage – affecting women, disabled people, or lesbian and gay people for example. It is now more often referred to as 'systemic bias'. While systemic bias does not necessarily arise out of malice on the part of any individual, it nonetheless has the effect of creating conditions which restrict opportunities for some groups and entrenching inequality.

The Race Relations Amendment Act 2000 introduced the first ever 'public sector duty' as a means of dealing with race-based systematic bias. In effect, the duty requires public bodies to assess the impact of their decisions on people of different ethnic backgrounds, and encourages them to consider what they might do to promote equality. Since 2000, similar versions of this duty have been introduced in relation to disability and gender.

Box 2.1 Modern equality law

In this chapter, we focus on a specific tradition of anti-discrimination law. There are also, however, many other pieces of modern law designed to secure basic rights for everyone, and to alleviate particular disadvantages faced by specific groups. These pieces of legislation are not subsumed into the Equality Act 2010, although in many cases their provisions are reflected in it. They include:

- **The Human Rights Act 1998** – enshrined in British law the basic rights guaranteed under the European Convention of Human Rights. These complement and underpin the rights set out in equality law
- **The Carers and Disabled Children Act 2000** – gave carers the right to have their needs assessed
- **The Flexible Working Regulations 2002** – gave parents of children under 6 and of disabled children under 18 the ‘right to request’ flexible working
- **The Adoption and Children Act 2002** – allowed same-sex couples to make a joint application to adopt
- **The Gender Recognition Act 2004** – gave transgender people a means of attaining legal recognition in their acquired gender
- **The Civil Partnership Act 2004** – gave same-sex couples the opportunity to gain legal recognition for their relationship, with associated rights and responsibilities
- **The Racial and Religious Hatred Act 2006** – made it an offence deliberately to incite racial hatred against a person on the grounds of their religion

Box 2.2 The evolution of modern British equality law: milestones

1965 Race Relations Act – outlaws racial discrimination in public places; establishes the Race Relations Board



1968 Race Relations Act – outlaws racial discrimination in employment, housing and public services



1970 Equal Pay Act – establishing in law the principle that men and women doing work of equal value should be equally rewarded in terms of pay and conditions



1975 Sex Discrimination Act – outlaws discrimination on the basis of sex in employment, training and the provision of goods and services; establishes the Equal Opportunities Commission



1976 Race Relations Act – defines and outlaws indirect discrimination as well as direct discrimination; establishes the Commission for Racial Equality



1995 Disability Discrimination Act – outlaws discrimination on the basis of disability; requires employers and service providers to make ‘reasonable adjustments’ for disabled people



2000 Race Relations Amendment Act – introduces a race equality duty on public authorities



2003 Employment Equality Regulations – outlaws discrimination in the workplace on the grounds of sexual orientation and religion or belief



2005 Disability Discrimination Act – introduces a disability equality duty on public authorities



2006 Employment Equality Regulations – outlaws discrimination in the workplace on the grounds of age



2006 Equality Act – introduces a gender equality duty on public authorities, outlaws discrimination in goods and services on the basis of religion or belief



2007 Equality Act Sexual Orientation Regulations – outlaws discrimination on the basis of sexual orientation in the provision of goods and services



2010 Equality Act – modernises, streamlines and strengthens the major provisions of British equality law to date

The Equality Act 2010

As equality law developed, piece by piece, from 1965 onwards, it became harder for individuals, organisations and their legal advisors to keep track of different people's rights and responsibilities. By the end of the last decade, equality law was spread across over 100 different pieces of primary and secondary legislation: Box 2.2 shows some of the most significant ones. Similar concepts were expressed in different ways in different places; but there were often some small, but significant, differences between the types of provision for different groups. This has made the law harder to understand and comply with for individuals and decision-makers; and more difficult to interpret and enforce for regulators.

The Equality Act 2010 (the Act) was designed to put all of equality law into one place and one common language. As a general rule, it also sets out to give people from different groups consistent forms of rights and protection, with the significant exception that it will continue to allow employers and other organisations to treat disabled people more favourably than non-disabled people. By simplifying and streamlining the law, the Act will make it easier to understand, easier to comply with, and easier to enforce.

The Bill was introduced into Parliament in April 2009 and was passed in April 2010, becoming the Equality Act 2010. The Government has confirmed that most of the Act's provisions are to come into force in October 2010.

In very simple terms, the Act sets out things that different organisations and individuals must do to avoid discrimination.

Employers must treat people fairly. They should not treat one individual worse because of any of the 'protected characteristics' defined by the Act. The protected characteristics include: age, disability, gender reassignment, race, religion or belief, gender and sexual orientation. This means that it would be unlawful to refuse to employ someone because he was a Muslim, for example, or to deny promotion to the best candidate because she happened to be a woman.

Service providers must treat people fairly. This includes organisations of every size, from family-run corner shops to major public bodies such as the NHS. This means that it would be unlawful for an hotel or B+B to refuse to take a booking from a couple because they were of the same sex, for example, or for a GP's surgery to turn away new patients because they were Somali. Currently, these provisions do not apply in relation to age.

Policies and practices that put people who share protected characteristics at a particular disadvantage when compared with others may be unlawful, even if that disadvantage is unintentional. If, for example, an employer were to advertise a job and say that applicants would need to be able to work late at least once a week (which might disadvantage applicants with caring responsibilities for young children, who are more likely to be women), then the employer would need to show that this was a legitimate and proportionate requirement in his or her particular enterprise. If they were unable to do so, that requirement would amount to what is known as ‘indirect discrimination’.

The Act sets out things that different organisations might choose to do to promote equality, if they want to. Where there is evidence that a particular group is under-represented in a workforce, or among the users of a service, it is lawful for an organisation to provide some forms of extra encouragement and support to people from that group. A university might observe, for example, that it attracts far more male applicants than female applicants to its engineering course. It could lawfully decide to host an open day targeted at women and girls, or to reserve a certain number of places on its foundation course for female applicants. What it cannot do, however, is to make the qualifications for entry different for women than they are for men.

The Act also contains provisions that build on public bodies’ existing equality duties, combining the current duties (relating to race, gender and disability) into one overarching equality duty, and expanding the scope to include age, religion or belief and sexual orientation. This would mean that public bodies will be required to assess the impact of their decisions on people of many different backgrounds, and to consider whether there might be ways to promote equality and good relations between them. The Government has said that it intends that the new public sector equality duty will come into force in April 2011.

The Commission and the 2010 Equality Act: making the law matter

The Equality and Human Rights Commission, as the regulator of equality law, has several significant responsibilities in relation to the Act.

First, through codes and guidance, the Commission seeks to help individuals and organisations understand their new rights and responsibilities. Some of the codes and guidance are currently available on the Commission's website and in other accessible formats on request. Further codes and guidance are being developed over the next year. Extra help and guidance are available through the Commission's website and helpline.

Second, the Commission has a role in helping clarify the limits of the new law, and ensuring that it achieves in practice what it is designed to do in principle. The Commission will be alert to opportunities to support individual cases that have the potential to illuminate aspects of the new law.

Third, the Commission has a role as a public regulator in holding organisations to account for their performance against the standards set out in the Act. It may choose, for example, to take enforcement action, carry out an investigation, or apply for an injunction against an organisation which commits serious and persistent breaches of the law.

Chapter 3

Changing attitudes and public opinion

As powerful as the law and regulation may be, they are only two aspects of the way a society changes its behaviour. When trying to achieve sustainable change, far more potent, in the end, are the attitudes of the majority of its people. Though these may be influenced by politics and legislation, many other factors count, including the real-life experience of individuals, their families, friends and workmates; the picture of society reflected by the media and arts; and the actions of key decision-makers and opinion-formers, such as the leaders of major enterprises, schools and religious groups.

Over the course of a generation, the composition of British society has become more diverse on many objective measures. It is much harder to gauge changes in subjective opinion, and the extent to which people's attitudes about diversity, equality and different groups have changed. Public opinion is constantly shifting. As the sum of thousands of different viewpoints, it is often ambiguous and sometimes inherently contradictory. However, the available evidence suggests that people's subjective attitudes towards diversity have become more accepting and more tolerant in many respects, and particularly towards some groups. There remain, however, other minority groups about whom the public remains more wary or simply ill-informed; and even where mainstream opinion has softened towards certain groups, individuals from those groups may still experience bigoted attitudes.

This chapter summarises some of these subjective changes and explains how they relate to the Review.

Changing Britain: friendships, family and work

Many aspects of life in England, Scotland and Wales have changed dramatically over the last four decades. Technological, demographic and social changes have reshaped everything from our family structures, to our workplaces, to the way we form and maintain friendships, and the way we express our identities. In simple terms, there is a far greater diversity of lifestyles across British society. Box 3.1 summarises some of the major changes.

Box 3.1 Major changes in British lifestyle**Family**

Modern Britons live in a range of different family structures. Marriage has been experiencing long-term decline. The 1971 Census showed that married couples made up two-thirds of the population in England and Wales. By 2001, they made up just over half of this group.³ Provisional estimates are that in 2008, the marriage rate was at the lowest level since records began in 1862.⁴ As the proportion of people living as married couples has decreased, the proportion of people who are divorced, or who live on their own, has grown.⁵

Indicative of changing attitudes towards the family, it is now more common for people to have children outside marriage. In 1971, 8% of births in England and Wales were outside marriage; in 2009, this had increased to 46%.⁶ The decline in marriage and increase in divorce rates means that, generally, more children are now living in step-families and households with cohabitation.

There has also been change within traditional family structures. The average age at which people are getting married is increasing and there are substantial increases in the proportion of marriages that are conducted as civil rather than religious ceremonies (two-thirds of all marriages in 2008 were civil ceremonies).⁷

In addition to these age and religion-focused changes, there are also changes in terms of ethnicity. Historically, many couples with different ethnic backgrounds had to contend with stigma in public places, from neighbours, and sometimes from friends or family. Research carried out for the Equality and Human Rights Commission in 2009 suggests that 9% of children today are either of mixed or multiple heritage, or live with at least one parent whose ethnic background is different to their own.⁸ If current trends continue, the proportion of children who are of mixed heritage will grow in the years to come.

³ Office for National Statistics, 2001. *The Census 2001*. Available at: <http://www.statistics.gov.uk/census2001/profiles/commentaries/family.asp>

⁴ Office for National Statistics, 2008. Statistical Bulletin. *Marriages in England and Wales*.

⁵ Office for National Statistics, 2001. *The Census 2001*. Available at: <http://www.statistics.gov.uk/census2001/profiles/commentaries/family.asp>

⁶ Office for National Statistics, 2010. *Population Trends* 138, Table 3.2.

⁷ Office for National Statistics, 2008. Statistical Bulletin. *Marriages in England and Wales*.

⁸ Platt., L, 2009. *Ethnicity and family relationships within and between ethnic groups: An analysis using the Labour Force Survey*, Equality and Human Rights Commission. Page 40.

Box 3.1 Continued**Work**

The modern economy is characterised by a variety of working patterns and a shift towards the knowledge and service sectors. Around 63% of people in employment in the UK work in full-time jobs. One in 5 works part-time; 1 in 8 is self-employed; and 1 in 17 is on a temporary contract. These proportions have been roughly stable for the past 15 years.⁹ Inextricably linked to this change is the increase in the presence of women in the workplace. Over the past four decades, the proportion of women in employment has increased from 56% in 1971 to 70% in the three months to December 2008,¹⁰ many of whom take up part-time employment opportunities.

The recent rise of information technology has opened the door to other forms of flexibility, giving an increasing number of workers the freedom to work from home, or on the move, when necessary.

Friendships and social interactions

The internet has made it possible for people to form and maintain friendships over distances. It enables people who share particular interests to congregate in online communities. A 2010 survey found that three-quarters of adults had used the internet at some point over the previous three months.¹¹ As new applications appear, the way we use the web continues to evolve. The proportion of UK web users posting messages on social networking sites, newsgroups or blogs doubled between 2008 and 2010. Although internet use is increasing overall, there is a generation gap with younger people much more likely than older people to use online technology: In 2010, only 1% of those aged 16 to 24 has never accessed the internet; in contrast, the majority of those aged 65 and over (60%) have never accessed the internet.¹²

Invisible minorities

Since 1970, a number of minority groups have gained in confidence, facilitated by legislation and active campaigning, and their visibility has grown. In 1970, for example, there were very few openly lesbian, gay and bisexual (LGB) political and cultural leaders. Today, the Independent newspaper's 'Pink List' of prominent 'out' LGB people includes journalists, athletes, politicians, entertainers and entrepreneurs.

⁹ UKCES, 2010. *Skills for Jobs: Today and Tomorrow, The National Strategic Skills Audit for England*, (Volume 2: The Evidence Report).

¹⁰ Office for National Statistics, 2009. Statistical Bulletin. *Internet Access: Households and Individuals*.

¹¹ Office for National Statistics, 2001. *The Census 2001*. Available at: <http://www.statistics.gov.uk/census2001/profiles/commentaries/family.asp>

¹² Office for National Statistics, 2009. Statistical Bulletin. *Internet Access: Households and Individuals*.

Major advances: changing lifestyles, growing openness

The greater diversity in terms of demography and structure of modern Britain has developed hand in hand with changes in public opinion. As noted in Chapter 2, Britain has a long history of legislation to remove or relax the restrictions on different groups' civic freedoms, and the idea of 'fair play' is deeply rooted in British culture.

However, until comparatively recently, the attitudes expressed towards some people in British society were anything but fair. Before the beginnings of anti-discrimination law in the mid-1960s, ethnic minorities faced discrimination (both overt and indirect) in almost every aspect of life. Same-sex relationships attracted significant hostility, and relationships between men were unlawful in England and Wales until 1967, and later still in Scotland. Disabled people were not generally expected to play a visible role in public life, and there was little awareness of transgender people's experiences.

Over recent years, the general public's attitude on equality and diversity has evolved considerably. People in Britain generally express attitudes that are much more tolerant and accepting of diversity, and much less tolerant of discrimination. This can be seen in relation to most of the major equality characteristics, including race and gender.

Sociologists have seen clear evidence of reductions in racial prejudice in Britain. The proportion of people who did not like the idea of White people working for a Black or Asian boss fell dramatically through the 1980s and 1990s. So, too, did opposition to marriages between people of different ethnic backgrounds.¹³ Research carried out for the Equality and Human Rights Commission on the 10th anniversary of the Stephen Lawrence inquiry report and published in January 2009 found that 70% of those who surveyed would be relaxed if their son or daughter chose to marry someone of a different race or religion.¹⁴ The research also found that a significant majority (78%) of people from ethnic minority communities mixes socially, outside work, with people from a different ethnic background at least once a month. Amongst the general public, the 2008/09 Citizenship Survey reported that 81% of adults in England and Wales had meaningful interactions at least once a month with someone from a different ethnic or religious background.¹⁵

¹³ Ford, R, 2008. 'Is Racial Prejudice Declining in Britain?', *The British Journal of Sociology* 2008, Vol. 59, Issue 4.

¹⁴ New Commission poll shows British institutions need to 'keep up with Obama generation', Equality and Human Rights Commission Press Release, 20 January 2009.

¹⁵ Communities and Local Government, 2009. *Citizenship Survey 2008/09 Community Cohesion Topic Report*. Page 53.

The Citizenship Survey also finds that the public increasingly feels greater tolerance for diversity at a local level. In 2003, whilst as many as 80% of respondents agreed that people from different backgrounds in their local area get on well together, this had increased to 85% by 2010.¹⁶

Meanwhile, stereotypical views about gender, such as fixed ideas about the roles that men and women should play in family and society life, have become less prevalent. In nine major surveys between 1984 and 2008 people were asked how much they agreed or disagreed with the statement, 'A man's job is to earn money; a woman's job is to look after the home and family'. In 1984, while 43% respondents agreed or strongly agreed with this statement, by 2008, this had reduced to 16%.¹⁷

It is more difficult to summarise changes in attitudes towards people with disabilities, largely as a result of definition. Some surveys have used definitions of disability that put people with a range of different impairments into one broad category, when in fact public attitudes to different impairments may vary.¹⁸ For example, research on attitudes towards mental health, shows that understanding and tolerance of people with mental illness is generally high, and there has been a trend towards greater acceptance on several indicators since 1994.¹⁹ People have become more likely to agree that residents have nothing to fear from people coming into their neighbourhood to obtain mental health services (66% agreed in 2010, up from 62% in 1994), more likely to agree that mental illness is an illness like any other (78% in 2010, up from 71% in 1994), and more likely to agree that no-one has the right to exclude people with mental illness from their neighbourhood (84% in 2001, up from 76% in 1994).

Perhaps the most dramatic change, however, is in relation to LGB people. A gap of less than 20 years separated the parliamentary debate about Section 28, a piece of law that sought to vilify same-sex relationships, and the debate about civil partnership, a piece of law that sought to offer the same relationships respect and recognition.

¹⁶ Communities and Local Government, 2010. *Citizenship Survey: 2009/10 (April 2009 – March 2010)*, England Cohesion Research Statistical Release 12.

¹⁷ British Social Attitude Surveys, 1984, 1987, 1989, 1990, 1991, 1994, 1998, 2002 and 2008.

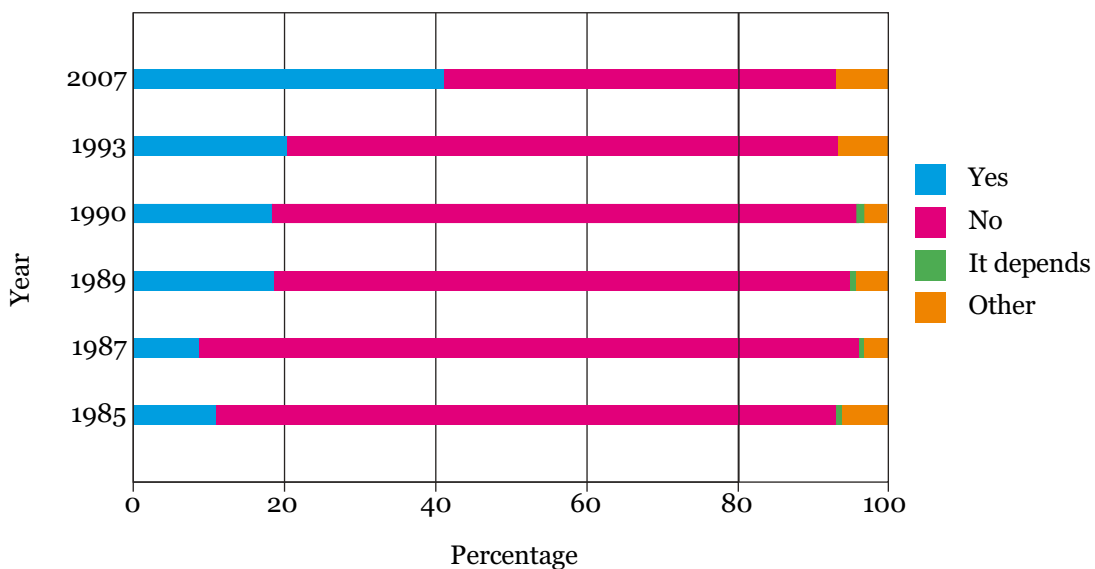
¹⁸ Discussed in Cripps, H., Gray, M., and Johal, A., 2009. *British Social Attitudes Survey – Attitudes towards the rights of disabled people: Findings from cognitive interviews*. Department for Work and Pensions Research Report No. 588.

¹⁹ Department of Health, 2010. *Attitudes to Mental Illness 2010 Research Report*.

Research conducted by Stonewall in 2006 on public attitudes towards lesbian and gay people, found that the majority of people in Britain were supportive of action to address discrimination and harassment on the grounds of sexual orientation.²⁰ The majority of the public also reported feeling very comfortable or neutral²¹ about contact with gay people in their lives:

- 87% would feel comfortable or neutral if their MP was gay
- 87% would feel comfortable or neutral if their boss in a new job was gay
- 78% would feel comfortable or neutral if their GP was gay
- 73% would feel comfortable or neutral if their child's teacher was gay

Figure 3.1 Acceptance of same-sex couples is growing:
Percentage answers to a question about whether same-sex female couples should be allowed to adopt children, as asked in the British Social Attitudes Survey 1985, 1987, 1989, 1990, 1993 and 2007



Note: Other includes no answer.

²⁰ Cowan, K., 2007. *Living Together: British Attitudes to Lesbian and Gay People*. Stonewall.

²¹ 'Comfortable' includes very comfortable, comfortable and neutral.

Figure 3.2 Younger people are more accepting of same-sex couples: Percentages by age group saying that same-sex relationships are ‘always wrong’ in the British Social Attitudes Survey 1994, 1998 and 2008

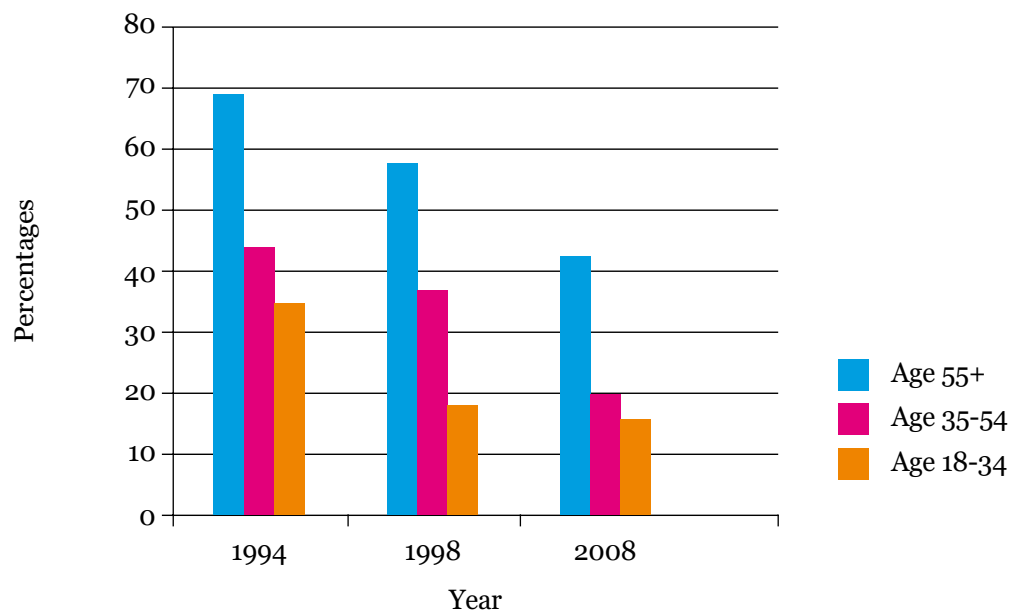
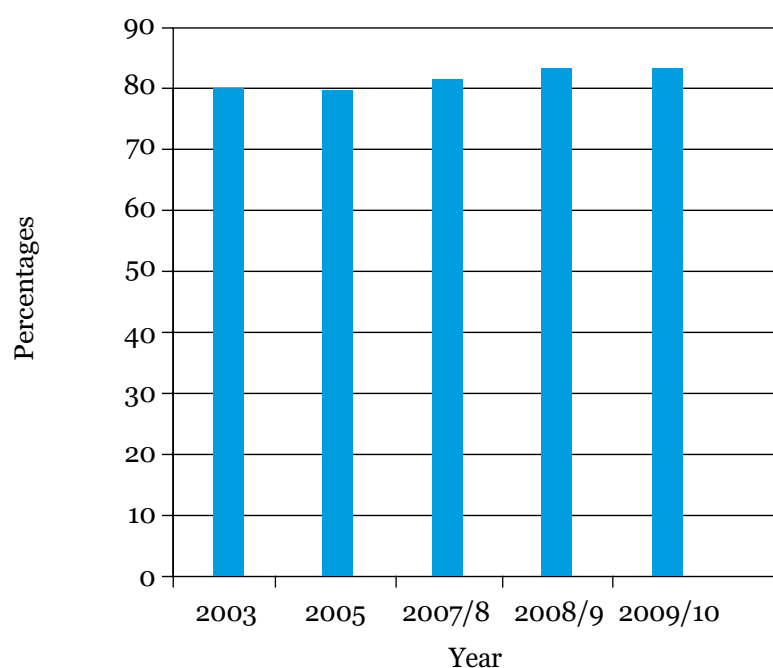


Figure 3.3 The public is generally at ease with diversity: Percentages of people saying in the Citizenship Survey that people from different backgrounds get on well in their area²²



²² Adapted from Communities and Local Government, 2010. *Citizenship Survey 2009/10 (April 2009 – March 2010), England Cohesion Research Statistical Release 12.*

As well as a decline in prejudice in attitudes towards people from specific different groups, evidence suggest that the general public is also strongly in favour of the generic principles of equality, dignity and respect for all. In 2009, an inquiry into human rights carried out by the Commission demonstrated that 81% of people asked think human rights are important for creating a fairer society, and 84% agree that it is important to have a law that protects human rights in Britain.²³

Finally, in as much as the positioning of political parties can be seen as indicative of public sentiment, there is evidence of significant change here too. Many principles of equality and individual policies were the subject of considerable debate and disagreement between different parties throughout the 1980s and into the early twenty-first century. Today, there is a greater degree of consensus. Each of the main political parties went into the 2010 General Election with some form of explicit commitment to equality.

Limitations to openness and tolerance

A considerable amount of evidence suggests that attitudes towards different groups in society are improving and that there is a broad acceptance of the importance of equality in abstract terms. Notwithstanding this, the public does have reservations. There are also some specific cases where attitudes towards specific groups remain lukewarm or hostile.

Race, religion or belief

Whilst research shows that there is greater mixing of people from different backgrounds, when the public is explicitly asked about prejudice, they feel that there is greater racial and religious prejudice nowadays, compared with the recent past. In 2001, 2 in every 5 people in England and Wales believed there was more racial prejudice in Britain then, than there had been 5 years previously. The view that there was more racial prejudice than 5 years ago increased to almost half (48%) in 2005, and to more than half (56%) by 2008. The Citizenship Survey also found that there was an increase in perceptions of religious prejudice and on this issue, feelings are stronger. The proportion of people who believe there is more religious prejudice in Britain compared to 5 years ago previously increased from around 52% in 2005 to 62% in 2007/08.²⁴ This may reflect changing sensitivities as well as changing experiences.

²³ The Human Rights Inquiry was carried out by the Equality and Human Rights Commission under section 16 of the Equality Act 2006 and was published in June 2009. The Inquiry assessed how well and effectively human rights are respected and enjoyed in Britain.

²⁴ Communities and Local Government, 2009. *Citizenship Survey 2007-08 Race, Religion and Equalities Topic Report*.

This sense of greater prejudice particularly surrounding religious difference was also found in the 2009 research carried out for the Commission on the anniversary of the Stephen Lawrence inquiry. The research found that three-fifths of people considered that religion was a bigger potential cause of division than race in modern Britain.²⁵ Attitudes towards Muslim people may be particularly negative – the British Social Attitudes Survey in 2010, for example, suggests that the general public holds more negative attitudes towards Muslim people than people of any other faith: 55% of people said that they would be concerned by the construction of a large mosque in their community, while only 15% would be similarly concerned by a large church.²⁶

This of course is just one aspect of the animated public debate about differences of religion and belief in all their forms in recent years. That said, there is very little support for violent extremism in the name of religion in Britain and this view is held by all leading religion and belief groups. Data from the Citizenship Survey in 2010 show that the vast majority of people from all religion or belief backgrounds feel that it is always wrong for people to use violent means in Britain to protest against things they think are very unfair or unjust.²⁷

Surveys tend to show negative perceptions of immigrants and asylum seekers. Some sections of the public are uneasy about current immigration levels. There is particular antipathy toward illegal immigrants.²⁸ The overall level of negative attitudes is increasing. Survey evidence has found that the proportion of people who strongly agreed or tended to agree that there are ‘too many immigrants’ in the UK increased from 61% in 1997 to 70% in 2009.²⁹ This trend correlates with greater numbers of immigrants and media coverage.

Though public attitudes differ by gender, race, geography, wealth, education, values and other variables, the overall picture is one of hostility towards immigration. But the fine-grained picture is much more complicated. When asked, the public does see benefits in some immigrant groups. There is also a sense amongst the public that those in genuine need should be provided with a place of safety.³⁰

²⁵ New Commission poll shows British institutions need to ‘keep up with Obama generation’, Equality and Human Rights Commission Press Release, 20 January 2009.

²⁶ Ling, R., and Voas, D., 2010. ‘Religion in Britain and the United States’, *British Social Attitudes: the 26th Report*, London: Sage/NatCen. Page 79.

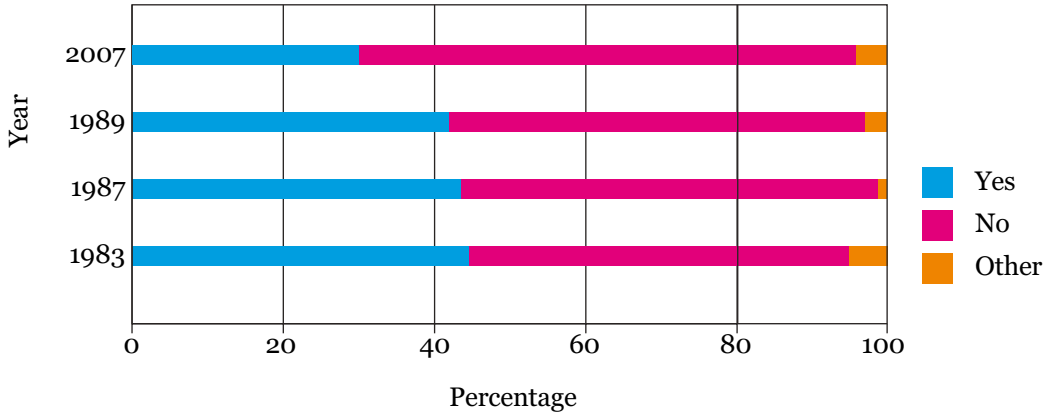
²⁷ Communities and Local Government, 2010. *Statistical release Citizenship Survey April-December 2009, England and Wales, Attitudes to Violent Extremism*.

²⁸ See, for example, Latorre, M., Somerville, W., and Sriskandarajah, D., 2009. *United Kingdom: A Reluctant Country of Immigration*.

²⁹ Ipsos MORI, 2009. *Real Trends 1999-2008*.

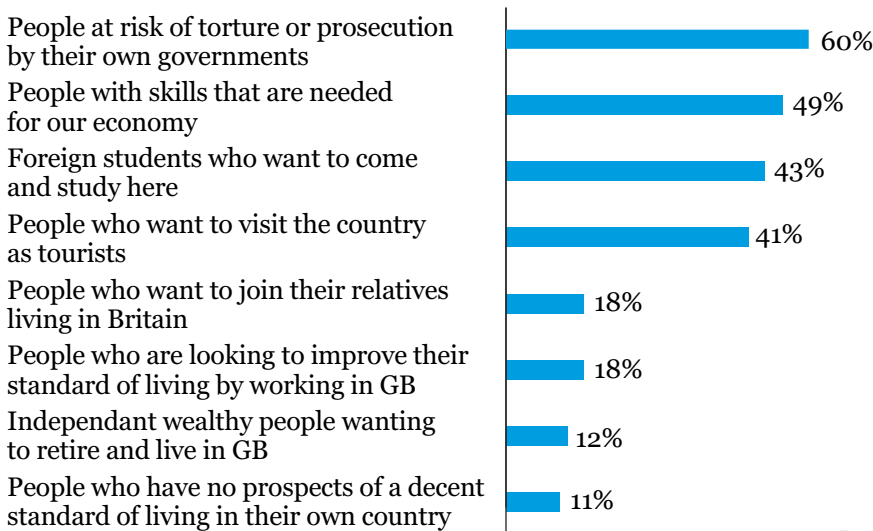
³⁰ UK Border Agency, 2009. *Public Attitudes to Immigration*.

Figure 3.4 Attitudes towards some visible displays of difference are hardening: Percentage answers to a question about whether a school with significant numbers of children for whom it is important to wear their traditional dress at school should allow them to do so. British Social Attitudes Survey, 1983, 1987, 1989, 2007



Note: Other includes no answer and don't know.

Figure 3.5 Responses to the question 'Looking at this list, which of these groups, if any, do you think **should be given** priority to come to Britain?'



Base. All respondents. Wave 6 (1,040). IPSOS Mori.

Ipsos MORI
 IPSOS Mori for the
 UK Border Agency

Finally, while surveys find that immigration is an extremely important issue at a national level, views are very different at a local level. When surveyed, the majority (70%) state that nationally, immigration is a problem. When asked about their local area, however, a larger proportion (76%) state that immigration is not a problem.³¹

Gypsies and Travellers are also often subject of suspicion and disapproval which are sometimes exacerbated by inaccurate media reporting.³² There is evidence that both the local and national media may, in some instances, issue reports linking Gypsy and Traveller communities with rises in crime rates on the basis of conjecture, rather than evidence, seek to draw a specious distinction between 'real' and 'fake' Gypsies, and in general terms present the nomadic lifestyle as a problem.

Analysis suggests that people's attitudes can be strongly affected by local circumstances. In 2007 the Commission on Integration and Cohesion looked at the results of the Citizenship Survey to identify the 20% of places in England with the lowest number agreeing that people from different backgrounds got on well in their local area. They found that high levels of diversity did not necessarily translate to poor relations between local people – in fact, some London boroughs, with some of the most diverse populations in England, showed levels of cohesion that were around the average. The research suggested instead that other factors, including rapid changes in local population and the decline of traditional industries, can harm relations between people from different groups. They also found that the actions of local authorities, including the way they articulated their own attitudes towards minority groups, could play a significant role in aggravating or improving tense situations.³³

Significant improvements have been made in terms of gender equality. However, evidence suggests that the public feels that women are still discriminated against in the workplace. When asked in 2009, for example, if they agreed or not with the statement that 'in Britain, men and women on the whole receive equal pay for doing jobs of equal value', opinion amongst men was divided (44% disagreed with the statement) whereas the majority of women (59%) were of the view that women were not paid equally.³⁴

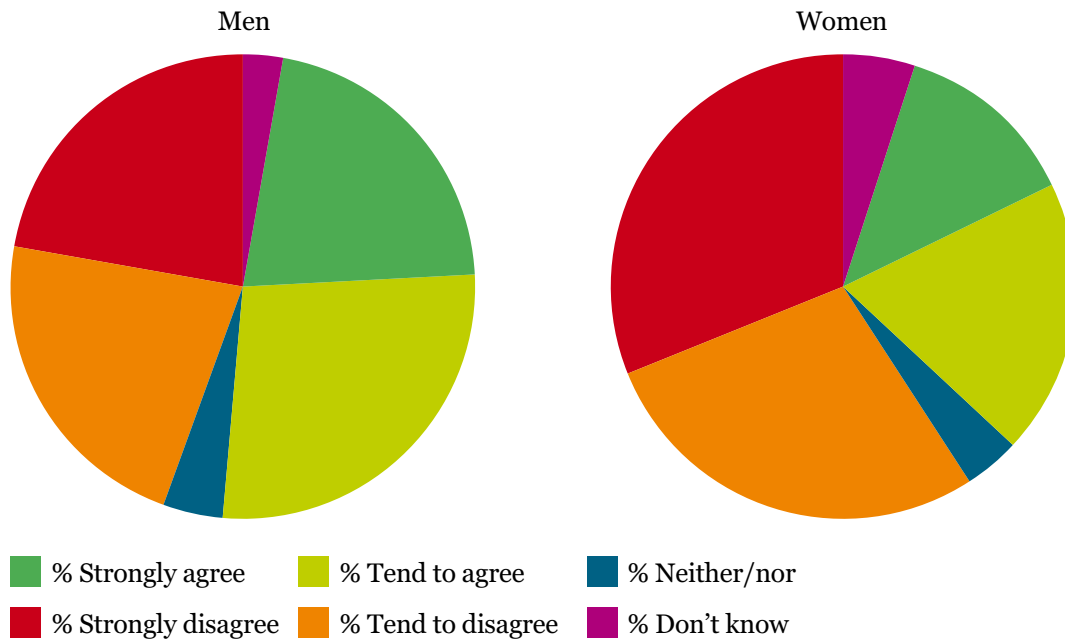
³¹ UK Border Agency, 2009. *Public Attitudes to Immigration*.

³² See, for example, Burnett, S., Cemlyn, S., Greenfields, M., Matthews, Z, and Whitwell, C., 2009. *Inequalities experienced by Gypsy and Traveller communities: A review*. Manchester: Equality and Human Rights Commission.

³³ Commission on Integration and Cohesion, 2007. *Our Shared Future: The Final Report of the Commission on Integration and Cohesion*.

³⁴ Ipsos MORI, 2010. *Politics, Public Services and Society: Context for the General Election 2010*.

Figure 3.6 Responses to the question
Please tell me whether you agree or disagree with the following statement:
'In Britain, men and women on the whole receive equal pay for doing jobs
of equal value'.



Base: 1,055 GB adults 16+, 24 October 2009.

In relation to age, research has suggested that different people have widely differing perceptions of what constitutes 'being young' and 'being old', and, as society's age structure changes, it is not always straightforward to measure changes over time in attitudes towards people of different ages.³⁵ However, there is evidence to suggest that some groups, including older workers, fear being stereotyped because of their age.³⁶

It is also clear that many people recognise the social unacceptability of expressing prejudice against people and caution should always be afforded when assessing opinion. On the basis of sexual preference, for example, improvements are undoubtedly significant and yet the public's true opinion, and potentially their behaviour, will not always reflect the attitudes they express. In another survey, when asked whether they feel prejudice towards gay or lesbian people, 23% of people said they do sometimes feel prejudice but try not to let it show.³⁷

³⁵ Abrams, D., Eilola, T., and Swift, H., 2009. *Attitudes to age in Britain 2004-08*. Department for Work and Pensions Research Report No. 599.

³⁶ See Maitland, A., 2010. *Working Better: The Over 50s, the New Work Generation*. Equality and Human Rights Commission.

³⁷ Abrams, D. and Houston, D. M., 2006. *Results from the 2005 National Survey*: Report for the Cabinet Office Equalities Review. Page 54.

Finally, what evidence there is on the attitudes of society at large towards transgender people suggests that there remain many misunderstandings and prejudices.³⁸ The public may be more aware of transgender people but whether or not they understand their experiences is another matter.

We do not seek to dismiss or discount any of this evidence. We recognise, too, that public opinion is constantly shifting in response to current events. However, even taking this into account, the broad national trend in attitudes towards equality issues remains, on balance, positive. By and large Britain is increasingly at ease with its diversity, tolerant of difference, and intolerant of discrimination.

³⁸ See Howarth, C., and Mitchell, M., 2009. *Trans research review*. Equality and Human Rights Commission.

Chapter 4

Britain in the world today

Introduction

Attitudes have changed, and life-chances have certainly improved for some groups. But just as changes in the economic, social and cultural background have created the conditions for immense advances for some, it has brought new challenges for others. Those who were able to seize opportunities offered by more expansive times, could find that a change in the economic or social weather snatches those opportunities away. That is why this Review is a vital tool in assessing the best way to confront the great economic and social problems faced by our whole society.

Tackling the financial crisis, is of course, a national priority. It is not the place of this Review to offer prescriptions on the wider issues. However it is widely acknowledged that an important element of any solution must be transparency as to the impact of change on different social groupings; and that where possible steps taken to deal with our social and economic problems are demonstrably fair. The data in this Review are an essential platform for any such national assessment.

We identify three major factors that will affect the relative position of the different social groupings on which we are reporting. First, in 2008, the country entered the worst recession for decades. Second, in 2010, a new government announced plans for significant reductions in public spending and changes to the way public services are delivered. And finally, longer-term factors such as migration and increased longevity are creating new pressures, and producing entirely novel forms of inequality.

Globalisation and economic change

The global economy suffered a major recession in 2008 and 2009 after a long period of stable growth and increasing globalisation. This recession (as most other recessions of the modern period) affected different groups in different ways.

Research published by the Commission and the Government Equalities Office at the end of 2009 found that, as overall unemployment increased over the course of 2009, men and the young, especially those aged 18-24, continued to see a rise in their unemployment levels.³⁹

³⁹ Equality and Human Rights Commission and GEO, 2009. *Monitoring Update on the Impact of the Recession on Various Demographic Groups*.

Members of ethnic minority groups and disabled people, who had seen relatively stable employment rates until March 2009, had begun to experience rises in unemployment. Meanwhile, unlike in previous recessions, older workers and those without DDA-defined disabilities appeared to have continued to be relatively sheltered from job losses. Finally, the numbers of women losing jobs was greater than in previous recessions: but this was, in part, a function of the fact that there were more women working when this recession began than ever before.

By summer 2010, the British economy had returned to modest, somewhat fragile, growth. How best to sustain that growth is a major concern among the general public. The evidence suggests that equality and diversity, rather than being part of the problem or (as it is sometimes supposed) an extra and unnecessary burden on hard-pressed private firms and public services, may in fact be part of the solution.

In recent years the vast majority of national economies have become increasingly interlinked, as technology has reduced dramatically the costs of transportation and communications. With Britain's openness to capital, labour, and skills, our economy is now intimately connected to the wider world economy. It is crucial, if Britain is to continue to enjoy relatively high standards of living, that workplace practices give us the opportunity to compete on the world stage.

Britain's economy, in common with many other Western European countries, is affected by demographic change. Already, only a quarter of the British workforce of working age fits the old 'standard model' of being White, male, non-disabled and under the age of 45.⁴⁰ The countries and firms that can adapt most quickly and most successfully to the different needs and expectations of a more diverse workforce, and make the most of the talents available to them, can gain a competitive edge.

Some British firms are already finding new ways of recognising and respecting the diversity of their workforce, such as structured programmes for keeping in touch with employees on maternity leave, and allowing older workers greater flexibility in their hours in order to combine paid work with other responsibilities and interests.⁴¹

⁴⁰ Equality and Human Rights Commission's analysis of Office for National Statistics, 2010. *Annual Population Survey October 2008 - September 2009*.

⁴¹ As described, for example, in CBI and TUC, 2009. *Talent, not Tokenism*.

Some report benefits in terms of greater staff motivation and loyalty, which can help boost productivity, retain skills and keep recruitment costs down. Meanwhile, some international studies also suggest a correlation between board diversity and some aspects of corporate performance.⁴² In this sense, a concern for equality and diversity is not an added burden on business: but the capability of managing and taking advantage of diversity is becoming a precondition for business success.

Globalisation not only calls for changes in the way that British workplaces operate, it means that British firms and businesses are producing different products and services. Over recent years the number of jobs in the operative occupations (blue collar jobs) has gone down, and the number of jobs in services and high skill work has gone up. Far from reversing this trend, evidence suggests that the recession has in fact accelerated it.⁴³ Services now account for more than four-fifths of economic activity as measured in terms of workforce jobs in the UK.⁴⁴ Manufacturing has shifted to types of production that use increasingly advanced technology, but fewer workers.

This implies that skills will be increasingly important to our economic success in the future. Yet in recent years, government reviews have uncovered significant gaps in Britain's skills base. In 2006, the Leitch Review said that by 2020, four million people in the UK would lack basic literacy and six million people would lack basic numeracy.⁴⁵ The UK Commission on Employment and Skills notes that progress is now being made,⁴⁶ but that many groups are not equipped with the necessary skills to prosper.

⁴² See, for example, Carter, M. N., Joy, L., Narayanan, S., and Wagner, H. M., 2007. *The Bottom Line: Corporate Performance and Women's Representation on Boards*. Catalyst; Adams, R. B., and Ferreira, D., 2008. 'Women in the Boardroom and their Impact on Governance and Performance', *Journal of Financial Economics*, Volume 94.

⁴³ UK Commission for Employment and Skills, 2010. *Skills for Jobs: Today and Tomorrow, The National Strategic Skills Audit for England, (Volume 2: The Evidence Report)*. Page 26.

⁴⁴ Office for National Statistics, 2010. 'Labour Market Statistics', *Statistical Bulletin*.

⁴⁵ Leitch Review of Skills, 2006. *Prosperity for all in the global economy – world class skills: Final Report*. Pages 13-14.

⁴⁶ UKCES, 2009. *Ambition 2020: World Class Skills and Jobs for the UK*.

There is an important equality dimension to this debate. Several groups of people are likely to have lower skill levels than average, as we explore in the chapter on education in Part II of this Review. More than 40% of Bangladeshi and Pakistani men and Pakistani women, and more than half of Bangladeshi women have no qualifications above Level 1, compared to a quarter of the general population.⁴⁷

People with disabilities are also more likely than average to have no qualifications above Level 1.⁴⁸ Younger women have higher skill levels on average than their male counterparts, yet the evidence suggests that women are currently less likely than men to rise to senior positions, and more likely to end up in roles, particularly part-time roles, which do not make full use of their skills.

Unless specific measures are taken to close the skills gaps between different groups, some people risk being left behind, and some measures of inequality risk getting worse, as the British economy continues to evolve. Conversely, closing the gap would represent an opportunity: if employers, training providers and educators can find a way to raise the skills levels among the groups who lack them, this could play a role in meeting the economy's future demands for skills.

Public service reform

If major economic change is the first and perhaps most important wider change that sets the context for this Review, a second, related, change is the prospect of significant reform to Britain's public services over the coming years.

The recession has changed and continues to change the shape of the private sector, but it has also had a profound impact on public finances. The new government has made clear that its first priority is to reduce the budget deficit. Its plans include cuts to the budgets of most Whitehall departments, and a move towards a less centralised state, with greater discretion for local authorities, and more opportunities for third sector grassroots bodies to get involved in the design and delivery of public services; and above all more autonomy and choice for the individual.⁴⁹

⁴⁷ Hills, J., *et al.*, 2010. *An Anatomy of Economic Inequality in the UK, report of the National Equality Panel*. London: Government Equalities Office. Pages 97-100: there is an important caveat that the age structure differs among minorities to a greater extent than in the general population.

⁴⁸ Hills, J., *et al.*, 2010. *An Anatomy of Economic Inequality in the UK, report of the National Equality Panel*. London: Government Equalities Office. Page 103.

⁴⁹ Cabinet Office, 2010. *Building the Big Society*.

Public service reform has significant implications for equalities and human rights. Several groups of people (for example, some ethnic minorities) are more likely than average to live in relative poverty, and more likely to rely to a greater extent than average on services or forms of support (such as unemployment benefits and social housing) paid for by public funds. Meanwhile, the possibility of job losses in the public sector has the potential to affect women more than men, as more than 50% of the workforce is female.⁵⁰

The ageing society

The third major change in wider society that is directly relevant to the issues discussed in this Review is demographic. As noted in Chapter 3, the British population has become more diverse in recent years. It is likely to continue to grow increasingly diverse. Perhaps the most dramatic anticipated change is in the country's age profile.

Between 1984 and 2009, the percentage of the population aged 65 and over increased from 15% to 16%, an increase of 1.7 million people. Over the same period, the number of people aged 85 and over in the UK more than doubled, from 660,000 to 1.4 million. Meanwhile, the percentage of the population aged 16 and under decreased from 21% to 19%. These trends are projected to continue. By 2034, 23% of the population will be aged 65 and over.⁵¹

⁵⁰ Matthews, D., 2010. 'The changing face of public sector employment 1999-2009', *Economic & Labour Market Review*. Pages 28-35 'in 2004 65% of people employed in the public sector were women'.

⁵¹ Office for National Statistics, 2010. *Ageing 'Fastest increase in 'oldest old''*. Available at: <http://www.statistics.gov.uk/cci/nugget.asp?id=2157>

Our increased longevity is a fact to celebrate, and a testament to the remarkable improvements in the average person's diet, healthcare and living standards over recent years. However, the ageing of our society also poses significant questions about social policy in fields ranging from pensions, to the wider economy, to support for carers, to town planning. For example:

- On **pensions**, the Office for National Statistics illustrate the likely impact of our ageing society on the dependency ratio – the balance between the number of people of working age, and the number of people of state pension age; the number of people paying into the national pension pot, and the number of people drawing on it.⁵² In simple terms, the current arrangements for the state pension are unlikely to be sustainable for the longer term.
- On the **economy**, a falling number of workers makes it difficult to maintain the absolute size of the workforce, with implications for growth: in June 2010 the Office for Budget Responsibility pointed to a decline in labour market activity of around 0.15% a year as a result of the ageing population.⁵³
- On **support for carers**, the demand for informal care from family, friends and community members was projected in 2008 to rise by 40% by 2022.⁵⁴ This highlights the case for having a greater concern for the needs and aspirations of carers: this might include considering such policies as more inclusive workplace practices that enable people to combine paid work with other responsibilities more easily.
- On **town planning**, such documents as the last government's policy paper *Lifetime Homes, Lifetime Neighbourhoods*⁵⁵ have highlighted the case for inclusive design of buildings, workplaces and communal spaces so that they enable older people to continue to live in comfort and safety, and to play a full part in local life, rather than curtail their ability to do so.

In this context, thinking about equality in terms of the varying needs of different people at different stages in their life is an essential component of sound policymaking.

Ageing is not, however, the only demographic change likely to affect Britain in the years ahead.

⁵² Office for National Statistics, 2010. *Pensions Trends*. Available at: <http://www.statistics.gov.uk/cci/nugget.asp?id=1272>

⁵³ Office for Budget Responsibility, 2010. *Pre-Budget Forecast*.

⁵⁴ Cabinet Office, 2008. *Realising Britain's Potential: Future Strategic Challenges for Britain*. Page 11.

⁵⁵ Communities and Local Government, 2008. *Lifetime homes, lifetime neighbourhoods*.

Migration

Migration, both in and out of the country, has been a reality of British life for decades. Emigration attracts relatively little public attention, although reliable estimates indicate there are more than five million UK nationals abroad, while immigration is often the subject of significant scrutiny and debate. The impacts of immigration on the economy remain contested, but research suggests that the effects are small.⁵⁶

Patterns of immigration to Britain have been historically high over the last decade. Net immigration contributed 1.8 million people to the UK population from 1997 to 2007. Immigration patterns over the past decade have also been qualitatively different from previous patterns. Immigration has become more dispersed geographically, often to rural areas or cities that were not traditional gateways for immigrants. Immigrants have also become more mobile, with fewer settling in Britain for good. Research has found that about 40% of male immigrants and 55% of female immigrants who arrived in the early 1990s and stayed for at least a year returned home within 5 years.⁵⁷

The pre-budget forecasts from the Office for Budget Responsibility in June 2010 (issued before the consultation on a non-EU migrant cap) noted that net immigration fell between 2007 and 2008, and suggested that recession would tend to keep net immigration lower.⁵⁸

Migration, and its impact on local communities, was a high-profile topic in the debate leading up to the last general election. The Government's current proposal to introduce a cap is likely to have a further impact. However, this policy would not limit the ability of EU citizens to come to the UK and in all probability migration will continue to be part of British life for the foreseeable future. The salient issues for policy will be: what kind of migrant; how many and for what activity? On all of these issues the importance of timely, accurate and detailed data is being recognised internationally.

Ensuring fairness based on ethnicity, culture or nationality is vital if we are to manage the effects of migration in a way that benefits our society rather than disrupts it. As noted in Chapter 2, the first pieces of modern equality law were designed, in part, as a means of helping migrants assert their right to decent and dignified treatment, and as a mean of fostering good relations between people of

⁵⁶ Somerville, W., and Sumption, M., 2009. *Immigration and the Labour Market: Theory, Evidence and Policy*. Equality and Human Rights Commission.

⁵⁷ Latorre, M., Somerville, W., Sriskandarajah, D., 2009. *United Kingdom: A Reluctant Country of Immigration*.

⁵⁸ Office for Budget Responsibility, 2010. *Pre-Budget Forecast*.

different backgrounds. In the modern context of continued migration, these goals are still valid.

It is also important to re-emphasise that equality law protects people born in this country from discrimination on the basis of their nationality. The Commission's recent inquiry into the meat and poultry processing sectors⁵⁹ found evidence of some employers and employment agencies seeking to employ only people of a particular nationality (and that nationality was not British). This practice is very likely to be unlawful. Proper use of the equality law can help individuals assert their right to be treated fairly, and discourage practices that are unlikely to lead to good relations between migrants and settled communities.

Challenges and opportunities

This Review is designed to help government, business, voluntary organisations and others in society to take stock and identify the key inequalities in British society that need tackling as a matter of priority. The bulk is made up of objective factual and statistical evidence about the experiences and outcomes in life of different groups. Throughout Part I, we have sought to set the context for the findings and conclusions that follow.

The right tools, the right attitude

There are two principal reasons to be confident that the Review will act as a catalyst for meaningful change in people's lives.

First, as noted in Chapter 2, Britain has many of the right tools. In the Equality Act 2010, Britain has one of the most developed equality law frameworks of any country. The Act shows how different people can play their part in addressing the major inequalities identified by this Review. The evidence provided in this Review will help them match their response to the realities of society today, and focus their efforts where they are most needed.

For example, all employers may wish to compare their own workforce, or their pay structures with other enterprises of their type and with the national benchmarks. As public bodies seek to meet their current equality duties, the evidence in the Review will help them to see which groups face difficulty in using public services. The Review offers these organisations a benchmark against which to measure their performance and may help them in identifying concrete, practical measures against which they can review their progress.

⁵⁹ Equality and Human Rights Commission, 2010. *Inquiry into Recruitment and Employment in the Meat and Poultry Processing Sector*.

Having looked at the evidence, a financial firm might choose, for example, to measure the proportion of women in senior manager roles. The use of such concrete measures may help focus their actions appropriately and so bridge the gap between good intentions and good outcomes.

If the Equality Act 2010 is one of the most comprehensive anti-discrimination frameworks in the world, then in the Equality and Human Rights Commission, Britain has a regulator with a broader set of responsibilities and powers than most similar organisations to be found elsewhere. The Commission will continue to develop its regulatory approach to use its powers to best effect. As organisations (public, private and voluntary) prepare for the Equality Act 2010 to come into force, the Commission will encourage them to consider what they might do to tackle the priorities identified in this Review.

Indeed, the timing of the Equality Act's commencement represents an opportunity: the Commission will encourage different organisations to bear in mind the findings of the Review as they plan for different parts of the Act coming into force.

The second reason to be confident that the Review can spur meaningful change is public opinion, as outlined in Chapter 3. Though there remain some groups towards which people are more likely to express antipathy, British society is by and large much more at ease with its diversity, tolerant of difference, and intolerant of discrimination than it was a generation ago. A concern for anti-discrimination and equality between different groups is no longer a minority interest; it is a mainstream attitude. Therefore any organisation with a responsibility for tackling discrimination and promoting equality (whether the Commission, or any public authority subject to equality duties) can be confident in setting its sights high. The challenge is no longer to convince decision-makers of the rightness of combating discrimination nor of securing public consent for action: it is to translate the shared aspiration towards greater equality into practical change.

Finally, and perhaps most importantly, both the principle and the practice of transparency are powerful levers for change. The Review is the most complete attempt so far to hold up a mirror to our society's efforts to move towards greater fairness. We believe that the very act of making it plain where the inequalities lie will do more than any other factor to galvanise those with responsibility to re-consider their decisions; and making this data and analysis widely available will put new power in the hands of individuals, voluntary groups and organisations fighting for change.

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Part II:
Critical issues
facing Britain today

Chapter 5:

Identifying critical issues

Summary

The second part of the Triennial Review gives evidence about the chances, choices and outcomes in life of people from different groups.

This chapter explains what kinds of evidence are presented, and how and why we chose the particular measures and indicators in Part II.

5.1 Introduction

The following chapters provide evidence against 40 indicators on the progress Britain has made in meeting its aspirations for a fair society in which all can flourish, irrespective of their diverse personal characteristics.

The task of narrowing down the range of issues that such evidence should cover is inherently complex. Decades of research have indicated that a very wide range of factors often interact to limit some groups' opportunities and life chances and make some people particularly vulnerable to their human rights not being realised.

The Commission has worked over the last three years with academics, statisticians, policy-makers and other stakeholders to develop a consensus on what is critical to measure and monitor.

This has involved two systematic processes that are described in the next two sections of this chapter:

- The development of equality indicators within the Equality and Human Rights Commission's Measurement Framework. These equality indicators have collectively been known as the Equality Measurement Framework or EMF.
- The compilation, for this Review, of existing evidence in the areas that the EMF covers.

Both the EMF and the evidence for this review are concerned particularly with the experiences of groups defined by the seven grounds protected in the Equalities Act 2006: age, disability, ethnicity, gender, religion and belief, sexual orientation and transgender people.

This first Review concentrates primarily on equality. Further academic and consultative work on developing human rights and 'good relations' indicators has begun with the aim of preparing fuller Reviews on these over the next two years.

The examination of different groups' experiences in this part of the Review shows that Britain is falling short in its aspiration to provide equal chances for everyone to thrive. In Part III of the report we suggest some areas which this evidence suggests are particularly important challenges for Britain to tackle.

5.2 Developing the Equality Measurement Framework indicators

The evidence on the state of equality in Britain presented in this Review is selected and organised in a way that derives from the Equality and Human Rights Commission's Equality Measurement Framework (EMF).¹

The EMF can be thought of as a simple matrix with the indicators along the top and the groups of people protected in the Equality Act down the side. The cells show data that represent how well a particular group is doing in relation to a particular indicator. Box 5.2.1 shows some of the key equality groups that would be down the side of this matrix with their approximate size in the population and some comments on their age and class profile that need to be borne in mind when different average experiences in relation to the indicators are discussed in subsequent chapters.

The indicators along the top of the EMF matrix are based on sound theoretical underpinnings,² the international human rights framework and extensive consultation over three years with the public and data experts.³ It was created using the following steps:

1 Identification of areas of life that affect people's opportunities and outcomes

Theoretical work and consultation with the public and expert stakeholders identified 10 domains of life that are important for individual flourishing:

Life; Legal Security; Physical Security; Health; Education and learning; Productive and Valued activities; Standard of Living; Individual, Family and Social life; Identity, Expression and Self Respect; and Participation, Influence and Voice.

2 Selection of a small range of indicators that highlight important aspects of these areas of peoples' lives

An 18 month consultation process with academic experts, statisticians, and other stakeholders resulted in the selection of 4-5 indicators for each 'domain' that collectively spotlight those aspects considered to have the most impact on life-chances. The consultation process included consultation on the criteria for this selection, as listed in Appendix 1.

¹ Further information on the Equality Measurement Framework is available at: <http://www.equalityhumanrights.com/key-projects/equality-measurement-framework/>

² Including in particular the 'capability approach' developed by Amartya Sen.

³ The indicators that have been derived were supported by the UK Government, Welsh Assembly Government and Scottish Government.

3 Identification of potential measures for each of these indicators that could be monitored over the long term to track society's progress in Britain, England, Scotland and Wales

In consultation with statisticians, data commissioners and data providers, potential measures were selected for Britain, England, Scotland and Wales. Where possible, the measures selected are in existing data sources but in a small number of cases, gaps were identified where new data will need to be developed.⁴ The measures use data sources wherever possible that give the maximum coverage possible of the groups that are protected in the Equality Act 2006, but these existing data sources often do not provide information about religion and belief, sexual orientation and transgender people.

With some adaptation and data development these measures could also be used in local areas and by public institutions generally to monitor and benchmark progress.

It was recognised in the development of this framework that it is important to capture:

- Inequality of **outcomes** (the things in life that individuals and groups actually achieve).
- Inequality of **process** (reflecting inequalities in treatment through discrimination or disadvantage by other individuals and groups, or by institutions and systems, including lack of dignity and respect).
- Inequality of **autonomy** (i.e. inequality in the degree of empowerment people have to make decisions affecting their lives, how much choice and control they really have given their circumstances).

The initial 40 indicators developed so far and on which this Review is based cover the first two of these. Parallel research on autonomy has led to a proposal for a set of further equality indicators covering autonomy. Questions that would allow survey data to provide the measurement of them have been piloted. Insofar as they are included on surveys in the future, they will be reported on in future Triennial Reviews.⁵

⁴ Details of the consultation process, the criteria used for selecting indicators and measures, and the detailed recommendations made for further exploiting existing data sources and developing measures where none currently exist are available in Alkire, S. *et al.* 2009. *Developing the Equality Measurement Framework: selecting the indicators*. Research Report 31. Manchester: Equality and Human Rights Commission.

⁵ Burchardt, T., Evans, M. and Holder, H. (forthcoming). *Measuring Inequality: Autonomy the degree of empowerment in decisions about one's own life*. Centre for Analysis of Social Exclusion, London School of Economics (CASE)/ University of Oxford.

The 10 domains covered by the EMF all apply to children, but the indicators need to be tailored to spotlight specific issues that are particularly important for children. After extensive consultation, the Commission has recently published the framework of indicators for children and data will be developed for this to include in the next Triennial Review.⁶

Box 5.2.1 Equality groups

In the chapters that follow we have methodically looked at the evidence in relation to the indicators covered in this Review for groups in seven equalities strands: age, gender, disability, ethnicity, religion and belief, sexual orientation and transgender, together with class. Below are some of the major groups for the first five of the equality strands, together with their size in the population, using the most reliable up to date sources. Detailed definitions and data are shown in Appendix 3. The data available for sexual orientation and transgender are very limited and there are no reliable estimates of population size. A variety of sources are referred to, as relevant, in the indicator chapters that follow.

When differences are shown between ethnic, religious or disability groups in the indicators described in the rest of the Review, it is important to remember that some may be due to the fact that one group is on average younger or older or of lower or higher class than another.

Younger age profiles of some ethnic and religious groups

The Office for National Statistics (ONS) ethnic population estimates for mid 2007 in England and Wales⁷ show that whereas 29% of White adults are under the age of 35 and a similar proportion of Black Caribbean adults (30%) are under 35, the proportions are higher for Indians (46%), Black Africans (51%), Pakistani/Bangladeshis (56%), Chinese (57%), those of mixed background (60%) and 'other' ethnicities (50%).

Similarly, the ONS Annual Population Survey⁸ for the year to September 2009 shows that, based on religious affiliation, only 25% of Christian and 28% of Jewish adults are less than 35 years old, compared with higher percentages of other groups: 38% of Buddhists, 41% of Sikhs, 43% of Hindus, and 55% of

⁶ Tsang, T. and Vizard, P. (forthcoming). *Developing the Equality Measurement Framework: Selecting the Indicators for Children and Young People*. CASE.

⁷ Equality and Human Rights Commission analysis of data from Office for National Statistics, 2010. *Population estimates by ethnic group (experimental) mid-2007*. This is the most recent year for which these estimates have been published.

⁸ Equality and Human Rights Commission analysis of data from Office for National Statistics, 2010. *Annual Population Survey October 2008 – September 2009*.

Box 5.2.1 Continued

Muslims are under 35. Those affiliated to no religion are also significantly younger than the Christian or Jewish adults with 47% being below age 35.

Disabled people are older than non-disabled people

The Family Resources Survey 2007-08⁹ shows that only 9% of disabled adults are under the age of 35 compared to 34% of non-disabled. At the other end of the age spectrum, 26% of disabled people are aged 75 or over, compared to only 5% of non-disabled.

Social class profiles of ethnic, religious and disability groups

The official definition of social class is the National Statistics Socio-Economic Classification (NS-SEC), based on occupation and employment status. In the standard 8 class classification the last class is 'never worked and long-term unemployed'. There are large differences in the employment rates of various groups that are discussed in Chapter 11: Employment. If one excludes this last class and 'residual groups' who are full-time students or otherwise unclassified, i.e. considers those in NS-SEC classes 1-7, then the class differences between groups are smaller than sometimes stated.

Nevertheless among working-age people in classes 1-7 of the NS-SEC, Indian people are more likely to be in the professional/managerial class (51%) and Pakistani and Bangladeshi people (28%) less likely to be so than White people (42%). Conversely only 30% of Indian people are in the routine/manual class compared to 37% of White people and 44% of Pakistani/Bangladeshi people. Those affiliated to non-Christian religions have a very similar class profile overall to both those with Christian affiliation and people affiliated to no religion. Within non-Christian religions, Muslim groups are the only group large enough for there to be reliable data. This shows that Muslim people have a lower class profile than Christian people with 31% in professional or managerial occupations compared to 42% of Christian people.

Of working-age disabled people in the first seven classes of the NS-SEC, only 34% are in professional and managerial occupations compared to 44% of non-disabled.

⁹ Equality and Human Rights Commission analysis of data from Department for Work and Pensions, 2009. *Family Resources Survey 2007-08*.

Box 5.2.1 Continued**Size of key groups within equality strands**

There follows a summary of the size of key groups in the population for each of the equality strands except for sexual orientation and transgender for which there are no firm data, but some estimates are given in Appendix 3. The sources for the data that follow are given in Appendix 3.

Age

Children aged under 16 account for 19% of the population in Britain, working-age adults for 62% of the population and pension-age adults 20% of the population.

Among adults in Britain:

16-24 years old:	15%
25-45 years old:	34%
45-64 years old:	31%
65+ years old:	20%

Scotland and Wales both have a slightly older population than England. The proportion above aged 45 is 55% in Wales, 53% in Scotland and 51% in England.

Social class

Among working-age adults in Britain:

Managerial and professional:	34%
Intermediate	17%
Manual and routine:	30%
Never worked/long-term unemployed/ full-time student/not classified	19%

Wales in particular has a lower socio-economic profile than England. The managerial/professional class accounts for 29% in Wales, 33% in Scotland and 35% in England. The manual/routine class accounts for 33% in Wales, 32% in Scotland and 29% in England.

The proportion of people in managerial and professional jobs is unsurprisingly lower among younger working-age adults below aged 30.

Box 5.2.1 Continued**Gender**

Among adults in Britain:

Women:	51%
Men:	49%

Men have a higher mortality rate than women so that whereas men are a higher proportion than women of 16-24 year olds (51%) by age 65-74 they are only 48% of the population and among over-85s they account for only a third.

In Scotland the higher mortality of men relative to women than in the other three nations means that the proportion of men overall in the adult population is only 48%. By the 65-74 age group men in Scotland account for only 46% of the population compared to 48% in Wales and England.

Ethnic groups

Among working-age adults in England:

White British	84%
Other White	5%
All White	89%
All Non-White	11%
Indian	2.6%
Pakistani	1.5%
Bangladeshi	0.6%
Black African	1.3%
Black Caribbean	1.2%
Chinese	0.8%
Mixed	1.2%
Other	1.6%

In Scotland and Wales the non-White population is only about 3% of the working-age adult population. The distribution of minorities within this is similar. The small size of the non-White ethnic minority populations means that data are often not available for these groups in these nations.

Box 5.2.1 Continued***Religious groups***

On the basis of religious affiliation, even if not currently practicing, among adults in Britain:

No religion	18.9%
Christian	73.8%
Non-Christian	7.4%
Muslim	3.5%
Hindu	1.3%
Sikh	0.6%
Jewish	0.5%
Buddhist	0.4%
Other	1.1%

In Wales and Scotland only about 3% report affiliation to non-Christian religions.

Disability groups

Family Resources Survey data which define the disabled as those people with a long-standing illness, disability or impairment, and who have substantial difficulty with day-to-day activities, estimate the level of disability in Britain as follows:

All disabled	21%
Not disabled	79%

The pattern is broadly similar in England, Wales and Scotland.

5.3 Compiling the evidence for this review

The starting point for the Review is the 40 initial indicators in the Equality Measurement Framework for adults.

A systematic approach to compiling the evidence for these indicators has involved:¹⁰

- Combining large-scale data sets with related qualitative and small-scale research to provide as much evidence against the indicators as possible for groups protected within the 2006 Equalities Act.
- Using smaller surveys and qualitative studies to enhance understanding of indicators, particularly in relation to groups that are poorly represented in large data sets.
- Using ‘proxy’ evidence that throws light on an indicator topic where measures are still under development or data are not available. This was done wherever possible but there are a small number of indicators where there is no measure and too little qualitative research.¹¹
- Undertaking several phases of consultation to hear about our stakeholders’ experiences, and to hear their reactions to the indicator data. This consultation comprised of a call for evidence running from October 2009 to January 2010; stakeholder roundtable meetings in May 2010 and a programme of consultation in Scotland under the ‘Significant Inequalities in Scotland’ project, which ran from November 2009 to March 2010 and involved a range of equality stakeholders.

The organisation of the evidence in this Review is in chapters that for the most part relate to the domains of the EMF, but with some adaptation to take account of:

- The fact that the small number of indicators where there is no measure and too little qualitative research even to create ‘proxy’ information are concentrated particularly in the domains of ‘individual, family and social life’ and ‘identity, expression and self-respect, making separate chapters on these inappropriate.¹²
- Stakeholders advised that it would be helpful to bring indicators that relate to care and support in three of the domains together in one place.

¹⁰ This has included systematic desk research, reviewing internally available evidence from sources such as the Equality and Human Rights Commission helpline and calling on a number of academic institutions to provide evidence for the Review. These papers are available on the Equality and Human Rights Commission Triennial Review web pages.

¹¹ The indicators that have no evidence against them in this Review are shown in Appendix 2.

¹² Some of the indicators in these domains also relate closely to the areas that are likely to be covered in the forthcoming human rights and good relations reviews.

The evidence in this Review is therefore reported indicator by indicator within the nine chapters shown in Box 5.3.1.¹³ For each indicator that is reported on there is a box on ‘How the measures work’ that provides specific information on data issues that need to be borne in mind when interpreting the evidence presented. But some general issues of coverage and accuracy are highlighted in Box 5.3.2. In Part III we discuss some priorities for improving data.

The indicators act as a fairly high-level ‘flag’ of the issues facing different groups and will show over time where problems are reducing or increasing. In the next two years we will be producing equivalent evidence for human rights and good relations, following further data development in these areas.

Box 5.3.1 The Indicators used in this Review

Chapter 6 Life

- 1 Life expectancy (p73)
- 2 Mortal illness (p82)
- 3 Suicide (p90)
- 4 Accidental death (p96)
- 5 Homicide (p100)
- 6 Deaths in institutions (p108)

Chapter 7 Legal security

- 1 Equal treatment by the criminal justice system (p127)
- 2 Offences reported and brought to justice: (p139)
- 3 Prison numbers and conditions (p162)

Chapter 8 Physical security

- 1 Crimes against the person (p193)
- 2 Targeted violence (p226)
- 3 Fear of crime (p234)

Chapter 9 Health

- 1 Poor health and limiting long-term illness or disability (p253)
- 2 Poor mental health (p270)
- 3 Living a healthy life (p280)
- 4 Dignity and respect in health treatment (p290)

¹³ The relationship between the indicators reported on in this Review and those in the EMF is shown in detail in Appendix 2.

Box 5.3.1 Continued**Chapter 10 Education**

- 1 Level of development at age 5 (p303)
- 2 Permanent exclusions from school (p309)
- 3 Bullying, respect and support at school (p316)
- 4 Educational attainment at age 16 (p324)
- 5 Participation in higher education (p338)
- 6 Adult skills and qualifications (p346)
- 7 Adult learning (p361)
- 8 Use of the Internet (p369)

Chapter 11 Employment

- 1 Employment rates (p383)
- 2 Pay gaps (p409)
- 3 Occupational segregation (p421)
- 4 Illness and injury at work (p432)
- 5 Discrimination (p442)

Chapter 12 Standard of living

- 1 Wealth (p463)
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- 3 Political activity (p606)
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Box 5.3.2 General issues relating to the evidence reported in this Review

- There is a lack of large-scale quantitative data in relation to some groups, notably transgender people, lesbians, gay men and bisexuals, and non-household or mobile/transient groups such as people in residential care or Gypsies and Travellers.
- Religion and belief data only refer to broad identity or religious affiliation to particular faiths, and not to the extent of belief or practice.
- It is generally not possible to get data on specific impairments for disabled people, and therefore we are reliant on the aggregate administrative definitions of ‘being disabled’, having a limiting long-term illness or having special educational needs, which hide a particularly wide diversity of experience.
- A range of different categories need to be used in relation to socio-economic groups, particularly when trying to find data that link these to other characteristics. Therefore we have pragmatically used income, area deprivation, housing tenure, occupational class, and eligibility for free school meals depending on data availability.
- Some data are household data or are related to the ‘household reference person’ only. This limits the range of individual experience that the data can capture within the household.
- Small population sizes and hence small samples in national surveys for many groups in Wales and Scotland in particular limit the amount of good indicator evidence available – particularly for minority groups. This issue also considerably limits what can be said about groups with two or more characteristics – e.g. older Muslim women. We hope to be able to do more data pooling of survey data in future Reviews to cover this.

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Chapter 6: Life

Summary

A girl born at the start of the twentieth century had an average life expectancy of less than 50 years.¹ By contrast, the Office for National Statistics predicts that girls born in 2008 will live, on average, for more than 90 years. This remarkable increase is a testament to medical breakthroughs, changes in the British economy, and improvements in diet and housing that have revolutionised life over the past century.

Despite this progress, there remain significant differences between the life expectancies of different groups in modern Britain. In some cases, we do not know whether these differences are a result of innate genetic predispositions. In other cases, the evidence suggests that the differences in life expectancy tell a story about the cumulative impact of inequalities experienced by different groups. Meanwhile, more specific data about particular causes of early death suggest a failure on the part of the state to safeguard the lives of people from different groups equally.

Men's life expectancy is lower than women's, though the gap is narrowing very gradually over time.

Some studies suggest some differences in life expectancy rates between different ethnic groups. There is some evidence that some ethnic minority groups are more likely to die early from certain causes. Black people are more likely to be homicide victims than are members of other ethnic groups. A disproportionate number of people who die following contact with the police are also Black. Infant mortality is higher than average among Black Caribbean and Pakistani groups, although, by contrast, it is lower than average among Bangladeshi groups.

Some groups may be particularly susceptible to certain types of risks to life. Infants and young adults are the most likely of any age group to be the victims of murder or homicide. There is some evidence to suggest that lesbian, gay and bisexual (LGB) and transgender people may be more likely than average to attempt suicide or to commit acts of self-harm. People with mental health conditions are more likely than those without to die during or following police custody.

There are differences in life expectancy between different parts of Britain. Life expectancy in Scotland ranges from 3 years lower than in England and 2 years lower than Wales. Overall, more people die early in Scotland than in any other western European country.

¹ Hicks, J. and Allen, G. 1999. *A Century of Change: Trends in UK statistics since 1990*. House of Commons Research Paper. Available at: <http://www.parliament.uk/documents/commons/lib/research/rp99/rp99-111.pdf> Accessed 25/08/2010.

Finally, there are significant differences in life expectancy between members of different socio-economic groups. Men in the highest socio-economic group can expect to live around 7 years longer than men in the lower groups. For women, the gap is the same. Evidence also suggests that people from lower socio-economic groups may be more susceptible to such risks to life as smoking-related cancers and suicide.

Introduction

Of all the measures reported on in this Review, life expectancy demonstrates most clearly and objectively Britain's continued development as a society. The average life expectancy has risen consistently since the Second World War; today, it exceeds by far the averages seen in our great-grandparents' lifetime.

However, there remain differences between the life expectancy of different groups. Some of these are widely recognised. Perhaps the best-known is the fact that women live longer than men, which has long been the subject of scientific research and public speculation. This chapter shows that there are other differences besides, and some of them are substantial.

Many factors can affect life expectancy, including income, living conditions, and genetic predisposition. It is wise to exercise caution in interpreting differences in life expectancy between different groups, and in general we do not seek to define the extent to which these differences are the result of intrinsic or extrinsic factors. In some cases, however, the differences in overall life expectancy are so stark that it is possible to infer with some confidence that they are indicative of the cumulative impact of unequal outcomes experienced by different groups throughout their lives. This is particularly true in relation to socio-economic background.

Overall expectancy, though, is not the only relevant indicator for assessing society's performance. International human rights agreements defend the right to life. This means the state has a positive duty to protect people from unlawful killing and death through negligence. The evidence here suggests that the state discharges that duty towards some minority groups less well than it does towards the majority of the population. There is some evidence to show that different groups are particularly vulnerable to risks including homicide and deaths in institutions.

Indicators

- 1. Life expectancy**
- 2. Mortal illness**
- 3. Suicide**
- 4. Accidental death**
- 5. Homicide**
- 6. Deaths in Institutions**

For **life expectancy**, we give the average life expectancy at birth and at ages 20, 65 and 80.

For **mortal illness**, we give annual age-standardised death rates from ischaemic (coronary) heart disease, cerebrovascular disease (strokes) and cancer.

Under **suicide**, we give suicide rates standardised for age.

Under **accidental death**, we give the number of accidental deaths and rates by age.

Under **homicide**, we give the numbers of murders, infanticides and manslaughters per million of the population.

Under **deaths in institutions**, we give the rates of deaths during and following contact with police, and of self-inflicted deaths in prisons.

As in the rest of Part II, this chapter explores what we know about these indicators and what the evidence tells us about the experiences of different groups. We end by examining gaps in our knowledge and what we need to know.

6.1 What we know about life expectancy

Measure:

Life expectancy – measured at birth and age 20, 65 and 80

How this measure works:

Life expectancy data are taken from the Office for National Statistics (ONS) and the General Register Office of Scotland. For this measure we are able to report for Britain, England, Scotland and Wales.

Direct estimates of life expectancy by ethnic group cannot be computed since ethnic group is not recorded on death registration certificates in Britain. We cite some studies that have used country of birth as a proxy; this has serious limitations, as the British-born ethnic minority population is not covered and not all foreign-born people are from an ethnic minority. These studies also rely in part on the 1991 and 2001 Census data and are therefore dated.

For different socio-economic categories, the ONS longitudinal study is used for 'at birth', and 'at age 65' life expectancy, which is available for England and Wales only.

There is very limited related literature for this measure for groups defined by disability (disability is not recorded on death certificates), religion or belief, sexual orientation and transgender, therefore they are not covered in this section.

As data relating to these groups are limited we examine some of the available literature. With all these studies, samples are generally small which limits the extent to which we can make any generalisations to the wider population.

Overview

Life expectancy has improved steadily in England, Scotland and Wales over the past few decades yet different groups in Britain continue to have considerably different chances in terms of how long they can expect, on average, to live.

The three clearest differences are between different parts of Britain, between men and women and between members of different socio-economic groups.

What we know about the overall situation and trends

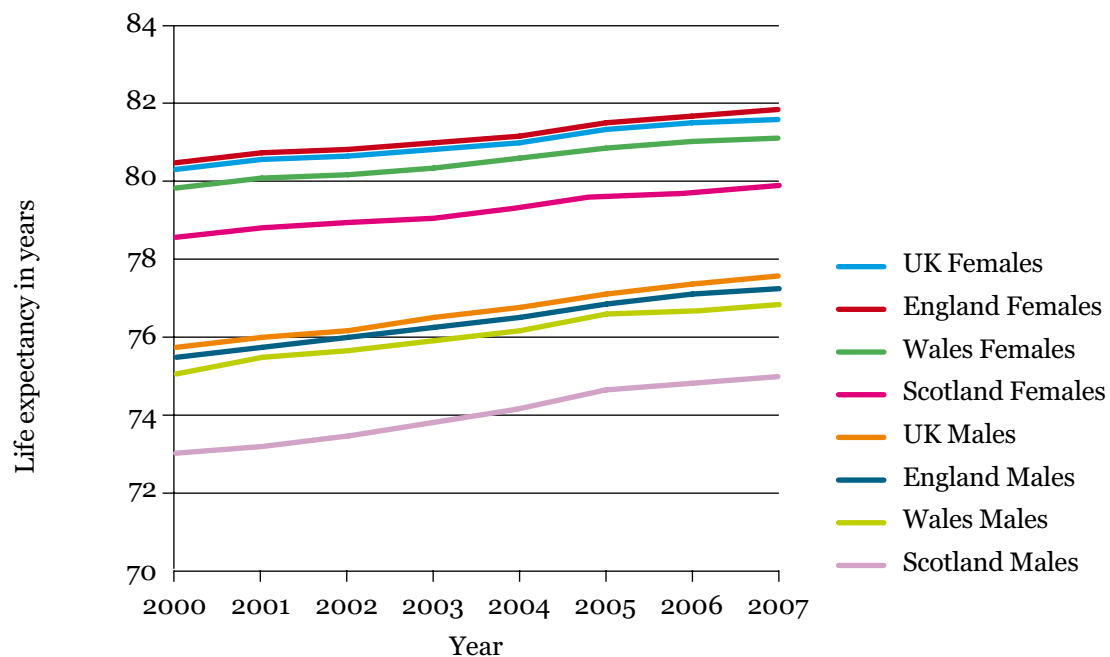
Figure 6.1.1. below shows life expectancy has increased over the past decades across the UK and England, Scotland and Wales. Women live on average longer than men, but the gap has narrowed over time to around 4 years in 2007 for the UK as a whole, as this table shows. Life expectancy is expected to continue to rise for both genders with the gap between the genders growing smaller. ONS projected life expectancies for people born in 2008 are 88.6 years for men and 92.2 years for women.²

These trend data show that in Scotland, life expectancy has been persistently shorter than it is in England and in Wales. Scottish people are more likely to die early (before age 65) than people in any other Western European country.³

² Alkire, S., Bastagli, F., Burchardt, T., Clark, D., Holder, H., Ibrahim, S., Munoz, M., Terrazas., P. and Tsang, T., and Vizard, P. 2009. *Developing the Equality Measurement Framework: selecting the indicators*. Research Report 31. Manchester: Equality and Human Rights Commission. Chapter 8. Page 22.

³ Allmark, P., Salway, S. and Piercy, H. 2010. *Life and Health: An evidence reviews and synthesis for the Equality and Human Rights Commission*. University of Sheffield Hallam Analysis of Scotland's Population 2008 – The Registrar General's Annual Review of Demographic Trends – Chapter 3 Deaths. Available at: <http://www.gro-scotland.gov.uk/statistics/publications-and-data/annual-report-publications/annual-review-2008/figures-chapter-3.html> Chapter 8. Page 27.

Figure 6.1.1 Period expectation of life at birth (years) in the UK, England, Wales and Scotland, 2000-07⁴



Source: ONS Interim Life Tables.

Note: All figures are based on a three-year period, so that for instance 2003 represents 2002-04. The population estimates used to calculate these life expectancies are the latest available at time of publication of the 2006-08 interim life tables (21 October 2009). All figures are based on death registrations.

What we know about the situation for different groups

Gender and age

While women live longer than men, this may mean that a portion of these years are spent in ill health, which increases with age⁵ – this is set out further in Chapter 9: Health. Life expectancy in Scotland ranges from nearly 3 years lower than England at the widest point (life expectancy for men at birth), although the gap closes over the age range.

⁴ Allmark, P. *et al.* 2010. Chapter 8. Page 22.

⁵ Allmark, P. *et al.* 2010. Chapter 8. Page 53.

Table 6.1.1 Life expectancy at birth, 20, 65 and 80 years by gender in England, Wales and Scotland, 2006-08⁶

	England				Wales				Scotland			
	Birth	20	65	80	Birth	20	65	80	Birth	20	65	80
Males	77.7	58.4	17.5	7.9	76.9	57.5	17.1	7.7	75.0	55.7	16.2	7.3
Females	81.9	62.4	20.2	9.2	81.2	61.8	19.8	9.1	79.9	60.4	18.8	8.6

Source: ONS Interim Life Tables.

Socio-economic groups

The gap in life expectancy at birth between the top and bottom socio-economic groups is wider than the gender gap and the evidence shows that people in higher socio-economic groups can expect longer lives. The gender and socio-economic gap combined is particularly large – a woman from social class 1 (professional) can expect to live nearly 12 and a half years longer than a man from social class 5 (partly skilled). The gap narrows by age 65 to 7.9 years between a woman from social class 1 and a man from social class 5.

⁶ Allmark, P. *et al.* 2010. Chapter 8. Pages 21-25.

Table 6.1.2 Life expectancy at birth and at age 65 by social class and gender in England and Wales, 2002-05⁷

2002-05 men			2002-05 women		
Social Class	Life exp.	95% CI (+/-)	Social Class	Life exp.	95% CI (+/-)
At birth			At birth		
1 Professional	80	1	1 Professional	85.1	1.1
2 Managerial and technical/intermediate	79.4	0.5	2 Managerial and technical/intermediate	83.2	0.5
3 Skilled non-manual	78.4	0.7	3 Skilled non-manual	82.4	0.5
4 Skilled manual	76.5	0.4	4 Skilled manual	80.5	0.5
5 Partly skilled	75.7	0.6	5 Partly skilled	79.9	0.6
6 Unskilled	72.7	1.1	6 Unskilled	78.1	1.2
7 Unclassified	73.8	1.1	7 Unclassified	77.9	0.9
All men	77	0.2	All women	81.1	0.2
Non-manual	79.2	0.4	Non-manual	82.9	0.3
Manual	75.9	0.3	Manual	80	0.3
Difference	3.3	0.5	Difference	2.9	0.5
At age 65			At age 65		
1 Professional	18.3	0.6	1 Professional	22	0.9
2 Managerial and technical/intermediate	18	0.3	2 Managerial and technical/intermediate	21	0.3
3 Skilled non-manual	17.4	0.5	3 Skilled non-manual	19.9	0.3
4 Skilled manual	16.3	0.3	4 Skilled manual	18.7	0.4
5 Partly skilled	15.7	0.4	5 Partly skilled	18.9	0.3
6 Unskilled	14.1	0.7	6 Unskilled	17.7	0.6
7 Unclassified	15.1	0.8	7 Unclassified	17.6	0.5
All men	16.6	0.2	All women	19.4	0.2
Non-manual	17.9	0.3	Non-manual	20.5	0.2
Manual	15.9	0.2	Manual	18.6	0.2
Difference	2	0.3	Difference	1.9	0.3

Source: Office for National Statistics: Longitudinal Survey.

⁷ Allmark, P. *et al.* 2010. Chapter 4. Page 24.

Disability

It is not possible to report on this indicator for disabled people because data are not collected on death certificates. For some disability groups, research suggests very poor life expectancy:

- A study in the 1990s found that people with learning disabilities are 58 times more likely to die before the age of 50 than the general population.⁸
- A second study in 2009 calculated standardised mortality rates from a small sample of people with learning disabilities in three counties in a region of England, and found the mortality rate to be over two times the average for men and over three times for women.⁹

Ethnicity

Life expectancy cannot be measured directly by ethnicity because this is not documented on death certificates. Some studies have attempted to estimate standardised mortality rates (SMR) based on country of origin data (SMR means the ratio of observed deaths for a particular group, compared to expected deaths for the general population. SMRs equal to 100 imply that the mortality rate is the same as the standard mortality rate. A number higher than 100 implies an excess mortality rate whereas a number below 100 implies below average mortality).¹⁰

Other studies have estimated life expectancy by ethnicity based on illness rates. Overall, on this basis although results should be treated with caution, in the absence of other data these studies appear to show that men and women born in Ireland, Scotland and Africa, and men born in south Asian countries have the lowest life expectancy.

⁸ British Medical Association 2007. *Disability Equality Within Healthcare: The Role of Healthcare Professionals*. London: British Medical Association. Page 15.

⁹ Allmark, P. *et al.* 2010. Chapter 6. Page 12.

¹⁰ See London health observatory at: http://www.lho.org.uk/LHO_Topics/Data/Methodology_and_sources/agestandardisedrates.aspx Accessed 26/08/2010.

For example, the worst SMRs are for these groups of people:

Table 6.1.3 Poorest (significant) standardised mortality rates (SMR) by country of birth (age 20+) in England and Wales, 2001¹¹

	Country of Birth	SMR
Men	Ireland	128
	Bangladesh	120
	West Africa	117
	Scotland	113
	East Africa	105
Women	West Africa	121
	Ireland	113
	Scotland	109
	East Africa	108
	Pakistan	106
	India	104

Source: Indirect age-standardisation using 2001 census population of England and Wales.

Note: All people resident in England and Wales in 2001, SMR = 100.

Alternatively, Table 6.1.4 shows the results of calculating mortality rates of ethnic groups by exploring the relationship between reported long-term limiting illness, and local mortality rates. It should be noted that these indirect estimates are based upon self-reported limiting long-term ill health/disability, a measure that may well be sensitive to cultural (linked to ethnicity and/or gender) variation in the experience and expression of ill health. However the results indicate poorer life expectancy for Bangladeshi, Pakistani, White/Black Caribbean and Other Black men and women.

¹¹ Allmark, P. *et al.* 2010. Chapter 7. Page 35.

Table 6.1.4 Indirect estimates of life expectancy at birth (e_0) by ethnicity and gender in England, 2001¹²

Ethnic group	Women e_0	Men e_0
White British	80.5	75.9
White Irish	80.3	74.9
Other White	81.3	76.9
Indian	79.3	75.5
Bangladeshi	77.7	72.7
Pakistani	77.3	73.1
Other Asian	79.5	75.2
Black Caribbean	79.1	74.4
Black African	80.4	76.1
Other Black	78.5	73.4
Chinese	82.1	78.1
White/Asian	80.0	75.1
White/Black Caribbean	78.7	73.4
White/Black African	79.5	74.2
Other Mixed	79.9	74.6
Other Ethnic	81.5	76.2
All groups	80.5	76.0

Source: Standardised Illness Ratio method using Census 2001.

Localised studies suggest that life expectancy for Gypsies and Travellers is below the norm, but possibly improving over time. One study found that 13% of Gypsies and Travellers were older than 65 compared to 17% local population.¹³

¹² Allmark, P. *et al.* 2010. Chapter 7. Page 38.

¹³ Home, R. and Greenfields, M. 2006. *Cambridge Sub-Region Traveller Needs Assessment*. Chelmsford: Anglia Ruskin University.

Box 6.1.1 Related issue: Infant and maternal mortality

Infant mortality: remains much higher in all nations in Britain than in many other European countries.¹⁴ Rates are notably higher in England than in Scotland or Wales.

Table 6.1.5 Infant mortality rates by gender in UK, England, Wales and Scotland, 2006/08

	Deaths in first year of life per 1,000 live births		
	Males	Females	Difference (male-female)
UK	5.34	4.37	0.97
England	5.38	4.43	0.95
Wales	5.24	3.74	1.50
Scotland	4.97	3.96	1.01

Source: Figures produced from interim life tables prepared and supplied by ONS.

Black Caribbean and Pakistani babies are the most likely to die, with twice the death rate (9.6 and 9.8 deaths per 1,000 live births) as those least likely to die (which are White British at 4.5 per 1000 and Bangladeshi at 4.2 per 1000). Overall, all ethnic minority groups are found to have lower birth weights than the majority White British population.¹⁵

Maternal mortality: In 2008 the Committee on the Elimination of Discrimination against Women expressed concern over ‘The high rate of maternal mortality among all ethnic minorities [as well as high numbers of miscarriages and stillbirths particularly of women from Traveller communities]’¹⁶ Black African women who are asylum seekers are estimated to have a mortality rate seven times higher than for White women, partly due to problems in accessing maternal healthcare.¹⁷

¹⁴ Allmark, P. *et al.* 2010. Chapter 8. Page 29.

¹⁵ Allmark, P. *et al.* 2010. Chapter 7. Page 41.

¹⁶ See also Parry, G., Van Cleemput, P., Peters, J., Walters, S., Thomas, K. and Cooper, C. 2007. ‘Health Status of Gypsies and Travellers in England’. *Journal of Epidemiology and Community Health*, 61, 3. Pages 198–204.

¹⁷ Aspinall, P. and Watters, C. 2010. *Refugees and asylum seekers: A review from an equality and human rights perspective*. Research Report 52. Manchester: Equality and Human Rights Commission.

6.2 What we know about mortal illness

Measures:

IHD and CBD – Annual age-standardised death rates from Ischaemic (coronary) heart disease (IHD) and Cerebrovascular disease (strokes) (CBD)

Cancer – Annual age-standardised death rates from all cancers

How these measures work:

Mortality data taken from the Office for National Statistics (ONS) and the General Register Office of Scotland are used for these measures, enabling us to report on Britain, England, Scotland and Wales.

These specific mortality causes were selected in the Equality Measurement Framework consultation in order to capture Department of Health targets to reduce mortality rates for specific diseases.¹⁸

Social class is not collected in the General Register Office Census Longitudinal Study (for England and Wales). We are able to cite data for England up to 2006 for 'Spearhead' areas (The Spearhead Areas include 70 Local Authorities and 88 Primary Care Trusts, taken from the bottom 5th nationally for certain indicators – set out further in Socio-economic section below). For Scotland we refer to the results for the Scottish Index of Multiple Deprivation.

As disability is not recorded on death certificates it is not possible to report on this indicator but we are able to use some small relevant studies. With all these studies, samples are generally small which limits the extent to which we can make any generalisations to the wider population.

Similarly to life expectancy, there are no direct estimates of cause-specific death rates by ethnicity for the nations of Britain. Estimates used here rely on country of origin, and are imprecise and should therefore be treated with caution.

There is very limited related literature for this measure for groups defined by religion or belief, sexual orientation and transgender, therefore they are not covered in this section.

Evidently these measures only look at a small range of illnesses and will therefore be limited in use, as the range of illnesses and health conditions experienced by different equality groups are so diverse. Illness that is specific to

¹⁸ Alkire, S. *et al.* 2009. Page 74.

a particular group have not been examined, as our aim is to compare common experiences. However some further information can be found in the background paper on Health and Life prepared for this report.¹⁹

IHD and CBD

Cardiovascular disease (CVD) encompasses a range of diseases of the circulatory system, among which the major killers, both measured here, are ischaemic (coronary heart diseases) (IHD) and cerebrovascular diseases (including stroke) (CBD). It is important to distinguish between these types of cardiovascular disease because they affect people differently, for example men and women, and have some different risk factors.

Overview

Risk of death from cardiovascular diseases and cancer varies only slightly in England, Scotland and Wales. Rates for cardiovascular diseases are relatively similar for men and women, but for cancer, men are disadvantaged compared to women.

In terms of ethnicity, death from cardiovascular diseases is particularly high for Pakistani and Bangladeshi born men and women, and men born in West Africa and the West Indies.

Data are very limited for disabled people – some small studies point to issues of concern, but this is an area where further research is needed to establish where inequality may lie.

What we know about the overall situation

The leading cause of death for both women and men in England, Scotland and Wales is Ischaemic Heart Disease (IHD).

Among women in all three nations and men in England, cerebrovascular disease (CBD) is the second leading cause of death, while this is the third biggest killer of men in Wales and in Scotland also, behind lung cancer.²⁰

Premature death from circulatory diseases is higher throughout Britain than on average in the EU, and since the 1980s, Scotland has had the highest IHD mortality rates in Western Europe.²¹

¹⁹ Allmark, P *et al.* 2010.

²⁰ Allmark, P. *et al.* 2010. Chapter 8. Page 32.

²¹ Allmark, P. *et al.* 2010. Chapter 8. Page 41.

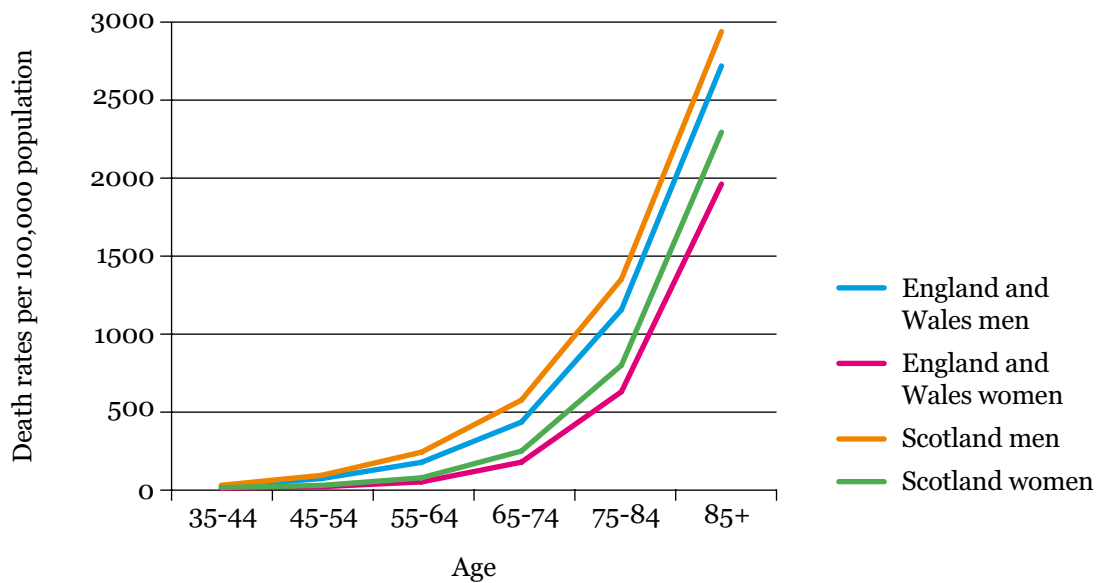
What we know about the situation for different groups

Gender and age

IHD and CBD

For both men and women, advancing age affects the number of deaths from both these diseases, which increase across England, Scotland and Wales after 65 years.

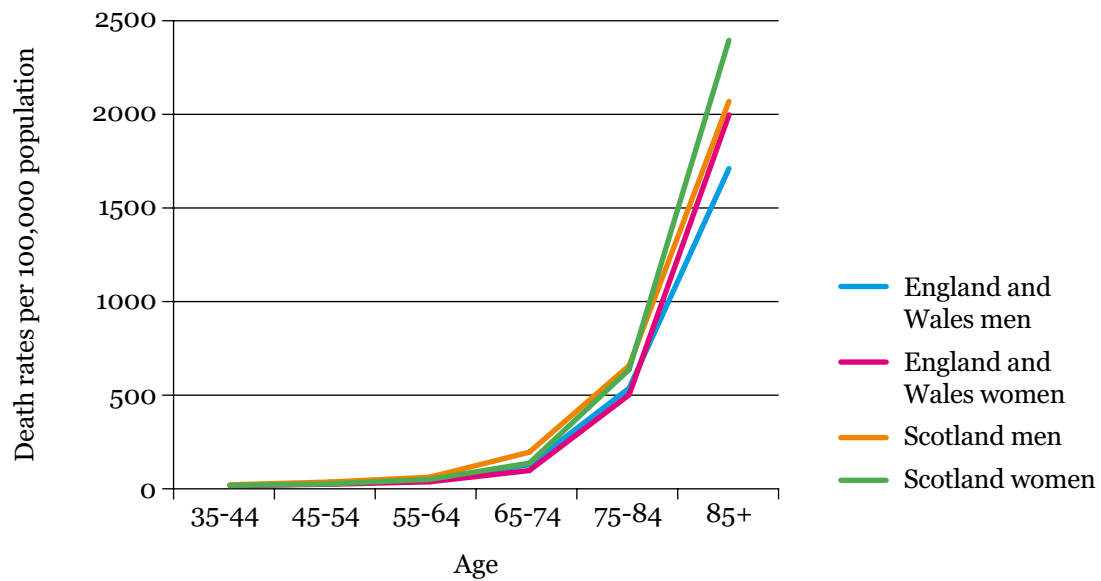
Figure 6.2.1 Death rates per 100,000 population from ischaemic heart disease by gender and age-group in England and Wales, and Scotland, 2008²²



Source: ONS Mortality statistics and the Scottish Registrar General's Annual Review of Population.

²² Office for National Statistics Mortality statistics: Deaths registered in 2008 and Scottish Registrar General's Annual Review of Population. Table 6.2.

Figure 6.2.2 Death rates per 100,000 population from cerebrovascular disease by age group in England and Wales, and Scotland, 2008²³



Source: ONS Mortality statistics and the Scottish Registrar General's Annual Review of Population.

Cancer

Men continue to experience excess cancer-related deaths overall when compared to women, although women have a higher rate in a number of age groups. In England and Wales in 2008, the overall cancer mortality rate for all ages was 206 per 100,000 for men and 150 per 100,000 for women. Overall cancer rates are far higher in Scotland for both men and women. In 2008, Scottish men had an overall cancer mortality rate of 309 per 100,000 and women had a slightly lower rate of 283 per 100,000. The gender differentials for different age groups are shown below in Table 6.2.1, and are particularly large at older ages.

²³ Allmark, P. *et al.* 2010. Chapter 8. Page 35.

Table 6.2.1 Age-specific death rates from all cancers (deaths per 100,000 population) by gender in England and Wales, and Scotland, 2008²⁴

	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85+
England and Wales								
Men	4	8	25	97	351	906	1,877	3,039
Women	3	11	37	111	296	625	1,169	1,732
Scotland								
Men	5	6	30	120	424	1,111	2,068	3,409
Women	4	8	39	116	329	768	1,410	2,002

Source: ONS Mortality statistics Deaths and Scottish Registrar General's Annual Review of Population.

Although there is a higher number of cancer deaths in the over 65s, cancer causes a greater proportion of deaths in younger people. Three-quarters of cancer deaths (76%) occur in people aged 65 years and over, but cancer caused more than a third (36%) of all deaths in the under 65s in the UK in 2008, compared with 25% of all deaths in the over 65s.²⁵

Socio-economic groups

IHD and CBD

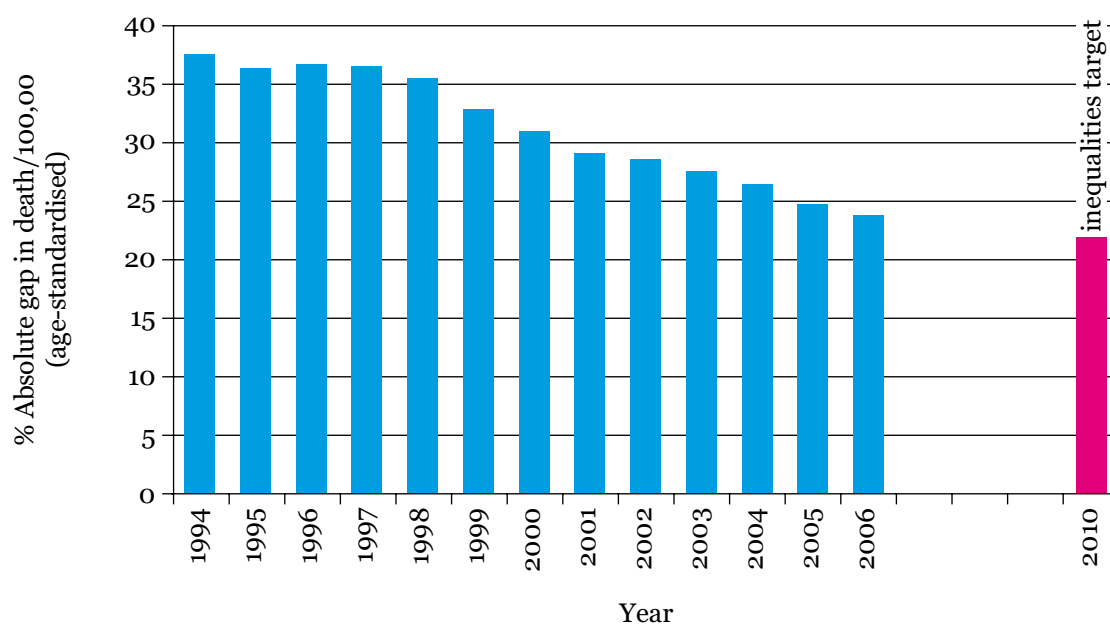
Data are available on the absolute gap in death rates from ischaemic heart disease, cerebrovascular disease and all other diseases of the circulatory system between the so-called Spearhead Group aimed at reducing some specific areas of health inequality,²⁶ and the population as a whole. Figure 6.2.3 below shows that there is inequality in the death rates between the Spearhead group and the wider population: that gap was 37% in 1994 and 24% in 2006, although the gap for these deprived areas has been declining over time. Similar data are not available for Wales.

²⁴ Allmark, P. *et al.* 2010. Chapter 8. Page 41.

²⁵ Cancer Research UK 2010. *Cancer in the UK*. Website publication, available at: http://info.cancerresearchuk.org/prod_consump/groups/cr_common/@nre/@sta/documents/generalcontent/018070.pdf Accessed 26/08/2010.

²⁶ The Spearhead Group is made up of 70 Local Authorities and 88 Primary Care Trusts, based upon the Local Authority areas that are in the bottom fifth nationally for 3 or more of the following 5 indicators: Male life expectancy at birth, Female life expectancy at birth, Cancer mortality rate in under 75s, Cardiovascular disease mortality rate in under 75s, Index of Multiple Deprivation 2004 (Local Authority Summary), average score. See Department of Health 2004. *Tackling Health Inequalities The Spearhead Group of Local Authorities and Primary Care Trusts*. London: DoH.

Figure 6.2.3 Absolute gap in death rates from CVDs between the Spearhead group and the population as a whole, for under 75s in England, 1994-2006²⁷



Source: Office for National Statistics 2009.

Note: Data are for under 75s, and are shown compared to the inequalities target rate of 22% set in 2006 to be met by 2010. The 2010 inequalities target will be calculated based on a 3 year rolling average from 1st January 2009 to 31st December 2011, meaning that final data on this target will not be published until spring 2012 at the earliest.

It is possible to examine rates for Scotland based on area deprivation. Standardised mortality rates for both coronary and cerebrovascular disease for 2004-08 by age group, against the Scottish indices of multiple deprivation, show that there is some association between level of deprivation and mortality rates for these illnesses. This association is stronger for coronary heart disease across all age ranges, and for both diseases for under 65s particularly.²⁸

Cancer

Evidence also points to an association between smoking related cancers and greater deprivation.²⁹

Disability

Little data are available on specific cause mortality and disability.

²⁷ Allmark, P. *et al.* 2010 Chapter 4. Page 36.

²⁸ For these results in full see Allmark, P. *et al.* 2010. Chapter 4. Page 39.

²⁹ Allmark, P. *et al.* 2010. Chapter 4. Page 44.

One small-scale study raises some potential issues, indicating the need for better impairment-specific understanding of mortality rates. This study, which calculated standardised mortality rates from a small sample of people with learning disabilities in three counties in a region of England, found:³⁰

- There was no obvious increased likelihood of cancer deaths.
- Standardised mortality rates for people with learning difficulties were more than doubled for cerebrovascular disease (men: SMR=241; women: SMR=245).
- The largest differences in underlying causes were:
 - Deaths caused from congenital malformations (SMR = 8560).
 - Diseases of the nervous system and sense organs (SMR = 1630).
 - Disease of the genitourinary system (SMR = 603).

Ethnicity

IHD and CBD

To understand mortality rates for different ethnic minority groups, data are more complex. We can look at standardised mortality rates for ischaemic heart disease and cerebrovascular disease rates by country of birth only (analysis based on the 2001 Census). The results for the groups who fare worst are set out in Table 6.2.2 below.

Death rates from ischaemic heart disease are highest for Pakistani and Bangladeshi born men and women. Death from cerebrovascular diseases such as strokes is highest for Pakistani and Bangladeshi men and women, and also men born in West Africa and the West Indies. Much more needs to be understood about these patterns and their causes in order to address differences in risk rates effectively.

³⁰ Allmark, P. *et al.* 2010. Chapter 6. Page 14.

Table 6.2.2 Poorest (significant) standardised mortality rates (SMR) by country of birth in England and Wales, 2001-03³¹

	Ischaemic heart disease		Cerebrovascular disease	
	Country of birth	SMR	Country of birth	SMR
Men	Bangladesh	175	Bangladesh	249
	Pakistan	162	West Africa	234
	East Africa	141	West Indies	160
	India	131	Pakistan	141
	Ireland	118	Ireland	127
Women	Pakistan	174	Bangladesh	207
	Bangladesh	167	Pakistan	139
	India	149	West Indies	137
	East Africa	130	West Africa	131
	Ireland	108	India	122

Source: 2001 Census population of England and Wales and mortality data for 2001-03 (for people aged 20 years and over).

Notes: Indirect age-standardisation using 2001 census population of England and Wales by gender and 5 year age group as standard. All people resident in England and Wales in 2001 SMR= 100.

Cancer

Using a similar approach we are able to set out estimated standardised mortality rates for cancer for England and Wales, based on country of birth.³²

- Statistically significantly higher mortality from all cancers combined, lung and colorectal cancer was found among people born in Scotland and Ireland.
- Lower mortality for all cancers combined, breast and prostate cancer was found among people born in Bangladesh (except for lung cancer in men), India, Pakistan and China/Hong Kong.
- Lower lung cancer mortality was found among people born in West Africa and the West Indies. Higher breast cancer mortality was seen among women born in West Africa and higher prostate cancer mortality among men born in West Africa and the West Indies.

³¹ Allmark, P. *et al.* 2010. Chapter 7. Page 47.

³² Allmark, P. *et al.* 2010. Chapter 7. Page 50.

6.3 What we know about suicide

Measure:

Suicide – Suicide rate standardised for age

How this measure works:

Data are available for gender and age using mortality data taken from the Office for National Statistics and the General Register Office of Scotland. We are able to report on England, Scotland and Wales.

Ethnicity is not available for this indicator – we are able to cite some studies that help elaborate on this area using standardised mortality ratios. With all these studies, samples are generally small which limits the extent to which we can make any generalisations to the wider population.

Socio-economic data are reliant on area deprivation rather than socio-economic categories.

For sexual orientation and transgender groups, reliance is on small-scale and qualitative work.

Overview

Generally, rates of suicide are falling over time, but men are more likely to commit suicide than women.

There is evidence that particular groups are more vulnerable to suicide: the rate for people with mental health conditions is high but some research suggests that prevention of these suicides could be improved.

Some studies indicate possible high levels of attempted suicide reported among transgender people, which points to the need to understand the experiences of transgender people much more comprehensively.³³

Some studies also suggest a high prevalence of suicide/self-harm among LGB people. These patterns are warning signs that society may not be protecting such vulnerable groups to a level that meets their needs.

³³ Allmark, P. *et al.* 2010. Chapter 11. Page 11. See also Mitchell, M. and Howarth, C., 2009. *Transgender Research Review*. Research Report 27. Manchester: Equality and Human Rights Commission. Page 55.

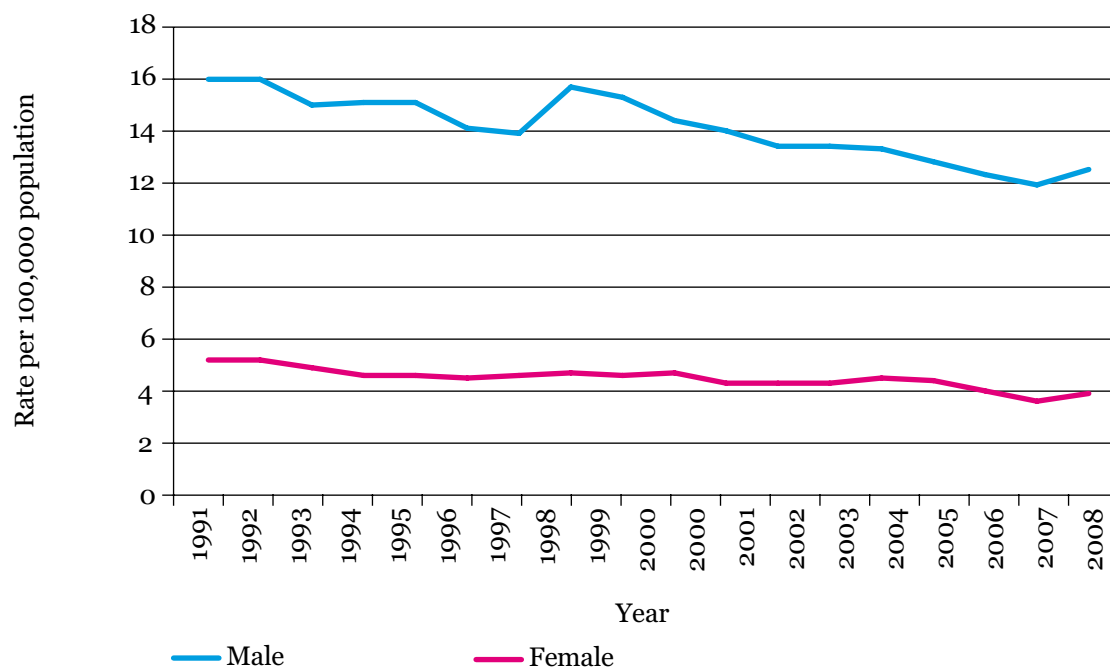
What we know about the overall situation and trends

Across the whole of the UK there were 5,706 suicides in 2008. The trend in suicide rates has been generally downwards since 1991, despite a peak in 1998. Men are more likely to commit suicide than women; in 2008 the suicide rate for men was 17.7 suicides per 100,000 population compared with 5.4 per 100,000 for women.³⁴

Despite downward trends, there has been a notable increase in absolute numbers among men in Scotland: absolute numbers increased from under 500 in 1981 to 630 in 2008.

The patterns of suicide over time for England, Wales and Scotland are shown in the figures below (note that age-standardised figures are not available for Scotland and are given in absolute figures, therefore we cannot compare the nations).

Figure 6.3.1 Age-standardised overall suicide rates per 100,000 population by gender in England and Wales, 1991/2008³⁵



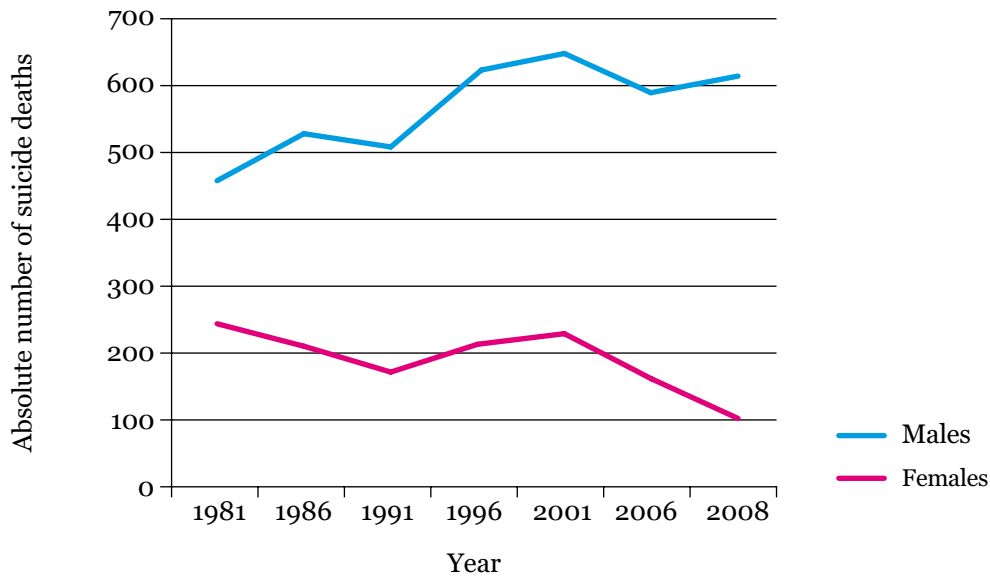
Source: ONS: Mortality statistics.

Notes: Includes deaths classified by underlying cause as due to intentional self-harm and event of undetermined intent (ICD codes X60-X84 and Y10-Y34).

³⁴ Office for National Statistics 2010. *Statistical Bulletin: Suicide Rates in the UK 1991-2008*. Available at: <http://www.statistics.gov.uk/pdffdir/suio110.pdf> Accessed 28/08/2010.

³⁵ Allmark, P. *et al.* 2010. Chapter 8. Page 46.

Figure 6.3.2 Absolute numbers of suicide deaths by gender in Scotland, 1981-2008³⁶



Source: Scottish Registrar General's Annual Review of Population.

Note: This figure shows absolute numbers and therefore cannot be compared directly to the trends in England and Wales above.

What we know about the situation for different groups

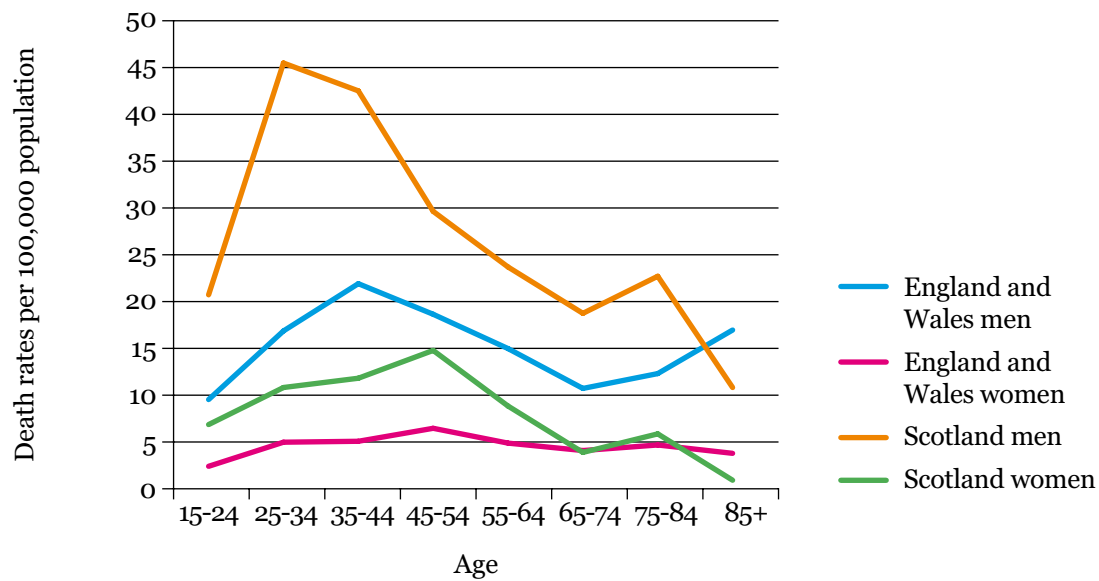
Gender and age

Although suicide has fallen for most groups in recent years, it remains a disturbing cause of early death, especially among younger adults whom it affects the most. Around three times as many men as women committed suicide in Britain in 2008. The suicide rate in Scotland is higher than that in England and Wales for both women and men in most age groups, and is particularly high in Scotland for men aged 25-34 and 35-44. There is also an increase for men in England and Wales for older age groups (75+).

In 2008 the UN Committee on the Covenant on Economic, Social and Cultural Rights raised concerns about increasing suicide rates in Scotland particularly among mental health patients who face difficulties in accessing the complaints system.

³⁶ Allmark, P. *et al.* 2010. Chapter 8. Page 47.

Figure 6.3.3 Suicide rates per 100,000 population by age and gender in England and Wales, and Scotland, 2008³⁷



Source: ONS Mortality statistics Deaths and Scottish Registrar General's Annual Review of Population.

Socio-economic groups

In all three nations there is an association between the deprivation of an area and the suicide rate. In England and Wales, men and women living in the most deprived areas are twice as likely to commit suicide as those in the least deprived.³⁸ In Scotland, data suggest the difference in suicide rates is even greater. The 2010 Marmot Review into Health Inequalities also commented on a link between unemployment and suicide.³⁹

Disability

It is not possible to identify disability or impairment from the data collected, therefore further study is needed that takes into account different impairments – particularly in the case of mental ill health. Where mental health conditions such as depression are categorised as a disability, higher suicide rates might be expected. However, evidence suggests that some suicides connected with mental health conditions may have been avoided; one study estimated 20% of suicides of people with current or recent mental health conditions may have been preventable, suggesting some individuals' needs are not being met.⁴⁰

³⁷ Allmark, P. *et al.* 2010. Chapter 5. Page 35.

³⁸ Allmark, P. *et al.* 2010. Chapter 4. Pages 51-55.

³⁹ Marmot, M., Atkinson, T., Bell, J., Black, C., Broadfoot, P., Cumberlege, J., Diamond, I., Gilmore, I., Ham, C., Meacher, M. and Mulgan, G. 2010. *Fair Society, Healthy Lives: The Marmot Review*. London: The Marmot Review.

⁴⁰ Allmark, P. *et al.* 2010. Chapter 6. Page 16.

Ethnicity

No recent estimates of suicide by ethnicity are available. The standardised mortality ratios (SMRs) of suicide following contact with mental health services were calculated by one study for four ethnic minority groups in England and Wales: Black African, Black Caribbean, South Asian (Indian, Pakistani, and Bangladeshi) and White (ethnicity was clinician-assigned).⁴¹ Overall, compared with the SMRs for their White counterparts (SMR=100), the results were:

- Low SMRs were found for South-Asian men and women (SMR 50 for men and SMR 70 for women).
- Overall SMRs did not differ significantly from the White group for Black Caribbean or Black African people.
- High SMRs were found for Black Caribbean and Black African men aged 13–24 (SMR 290 for Black Caribbean men and SMR 250 for Black African men). High SMRs were also found for young women aged 25–39 of South-Asian origin (SMR 280), Black Caribbean origin (SMR 270), and Black African origin (SMR 320).

In 2008 the UN Committee on the Elimination of Discrimination against Women is recorded as expressing concern over the higher rates of depression and mental illness in ethnic minority women as well as the higher suicide and self-harm rates of women of Asian descent.⁴²

Sexual orientation

Studies suggest there may be a higher of risk of and attempted suicide among LGB people, with research indicating it is directly linked to sexual orientation, or depression, or relationship problems and difficulties with family.⁴³ There is an indication that younger age LGB groups may be particularly vulnerable to thoughts of suicide (compared to LGB groups of other ages).⁴⁴

⁴¹ Allmark, P. *et al.* 2010. Chapter 7. Page 55.

⁴² Committee on the Elimination of Discrimination Against Women 2008. 41st session (30 June-18 July 2008). *Concluding observations to the United Kingdom of Great Britain and Northern Ireland*. UN document number: CEDAW/C/UK/CO/6.

⁴³ Allmark, P. *et al.* 2010. Chapter 10. Pages 15-17.

⁴⁴ Allmark, P. *et al.* 2010. Chapter 10. Page 16. See also Mitchell, M., Howarth, C., Kotecha, M. and Creegan, C. 2008. *Sexual Orientation Research Review 2008*. Research Report 34. Manchester: Equality and Human Rights Commission. Page 223.

Transgender

Some evidence provided by a survey of transgender people reported that 34% of respondents of those surveyed (N=872) had attempted suicide at least once.⁴⁵

There is evidence that transgender people who have experienced mental health difficulties are more likely to have had serious thoughts of suicide – the Brighton and Hove ‘Count me in too survey’ of transgender and LGB people found transgender respondents were more likely (56%, n=22) than LGB (28%, n=168) to have experienced difficulties with suicidal thoughts (p = .0005).⁴⁶

Other groups

Carers: Research suggests that this group face particular pressures and are likely to display symptoms that could indicate depression, perhaps leading to suicide attempts.⁴⁷

- One study found that almost three-quarters (74%) of carers questioned felt their role as a carer has pushed them to breaking point at least once.
- Some had contemplated suicide because of the pressure they found themselves under as a carer. Common reasons included ‘frustration with bureaucracy’, followed by the deteriorating health of the person in their care, lack of sleep and financial concerns.

⁴⁵ Allmark, P. *et al.* 2010. Chapter 11. Page 11; see also Mitchell, M. and Howarth, C. 2009. *Transgender Research Review*. Research Report 27. Manchester: Equality and Human Rights Commission. Page 55.

⁴⁶ Allmark, P. *et al.* 2010. Chapter 11. Page 11.

⁴⁷ Carers Week website 2009. *Carers at breaking point*. Available at: http://www.carersweek.org/newsroom_page.asp?id=194 Accessed 03/09/2010.

6.4 What we know about accidental death

Measure:

Accidents – Number of accidental deaths and rates by age

How this measure works:

There are only data for gender and age, using mortality data taken from the Office for National Statistics (ONS) for England and Wales and the General Register Office of Scotland.

There are very limited data for ethnicity. Some studies have been referred in this section, which use estimations based on country of birth, but are very general and not all results are statistically significant.

There is very limited related literature for this measure for groups defined by socio-economic background, disability, religion or belief, sexual orientation and transgender, therefore they are not covered in this section.

Overview

Based on this limited evidence, accidental death rates are higher for men than women of all ages except the very elderly. This may be due in part to the prevalence of work based accidents in male dominated occupations.

While accidents have a wide range of causes, not all of which are preventable, **there is scope to reduce deaths in some categories** – this is particularly relevant to the increasing number of accidents (probably mainly falls) experienced by older people.

What we know about the overall situation

Although more recent data are not easily obtainable, trend data are available up to 1998, which show that the accident rate was declining.

Table 6.4.1 Accidental death rates (per million population) by gender and age in England and Wales, 1961-98⁴⁸

		Under 15	15-24	25-54	55-74	75 and over
1961-70	Male	236	555	326	542	2,436
	Female	130	110	94	362	2,731
1971-80	Male	162	505	272	425	1,694
	Female	88	118	91	289	2,026
1981-90	Male	106	397	229	314	1,223
	Female	58	92	69	204	1,284
1991-98	Male	59	290	205	254	1,074
	Female	32	76	59	152	1,072

Source: ONS Mortality statistics.

What we know about the situation for different groups

Gender and age

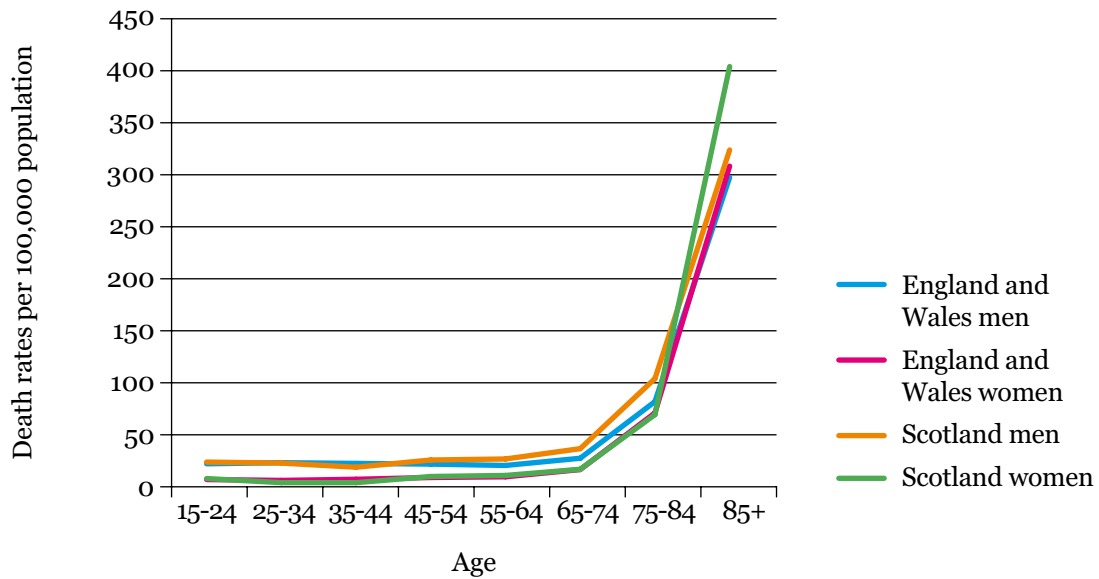
Men have higher rates of accidental death than women in every age group except 85+, and linked to this difference, almost all people killed at work are men: only four fatalities (out of 129) at work in 2008/09 were women.⁴⁹

The risk of accidental death rises rapidly in very old age for both men and women. Because of women's greater life expectancy, a higher number of older women than older men die from accidents.

⁴⁸ ONS, Accidental death rates: by gender and age, 1901-1910 to 1991-1998: Social Trends 30. Available at: <http://www.statistics.gov.uk/STATBASE/xsdataset.asp?vlnk=667> Accessed 28/08/10.

⁴⁹ Health and Safety Executive. Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995. Available at: <http://www.hse.gov.uk/statistics/tables/agegen2.htm> Accessed 27/08/2010.

Figure 6.4.1 Accident death rates (deaths per 100,000 population) by age and gender in England and Wales, and Scotland, 2008⁵⁰



Source: ONS Mortality statistics and Scottish Registrar General's Annual Review of Population.

Box 6.4.1 Related issue: Children and traffic accidents

In the forthcoming Children's Measurement Framework, it is proposed that there is a specific indicator on the numbers of children in fatal traffic accidents. The number of children that have been killed or seriously injured in traffic accidents has been decreasing overtime. The number of children killed or seriously injured in road or traffic accidents in 2009 was 2,671 (down 5% on 2008). Of those, 1,660 were pedestrians, 7% down on 2008. 81 children died on the roads, 43 less than in the previous year, a reduction of over a third.⁵¹

However a study carried in 2003 by the AA Foundation for Road Safety Research found that in Britain:⁵²

- Children from ethnic minorities are up to twice as likely as average to be involved in road accidents while walking or playing.

⁵⁰ Allmark, P. *et al.* 2010. Chapter 5. Page 41.

⁵¹ See Department for Transport 2009. *Reported Road Casualties Great Britain Main Results: 2009*. Available at: <http://www.dft.gov.uk/pgr/statistics/datatablespublications/accidents/casualtiesmr/rrcgbmainresults2009> Accessed 03/09/2010.

⁵² The AA Motoring Trust 2003. *AA Foundation for road safety research*. Available at: http://www.theaa.com/public_affairs/reports/facts_about_road_accidents_and_children.pdf Accessed 28/08/2010.

Box 6.4.1 Continued

- Children with hearing difficulties are 10 times as likely to be involved in road accidents while walking or playing.
- Children from low income families are five times more likely to be killed in road accidents as those from high income families.

Ethnicity

In the absence of other data, the following analysis uses the 1991 Census, using country of birth to estimate accident rates for ethnic minority groups - this is fairly limited in the results it can show, hence the very few countries listed. This shows for accidental deaths, men born in the Indian sub-continent had a lower risk compared to the standard, but mortality was elevated for both men and women born in Scotland or in Ireland.

Table 6.4.2 Accidental injury standardised mortality ratios (SMR) by country/region of birth in England and Wales, 1991/93⁵³

Country/Region of birth	Men	Women
	Accident	Accident
Caribbean	121	103
Indian sub-continent	80	93
Scotland	177	201
Ireland	189	160

Source: Census 1991.

Notes: For people aged 20-64 years. SMR for all people resident in England and Wales 1991 = 100. Bold indicates statistically significantly different from the standard England and Wales population.

⁵³ Allmark, P. *et al.* 2010. Chapter 7. Page 54.

6.5 What we know about homicide

Measure:

Homicide – murder, infanticide and manslaughter per million of the population

How this measure works:

The Home Office collects homicide data from police forces in England and Wales.⁵⁴ The Scottish Government collects similar data for Scotland.⁵⁵

The Home Office's Homicide Index contains data disaggregated by gender, age, ethnicity and sexual orientation.⁵⁶ We present information relating to homicides in England and Wales, classified by gender, age, and ethnicity, since these data are quality-assured. The Scottish data are disaggregated by age and gender only.

The small numbers involved make it hard to assess the risk of homicide as it falls across different social groups, although the Crown Prosecution Service has collected data for 3 years on homicides resulting from hate crime in England and Wales in the following categories:

- Race and religion
- Disability
- Homophobia and transphobia.

There is very limited related literature for this measure for groups defined by socio-economic background therefore they are not covered in this section.

⁵⁴ Smith, K., Flatley, J., Coleman, K., Osborne, S., Kaiza, P and Roe, S. 2010. *Homicides, Firearm Offences and Intimate Violence 2008/09*. London: Home Office.

⁵⁵ Scottish Government 2007. *Homicide in Scotland, 2006-07. Criminal Justice Series*. Edinburgh: Scottish Government. Table 6. Available at: <http://www.scotland.gov.uk/Resource/Doc/207004/0054998.pdf> – see also Scottish Government Statistical Bulletin/Justice Analytical Statistics.

⁵⁶ Data on homicide victims' and suspects' visual ethnicities are collected by the Home Office; a 3-year combined total is supplied to the Ministry of Justice to include in their annual section 95 *Race and the Criminal Justice System* publication. Information about homicide victims' sexual orientation has been collected by the Home Office only since April 2007 and has not yet been through a quality assurance process.

Overview

Infants, young adults and Black people all have an increased risk of being killed by others.

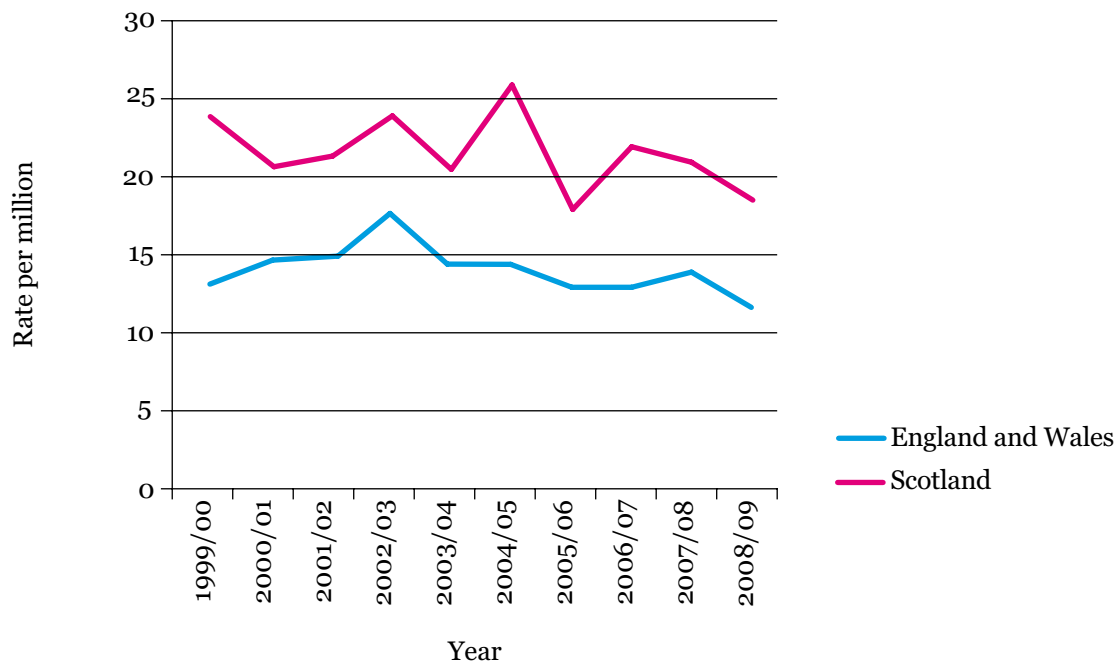
Women victims are more likely than men to have been killed in domestic contexts – the majority by partners; men are more likely than women to have been killed by strangers, friends or acquaintances.

What we know about the overall situation and trends

The homicide rate in England and Wales has been fairly constant over the past 10 years (see Figure 6.5.1, below), with the sharp rise in 2002/03 reflecting 172 homicides attributed to Dr. Harold Shipman – all recorded by police in that year.

The homicide rate in Scotland is higher than that in England and Wales, and has fluctuated more over time.

Figure 6.5.1 Homicide rate per million in England and Wales, and Scotland, 1999/00-2008/09^{57,58}



Source: Home Office, 2010. Scottish Government, 2010.

Notes:

- 1 In England and Wales, a separate offence is recorded for each victim of homicide, so that in an incident in which several people are killed, the number of homicides counted is the total number of persons killed.
- 2 Data for England and Wales were correct as at 24 November 2009; figures are subject to revision as cases are dealt with by the police and by the courts, or as further information becomes available.
- 3 Data for Scotland were correct as at January 2010. The initial classification of a case as homicide is made by the police; this will generally be murder. This classification may be altered as a result of decisions taken in the course of criminal proceedings. Some cases initially classified as homicide will, on the basis of criminal proceedings, no longer be classified as such at a later date. This happens in cases where it is found that a homicide had not in fact taken place at all, for example where the main accused person is found guilty of a lesser offence, such as serious assault; or where the decision has been made not to proceed with the case, for example if it is concluded that the victim committed suicide. For these reasons, and as a result of continual data checking, the figures for 2009-10 and for previous years which will appear in the next bulletin may differ slightly from those given here.

⁵⁷ Smith, K. *et al.* 2010. Table 1.01, page 20.

⁵⁸ Scottish Government 2010. *Statistical Release – Crime and Justice Series: Homicide in Scotland 2008-09*. Available at: <http://www.scotland.gov.uk/Publications/2010/02/19113939/2> Table 1.

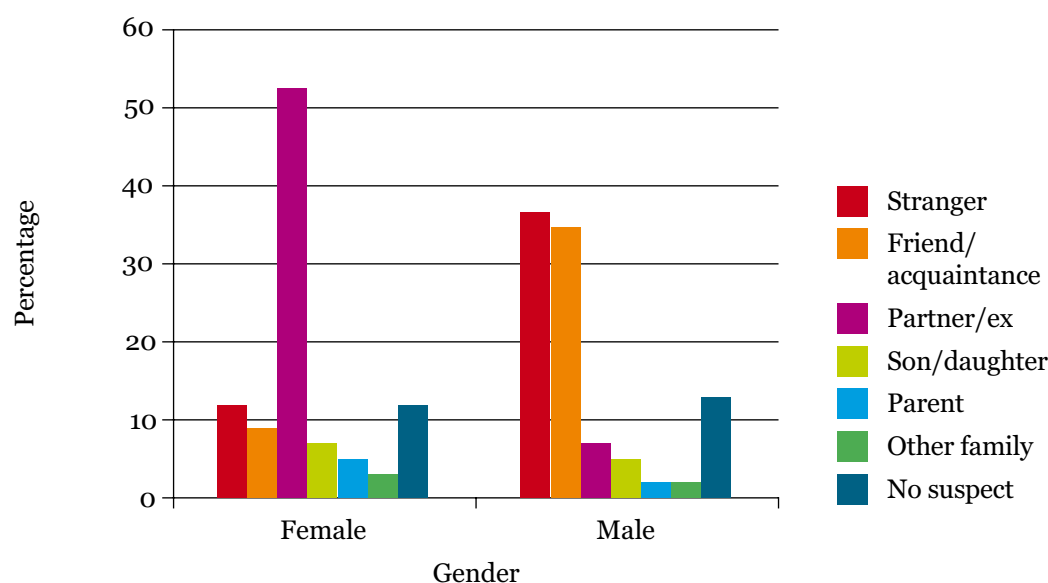
What we know about the situation for different groups

Gender

In 2008/09, 71% of homicide victims in England and Wales were male. While male victims were more commonly killed by friends/acquaintances or strangers, female victims were far more likely to be killed by partners or ex-partners (see Figure 6.5.2, below).

There has been a general downward trend in homicides carried out by partners or ex-partners since 2004/05 in England and Wales. However, the number of females killed by a partner or ex-partner rose above 100 for the first time in 4 years in 2008/09⁵⁹ – a year in which domestic violence (including by partners, ex-partners and family members) accounted for 68% of female homicides and 15% of male homicides (see Figure 6.5.2, below).⁶⁰

Figure 6.5.2 Percentage of homicides by victim's gender and relationship to principal suspect in England and Wales, 2008/09⁶¹



Source: Home Office 2010.

Notes:

- 1 Stranger figures include cases where the suspect is not known.
- 2 Data for England and Wales were correct as at 24 November 2009; figures are subject to revision as cases are dealt with by the police and by the courts, or as further information becomes available.

The situation is similar in Scotland, where domestic violence (including by family members, partners and ex-partners) accounted for 53% of female homicides and

⁵⁹ Smith, K. *et al.* 2010. Table 1.05, page 25.

⁶⁰ Walby, S., Armstrong J. and Strid, S. 2010. *Physical and Legal Security and the Criminal Justice System: An analytical research overview*. UNESCO Chair in Gender Research Group. Lancaster University.

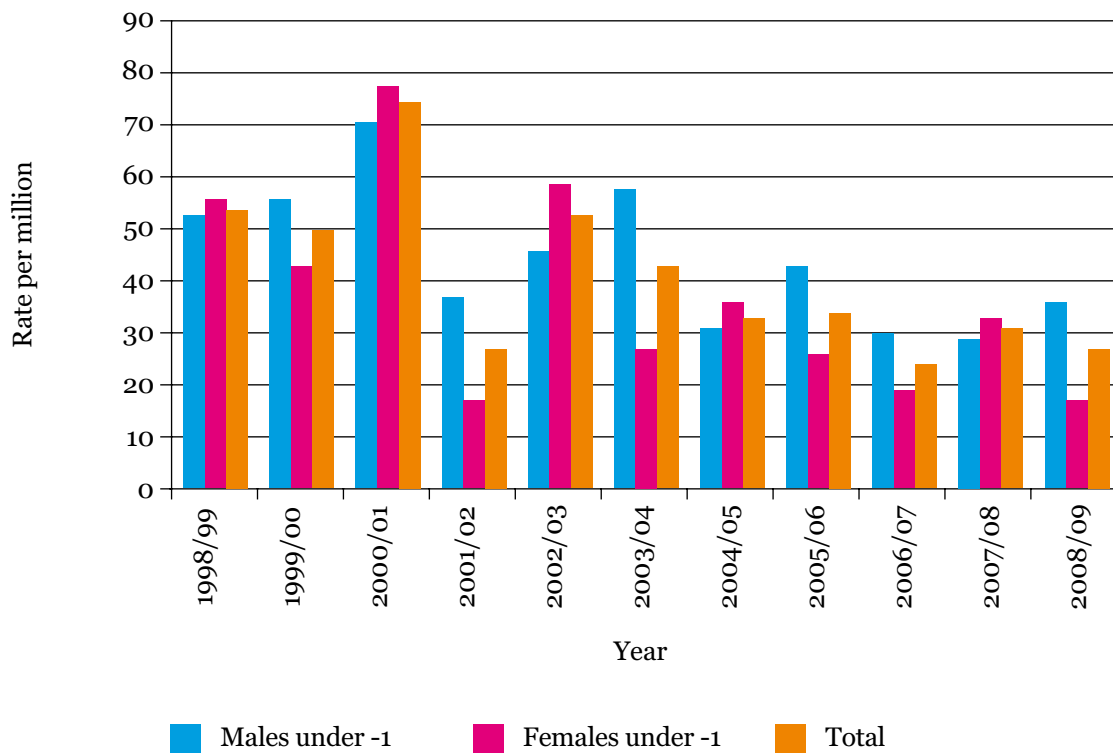
⁶¹ Smith, K. *et al.* 2010. Table 1.05, page 25.

20% of male homicides. The majority of female victims of homicide were killed by a partner/ex-partner in 2008/09 (46%), with an additional 7% by family members; the respective numbers for men were 7% and 13% – as in England and Wales, a larger proportion of male victims of homicide were killed by an acquaintance (65%).⁶²

Age

Children aged under 1 are more likely to die as a result of homicide than any other age group in England and Wales. However, in 2008/09, the rate was half that of a decade ago (see Figure 6.5.3, below).

Figure 6.5.3 Homicide rate per million of infants aged under 1 by gender in England and Wales, 1998/99-2008/09⁶³



Source: Home Office 2010.

Notes:

- 1 As at 24 November 2009; figures are subject to revision as cases are dealt with by the police and the courts, or as further information becomes available.
- 2 For the year 2000/01 there were 58 victims (54 male and 4 female) of unknown age.
- 3 For the year 2003/04 there was one victim of unknown age.
- 4 For the year 2004/05 there were six victims of unknown age.
- 5 For the year 2005/06 there were two victims of unknown age.
- 6 For the year 2006/07 there was one victim of unknown age.

⁶² Walby, S. *et al.* 2010. Table 4.2.

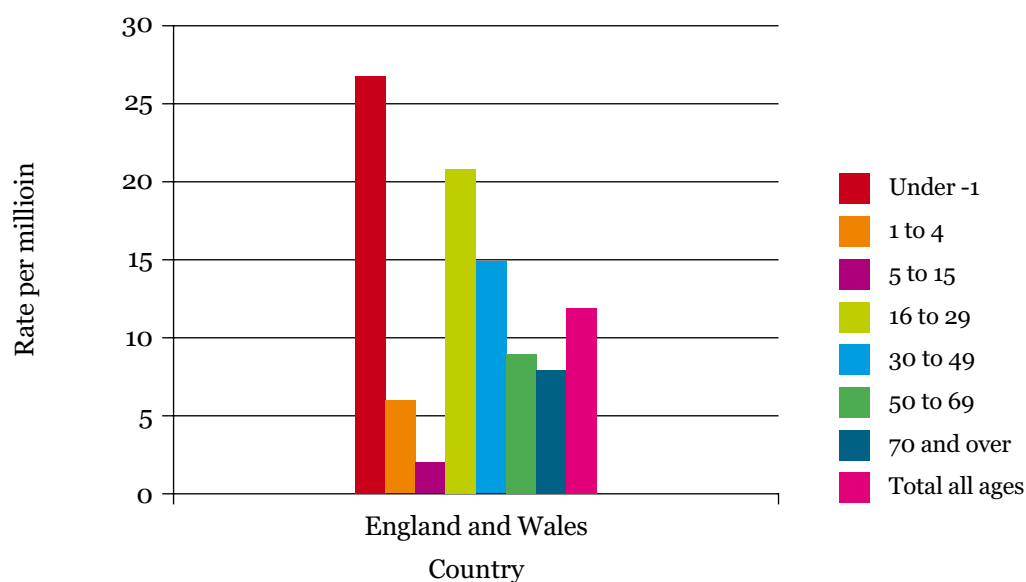
⁶³ Smith, K. *et al.* 2010. Table 1.07, page 28.

On average one child aged under 16 died as a result of cruelty or violence each week in England and Wales in 2008/09 – two-thirds of them aged under five. The majority of child homicide victims were killed by their parents.⁶⁴

Where a parent was responsible for the homicide of a child in England and Wales between 1998/99 and 2008/09, mothers were the main suspect in a third of the deaths and fathers in two-thirds; in cases where a stranger was involved, the main suspect was disproportionately likely to be a man (86%).⁶⁵

Trend data suggest that homicide victimisation rates among adults peak before the age of 30. In England and Wales, the rate for victims aged 16-29 in 2008/09 was 21 per million:⁶⁶ in Scotland, the rate for victims aged 16-30 was higher at 34 per million (see Figure 6.5.4, below).⁶⁷

Figure 6.5.4 Homicide rates per million population by victim age in England and Wales,⁶⁸ and Scotland,⁶⁹ 2008/09



Continued...

⁶⁴ Smith, K. *et al.* 2010. Tables 1.04 and 1.07, pages 23, 24, 28.

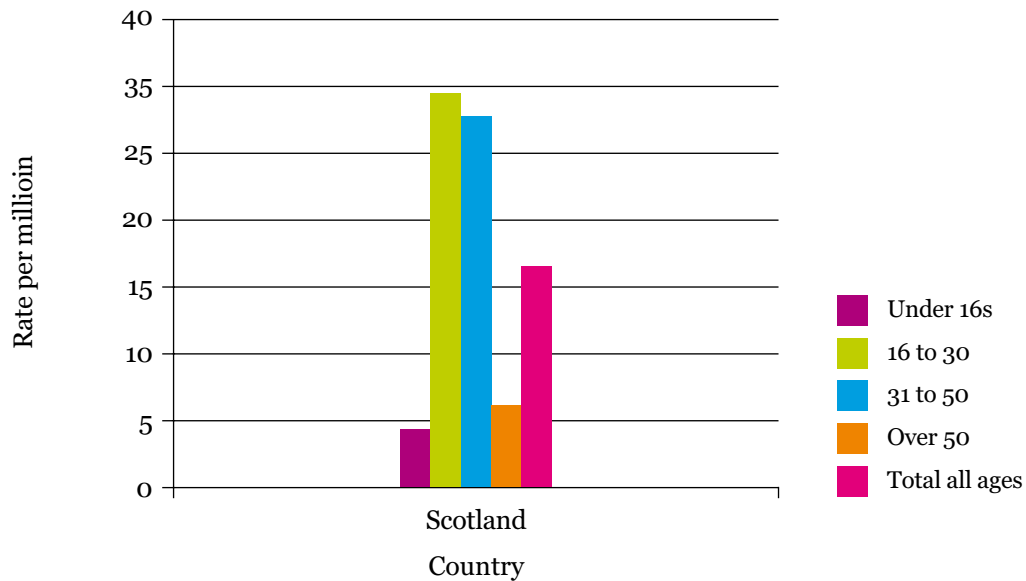
⁶⁵ Information supplied via personal communication with the Home Office.

⁶⁶ Smith, K. *et al.* 2010. Table 1.07, page 28.

⁶⁷ See Scottish Government 2010. *Statistical Release Crime and Justice Series: Homicide in Scotland, 2008-09*. Table 3.

⁶⁸ Smith, K. *et al.* 2010. Table 1.07, page 28.

⁶⁹ Scottish Government 2010. *Statistical Release Crime and Justice Series: Homicide in Scotland, 2008-09*. Table 3.

Figure 6.5.4 Continued

Source: Home Office, 2010. Scottish Government 2010.

Notes:

1. The age-bands used for England and Wales are different to those used in Scotland, so the charts are not directly comparable, although they indicate the broad age trends described in the text.
2. For English and Welsh data, see notes under Figure 6.5.3.
3. Data for Scotland were correct as at January 2010. The initial classification of a case as homicide is made by the police; this will generally be murder. This classification may be altered as a result of decisions taken in the course of criminal proceedings. Some cases initially classified as homicide will, on the basis of criminal proceedings, no longer be classified as such at a later date. This happens in cases where it is found that a homicide had not in fact taken place at all, for example where the main accused person is found guilty of a lesser offence, such as serious assault; or where the decision has been made not to proceed with the case, for example if it is concluded that the victim committed suicide. For these reasons, and as a result of continual data checking, the figures for 2009-10 and for previous years which will appear in the next bulletin may differ slightly from those given here.

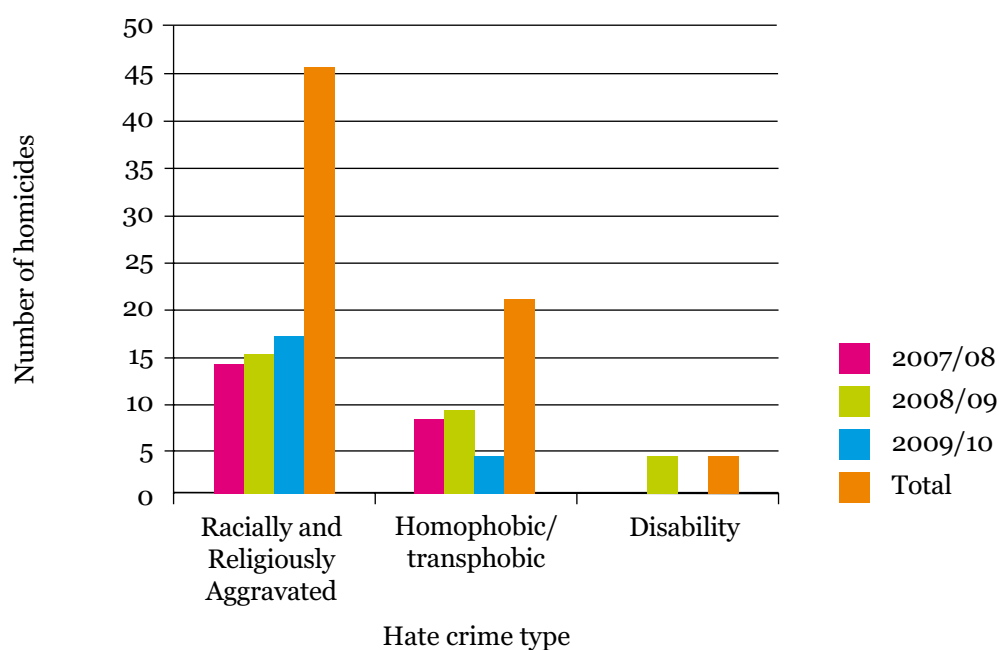
Ethnicity, religion or belief, disability, sexual orientation and transgender status

Of the 2,210 homicides recorded in England and Wales between 2006/07 and 2008/09 where the ethnic identity of the victim is known, 516 were from ethnic minorities, and just over half of these ethnic minority victims were Black – highlighting disproportionality in relation to population size.⁷⁰

⁷⁰ Ministry of Justice 2010. *Statistics on Race and the Criminal Justice System: 2008/09*. London: MOJ. Table S2.04.

Over 70 homicides were identified to have resulted from hate crimes between 2007/08 and 2009/10, of which 46 were classified as religiously and racially aggravated, 21 homophobic or transphobic and 4 arose from violence targeting disabled people (see Figure 6.5.5, below).⁷¹

Figure 6.5.5 Prosecuted homicides arising from hate crime in England and Wales, 2007/08-2009/10⁷²



Source: Homicides Linked to Hate Crime – data provided by the Crown Prosecution Service Management Information System.

Notes:

- 1 These figures are the number of completed defendant prosecutions **not** charged cases.
- 2 These prosecutions have been recorded on a Principal Offence basis, in this case the category 'Homicide'. The 'Homicide' principal offence category comprises a range of offences including:
 - a Murder and Attempted Murder
 - b Making Threats to Kill
 - c Conspiring to Commit Murder
 - d Manslaughter
 - e Causing Death by Dangerous Driving
- 3 The principal offence category indicates the most serious offence with which the defendant is charged at the time of finalisation.

⁷¹ Data supplied by the Crown Prosecution Management Information System. It should be noted that these figures do not necessarily reflect all deaths that resulted from hate crime – rather, they reflect those cases that were charged as such.

⁷² Data supplied by the Crown Prosecution Management Information System.

6.6 What we know about deaths in institutions

Measures:

Deaths during and following contact with the police
Self-inflicted deaths in prisons

How these measures work:

Deaths during and following contact with the police

The main data source regarding deaths during or following police custody in England and Wales – the Independent Police Complaints Commission – provides data about gender, age and ethnicity.⁷³

We are unable to obtain any disaggregated data about the numbers of people from our other equality strands who die during or following contact with the police in England and Wales.

We are unable to obtain any data about deaths following contact with the police in Scotland.

We have no information about the number of deaths (including suicides) which occur after a person has been released from police custody, except for those individuals who have been transferred to the care of another agency⁷⁴ and subsequently die while in their care.⁷⁵

Self-inflicted deaths in prisons

Data relating to deaths in prisons are produced by the Ministry of Justice and disaggregated by gender, ethnicity and broadly by age for prisoners in England and Wales.⁷⁶ They are also broadly disaggregated by nationality and sentence type.

⁷³ Independent Police Complaints Commission 2009. *Deaths during or following police contact: Statistics for England and Wales 2008/09*. IPCC.

⁷⁴ Hospitals and hospices data including unpublished data supplied by Ministry of Justice, *Annual statistical bulletin on deaths, self-harm and violence in prison custody*. MoJ, 2010. Available at: <http://www.justice.gov.uk/safer-custody.htm> Accessed 11/08/2010.

⁷⁵ This means that if someone attempts suicide in prison, the police may not be aware of the risk of them self-harming if they are subsequently re-arrested on release.

⁷⁶ See Ministry of Justice 2010. *Annual statistical bulletin on deaths, self-harm and violence in prison custody*.

Due to small numbers, we are not able to disaggregate information about our other equality strands from official data on prison deaths, or draw any conclusions about trends.

There are no published data sources about self-inflicted deaths in Scottish prisons.

We have not included deaths occurring in secure mental health facilities.

There is very limited related literature for this measure for groups defined by socio-economic background, religion or belief, sexual orientation and transgender, therefore they are not covered in this section.

Overview

People in prison are far more likely than the general population to die of self-inflicted causes although the rate has been falling.

There is a clear link between mental health conditions and deaths during and following police custody. There is also a link between mental health conditions, drug dependency and length of stay in prison with an increased risk of self-inflicted death in prison.

What we know about the overall situation and trends

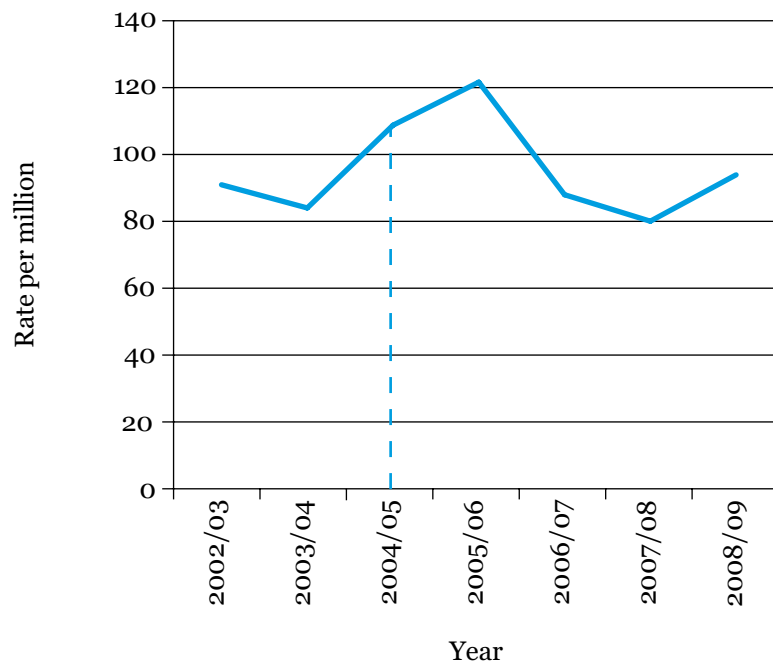
Deaths during and following contact with the police

Deaths during and following contact with the police include deaths that occur in non-institutional contexts – for example, during car pursuit – and include ‘lawful’ killings. In 2005/06, when the number of deaths occurring during or following contact with the police reached its peak, 48 of the 120 fatalities were the result of road traffic accidents; 5 were the result of shootings; 39 were classified as ‘other’; and 28 occurred in custody. In the following years, deaths in custody accounted for between a third and a sixth of all fatalities that occurred during or following contact with the police.⁷⁷

The number of deaths during or following contact with the police is currently lower than it was when it reached its peak in the mid-2000s, although they rose slightly between 2007/08 and 2008/09 (see Figure 6.6.1, below).

⁷⁷ See overview figures on fatalities during or following contact with the police: http://www.ipcc.gov.uk/deaths_during_or_following_police_contact_statistics_for_england_and_wales_2008_09.pdf

Figure 6.6.1 Deaths during or following contact with the police in England and Wales, 2002/03-2008/09⁷⁸



Source: Independent Police Complaints Commission (2004/05 and 2008/09 reports).

Notes:

- 1 'Contact with police' includes: road traffic fatalities, fatal shootings, death during or following police custody, other deaths following police contact.
- 2 The change in the definition in 2004/05 means that any trend analysis of this category should be treated with caution. Figures for 2002/03 and 2003/04 are likely to **under-represent** the actual number of deaths which occurred. Walby *et al.* 2010 suggest that the respective numbers are 104 and 100.⁷⁹

Self-inflicted deaths in prisons

There was a 30% fall in the overall number of self-inflicted deaths in prisons in England and Wales between 2002 and 2009 – despite a peak in 2007: however, the number of recorded attempts at self-harm have risen in England and Wales (from 19,550 in 2004 to 24,686 in 2008).⁸⁰ Over the same period, there was a rise in the number of prisoner deaths attributed to 'natural causes' (see Figure 6.6.2, below).

⁷⁸ Independent Police Complaints Commission. *Deaths during or following police contact: Statistics for England and Wales 2008/09*. Table 2.1 of the 2004/05 report (2002/03 to 2004/05) and Table 1.1 of the 2008/09 report (2005/06 to 2008/09).

⁷⁹ Walby, S. *et al.* 2010. Table 4.24.

⁸⁰ Walby, S. *et al.* 2010. Table 4.25. As noted in the report, the rise is in part due to improved systems of reporting such incidents since 2002 by NOMS.

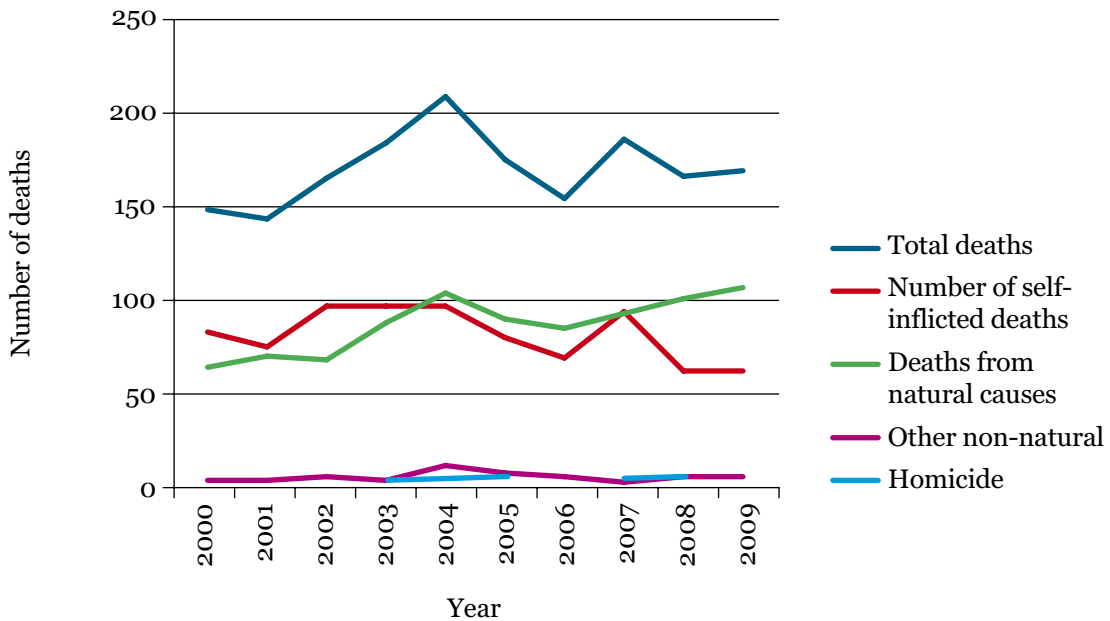
Box 6.6.1 Related issue: Risk of self-inflicted deaths in prison

One academic study estimates that people in prison are 10 times more likely than the general population to die from self-inflicted causes where intervention is not used.⁸¹

In general, self-inflicted deaths are more common among pre-sentence prisoners; for example, this group made up less than 20% of the total prison population in 2003, yet accounted for 54% of self-inflicted deaths in prisons that year.⁸²

⁸¹ See Bird, S.M. 2008. 'Changes in Male Suicides in Scottish Prisons: Ten Year Study', *British Journal of Psychiatry*, 192. Pages 446-449.

⁸² House of Lords and House of Commons, Joint Committee on Human Rights, 2004. *Deaths in Custody: Third Report of Session 2004-5, Vol. 1*. Available at: http://www.preventingcustodydeaths.org.uk/jchr_deaths_in_custody_report__3rd_report_of_session_04-05_.pdf

Figure 6.6.2 Number of deaths in prison in England and Wales, 2002-09⁸³

Source: Ministry of Justice Safety in Custody data (2008/09).

Notes:

- 1 Deaths in prison custody statistics are derived from the National Offender Management Service (NOMS) deaths in the custody database which contains details of all deaths in prison custody for England and Wales from 1978.
- 2 Self-harm statistics are derived from the NOMS incident reporting system. A new system for monitoring self-harm was introduced in December 2002 and as a result recording improved throughout 2003. Statistics collected before 2004 are not comparable with more recent figures. Due to the large number of incidents to process the final figures for 2009 will not be available until later in 2010.
- 3 Assault statistics are also derived from the NOMS incident reporting system. As with self-harm, the final assault figures for 2009 will not be ready until later in 2010.

What we know about the situation for different groups

Gender

Deaths during and following contact with the police

While men constitute the majority of deaths during or following contact with the police, the proportion of women dying following contact with the police is growing:

⁸³ Ministry of Justice 2010. *Safety in custody statistics 2008/2009*. Ministry of Justice Statistical Bulletin. Table 1: Summary statistics.

in 1999/2000, 3 out of the 70 mortalities that occurred in this context were women, while in 2008/09, women accounted for 18 out of 92 deaths.⁸⁴

Self-inflicted deaths in prisons

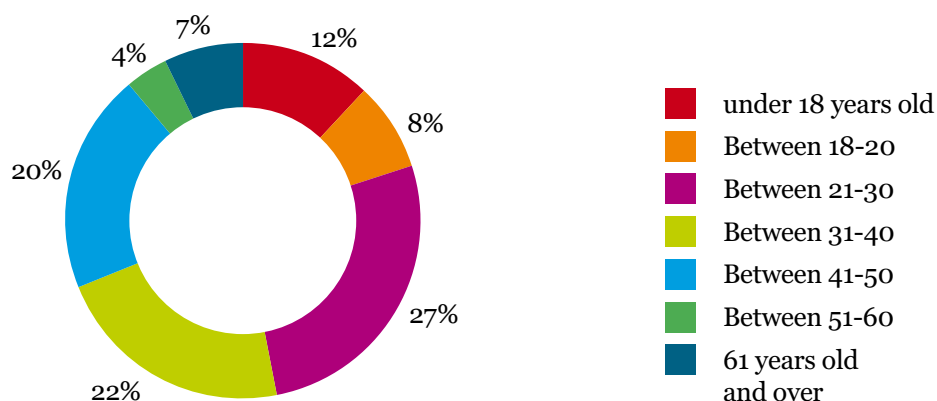
The data on self-inflicted deaths in part match the patterns of suicide in the general population – that is, that men are more likely than women to die in this way (see Figures 6.6.4 and 6.6.5, below). However, women prisoners during the early 2000s were disproportionately likely to die from self-inflicted causes.⁸⁵

Age

Deaths during and following contact with the police

Data for England and Wales highlight the uneven age distribution of those dying during or following contact with the police in 2008/09 (see Figure 6.6.3, below).

Figure 6.6.3 Age distribution of deaths following contact with the police in England and Wales, 2008/09⁸⁶



Source: IPCC report into Deaths during or following police contact: statistics for England and Wales, 2008/09.

Note: 'Contact with police' includes: road traffic fatalities, fatal shootings, death during or following police custody, other deaths following police contact.

⁸⁴ Independent Police Complaints Commission. *Deaths during or following police contact: Statistics for England and Wales*. See Walby, S. *et al.* 2010. Table 4.24 for data from 1998/99, although note that this table is disaggregated by gender and ethnicity only.

⁸⁵ For example, in 2003 self-inflicted deaths among female inmates were at their peak: women made up 6% of the prison population yet 15% of self-inflicted deaths in prisons occurred among female inmates – see Walby, S. *et al.* 2010. (particularly Table 4.26a). See also House of Lords and House of Commons, Joint Committee on Human Rights, *Deaths in Custody: Third Report of Session 2004-5*, Vol. 1, 2004.

⁸⁶ Independent Police Complaints Commission, *Deaths during or following police contact: Statistics for England and Wales, 2008/9*. Table A1.2.

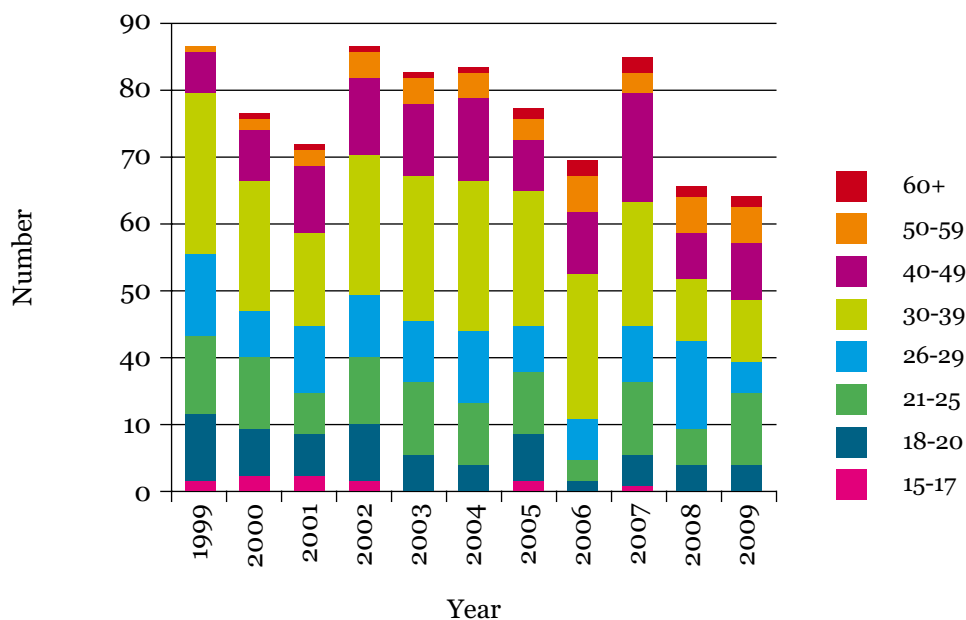
Data spanning 9 years suggest that this age distribution of deaths during or following police custody has remained fairly consistent.⁸⁷

Self-inflicted deaths in prisons

From 1999 to 2009, male prisoners aged between 30 and 39 were more likely than prisoners of any other age to die from self-inflicted causes (in line with the general suicide trends discussed above) – see Figure 6.6.4, below.

There was a spike in the number of women inmates aged between 18 and 20 who died from self-inflicted causes in prisons in 2003: there have been no self-inflicted deaths in this age-group since 2005 (see Figure 6.6.5, below).

Figure 6.6.4 Number of self-inflicted deaths in prison (men) by age group in England and Wales, 1999-2009⁸⁸

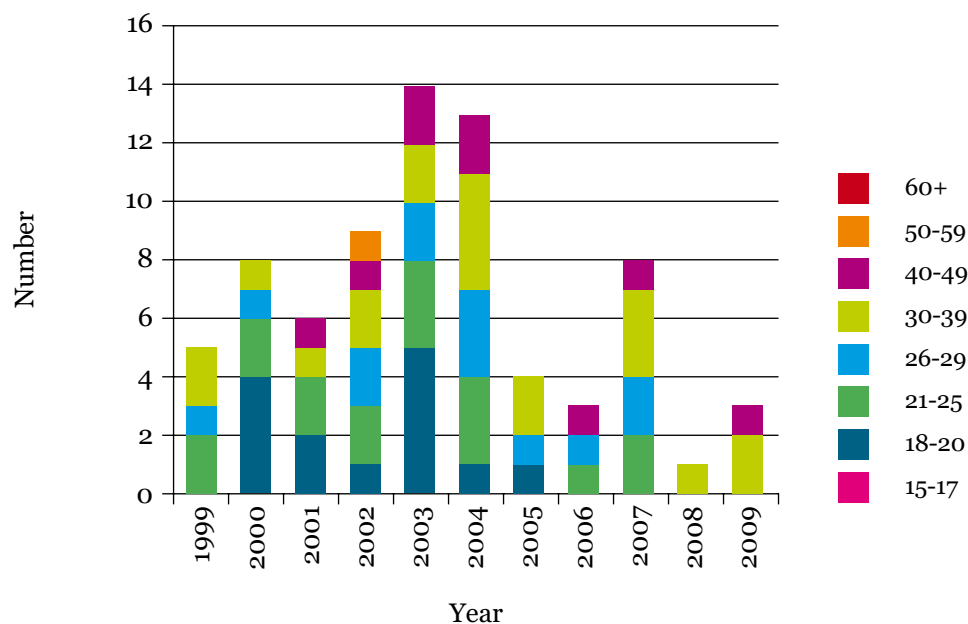


Source: Ministry of Justice Safety in Custody data (2008/09).

⁸⁷ Independent Police Complaints Commission. *Deaths during or following police contact: Statistics for England and Wales*. See Table A1.2 of the 2004/05 report (2002/03 to 2004/05) and Table A1.2 of the 2008/09 report (2005/06 to 2008/09).

⁸⁸ Ministry of Justice 2009. *Safety in Custody Statistics: Statistical Tables on deaths*. Table 6. Available at: <http://www.justice.gov.uk/saftey-custody-deaths-statistics.xls>

Figure 6.6.5 Number of self-inflicted deaths in prison (women) by age group in England and Wales, 1999-2009⁸⁹



Source: Ministry of Justice Safety in Custody data (2008/09).

Deaths during and following contact with the police

According to the Joint Committee on Human Rights (JCHR) report into deaths in police custody, just over half of those who die following contact with the police had prior indications of mental health conditions.⁹⁰

Self-inflicted deaths in prisons

The JCHR report cites evidence that suggests there is a clear link between mental health conditions, drug dependency, length of stay in prison and an increased risk of self-inflicted death.⁹¹

Ethnicity

Deaths during and following contact with the police

A disproportionate number of deaths following contact with the police since 2004 were of Black people, who comprise around 2% of the population (see Figure 6.6.6, below, which shows percentages rather than numbers to illustrate disproportionality).⁹²

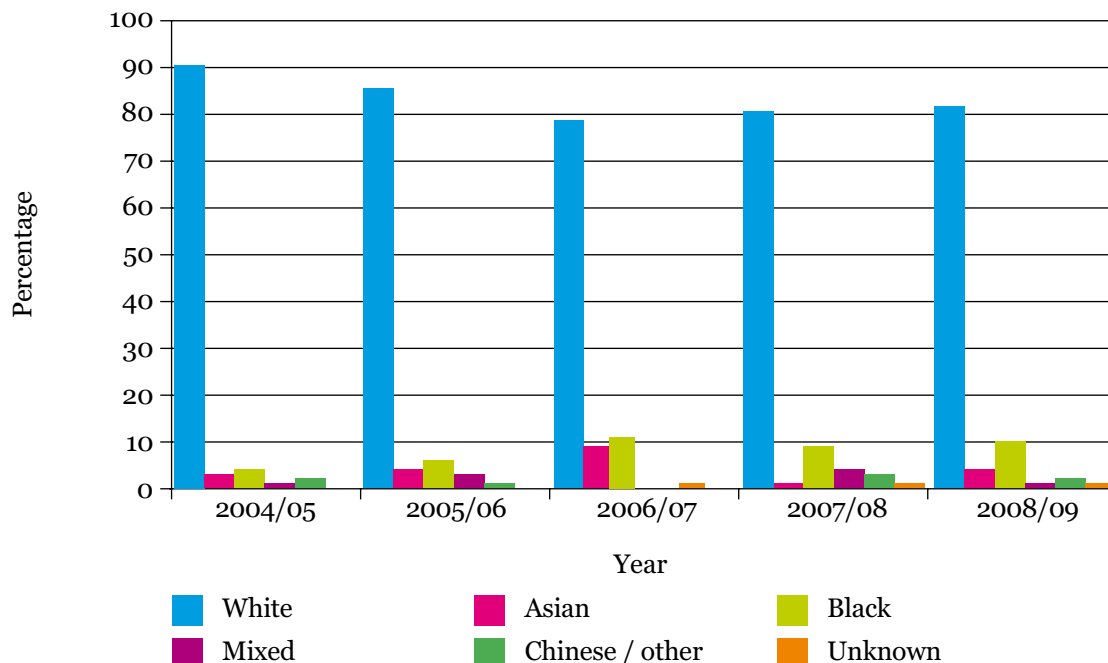
⁸⁹ Ministry of Justice 2009. *Safety in Custody Statistics: Statistical Tables on deaths*. Table 6.

⁹⁰ House of Lords and House of Commons, Joint Committee on Human Rights 2004. *Deaths in Custody: Third Report of Session 2004-5*, Vol. 1.

⁹¹ House of Lords and House of Commons, Joint Committee on Human Rights 2004.

⁹² See Office for National Statistics website: <http://www.statistics.gov.uk/cci/nugget.asp?id=273>

Figure 6.6.6 Percentage of deaths following contact with the police by ethnicity in England and Wales, 2004/05-2008/09⁹³



Source: Independent Police Complaints Commission, (2004/05, 2005/06, 2006/07, 2007/08 and 2008/09 reports on Deaths During or Following Police Contact: Statistics for England and Wales).

Note: 'Contact with police' includes: road traffic fatalities, fatal shootings, death during or following police custody, other deaths following police contact.

Box 6.6.2 Related issue: Control and restraint – deaths during or following contact with the police

The UK Parliament's Joint Committee for Human Rights notes that between 1998 and 2003, 18% of those who died in police custody overall were from ethnic minorities: restraint was involved in a higher proportion of the deaths of ethnic minority people coming into contact with the police (22%) than of White people (12%).⁹⁴

Self-inflicted deaths in prisons

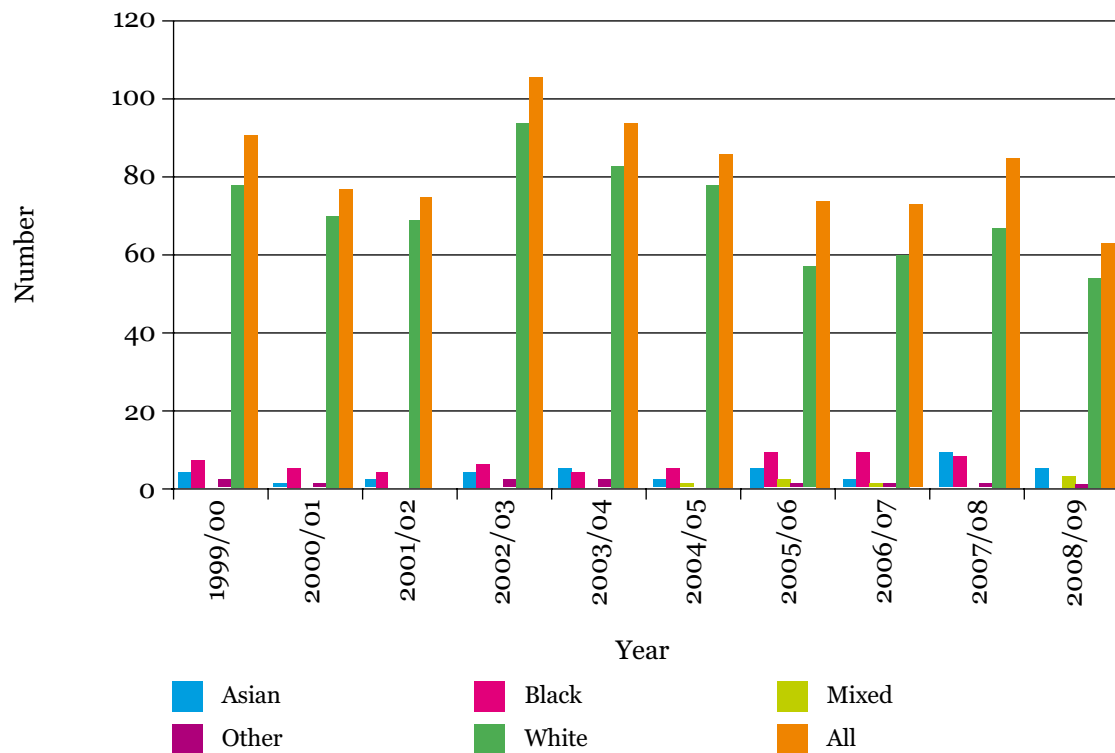
The number of ethnic minority prisoners who are reflected in the self-inflicted death statistics from prisons in England and Wales tends to fluctuate; in 1997,

⁹³ Independent Police Complaints Commission. *Deaths during or following police contact: Statistics for England and Wales 2008/09*. Table A1.3. 2004/05, 2005/06, 2006/07, 2007/08 and 2008/09 reports.

⁹⁴ House of Lords and House of Commons, Joint Committee on Human Rights, 2004. *Deaths in Custody: Third Report of Session 2004-5*, Vol. 1.

there were 6 such deaths, 23 in 2007 and 5 in 2009.⁹⁵ The patterns of self-inflicted deaths in prisons are shown in Figure 6.6.7, below. White people consistently account for the largest proportion of self-inflicted deaths in prison custody.

Figure 6.6.7 Number of self-inflicted deaths in prison by ethnicity in England and Wales, 1999/2000-2008/09⁹⁶



Source: Ministry of Justice, 2010.

⁹⁵ Ministry of Justice. *Safety in Custody Statistics. Statistical Tables on deaths.* Table 9.

⁹⁶ Ministry of Justice 2010. *Statistics on Race and the Criminal Justice System: 2008/09.* Table S5.12 (financial). Available at: <http://www.justice.gov.uk/publications/docs/stats-on-race-in-the-cjs-supplementary-tablesa.zip>

Box 6.6.3 Related issue: Foreign National Prisoners

Asylum seekers and Foreign National Prisoners are considered to be at particular risk of self-inflicted deaths in custody. Negative experiences of detention, delays in processing cases, a lack of information and legal support, mental health conditions and experiences of discrimination and racism all lead to an increased risk of self-harm. The HM Chief Inspector of Prisons stated: ‘The treatment of foreign national prisoners over recent years has been an object lesson in systems and procedures that lack both efficiency and humanity.’⁹⁷

⁹⁷ See reports from HM Inspector of Prisons:

HM Inspectorate of Prisons 2006. *Foreign National Prisoners: A Thematic Review*. London: HM Inspectorate of Prisons. Available at: <http://www.justice.gov.uk/inspectorates/hmi-prisons/docs/foreignnationals-rps.pdf>.

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Web links

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London health observatory http://www.lho.org.uk/LHO_Topics/Data/Methodology_and_sources/agestandardisedrates.aspx Accessed 26/08/2010.

Chapter 7:

Legal security

Summary

The majority of people believe that accused people will be treated fairly by the criminal justice system. However, fear of police harassment and concern that complaints against the police will not be taken seriously is greater among ethnic minorities. There is evidence from smaller-scale studies that some groups, including lesbian, gay and bisexual (LGB) people, Gypsies and Travellers and people with learning disabilities have only limited confidence in the system's ability to protect them.

Some groups continue to experience events such as stop and search more than others. While its degree has fluctuated, it remains a broadly constant feature of the justice system.

There are clear advances in the extent to which the criminal justice system recognises and deals with hate crime, which has led to a rise in the levels of reporting – particularly for the forms that have most recently been recognised in legislation.

The incidence of racially motivated crimes recorded in the British Crime Survey has stayed fairly constant, but there has been a fall in the number of crimes reported to the police, and therefore a fall in the number of cases referred to the Crown Prosecution Service: meanwhile, there has been a rise in the number of cases reported to the police in Scotland, and a rise in the proportion of cases resulting in court proceedings.

Some groups encounter persistent difficulties in obtaining justice for hate crimes, stemming from and resulting in a reluctance to report incidents. Groups that feel like outsiders in society may not feel sufficiently supported to seek justice and preventative action when they face hate crime, domestic violence and sexual assault: this can hinder their access to protection of the law.

The picture varies for different types of attack. For domestic violence, both the number of incidents reported to the police and the rate at which they result in conviction has risen, despite a slight fall in incidence recorded in the British Crime Survey. For rape cases, however, high attrition rates in moving from report to conviction and low rates of reporting give cause for concern.

On average, five times more Black people than White people in England and Wales are imprisoned. Women are much less likely to go to prison than men, but the rate of imprisonment of women is increasing faster than the rate of men – many for relatively minor offences. When mothers go to prison, their children are often left at risk of being taken into care.

Many prisoners face particular risks when imprisoned. Young inmates are often particularly damaged by their experience of custody, and there is a strong link between young people experiencing the care system and being incarcerated.

Ex-prisoners can experience difficulties finding work and accommodation once they leave prison. The higher rate of repeat offending of those encountering such problems suggests that better support for prisoners – particularly those serving short sentences – would help break offending cycles.

Introduction

Legal security refers to the way the police and justice system treat offenders and victims. It encompasses various rights including to due process, to treatment without prejudice, to the effective prosecution of offences and to the humane treatment of those held in custody.

Britain has a long history of judicial independence and protection for people under the law. However, it is only in recent decades that advances have been made for some groups, previously treated punitively or suffering from institutional forms of discrimination. Today, legislation and policy measures seek to correct and avoid such inequalities, whether that is protection for LGB people or greater recognition of the needs of ethnic or religious minorities and women by the police.

Public opinion today is firmly in favour of fair and equal treatment. British people do not want harsher treatment for the sake of punishment, but would want to see more effective rehabilitation.¹

In this chapter we ask whether people are treated equally, and whether they have access to justice. In addition, we look at the state of Britain's prisons. Drawing on the Equality Measurement Framework, (EMF), we examine three indicators of legal security:

Indicators

- 1. Equal treatment by the criminal justice system**
- 2. Offences reported and brought to justice: rape, domestic violence and hate crime**
- 3. Prison numbers and conditions**

¹ Roberts, J. and Hough, M. 2004. 'The State of the Prisons: Exploring Public Knowledge and Opinion', *The Howard Journal of Criminal Justice*, 44, 3: 286–306.

We examine three key measures under **equal treatment**: the percentage stopped and searched (stop and search), the percentage confident that the criminal justice system (CJS) meets the needs of victims and of the accused (confidence in the CJS), and the percentage satisfied with the handling of police complaints (handling of police complaints).

There are three measures under **offences reported and brought to justice**. First, the number of cases of rape estimated from crime surveys compared with the number of cases reported to and recorded by the police and the number of legal cases successfully prosecuted. Second, the number of cases of domestic violence estimated from crime surveys, compared with the number of cases reported to and recorded by the police, and the number of legal cases successfully prosecuted. Third, the number of cases of hate crime estimated from crime surveys compared with the number of cases reported to and recorded by the police and the number of legal cases successfully prosecuted.

For **prison conditions and prison numbers**, we use two key measures from the EMF. The first measure is the percentage of the population in prisons in England, Wales and Scotland (prison population) and the second is the perception of treatment with dignity and respect in prisons (prison conditions).

As elsewhere in Part II, this chapter explores what we know overall from these indicators and what we know about the impacts on specific groups.

7.1 What we know about equal treatment by the criminal justice system

Measures:

Stop and search – Percentage stopped and searched

Confidence in the criminal justice system – Percentage confident that criminal justice system meets needs of victims and of the accused

Handling of police complaints – Percentage satisfied with the handling of police complaints

How these measures work:

Stop and search

Data on stop and search relate to England and Wales only. They draw on police figures compiled by the Ministry of Justice, and are broken down only by ethnicity. Due to small sample sizes, changes are not always statistically significant.

The focus is on Stop and Search under section 1 of PACE legislation only (and not section 60 of the Criminal Justice and Public Order Act 1994 or section 44 of the Terrorism Act).

In addition, we use preliminary analysis of 2007/08 British Crime Survey data carried out as part of the Equality Measurement Framework (EMF) which have been disaggregated by age, gender, disability and ethnicity using small sample sizes.²

We include evidence from a range of sources to illustrate the experience of ethnic minorities including Gypsies and Travellers in relation to stop and search.

² Alkire, S., Bastagli, F., Burchardt, T., Clark, D., Holder, H., Ibrahim, S., Munoz, M., Terrazas, P., Tsang, T. and Vizard, P. 2009. *Developing the Equality Measurement Framework: selecting the indicators*. Research Report 31. Manchester: Equality and Human Rights Commission. See Chapter 7. Table 7.5, page 191. In the development of the Equality Measurement Framework indicators, the technical phase was to check sample sizes rather than generate final data analysis tables, so these are preliminary results for group means and the significance of the variations in group means, as well as a report on sample sizes. Significance tests are reported at the 95 per cent level. A series of cross-checks are required at the next stage of the development of the Equality Measurement Framework before final data tables can be produced.

There is limited related literature for this measure on groups defined by socio-economic background, religion or belief, sexual orientation and transgender status. They are therefore not covered in this section.

Confidence in the criminal justice system (CJS)

The British Crime Survey measures public confidence in the CJS's ability to meet the needs of victims and defendants, and since 2008 has looked at public perceptions about the overall fairness of the CJS. These data have been disaggregated by age, gender, disability and ethnicity.

Such measures are gathered in Scotland by the Scottish Crime and Justice Survey, but not broken down by group.

Supplementary evidence from small-scale surveys has been used to illustrate the experience of women, people with learning disabilities and LGB and transgender people.

There is limited related literature for this measure on groups defined by socio-economic status and religion or belief. They are therefore not covered in this section.

Handling of police complaints

Police complaints data, although collected in the British Crime Survey since 2001, do not yield statistically significant results because of the small sample size. However, the Independent Police Complaints Commission has carried out relevant studies. These are used here in the place of the British Crime Survey, and have been disaggregated by gender, age and ethnicity.

There is limited related literature for this measure on groups defined by religion or belief, disability, socio-economic status, sexual orientation and transgender status. They are therefore not covered in this section.

There are no comparable data for Scotland.

Overview

Some groups continue to experience stop and search more than others. While its degree has fluctuated, it remains a broadly constant feature of the criminal justice system (CJS).

The majority of people believe that accused people will be treated fairly by the CJS.

Fewer people believe that victims will be given sufficient support, but ethnic minorities and young people are much more likely to think that victims get a good service than others. They are also more likely to express greater concern that complaints against the police will not be taken seriously.

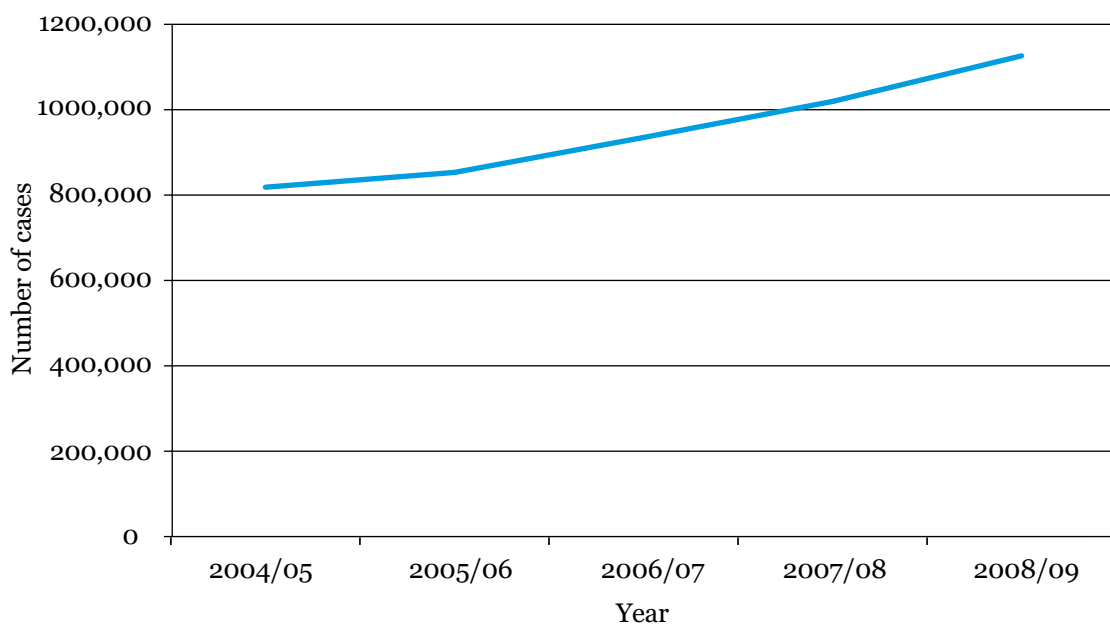
There is evidence from smaller-scale studies that some groups including LGB people, Gypsies and Travellers and people with learning disabilities appear to have only limited confidence in the system's ability to protect them.

What we know about the overall situation and trends

Stop and search

Over a million people are stopped and searched by police each year in England and Wales. About 1 in 10 of these checks results in an arrest. Between 2004/05 and 2008/09 the use of stop and search grew steadily (see Figure 7.1.1, below).

Figure 7.1.1 Number of stop and searches for population in England and Wales, 2004/05-2008/09³



Source: Statistics on Race and the Criminal Justice System 2008/09.

³ Ministry of Justice 2010a. *Statistics on Race and the Criminal Justice System 2008/09: A Ministry of Justice publication under Section 95 of the Criminal Justice Act 1991*. Crown Copyright: Ministry of Justice. Table 3.03.

Confidence in the criminal justice system (CJS)

While a majority of people in England and Wales (59% in 2009/10 – up from 56% in 2007/08) think that the CJS is fair overall,⁴ a larger proportion believes it treats those accused of crimes fairly than thinks it is fair to victims.

In 2007/08, 80% thought that the CJS respects the rights of people accused of committing a crime and treats them fairly – up from 76% in 2001/02.⁵ In contrast, just over a third (36%) thought that the CJS meets the needs of victims of crimes – a figure that has remained broadly the same, with fluctuations, in recent years.⁶

This pattern is similar in Scotland, where 70% of respondents were confident overall that everyone has access to the legal system if they need it; 53% believed that the system is effective in bringing those who have committed crimes to justice; 43%, that the CJS provides a good service to witnesses; and 38% that it provides a good service to victims.⁷

Handling of police complaints

Over 30,000 people make complaints to the police in England and Wales each year.⁸ Of those who have made a complaint, most are not satisfied with the way their complaint was handled: dissatisfaction rates have fluctuated over time, with between two-thirds and four-fifths of those making complaints expressing dissatisfaction between 2001/02 and 2006/07; levels of dissatisfaction were close to 80% for the last 3 years of that period.⁹

⁴ Flatley, J., Kershaw, C., Smith, K., Chaplin, R. and Moon, D. 2010. *Crime in England and Wales 2009/10: Findings from the British Crime Survey and police recorded crime*. London: Home Office. Page 122.

⁵ Kershaw, C., Nicholas, S. and Walker, A. 2008. *Crime in England and Wales 2007/08: Findings from the British Crime Survey and police recorded crime*. London: Home Office. Table 5b, page 121.

⁶ Kershaw, C. *et al.* 2008. Table 5b, page 121.

⁷ MacLeod, P. Page, L. Kinver, A. and Iliasov, A. 2009. *2008/09 Scottish Crime and Justice Survey: First Findings*. Scottish Government. Figure 8.8, pages 158-159.

⁸ Grace, K. and Bucke, T. 2009. *Public Annoyance and Complaints about the Police: findings from the 2006/07 British Crime Survey*. Independent Police Complaints Commission (IPCC) Research and Statistics Series: Paper 16. London: IPCC.

⁹ Grace, K. and Bucke, T. 2009. Table 4.0.

What we know about the situation for different groups

Gender and age

Stop and search

Analysis of 2007/08 British Crime Survey data undertaken for the EMF suggests that those aged 16-24 are more likely than people of any other age to experience stop and search.¹⁰

The same analysis suggests that men are twice as likely as women to be stopped by the police and three times more likely than women to experience stop and search.¹¹

Confidence in the criminal justice system (CJS)

Over 60% of people do not think victims are treated fairly by the CJS, according to the British Crime Survey, with men marginally less likely to think that the system meets the needs of victims than women (34% and 37%, respectively).¹²

Young people are considerably more likely than older people to think that the CJS meets the needs of victims. For example, 58% of men aged 16-24 think this, compared to 27% of men aged 75 and over.¹³

¹⁰ Alkire, S. *et al.* 2009. See Chapter 7. Table 7.5, page 191. In the development of the Equality Measurement Framework indicators, the technical phase was to check sample sizes rather than generate final data analysis tables, so these are preliminary results for group means and the significance of the variations in group means, as well as a report on sample sizes. Significance tests are reported at the 95 per cent level. A series of cross-checks are required at the next stage of the development of the Equality Measurement Framework before final data tables can be produced.

¹¹ Alkire, S., *et al.* 2009. See Chapter 7. Table 7.5, page 191 (see footnote, above).

¹² Kershaw, C. *et al.* 2008. Table 5.02.

¹³ Kershaw, C. *et al.* 2008. Table 5.02.

Box 7.1.1 Related issue: Victims' experience of the criminal justice system – women and 'intimate violence'

Data from the Witness and Victims Experience Survey (WAVES) suggest that men who are victims of crime are more likely than women victims to report being satisfied with the information given about the CJS.¹⁴

This is particularly relevant in the context of domestic and sexual violence (see Indicator 2, below): many victims require access to a range of services to make a complaint and navigate the criminal justice process, and then to rebuild their lives after leaving an abusive relationship. The absence of such support leaves many women trapped in abusive situations.¹⁵

Indeed, insensitive handling by police and the CJS discourages women from reporting intimate violence, such as rape, and leads to attrition once the police have been involved.¹⁶

Handling of police complaints

Men are less satisfied than women with their experience of making complaints to the police. Women are twice as likely as men to be satisfied with the way complaints to the police are dealt with (32%, compared to 16%), although men made twice as many complaints as women in 2008/09.¹⁷

Young people are more likely to come into contact with the police (e.g., through stop and search, as discussed above), but make fewer complaints than other age groups. In 2008/09, 3% of complaints came from people aged 17 and under, rising to 18% of complaints from those aged 18-29; levels of complaint were low (6%) among those aged 60 and above.¹⁸

¹⁴ Ministry of Justice, 2010b. *Statistics on Women and the Criminal Justice System: A Ministry of Justice publication under Section 95 of the Criminal Justice Act 1991*. Crown Copyright: Ministry of Justice. Pages 29-33.

¹⁵ Payne, S. 2009. *Redefining Justice: Addressing the Individual Needs of Victims and Witnesses*. Ministry of Justice. Available at: <http://www.justice.gov.uk/sara-payne-redefining-justice.pdf> Accessed 24/09/2010.

¹⁶ Fawcett Society, 2009. *Engendering Justice: From Policy to Practice*. Fawcett Society. <http://www.fawcettsociety.org.uk/documents/Commission%20report%20May%2009.pdf> Accessed 24/09/2010.

¹⁷ Gleeson E. and Grace K. 2009. *Police Complaints: Statistics for England and Wales 2008/09*. IPCC Research and Statistics Series: Paper 15. London: IPCC

¹⁸ Gleeson, E. and Grace, K. 2009. Table B, page 9.

Disability

Stop and search

Analysis of 2007/08 British Crime Survey data undertaken for the EMF suggests that people with disabilities are less likely than those without to experience stop and search: however, given the small sample size, it is difficult to know whether this was a chance or significant finding.¹⁹

Confidence in the criminal justice system (CJS)

People with a disability or limiting long-term illness (LLTI) are significantly less likely to believe that the CJS meets the needs of victims: only 27% of those with an LLTI/ disability believed this, compared to 39% of the rest of the population.²⁰

Analysis of British Crime Survey data by the Office for Disability Issues suggests that the difference is more pronounced among young disabled people: in 2008/09, 39% of those with an LLTI/disability aged between 16 and 34 thought that the CJS was effective, compared with 48% of those without. In addition, 53% in this group thought that the CJS was fair, compared with 64% of those without disabilities.²¹

Box 7.1.2 Related issue: People with learning disabilities

The Joint Committee on Human Rights has highlighted that people with learning disabilities are more likely to lack confidence in the CJS than the general population: many may not know how to report a crime, and the police can be reluctant to accept that a crime has been committed if the victim has a learning disability.²²

¹⁹ Alkire, S. *et al.* 2009. See Chapter 7. Table 7.5, page 191. In the development of the Equality Measurement Framework indicators, the technical phase was to check sample sizes rather than generate final data analysis tables, so these are preliminary results for group means and the significance of the variations in group means, as well as a report on sample sizes. Significance tests are reported at the 95 per cent level. A series of cross-checks are required at the next stage of the development of the Equality Measurement Framework before final data tables can be produced.

²⁰ Kershaw, C. *et al.* 2008. Table 2.05.

²¹ See Office for Disability Issues 'Roadmap Indicators' website: <http://www.odi.gov.uk/roadmap2025/indicators.php> Accessed 02/09/2010.

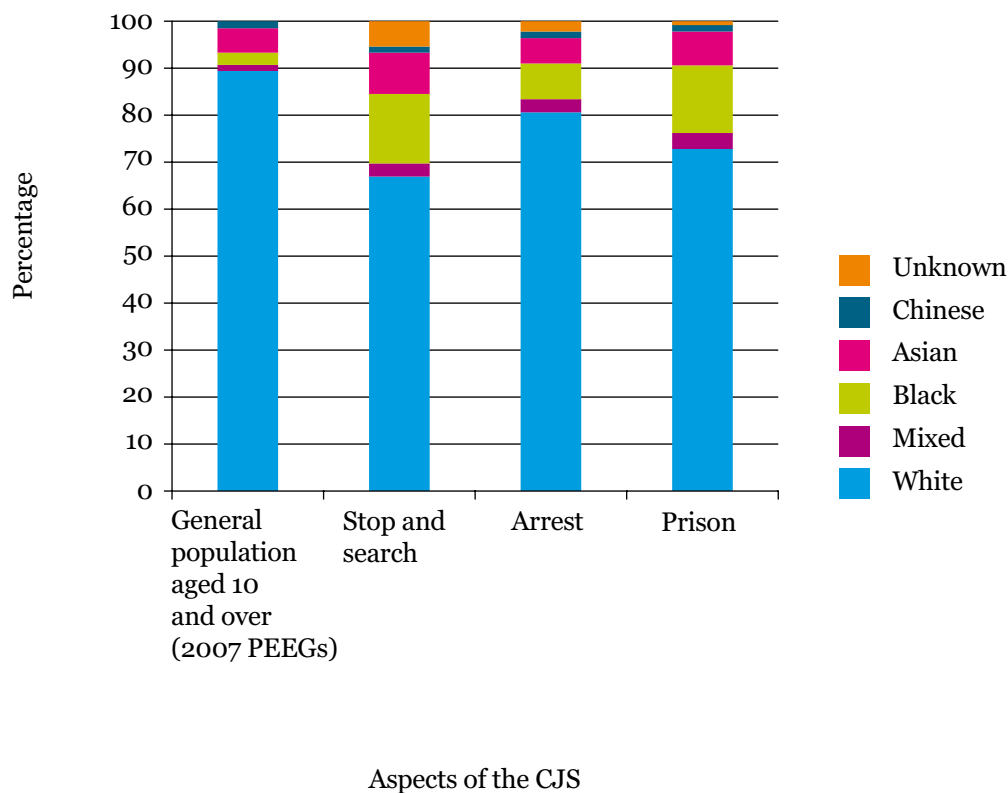
²² Joint Committee on Human Rights 2008. *A Life Like Any Other? Human Rights of Adults with Learning Disabilities*. Seventh report of session 2007-2008, Volume 1. London: The Stationary Office, Ev 247, Annex 3; Ev 306, Annex 3; Ev 122, 142.

Ethnicity and religion or belief

Stop and search

Black people make up between 2-3% of the population, yet constituted 15% of those who were stopped by the police in 2008/09: other ethnic minority groups are also over-represented (see Figure 7.1.2, below).

Figure 7.1.2 Percentage experiencing aspects of the criminal justice system by ethnicity in England and Wales, 2008/09²³



Source: Statistics on Race and the Criminal Justice System. 2008/09

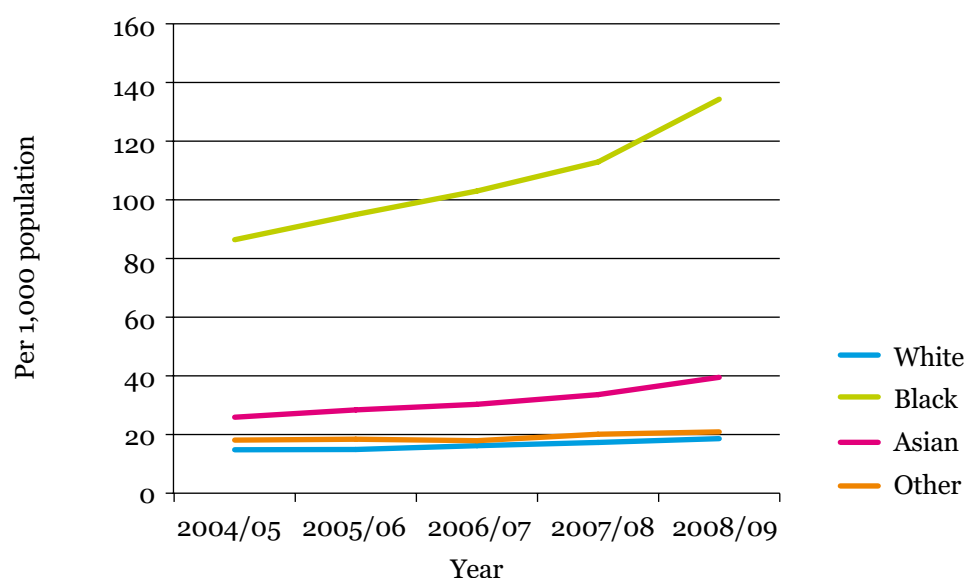
Notes:

1. Population Estimates by Ethnic Group (or PEEGs) for 2007 are provided by ONS: they are experimental estimates which cover the usually resident population including international migrants staying for 12 months or more.
2. Data relating to stop and search are based on officer-defined ethnicity and therefore slight differences may be seen compared to those that use self-defined ethnicity (arrest and prison).

²³ Ministry of Justice 2010a. Table A.

Adjusting for population changes, there have been small growths in the disproportionality ratios in relation to the use of stop and search in England and Wales (see Figure 7.1.3, below). According to analysis by the Equality and Human Rights Commission, Black people in England experienced around 145,000 excess stop and searches in 2007/08 – Asian people, around 43,000: the disproportionality ratio was 6.5 for Black people, and 1.9 for Asian people in that year.²⁴

Figure 7.1.3 Stops and searches per 1,000 population by observed ethnicity in England and Wales, 2004/05-08/09²⁵



Source: Statistics on Race and the Criminal Justice System 2008/09.

Note: Population Estimates by Ethnic Group (or PEEGs) for 2007 are provided by ONS: they are experimental estimates which cover the usually resident population including international migrants staying for 12 months or more.

Of the stop and searches conducted in 2008/09, 11% of Chinese/Other people, 10% of White people, 10% of Mixed Race people, 9% of Black people and almost 8% of Asian people were arrested.²⁶

²⁴ Equality and Human Rights Commission 2010. *Stop and Think: A critical review of the use of stop and search powers in England and Wales*. Manchester: Equality and Human Rights Commission.

²⁵ Ministry of Justice 2010a. Figure A.

²⁶ Ministry of Justice 2010a. Table 3.05.

Box 7.1.3 Related issue: The policing of ethnic minorities

Analysis carried out for the Equality and Human Rights Commission, and evidence submitted to Parliament, shows the processes and attitudes which lead to the differential treatment of ethnic minorities within the CJS.²⁷ These contribute to Asian people being over-represented in the stop and search statistics of some police forces, and Black people in others.²⁸

Moreover, it has been suggested that some Gypsies and Travellers have experienced blanket raids of their sites on the basis of unfounded allegations by local communities.²⁹ Because the police have power to remove and destroy vehicles if directions are not followed, most leave voluntarily when served notice, but then lack access to legal processes to challenge the direction: instead of due process, Travellers are often forced out of their homes by default.³⁰

Her Majesty's Inspectorate of Constabulary (HMIC) found that line managers had systematically failed to address inappropriate behaviours and attitudes among their staff; training was found to lack any racial equality dimensions.³¹ Meanwhile, a study of Scottish Gypsy and Traveller experiences of discrimination noted that of those interviewed (82), harassment from the police affected many.³²

²⁷ House of Commons Home Affairs Committee, 2007. *Young Black People and the Criminal Justice System. Volume I*. London: The Stationery Office. See also May, T., Gyateng, T. and Hough, M., 2010. *Differential treatment in the youth justice system*. Research Report 50. Manchester: Equality and Human Rights Commission.

²⁸ Equality and Human Rights Commission 2010.

²⁹ Coxhead, J. 2007. *The Last Bastion of Racism*. Stoke on Trent: Trentham Books; Greenfields, M. 2007. 'Gypsies, Travellers and Legal Matters'. In Clark, C. and Greenfields, M. (eds.) *Here to Stay*. Hatfield: University of Hertfordshire Press.

³⁰ Cemlyn, S., Greenfields, M., Burnett, S. Matthews, Z., and Whitwell, C., 2009. *Inequalities Experienced by Gypsy and Traveller Communities: A Review*. Research Report 12. Manchester: Equality and Human Rights Commission.

³¹ Her Majesty's Inspectorate of Constabulary (HMIC) 2003. *Diversity Matters*. HMIC Thematic Inspection, 2003. London: Home Office.

³² Taggart, I., 2007. *Moving On – Again? A Survey of Gypsies/Travellers' Views in the North East of Scotland*. Aberdeen: University of Aberdeen.

Confidence in the criminal justice system (CJS)

A slightly higher proportion of White people are confident than people from ethnic minority backgrounds that the CJS treats those accused of crimes fairly (80% compared to 76% in 2007/08): the statistical significance of this difference has not been tested.³³ A larger proportion of people from ethnic minority backgrounds (51%) than White respondents (34%) said that they thought the CJS meets the needs of victims.³⁴

Moreover, in 2008/09, more people from ethnic minority backgrounds were confident that the CJS as a whole was fair (68%, compared to 57% of White people).³⁵ However, an in-depth study of 47 young ethnic minority people's attitudes suggested that young Black men remain wary of being perceived as criminals by the police.³⁶

Handling of police complaints

Over three-quarters of police complaints that constitute allegations of discriminatory behaviour relate to 'race' (76%).³⁷ While there has been increase in the complaints made by all ethnic minority groups since 2007/08, the largest has been among Asians (14%).³⁸

The Independent Police Complaints Commission notes that smaller proportions of those from ethnic minority groups than from the White population say that they would complain if they were unhappy with the way that the police had treated them.³⁹ Figures from 2008/09 suggest that 63% complaints were from White people, 6% from Asian people, 7% from Black people, 3% from 'Other', and 22% whose ethnicity was unknown.⁴⁰

³³ Kershaw, C. *et al.* 2008. Table 5.02.

³⁴ Kershaw, C. *et al.* 2008. Table 5.02.

³⁵ Walker, A., Flatley, J., Kershaw, C. and Moon, D. 2009. *Crime in England and Wales 2008/09: Volume 1 Findings from the British Crime Survey and police recorded crime*. London: Home Office.

³⁶ Sharp, D. and Atherton, S. 2007. 'To serve and protect? The experiences of policing in the community of young people from Black and other ethnic minority groups', *British Journal of Criminology*, 47, 5: 746-763.

³⁷ Gleeson, E., and Grace, K. 2009. Page 6.

³⁸ Gleeson, E., and Grace, K. 2009. Table C, page 10.

³⁹ Inglis, G. 2009. *Confidence in the police complaints system: a survey of the general population in 2009*. IPCC Research and Statistics Series: Paper 17. London: IPCC. Table 5, page 12.

⁴⁰ Gleeson, E. and Grace, K. 2009. Table C, page 10.

The general expectations of ethnic minority groups remained lower than those of White people in 2009: nearly half (46%, compared to 37% of White people) did not think that a complaint from them would be taken seriously – up from just over a third in 2007 (36% compared to 29%).⁴¹ They were more than twice as likely to be worried about possible police harassment (40% compared to 17%).⁴²

Sexual orientation

Stonewall's study into the attitudes of British LGB people towards the CJS – *Serves You Right* – found that 1 out of 5 of the 1,658 lesbian, gay and bisexual people they surveyed would expect discrimination from the police if they reported an offence; a quarter thought they would be treated worse than any other victim if they reported a homophobic incident; a third thought that they would be treated worse than a heterosexual person if they were accused of committing a crime; and nearly a quarter thought they would be treated worse if they appeared before a judge for a major offence.⁴³

A quarter of respondents to Stonewall Cymru's survey claimed that they had been discriminated against or harassed by the police.⁴⁴ One study has found that only a proportion of criminal offences were reported by LGB people to the police in Wales – even in the case of violent crime, just over half of incidents were reported: those who did report a crime were generally dissatisfied with both how the police handled the report and with the resolution of the case.⁴⁵

Transgender

A survey of attitudes among 872 transgender people found that two-thirds felt confident that they would be treated appropriately by members of the police service as their acquired gender. However, around 1 in 5 of those who had had contact with the police (68/367) felt that they were treated inappropriately, with attacks against them not being taken seriously and inappropriate searches being carried out.⁴⁶

⁴¹ Inglis, G. 2009. Table 16, page 22.

⁴² Inglis, G. 2009. Table C6, page 41.

⁴³ Hunt, R. and Dick, S. 2008. *Serves You Right: Lesbian and gay people's expectations of discrimination*. London: Stonewall.

⁴⁴ Stonewall Cymru, 2003. *Counted out – the findings from the 2002-2003 survey of lesbian, gay and bisexual people in Wales*. Cardiff: Stonewall Cymru.

⁴⁵ Williams, M. and Robinson, A.L. 2007. *Counted In! The All Wales Survey of Lesbian, Gay and Bisexual People*. London: Stonewall.

⁴⁶ Whittle, S. Turner, L. and Al-Alami, M. 2007. *Engendered Penalties: Transgender and Transsexual People's Experiences of Inequality and Discrimination*. London: The Equalities Review.

7.2 What we know about offences reported and brought to justice - rape, domestic violence and hate crime

Measures:

Rape – The number of cases of rape estimated from general population survey sources compared with the number of cases reported to and recorded by the police and the number of legal cases successfully prosecuted

Domestic violence – The number of cases of domestic violence estimated from general population survey sources compared with the number of cases reported to and recorded by the police and the number of legal cases successfully prosecuted

Hate crime – The number of cases of hate crime estimated from general population survey sources compared with the number of cases reported to and recorded by the police and the number of legal cases successfully prosecuted

How these measures work:

English and Welsh data come from the British Crime Survey, police statistics (where available) spanning from 1997 to the present, and Crown Prosecution Service records providing data from 2006 onwards

The Scottish data come from the Scottish Crime and Justice Survey, police statistics (where available) and the Crown Office and Procurator Fiscal Services records, spanning from 1999 to the present.

The nature of population estimates, police records and prosecution data is such that the figures provided about each are not directly comparable. We place them alongside each other to illustrate attrition within the criminal justice system (CJS).

Rape

Changes in the way that crime has been recorded over time in England and Wales mean that comparisons of trends are problematic. We annotate charts accordingly.

Conviction rates for rape are calculated from a range of different data sets and start points in the literature consulted for this report. We outline the implications of these different start points on calculating the conviction rate for rape in more detail below (see Box 7.2.1). In brief, figures published by

the Scottish Government follow a recommendation in the Review of Sexual Offences, and therefore show low conviction rates;⁴⁷ meanwhile, Crown Prosecution Service calculations are taken as a percentage of prosecuted cases, and therefore produce higher conviction rates.

The English and Welsh data have been disaggregated by gender and age (the latter in relation to children under 16 only). Supplementary evidence relating to the experience of ethnic or religious minorities and disabled people is drawn from a range of sources.

There is limited related literature for this measure on groups defined by socio-economic background, sexual orientation and transgender status. They are therefore not covered in this section, although they are discussed in Chapter 8: Physical security.

It is important to note that rape and domestic violence are two of the most prevalent forms of violence against women and girls. Where possible, we have included prosecution data in relation to other forms.

Domestic violence

There are no publicly available national police data on domestic violence in England and Wales as there is no separate code for this category of crime, so incidents are not always flagged as such.

The English and Welsh data have been disaggregated by gender and include information about forced marriage, 'honour'-crimes, trafficking and female genital mutilation (FGM). Supplementary evidence relating to the experience of ethnic or religious minorities and disabled people is drawn from a range of sources.

There is limited related literature for this measure on groups defined by age, socio-economic background, sexual orientation and transgender status. They are therefore not covered in this section, although they are discussed in Chapter 8: Physical security.

There are no data from the Crown Office Procurator Fiscal Service in Scotland on the prosecution and conviction of domestic abuse.

There are variations in the ways that different police forces report and refer cases of domestic violence in all three nations.

⁴⁷ Crown Office and Procurator Fiscal Service, 2006. *Review of the Investigation and Prosecution of Sexual Offences in Scotland: Report and Recommendations*. Available at: <http://www.copfs.gov.uk/Resource/Doc/9/0000174.pdf> Accessed 21/09/2010. Page 44.

Hate crime

Hate crime is a relatively new concept, and there have been changes in recording practices over time. Fluctuations may reflect the fact that institutional and public awareness is still growing, rather than providing an indication of the number of actual incidents or the levels of under-reporting.

Crime survey estimates are based on small samples, and therefore do not provide an accurate indication of change.

There are variations in the ways that different police forces report and refer cases of hate crime in all three nations.

National data on hate crime are available in relation to racially and religiously aggravated offences and on crimes related to age, disability, homophobia and transphobia in England and Wales; in Scotland, they are available only in relation to racially and religiously motivated crimes.

Supplementary evidence about the experience of LGB people and ethnic or religious minorities including Gypsies, Travellers and asylum seekers is drawn from a range of sources.

There is limited related literature for this measure on groups defined by socio-economic status. They are therefore not covered in this section.

Overview

Despite the growing number of people reporting rape, domestic violence and hate crimes to the police, the vast majority of cases still go unreported and progress in bringing cases to prosecution and securing conviction is limited.

The picture varies for different types of attack. For domestic violence, both the number of incidents reported to the police and the rate at which they result in conviction has risen, despite a slight fall in prevalence recorded in the British Crime Survey. For rape cases, however, the gap is widening between the number of incidents being reported to the police (which is rising) and the number being prosecuted (which has been relatively stable over time).

The incidence of racially motivated crimes recorded in the British Crime Survey has stayed relatively stable, but there has been a fall in the number of cases reported to the police and referred to the Crown Prosecution Service. The reverse is true in Scotland, where the number of racially motivated crimes recorded by the police, and the proportion leading to court proceedings has risen.

Reporting rates of more recently recognised hate crimes are just starting to take off, as are the numbers prosecuted and convicted. For example, the number of cases referred to the Crown Prosecution Service relating to disabled people has risen sharply since 2007: this can be attributed to better flagging of cases and recognition by the Crown Prosecution Service and police.

There are clear improvements in the way that the CJS recognises and deals with all kinds of violence and abuse covered in this chapter. However, residually high attrition rates in moving from report to conviction in rape cases give cause for concern – as does the scale of under-reporting.

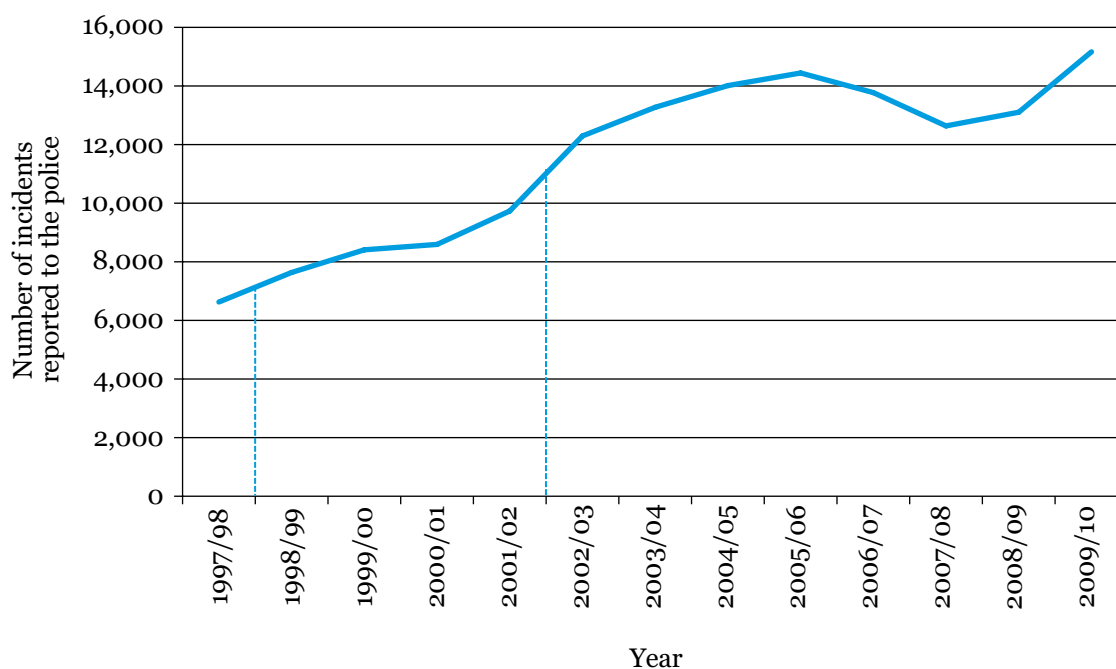
Some groups encounter persistent difficulties in obtaining justice. Groups that feel like outsiders in society may not feel sufficiently supported to seek justice and preventative action when they face hate crime, domestic violence and sexual assault: this can hinder their access to the protection of the law.

What we know about the overall situation and trends

Rape

Since 1997, the number of cases of rape being recorded by the police has risen: this not only reflects a rise in incidents, but also reflects changes in the ‘counting rules’ under which crimes are recorded, and to legislation on sexual offences (see Figure 7.2.1, below).

Figure 7.2.1 Rape reported to the police for population in England and Wales, 1997/98-2009/10⁴⁸



Source: Police Recorded Crime, 2009/10.

Notes:

1. New counting rules and the National Crime Recording Standard were introduced in 1998 and 2002 respectively, which mean that the definitions and recording of rape have changed over time. This means that we cannot report on a clear ‘trend’, as the figures produced before and after these dates are not directly comparable.
2. The Sexual Offences Act 2003 introduced in May 2004 altered the definition and coverage of sexual offences.
3. All data include cases with minors.
4. The percentage change in levels of rape between 2008/09 and 2009/10 was 15% for women and 22% for men (with a 38% increase in reported rapes of boys under 13).

⁴⁸ Flatley, J., *et al.* 2010. Table 2.04.

Between 1997 and 2006, the prosecution rate for rape fell from 30% to 18% of cases reported to the police; similarly calculated, the conviction rate halved from 10% in 1997 to 5% in 2003 before rising slightly to 6% in 2006.⁴⁹

Box 7.2.1 Related issue: Note on conviction rates

The conviction rate highlights the extent to which crimes are brought to justice. It can be calculated from different start-points – a few of which are outlined below – although there are controversies associated with each as recently discussed in the Stern Review.⁵⁰

Possible start-points

Crime committed	Crime surveys do not record all rape. However, calculated from crime survey estimated prevalence, the conviction rate is around 1%
Reported to the police	It is thought that between 10-14% of all rapes are reported to the police - the majority are 'hidden'. Calculated from here, the conviction rate is around 6%.
Prosecuted	Attrition between reporting and prosecution means that under half of reported rapes are referred for prosecution. When calculated from the point of prosecution, conviction rates for rape are lower than but comparable to other kinds of violent crime (around 60%).

Possible end points

Conviction as charged	This refers to rape cases that are convicted as rape (rather than a lesser charge).
Conviction for a related/lesser offences	This includes cases that are charged as rape cases but convicted as lesser and related offences (i.e., a rape case convicted for the crime of sexual assault).
Police sanction (e.g., caution)	This describes offences 'cleared up' by the police whether by charging or cautioning a suspect, or by taking offences into consideration.

⁴⁹ Walby, S., Armstrong, J. and Strid, S. 2010. *Physical and Legal Security and the Criminal Justice System: A Review of Inequalities*. UNESCO Chair in Gender Research Group Lancaster University. This is available on the Equality and Human Rights Commission website, Table 5.1. Note that these prosecution and conviction rates are not based on tracking cases through the criminal justice system.

⁵⁰ Stern, Baroness V. 2010. *The Stern Review*. London: Government Equalities Office.

In 2006, statutory charging was introduced. Since then, around half of all cases reported to the police have been referred to the Crown Prosecution Service, suggesting that a large proportion of cases are lost from the point of recording by the police.⁵¹ However, there is evidence of severe under-reporting before this stage: in analysis of British Crime Survey data conducted to test the measure, it was estimated that 87,280 rapes occurred in 2007/08,⁵² while 12,637 rapes were recorded by the police in England and Wales that year.⁵³

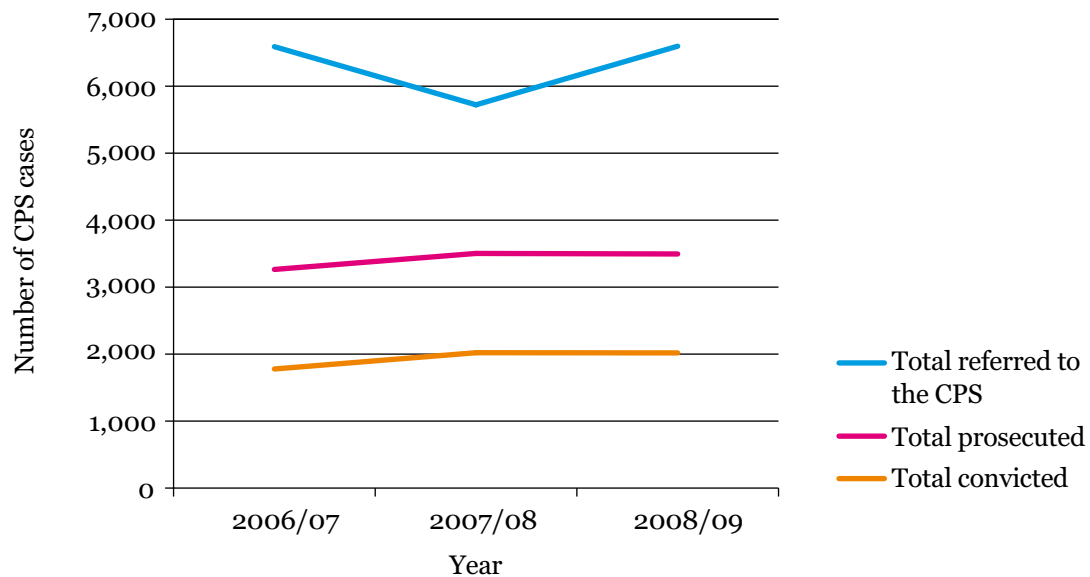
⁵¹ Crown Prosecution Service (CPS) 2009b. *Violence Against Women crime report, 2008/09*. CPS Management Information Branch. Table 1, page 34. See also Baird, V., 2010 *Response to Stern Review*. Women's National Commission. Available from: <http://www.thewnc.org.uk/>

⁵² Alkire, S. *et al.* 2009. See Chapter 7. Alkire *et al.* draw on British Crime Survey (Self-completion module) and ONS Mid-Year Population Estimates. Table 3. Available at: <http://www.statistics.gov.uk/statbase/Product.asp?vlnk=15106> The British Crime Survey figure is a population estimate based on a victim's count of 67 victims in the sample. The upper and lower bounds for the estimate are 60,190 and 114,369. The estimated number of cases of rape is currently proxied by the estimated number of victims, rather than providing an incidents based estimate. It is based on Alkire *et al.*'s calculations from the British Crime Survey self-completion module for adults aged 16-59. Figures for the population are obtained by multiplying the rape prevalence rate by 32077500 (the mid-population estimate for the number of adults aged 16-59 in England and Wales). The prevalence rate estimate covers victims of penetration of the vagina, anus or mouth by penis and attempts. In order to arrive at a consistent comparison for this measure and the police recorded crime /legal case outcome figures, questions corresponding to the crime of assault by penetration (included in British Crime Survey serious sexual violence) are not covered by the estimate. The British Crime Survey self-completion module had a cut off at age 59 in 2007-08 and the figure does not, therefore, cover over 59s. In the development of the Equality Measurement Framework indicators, the technical phase was to check sample size rather than generate final data analysis tables, so these are preliminary results for group means and the significance of the variations in group means, as well as a report on sample size. Significance tests are reported at the 95 per cent level. A series of cross-checks are required at the next stage of the development of the Equality Measurement Framework before final data tables can be produced.

⁵³ Flatley, J. *et al.* 2010. Table 2.04.

The proportion of cases referred to the Crown Prosecution Service that were charged rose from 30% (1,963 out of 6,590 cases) in 2006/07 to 39% (2,565 out of 6,597 cases) in 2008/09. The proportion of convictions (calculated as a percentage of prosecuted cases) rose from 55% (1,778 out of 3,264 cases) in 2006/07, to 58%, (2,018 out of 3,495 cases) in 2008/09 (see Figure 7.2.2, below).⁵⁴

Figure 7.2.2 Rape: referrals, prosecutions and convictions for population in England and Wales, 2006/07-2008/09⁵⁵



Source: Crown Prosecution Service 2009.

Notes:

1. Convicted cases often include cases carried forward from the previous year.
2. Pre-charge data (reflected in the numbers of referrals to the Crown Prosecution Service) are not as robust as prosecution and conviction data, and are likely to underestimate the actual number of cases referred.
3. The number of rapes reported to the police has fluctuated over this period. In 2006/07, 13,774 rape crimes were reported, falling to 12,637 in 2007/08 before rising again to 13,104 in 2008/09.⁵⁶

⁵⁴ CPS 2009b. Table 1, page 34 and Table 2, page 35.

⁵⁵ CPS 2009b. Table 1, page 34 and Table 2, page 35.

⁵⁶ Flatley, J. *et al.* 2010. Table 2.04.

Figures produced by the Ministry of Justice suggest that even when calculated from the point of trial, the conviction rate for rape is still lower than it is for other kinds of violent or sexual crime.⁵⁷ Similarly, information published by the Home Office suggests that the sanction detection rate for ‘rape of a female’ was 26% in 2008/09 as compared with 47% for ‘violence against the person’ and 41% for ‘violence against the person with injury’.⁵⁸

Similar patterns have been found in Scotland, where there was an overall rise in the number of rapes reported to the police between 1999/2000 and 2008/09 (from 586 to 821).⁵⁹ Despite the report-rate rising, the conviction rate in Scotland has fallen dramatically: calculated as a percentage of rape cases reported to the police, the conviction rate was 8% in 2006/07, and just under 4% in 2007/08.⁶⁰

⁵⁷ Walby, S. *et al.* 2010. Table 5.9 which compares the conviction rate for sexual offences and physical violence in 2008 (England and Wales) from the point of trial: 69% of those prosecuted for violence were found guilty, compared with 61% of those prosecuted for sexual offences (broadly) and 38% for rapes. Source: Ministry of Justice Supplementary Tables Volume 5 Proceedings at all courts: table S5.1. Available at: <http://www.justice.gov.uk/publications/criminalannual.htm>

⁵⁸ Walker, A. *et al.* 2010. *Crime in England and Wales 2008/09*.

⁵⁹ Scottish Government 2009a. *Recorded Crime in Scotland 2008/09*. Statistical Bulletin Crime and Justice Series. Scottish Government.

⁶⁰ Scottish Government 2008a. *Conviction rates in rape cases*, Crown Office Procurator Fiscal Service. Available at: <http://www.copfs.gov.uk/Resource/Doc/13547/0000580.pdf>. Table 2 and section 6. See Walby, S. *et al.* 2010. Tables 5.6 and 5.7 for different calculations of conviction rates for rape in Scotland, which also show a decline:

- The 3% rate for 2006 (Table 5.6) comes from Burman, M., Lovett, J. and Kelly, L. 2009. *Different systems, similar outcomes? Tracking attrition in reported rape cases in eleven countries. Country briefing: Scotland*. London: Child and Woman Abuse Studies Unit: London Metropolitan University.
- The 5.2% rate for 2006/07 (Table 5.7) draws on the method devised by the report authors plus others.
- Data in Table 5.7 draw on Scottish Government 2009a. *Recorded Crime in Scotland 2008/09*. Statistical Bulletin Crime and Justice Series and Scottish Government 2009b. *Criminal Proceedings in Scottish Courts 2007-08*. Statistical Bulletin Crime and Justice Series.

Domestic violence

Given that there is no separate crime code for domestic violence, it is difficult to know the scale of under-reporting. As reported in the Chapter 8: Physical Security, levels of domestic violence measured by the British Crime Survey are falling slightly: it has been estimated from the 2007/08 survey that there were 1,688,000 victims of domestic abuse,⁶¹ while estimates from the 2008/09 British Crime Survey data suggest that there were 1,641,000 victims in the year prior to interview.⁶²

Despite this fall in crime survey recorded abuse, the number of women killed by a partner or ex-partner rose above 100 in 2008/09 for the first time in 4 years (see Chapter 6: Life).⁶³

Using Crown Prosecution Service referrals data, it is clear that only a proportion of the estimated number of domestic violence incidents result in a criminal charge being made (see Figure 7.2.3, below). However, the number of referrals, prosecutions and convictions for domestic violence has risen in England and Wales. The charge-rate has also risen over this period (from 56% (36,957 out of 66,639 cases) to 65% (52,418 out of 80,423 cases)).⁶⁴ Meanwhile, the conviction rate has risen from 65% (37,383 out of 57,361 cases) in 2006/07 to 72% (48,465 out of 67,094 cases) in 2008/09.⁶⁵

⁶¹ Povey, D., Coleman, K., Kaiza, P., and Roe, S., 2009. *Homicides, firearm offences and intimate violence 2007/08*. Home Office Statistical Bulletin. London: Home Office. Table 3.04.

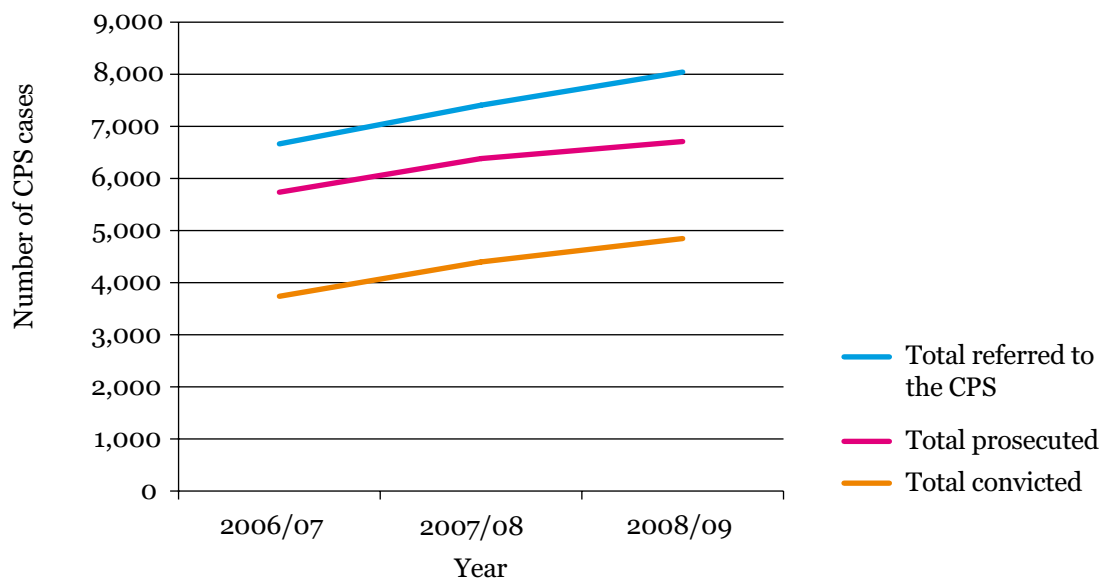
⁶² Smith, K., Flatley, J., Coleman, K., Osborne, S., Kaiza, P., and Roe, S., 2010. *Homicides, firearm offences and intimate violence 2008/09*. Home Office Statistical Bulletin. London: Home Office. Table 3.04.

⁶³ Smith, K., *et al.* 2010. Table 1.05.

⁶⁴ CPS, 2009b. Table 1, page 22.

⁶⁵ Walby, S. *et al.* 2010. Table 5.10.

Figure 7.2.3 Domestic violence: referrals, prosecutions and convictions for population, England and Wales, 2006/07-2008/09⁶⁶



Source: Crown Prosecution Service 2009.

Notes:

1. Convicted cases often include cases carried forward from the previous year.
2. Pre-charge data (reflected in the numbers of referrals to the Crown Prosecution Service) are not as robust as prosecution and conviction data, and are likely to underestimate the actual number of cases referred.

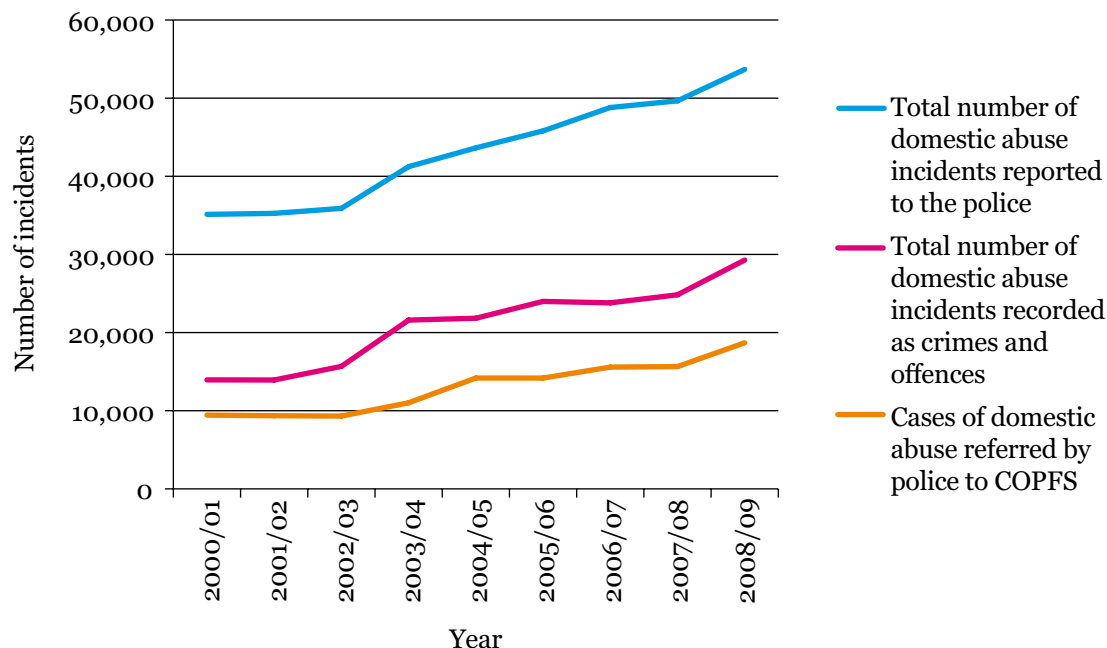
Meanwhile, the number of cases of domestic abuse being reported to the police is rising in Scotland – from around 35,000 in 2001 to around 54,000 in 2008/09 – as is the number being recorded as a crime.⁶⁷ The number of cases referred to the Crown Office and Procurator Fiscal Service (COPFS) is also rising, although as shown in Figure 7.2.4, not in proportion to the number of offences being reported to the police – many of which are followed up through non-legal routes.⁶⁸

⁶⁶ CPS, 2009b. Tables 1 and 2, pages 22 and 23.

⁶⁷ Walby, S. *et al.* 2010. See Table 5.11.

⁶⁸ Walby, S. *et al.* 2010. See Tables 5.11 and 5.12.

Figure 7.2.4 Domestic abuse: incidents, criminal offences and referrals for population in Scotland, 2000/01–2008/09⁶⁹



Source: Scottish Government 2009.

Hate crime

Legislation on hate crime is relatively new. It was first classified as an offence on the grounds of race in the UK in the 1986 Public Order Act. Religiously motivated crime was first recognised in England and Wales in 2002 (2003 in Scotland) and crime motivated by disability, sexual orientation and transgender status in 2006 (2009 in Scotland). This means that, so far, there is better public and institutional awareness of racially and religiously aggravated crime, and it is hard to judge the extent to which 'newer' hate crimes are being reported or recognised.

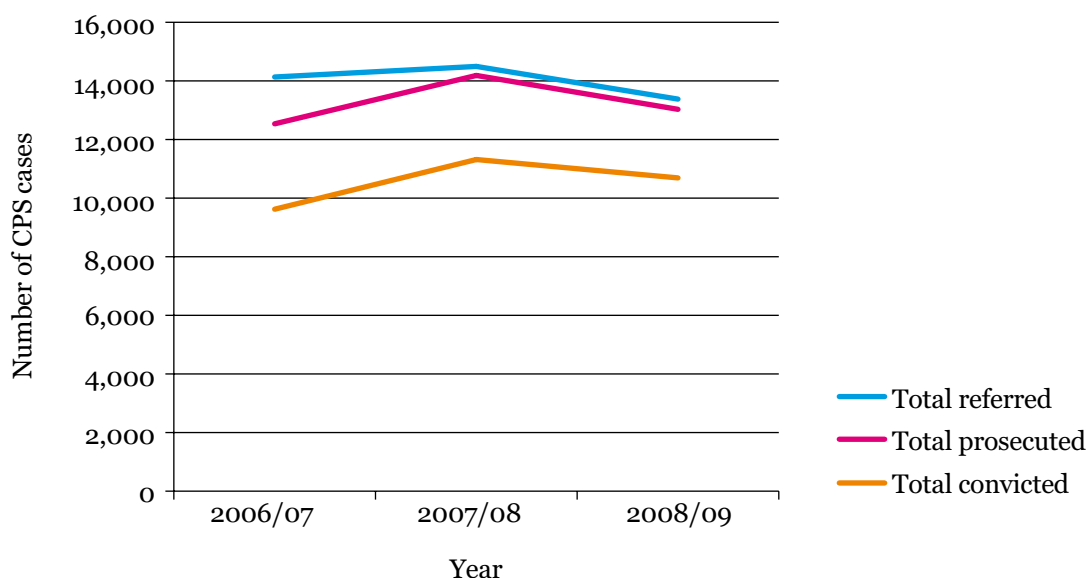
There is evidence that the proportion of cases identified as hate crime that result in a criminal charge is growing (see Figure 7.2.5, below). For example, in 2008/09, the rate of charging was 73% for racially and religiously aggravated (RARA) cases – up from 60% in 2006/07. The charge-rate was 65% for homophobic and transphobic cases – up from 54% in 2006/07. Finally, it was 66% for disability cases – a slight fall from 67% in 2006/07. The conviction rates for 2008/09 were 82% for RARA cases, 81% for homophobic and transphobic cases and 76% for disability cases.⁷⁰

⁶⁹ Scottish Government, 2009c. *Domestic abuse recorded by the police in Scotland*. Table 1a.

⁷⁰ CPS, 2009a. *Hate Crime Report 2008/09*. CPS Management Information Branch. Tables 1 and 2, page 9.

Those cases that are tried usually involve offences against the person;⁷¹ but the vast majority of hate crime reported to the police involves harassment.⁷²

Figure 7.2.5 Hate crime (all): referrals, prosecutions and convictions for population in England and Wales, 2006/07-2008/09⁷³



Source: Crown Prosecution Service 2009.

Notes:

1. Convicted cases often include cases carried forward from the previous year.
2. Pre-charge data (reflected in the numbers of referrals to the Crown Prosecution Service) are not as robust as prosecution and conviction data, and are likely to underestimate the actual number of cases referred.

What we know about the situation for different groups

Gender

The UN Committee on the Elimination of Discrimination against Women (CEDAW) voiced its concern in 2008 that Britain still lacks a comprehensive strategy to combat violence against women, including rape, domestic violence, forced marriage, female genital mutilation (FGM) and trafficking.⁷⁴

The government has since (in 2009) launched its Violence against Women and Girls strategy, which coordinates the work of statutory agencies and government departments to ensure better prevention, protection, and provision for all.

⁷¹ CPS, 2009a. Pages 25, 36 and 47.

⁷² Flatley, J. *et al.* 2010. Table 2.04.

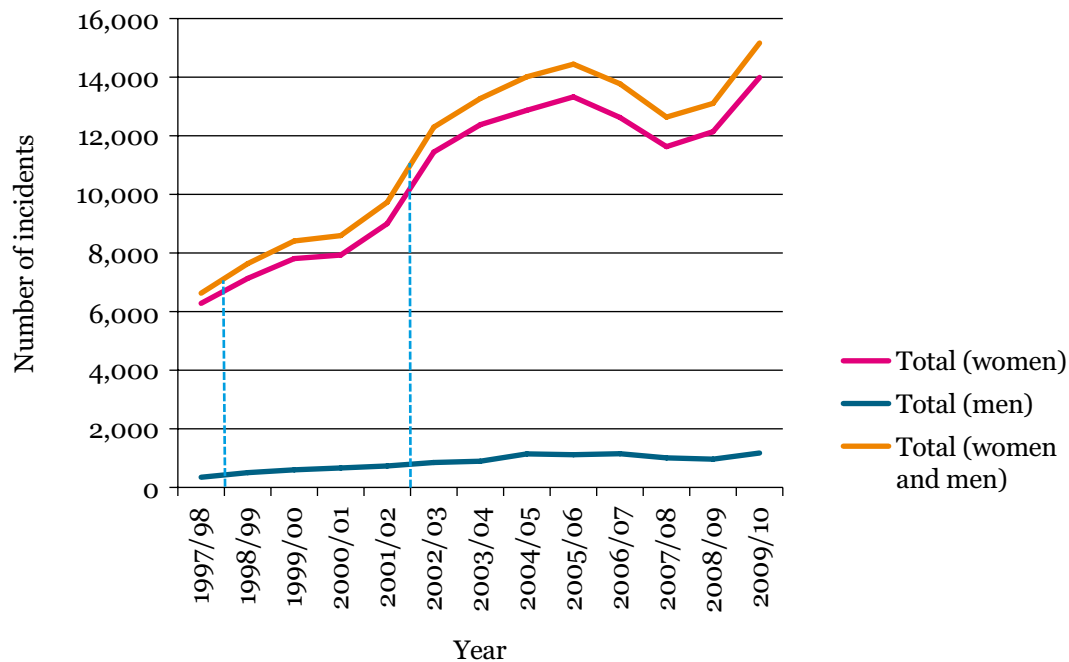
⁷³ CPS 2009a. Tables 1 and 2, page 9.

⁷⁴ UN Committee on the Elimination of all Forms of Discrimination Against Women concluding observations to the United Kingdom 2008. UN document: C/UK/CO/6. Available at: <http://daccessddsny.un.org/doc/UNDOC/GEN/N09/555/92/PDF/N0955592.pdf?OpenElement>.

Rape

While the number of men reporting rape has risen overall since 2002/03, women were the victims in more than 90% of the rapes reported to police in England and Wales in 2008/09 (see Figure 7.2.6).

Figure 7.2.6 Police-recorded rape by gender in England and Wales, 1997/98-2009/10⁷⁵



Source: Police Recorded Crime 2009/10.

Notes:

1. New counting rules and the National Crime Recording Standard were introduced in 1998 and 2002 respectively, which mean that the definitions and recording of rape have changed over time. This means that we cannot report on a clear 'trend', as the figures produced before and after these dates are not directly comparable.
2. The Sexual Offences Act 2003 introduced in May 2004 altered the definition and coverage of sexual offences.
3. All data includes cases with minors.
4. The percentage change in levels of rape between 2008/09 and 2009/10 was 15% for women and 22% for men (with a 38% increase in reported rapes of boys under 13).

Under-reporting remains a significant problem: it is estimated that 6% of male victims report sexual violence to the police, compared to 12% of female victims.⁷⁶

⁷⁵ Flatley, J. *et al.* 2010. Table 2.04.

⁷⁶ Ministry of Justice 2010b. Page 26.

Domestic violence

As in England and Wales, women were the victims in between 85% and 90% of the cases of domestic violence reported to the police in Scotland between 2000/01 and 2008/09, but it is not known what proportion was prosecuted.⁷⁷

Box 7.2.2 Related issues: ‘Honour’ crimes, forced marriage, trafficking and female genital mutilation (FGM)

The government includes ‘honour’ crimes, forced marriage and FGM within its policy on domestic violence; and in addition, the Crown Prosecution Service has specific definitions of forced marriage and ‘honour’- based violence that can be prosecuted separately. So far there have been no prosecutions for FGM crimes.⁷⁸

From the launch of the Forced Marriage (Civil Protection) Act in November 2008 until the end of July 2010, 182 Forced Marriage Protection Orders have been issued to protect a person from being forced into marriage. In 2009, the Forced Marriage Unit dealt with 1,682 reports to their helpline and 377 cases.⁷⁹ It is not known how many prosecutions there have been for ‘honour’ crimes, although the Crown Prosecution Service is now monitoring all cases.⁸⁰

During 2008/09, there were 219 arrests for human trafficking: 82 of these related to sexual exploitation, 26 to domestic servitude and 111 to forced labour – many had multiple victims. Of the 227 victims of trafficking whose gender was known, 140 were women and 47 men – the majority aged between 21 and 25.⁸¹ This, however, represents the tip of the iceberg (see Chapter 8: Physical security).

Hate crime

In English and Welsh cases where the gender of the victims are known, two-thirds of hate crimes linked to race or religion (68%) and homophobia (65%) are directed against men, as are 45% of disability hate crimes.⁸²

⁷⁷ Scottish Government 2009c. See also figures from the Scottish government website: <http://www.scotland.gov.uk/Resource/Doc/933/0099561.xls>

⁷⁸ CPS 2009b. Page 49.

⁷⁹ Information supplied in private correspondence with the Home Office.

⁸⁰ CPS 2009b. Page 50.

⁸¹ CPS 2009b. Page 56.

⁸² CPS 2009a. Page 16.

Age

Intimate violence (rape and domestic violence)⁸³

The rates of child abuse convictions in England and Wales have risen slightly since 2006/07: the conviction rate for offences against the person (i.e., physical violence) affecting children has stayed relatively stable, with little change from 72% in 2006/07 to 73% in 2008/09 (there were 6,730 prosecutions over this period); there has been an increase for sexual offences from 69% to 75% (there were 11,810 prosecutions since 2006/07).⁸⁴ Indicators about child abuse are being developed within the Equality and Human Rights Commission's Children's Indicators for the Measurement Framework.

Hate crime

In England and Wales, the Crown Prosecution Service has started to recognise a category of crime against older people – defined broadly to cover a range of offences where the advanced age of the victim is relevant, either because the crime exploits an older person's vulnerability or because it is linked to hostility because of a person's age. In 2008/09, 1,004 defendants were prosecuted in England and Wales in for such crimes against older people, with 78% successful prosecutions.⁸⁵

Disability

Intimate violence (rape and domestic violence)

Box 7.2.3 Related issue: People with disabilities – rape and domestic violence

There is evidence to suggest that incidents of sexual violence against disabled people – especially people with mental health conditions – are frequently not treated as crimes.⁸⁶

⁸³ The vast majority of intimate violence prosecuted by the Crown Prosecution Service is domestic violence (85%): rape makes up 5% of intimate violence tried by the Crown Prosecution Service and sexual assault, 10% – see CPS 2009. Page 3.

⁸⁴ CPS 2009b. Pages 53 and 54.

⁸⁵ CPS 2009b. Page 68.

⁸⁶ See the following reports for further details: Women's Resource Centre 2008. Rape Crisis, *The Crisis in Rape Crisis: A Survey of Rape Crisis (England and Wales) Centres*, March 2008; Kelly, L.J., Lovett, J. and Regan, C. 2005. *A Gap or a Chasm? Attrition in Reported Rape Cases*. Metropolitan Police Service, 2007. *The attrition of rape allegations in London: A Review*. http://www.met.police.uk/sapphire/documents/084796_rr2_final_rape_allegations_london.pdf

Box 7.2.3 Continued

People with learning disabilities and mental health conditions find the CJS hard to navigate; the conviction rate for those cases where the victim has a mental health condition or learning disability is often lower than for cases involving witnesses without.⁸⁷

Hate crime

The newness of disability hate crime as a recognised offence is reflected by a sharp rise in referrals, charges and convictions in a short period. The number of people charged for disability hate crime in England and Wales rose from 187 in 2007/08 to 292 in 2008/09, which reflected the rise in the volume of referrals (from 279 to 444 over this period).⁸⁸ Similarly, while the number of convictions rose in the same period from 141 to 299, the conviction rate remained the same at just over three-quarters of offences prosecuted (77% in 2007/08 and 76% in 2008/09).⁸⁹

Disability hate crime involves a lower proportion of public order offences (i.e., those involving threatening or violent behaviour) and a higher proportion of property offences (theft and handling, burglary and robbery) than other forms of targeted crime.⁹⁰

Ethnicity and religion or belief***Intimate violence (rape and domestic violence)***

Box 7.2.4 Related issue: Legal justice for ethnic and religious minority groups suffering domestic abuse

There is evidence that some women from ethnic minority communities who have experienced rape or domestic violence face barriers to accessing criminal justice agencies. Partly, these reflect a lack of cultural sensitivity within the CJS.⁹¹

⁸⁷ Kelly, L. *et al.* 2005. Also Her Majesty's Crown Prosecution Service Inspectorate, 2007. *Without Consent: A report on the joint review of the investigation and prosecution of rape offences*. London: HMIC.

⁸⁸ CPS, 2009a. Table 1, page 41.

⁸⁹ CPS, 2009a. Table 2, page 42.

⁹⁰ CPS, 2009a. Page 15.

⁹¹ Chakraborti, N. and Garland, J. 2003. 'Under-researched and overlooked: an exploration of the attitudes of rural minority ethnic communities towards crime, community safety and the criminal justice system', *Journal of Ethnic and Migration Studies*, 29, 3. Pages 563-572.

Box 7.2.4 Continued

Black and ethnic minority people experiencing domestic abuse, as a result, have been found to be less likely than White people to access statutory services.⁹²

Many women from ethnic minority backgrounds fear reporting domestic violence because of the ramifications for and within their communities.⁹³

Gypsies and Travellers similarly fear that reporting domestic violence will result in rejection by their communities, and further isolation; victims often fear racism from the authorities.⁹⁴

Hate crime

Estimates based on British Crime Survey data suggest that the number of incidents perceived to be motivated by race or religion have fluctuated since they reached a peak of 184,000 in 2006/07 (see Figure 7.2.7, below).⁹⁵ Meanwhile, the number of racially and religiously motivated crimes reported to the police in England and Wales has fallen slightly.⁹⁶ There has been a significant improvement in the ratio of reporting to the police since the 1990s, although such crimes are still under-reported and the gap between British Crime Survey estimates and reports to the police is becoming wider.

Meanwhile, the percentage of racially and religiously aggravated (RARA) crime cases resulting in a charge rose from 60% in 2006/07 to 73% in 2008/09.⁹⁷ The conviction rate rose steadily between 2005/06 and 2008/09, from 74% to 82%, although the actual number of convictions fell between 2007/08 to 2008/09, from 10,398 to 9,576, reflecting the dip in the number of referrals.⁹⁸

⁹² Hester, M. and Westmarland, N. 2005. *Tackling Domestic Violence: effective interventions and approaches*. Home Office Research Study 290. London: Home Office.

⁹³ Burman, E. 2003. 'Taking refuge? Domestic violence, "race" and asylum', *Asylum*, 13, 3.

⁹⁴ Cemlyn, S. *et al.* 2009.

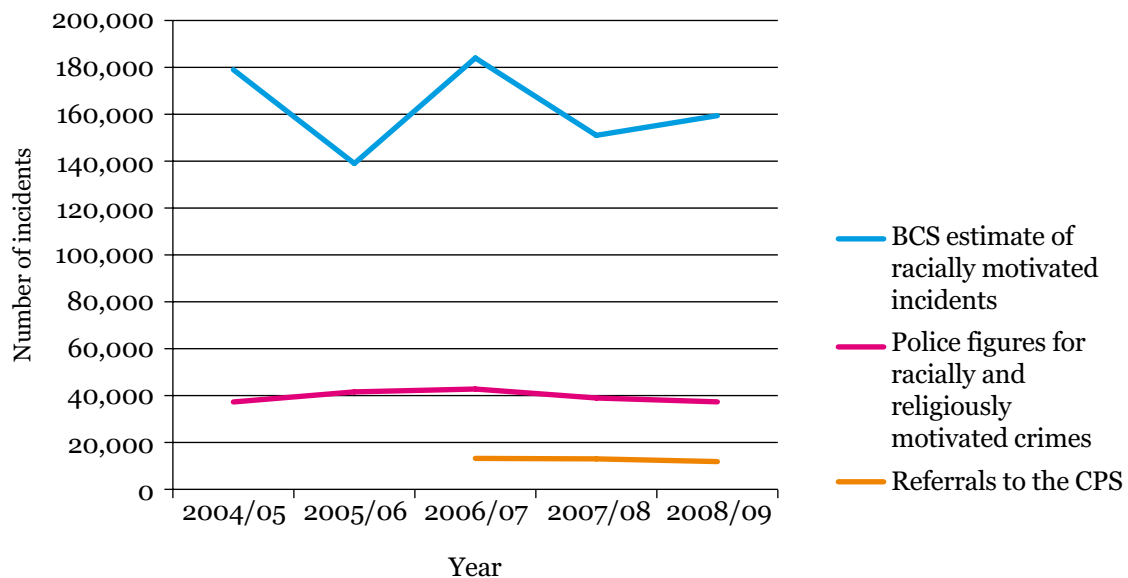
⁹⁵ Walby, S. *et al.* 2010. Table 4.19.

⁹⁶ Flatley, J. *et al.* 2010. Table 2.04.

⁹⁷ CPS 2009a. Table 1, page 20.

⁹⁸ CPS 2009a. Table 2, page 21.

Figure 7.2.7 British Crime Survey estimates of racist incidents, police reports of racially and religiously motivated offences; and referrals to the Crown Prosecution Service of racially and religiously aggravated crime for population in England and Wales, 2005/06-2008/09^{99 100 101}



Sources: British Crime Survey 2008/09; Police Recorded Crime, 2009/10; Crown Prosecution Service 2009.

Notes:

1. The British Crime Survey estimate for 2007/08 has been revised down by the Home Office from the previously published estimate of 207,000. The estimate for 2008/09 is provided by the Home Office, based on the 0.4% prevalence reported in the British Crime Survey for that year. The estimate for 2009/10 is 122,205 incidents.
2. No information is available about referrals to the Crown Prosecution Service from before 2006/07.

The number of both racially and religiously motivated crimes referred to the Crown Office and Procurator Fiscal Service has risen overall in Scotland – as has the number of racially motivated crimes being recorded by the police in Scotland (see Figure 7.2.8, below).

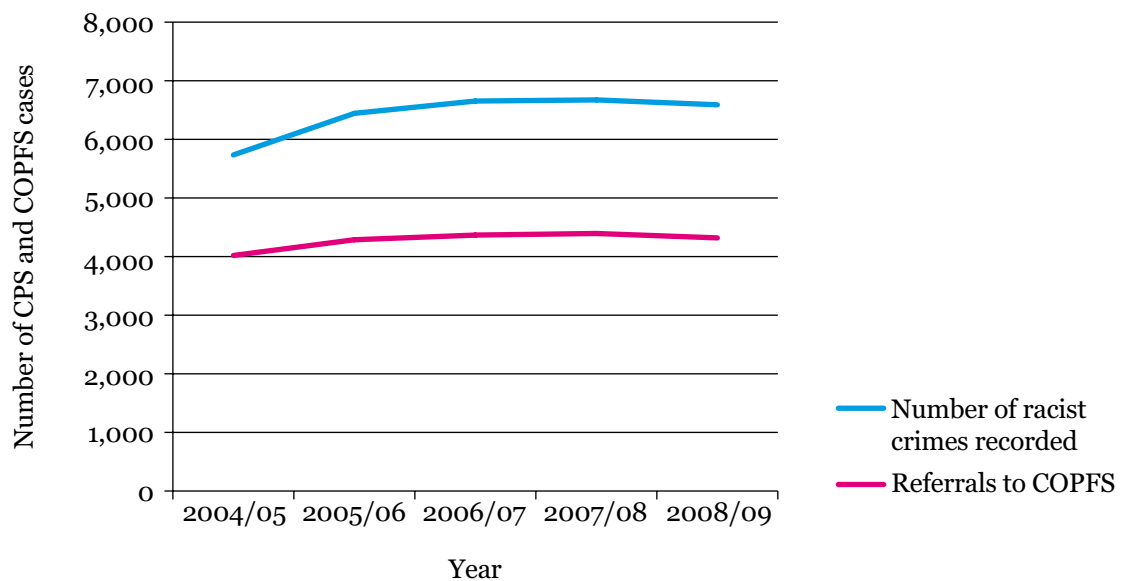
⁹⁹ Walby, S. *et al.* 2010. Table 4.19. Post-2007/08 British Crime Survey estimates from 2007/08 provided by the Home Office.

¹⁰⁰ Flatley, J. *et al.* 2010. Table 2.04.

¹⁰¹ CPS 2009a. Table 1, page 20.

The proportion of cases of racially aggravated crime resulting in court proceedings in Scotland rose from 85% in 2004/05 to 89% in 2006/07, staying at 88% for the following 2 years.¹⁰² The proportion of cases for religiously aggravated crime resulting in court proceedings fell from 96% in 2004 to 91% in 2007/08, rising to 93% in 2008/09.¹⁰³

Figure 7.2.8 Police recorded racist crime and referrals to the Crown Office Procurator Fiscal Service for population in Scotland, 2004/05-2008/09^{104 105}



Source: Scottish Government, 2010; Crown Office Procurator Fiscal Service, 2010.

¹⁰² See data from Crown Office Procurator Fiscal Service website: <http://www.copfs.gov.uk/About/Departmental-Overview/diversity/racist-crime/Statistics0506>

¹⁰³ Walby, S. *et al.* 2010. Table 5.18.

¹⁰⁴ Scottish Government, 2010a. *Racist Incidents Recorded by the Police in Scotland, 2004/05 to 2008/09*. Scottish Government. Table 7a. <http://www.scotland.gov.uk/Publications/2010/04/26153852/11> Accessed 01/09/2010. Table 7a.

¹⁰⁵ See data from Crown Office Procurator Fiscal Service website: <http://www.copfs.gov.uk/About/Departmental-Overview/diversity/racist-crime/Statistics0506>

Box 7.2.5 Related issue: Justice for ethnic minority groups experiencing hate crimes

Issues with under-reporting and fear of discriminatory treatment by the police and courts mean that crimes against Gypsies and Travellers may not be reflected in official data:¹⁰⁶ there have been notable cases of aggravated murder, for example, that have not been tried as hate crimes.¹⁰⁷

In a 2007 study of Scottish Gypsy and Traveller experience of discrimination, 65 of the 82 interviewees had experienced prejudice and harassment in the preceding 12 months (an increase over the number of people experiencing such targeted behaviours in the preceding survey in 1999). 63 of the incidents reviewed in this study involved the local community – many involved the police (see section on confidence in the CJS).¹⁰⁸ Yet many people in these communities come to see crimes committed against them as a fact of life, for which they seek no redress.¹⁰⁹

Refugees and asylum seekers rarely report hate crime, according to the Home Office's Cross Government Action Plan on hate crime. It cites a range of factors, such as fear that reporting crime to the police or other statutory agencies will affect their immigration status.¹¹⁰ Yet no systematic information exists on hate crimes directed towards recently arrived migrants and asylum seekers.¹¹¹

¹⁰⁶ Taggart, I. 2007.

¹⁰⁷ Cemlyn, S. *et al.* 2009. See also Mason, P. and Hughes, N. 2009. *Access to Justice: a review of existing evidence of the experiences of minority groups based on ethnicity, identity and sexuality*. Ministry of Justice Research Report 7/09.

¹⁰⁸ Taggart, I. 2007.

¹⁰⁹ For example, James, Z. 2007. 'Policing Marginal Spaces: Controlling Gypsies and Travellers', *Criminology and Criminal Justice*, 7: 367-389.

¹¹⁰ HM Government 2009. *Hate Crime – the cross government action plan*. Home Office. Available at: <http://library.npia.police.uk/docs/homeoffice/hate-crime-action-plan.pdf> Accessed 02/09/2010.

¹¹¹ Gavrielides, T. 2007. *Restoring Relationships: Addressing hate crime through restorative justice*. London: Race on the Agenda.

Sexual orientation and transgender

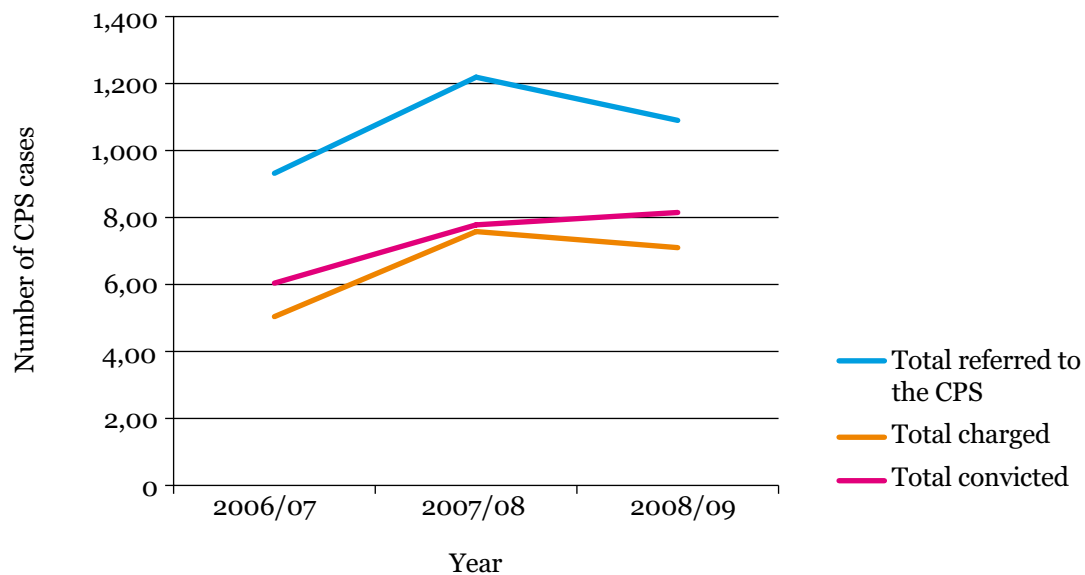
Intimate violence (rape and domestic violence)

See Chapter 8: Physical security

Hate crime

The volume of cases referred to the Crown Prosecution Service by the police has risen and then fallen, as Figure 7.2.9 (below) illustrates. While the actual number of cases charged has followed the same course, the proportion charged has risen from just over half (54%) to nearly two-thirds of cases (65%).

Figure 7.2.9 Charge-patterns for homophobic and transphobic hate crime for population in England and Wales, 2006/07-2008/09¹¹²



Source: Crown Prosecution Service 2009.

Notes:

1. Convicted cases often include cases carried forward from the previous year.
2. Pre-charge data (reflected in the numbers of referrals to the Crown Prosecution Service) are not as robust as prosecution and conviction data, and are likely to underestimate the actual number of cases referred.

Offences against the person constituted 48% of homophobic and transphobic crimes charged by the Crown Prosecution Service in 2008/09, and public order offences constituted 36%.¹¹³ Of those cases prosecuted, the conviction rate has risen between 2004/05 and 2008/09, from 71% to 81%, with the number of convictions increasing from 426 to 815 over this period.¹¹⁴

¹¹² CPS 2009a. Table 1, page 30.

¹¹³ CPS 2009a. Page 36.

¹¹⁴ CPS 2009a. Table 2, page 31.

Box 7.2.6 Related issue: Justice for gay, lesbian and bisexual victims of hate crime

In Britain

LGB people are often concerned about potential prejudice within the CJS – as a result, an estimated 3 in 4 victims of hate crime do not report incidents to the police.¹¹⁵ The Crown Prosecution Service has developed a policy statement that notes that it will do everything possible to protect people’s sexual orientation and gender identity, rather than letting people be ‘outed’ by the criminal justice process.¹¹⁶

Asylum seekers facing homophobia in their home countries

Until recently, the cases of individuals who were seeking asylum on the basis of their sexuality were considered under a test established by the Court of Appeal. Under that test, some individuals were refused asylum on the basis that they would avoid persecution by exercising discretion in their way of life in their country of origin;¹¹⁷ however, on 7 July, the UK’s Supreme Court set a new test for assessing such claims. The test requires consideration to be given not just to how an individual would act on return to their country of origin, but the reasons behind them behaving in that way. This means that where individuals would behave discretely as a direct consequence of fear of persecution, they would qualify for refugee status.

¹¹⁵ Dick, S. 2008. *Homophobic Hate Crime: The Gay British Crime Survey*. London: Stonewall.

¹¹⁶ CPS 2009a. Page 28.

¹¹⁷ See Mason, P. and Hughes, N. 2009.

7.3 What we know about prison numbers and conditions

Measures:

Prison population – Percentage of the population in prisons in England, Wales and Scotland

Prison conditions – Perceptions of treatment with dignity and respect in prisons

How these measures work:

Prison population

Data on the number of prisoners from the Ministry of Justice and Home Office (England and Wales) and Scottish Government sources can be broken down by age, ethnicity and gender. We also include data about foreign national prisoners, including asylum seekers, and about prisoners defined by disability or by religious affiliation. There is very limited related literature for this measure about groups defined by socio-economic background, sexual orientation or transgender status. They are therefore not covered in this section.

Prison conditions

Data are available for England and Wales only, although they are not collected systematically. This section relies on a literature review, and on prison monitoring data, to describe the experiences of prisoners across all our protected strands, as well as foreign nationals (including asylum seekers).

There is very limited related literature for this measure about groups defined by socio-economic background. They are therefore not covered in this section.

Overview

On average, five times more Black people than White people in England and Wales are imprisoned.

Women are much less likely to go to prison than men, but the rate of imprisonment of women is increasing faster than that of men. When mothers go to prison, their children are often left at risk of being taken into care.

A large proportion of prisoners are often among the most excluded or victimised within society and face particular risks when imprisoned. Ethnic minorities, for example, can encounter racism within prisons; meanwhile, people with learning disabilities are often not properly assisted when they face problems navigating the

complexities of prison life, or when they require access to other kinds of mental health support.

There is a strong link between young people experiencing the care system and being incarcerated.

Ex-prisoners can experience difficulties finding work and accommodation once they leave prison. The higher rate of repeat offending of those encountering such problems suggests that better support for prisoners – particularly those serving short sentences – would help break offending cycles.

What we know about the overall situation and trends

Prison population

The prison populations in England, Wales and in Scotland are among the highest in Western Europe. England and Wales has an imprisonment rate of 153 per 100,000 and Scotland of 152 per 100,000 of the population. This contrasts with rates of 100 per 100,000 or below for most of Britain's neighbours and 74 per 100,000 or below in the Nordic countries.¹¹⁸

The prison population in England and Wales rose by over 66% between 1995 and 2009 (by 32,597 prisoners), even though a similar number of crimes are being reported to the police as in the early 1990s and the volume of indictable offences has fallen over this time.¹¹⁹

Similarly, the size of the Scottish prison population has risen consistently in the past decade. In 2008/09 it had reached a high of 7,834, rising steadily from 5,883 in 2000/01,¹²⁰ It has risen by over 30% since 1999.¹²¹

Prison conditions

Research by the Ministry of Justice highlights that ex-prisoners who have difficulties finding both employment and accommodation have a reoffending rate of 74% during the year after custody, compared to 43% for those who do not experience these problems.¹²²

¹¹⁸ Walmsley, R., 2009. *World Prison Population List (eighth edition)* International Centre for Prison Studies. Available at: http://www.kcl.ac.uk/depsta/law/research/icps/downloads/wppl-8th_41.pdf Accessed 02/09/2010

¹¹⁹ Ministry of Justice, 2010c. *Offender Management Caseload Statistics, 2009*. Table 7.5.

¹²⁰ Scottish Government, 2010b. *Criminal Justice – Prison Population: High level Summary of Statistics Trend*. Last update: Monday, 8 February, 2010.

¹²¹ Scottish Government, 2010b.

¹²² Ministry of Justice, 2008a. *Factors linked to reoffending: a one-year follow-up of prisoners who took part in the Resettlement Surveys 2001, 2003 and 2004*. London: Ministry of Justice.

Because entitlement to housing benefit stops for all sentenced prisoners expected to be in prison for more than 13 weeks, those leaving prison often have no home to go to. In a study of re-offending by the Home Office, having accommodation arranged prior to release is estimated to make it four times more likely that an ex-prisoner will be able to find employment, education or training.¹²³

What we know about the situation for different groups

Gender

Prison population

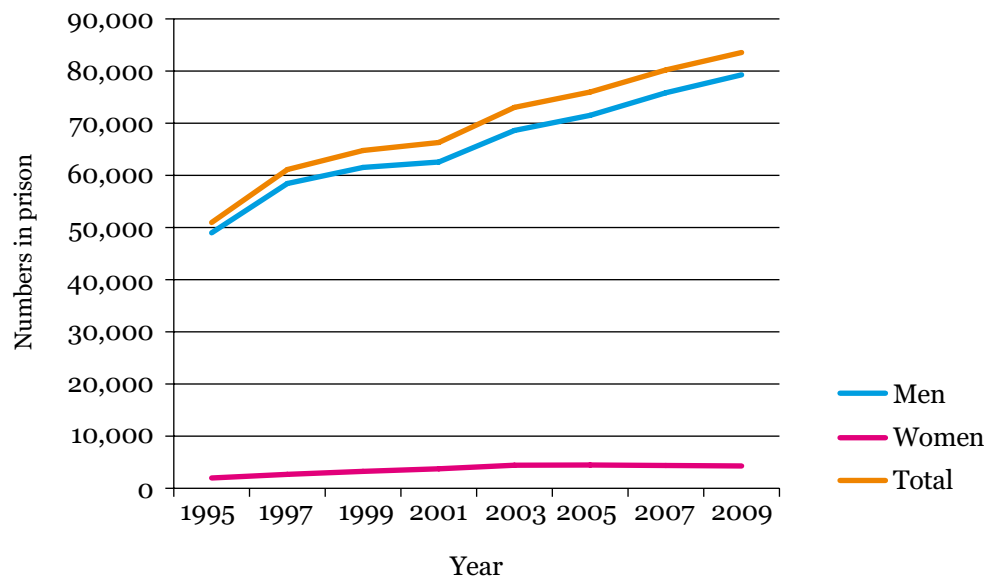
The number of women in prison in England and Wales more than doubled between 1995 and 2009, from 1,979 to 4,283: women currently represent 5% of the prison population.¹²⁴ The number of women grew rapidly between 1995 and 2005, but it has fluctuated since then, while the number of men has grown consistently over this period (see Figure 7.3.1). The proportion of women prisoners aged 40 and over rose from 18% in 2002 to 25% in 2007.¹²⁵

¹²³ Niven, S. and Stewart, D. 2005. *Resettlement outcomes on release from prison, Home Office Findings*. London: Home Office

¹²⁴ Ministry of Justice 2010c. Table 7.5.

¹²⁵ Prison Reform Trust Bromley Briefings Factfile, November 2009. Page 25.

Figure 7.3.1 Size of prison population by gender in England and Wales, 1995-2009¹²⁶



Source: Offender Management Caseload Statistics, 2009.

Notes:

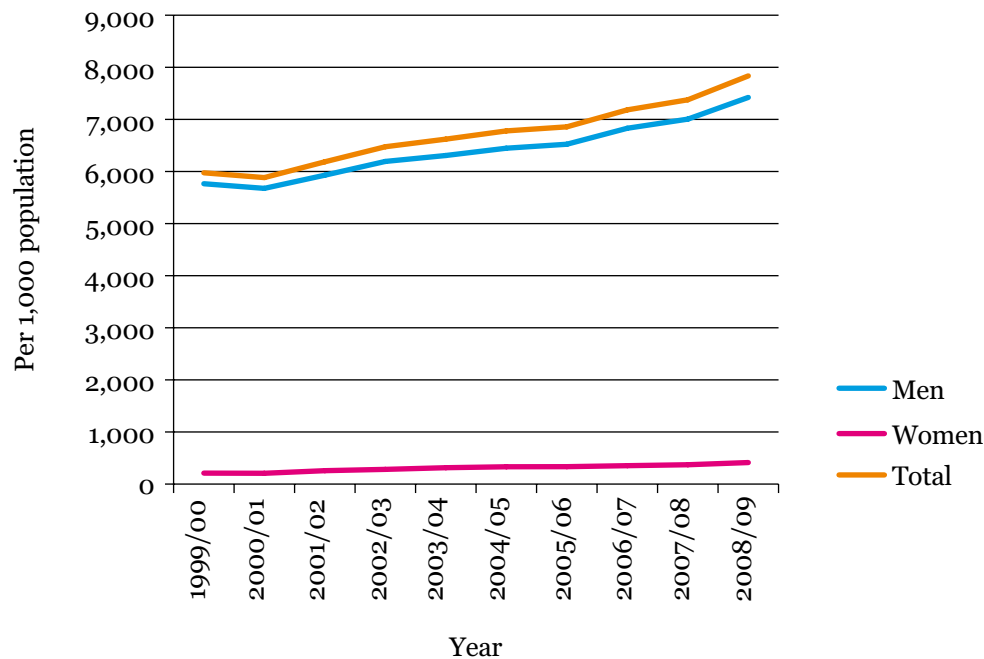
1. Annual average population.
2. Excludes police cells.
3. Due to technical problems relating to the supply of data for statistical purposes, the annual average population for 2009 uses data compiled on a slightly different basis for July to December 2009.

In Scotland, the pattern is very similar, but the women's population has risen faster than the men's prison population over the long term – having nearly doubled (from 207 to 413) since the turn of the century, while the men's population has risen less steeply (from 5,676 to 7,422) over the same period – see Figure 7.3.2.¹²⁷

¹²⁶ Ministry of Justice 2010c. Table 7.5.

¹²⁷ Scottish Government 2010b.

Figure 7.3.2 Average daily population of men and women in penal establishments for population in Scotland, 1999/00-2008/09¹²⁸



Source: Prison Statistics Scotland 2009.

Box 7.3.1 Related issues: Women in prison

At the end of 2009, 24% of women prisoners in England and Wales had no previous convictions – double the figure for men.¹²⁹ In addition, 64% of women were in prison for non-violent offences, compared with 45% of men.¹³⁰

The Fawcett Society Commission on Women and the Criminal Justice System notes that causal factors in women's offending are often neglected by prosecutors.¹³¹ Meanwhile, the Corston Review notes that the particular experiences of women prisoners are often overlooked within the CJS.¹³² Finally, the HM Prison Service reports that specific needs of women prisoners (e.g., to maternity care and gynaecological health) are often not adequately provided for.¹³³

¹²⁸ Scottish Government 2009d. *Prison Statistics Scotland, 2008/09*. Statistical Bulletin Crime and Justice Series. Edinburgh: Scottish Government. Table 1.

¹²⁹ Ministry of Justice 2010c. Page 34.

¹³⁰ Ministry of Justice 2009. *Population in Custody, England and Wales, June 2009*. London: Ministry of Justice.

¹³¹ Fawcett Society 2009.

¹³² Corston, Baroness J. 2007. *The Corston Report*. London: Home Office 2007.

¹³³ HM Prison Service 2003. *Working with Women Prisoners*. Fourth edition. Edited by B. Ash. Women's Estate Policy Unit HM Prison Service.

Box 7.3.1 Continued

Research has shown that men and women offenders are treated in subtly different ways: interventions tend to be used earlier with female suspects in a bid to provide them with access to support and services given their history of abuse or mental illness (see below). Often, this means that they enter the probation system faster – ending up in prison when alternative strategies are exhausted.¹³⁴ Concern has been expressed about the over-use of remand and custodial sentences in cases involving women.¹³⁵

History of abuse

Over half of women in prison have suffered intimate violence, 1 in 3 has experienced sexual abuse; and 1 in 4 spent time in local authority care as a child.¹³⁶

Poor mental health

A number of reports have drawn attention to the high proportion of women prisoners with mental health problems.¹³⁷ Although they made up just 5% of the prison population in England and Wales in 2007, women accounted for 54% of all self-harm incidents that year.¹³⁸ The death of 6 women in Styal Prison in a 13 month period prompted the Corston Review of women in the CJS.¹³⁹

Divided families

Two-thirds of women prisoners are mothers of young children (often raising children alone).¹⁴⁰ The small number of women's prisons – 14 in England, one in Scotland, none in Wales – means that contact between incarcerated women and their children is often disrupted by lack of access.¹⁴¹

¹³⁴ Social Work Services and Prisons Inspectorates for Scotland, 1998. *Women Offenders – A Safer Way*. Edinburgh: The Stationery Office.

¹³⁵ See Walby, S. *et al.* 2010. Pages 98-100.

¹³⁶ Prison Reform Trust, June 2009, *Bromley Briefings Prison Factfile*.

¹³⁷ Wedderburn, D. 2000. *Justice for Women: the Need for Reform*. London: Prison Reform Trust.

¹³⁸ Prison Reform Trust, November 2009.

¹³⁹ Corston, Baroness J. 2007.

¹⁴⁰ HM Prison Service 2008. Prison Service Order 4800: 'Women Prisoners'. Available at: http://pso.hmprisonservice.gov.uk/PSO_4800_women_prisoners.doc

¹⁴¹ Prison Reform Trust, November 2009.

Box 7.3.1 Continued

The concentration of ethnic minority communities in cities means that many ethnic minority women prisoners are isolated from their families, which has been shown to have an impact on their ability to find work and support on their release.¹⁴² Between April 2005 and July 2008, 283 children were born to women prisoners, but only half of English prisons have mother-and-baby units.¹⁴³

Many women ex-prisoners (and their dependents) have problems finding accommodation on their release.¹⁴⁴ Fewer unmarried women than men in prison have rented or owned property to return to after a custodial sentence; this makes them dependent on family and friends for housing.¹⁴⁵ Lack of permanent accommodation can hinder their chances of finding work or accessing support services.¹⁴⁶

Prison conditions

Women prisoners are subject to higher rates of discipline than men: 189 proven breaches against discipline per 100 women were recorded in 2007, compared to 133 per 100 men. One explanation given for this pattern is the poor mental health of many women prisoners, which affects their ability to cope with the prison regime.¹⁴⁷ Women are more likely to be disciplined for disobedience and violence – men are more likely to be disciplined for unauthorised transactions/possessions.¹⁴⁸

Age**Prison population**

The number of over 50s in prisons is growing. In March 2009 there were 7,358 prisoners aged over 50 in England and Wales, including 518 over 70: the number of women prisoners aged over 50 years has more than trebled since 1996, rising from 92 to 316.¹⁴⁹

Figures presented by HM Prisons Inspectorate suggest that by the end of August 2009, levels of imprisonment for the under-18s were 17% lower than those the previous year, but the number of those serving longer sentences had increased.¹⁵⁰

¹⁴² Fawcett Society 2009.

¹⁴³ Prison Reform Trust, November 2009. Page 20.

¹⁴⁴ HM Chief Inspector of Prisons for England and Wales 2009a. *Annual Report 2007-08*. London.

¹⁴⁵ Ministry of Justice 2010b. Page 53.

¹⁴⁶ Citizens Advice Bureau 2007. *Locked Out: CAB evidence on prisoners and ex-offenders*. CAB.

¹⁴⁷ Prison Reform Trust, November 2009. Page 25.

¹⁴⁸ Ministry of Justice 2010b.

¹⁴⁹ Prison Reform Trust, 2009. Information from Offender Policy and Rights Unit, 31 March 2009.

¹⁵⁰ HM Chief Inspector of Prisons for England and Wales 2009a.

Box 7.3.2 Related issues: Young people in prisons and young offenders institutions

There is a large overlap between children experiencing the care and custody systems. A survey of 152 children in custody across England and Wales by the Youth Justice Board found that around three-quarters had seen a social worker before entering custody. A similar proportion had lived with someone other than a parent at some time (compared with only 1.5% of children in the general population).¹⁵¹ Similarly, whereas 1% of Scottish children have been in care, 50% of young Scottish prisoners have been in care – rising to 80% of those convicted of violent offences.¹⁵²

Findings from a survey of young people aged 15-18 in prison across England and Wales between 2006 and 2008 showed that almost nine-tenths of the young men and two-fifths of the young women surveyed had been excluded from school. Around a third were under 14 years old when they last attended school, and 63% were not in education, employment or training (NEET) at the time of arrest.¹⁵³

Mental health problems, along with drug and alcohol abuse, are more common among young people in prison than they are among the general population (around 95% of young offenders in one detailed study were found to have one or more mental disorder) – as is a history of suicidal thinking and attempted suicide.¹⁵⁴

According to the Youth Justice Board, the number of children assessed as vulnerable in custody was 1,148 in 2007 – a rise of 12% on 2006, which was itself a rise by 12% on 2005 figures.¹⁵⁵

¹⁵¹ Youth Justice Board 2007. *Accommodation Needs and Experiences of Young People who Offend*. YJB.

¹⁵² HM Chief Inspector of Prisons for Scotland 2009. *Annual Report 2008-09*. Edinburgh: Scottish Government.

¹⁵³ Parke, S. 2009. *Children and Young People in Custody 2006-2008, an analysis of the experiences of 15-18-year-olds in prison*. HM Inspectorate of Prisons and Youth Justice Board. See also HM Inspectorate of Prisons, 2002. *Reducing re-offending by ex-prisoners*. London: Social Exclusion Unit.

¹⁵⁴ Singleton, N. Lader, D. and Meltzer, H. 2000. *Psychiatric Morbidity among young offenders in England and Wales*. London: Office for National Statistics.

¹⁵⁵ Hansard, House of Commons written answers, 28 March 2007: Col. 1652W.

Box 7.3.2 Continued***Children of inmates***

It is estimated that there are 160,000 children with a parent in prison at any given time in England and Wales.¹⁵⁶ The Home Office estimates that more than 17,700 children are separated from their mothers by imprisonment.¹⁵⁷ This poses greater risks than imprisonment of fathers, since an estimated 25% of children whose mothers are incarcerated are looked after by their fathers whereas 92% of children whose fathers are incarcerated are looked after by their mothers.¹⁵⁸

Among the emotional and health problems that children of prisoners often experience are becoming withdrawn or secretive; displaying anger or defiance (especially against authority figures); attention-seeking or self-destructive behaviour; low self-esteem; and poor educational performance.¹⁵⁹

Disability***Prison population***

In HM Inspectorate of Prison surveys, 15% of prisoners report a disability.¹⁶⁰ A survey undertaken by the Ministry of Justice found that over a quarter of newly sentenced prisoners reported a long-standing physical disorder or disability. Musculoskeletal and respiratory complaints were the most commonly reported physical problems.¹⁶¹

Moreover, it is believed that 20 to 30% of adult offenders have learning disabilities.¹⁶² Mental health concerns are prevalent within prisons: around three-quarters of prisoners are found to have at least one mental disorder.¹⁶³

¹⁵⁶ Prison Reform Trust Bromley Briefings Factfile, December 2008.

¹⁵⁷ Prison Reform Trust Bromley Briefings Factfile, November 2006.

¹⁵⁸ Social Exclusion Unit 2002. *Reducing Re-offending by Ex-prisoners*. Office of the Deputy Prime Minister (ODPM). Page 141.

¹⁵⁹ Brown, K. 2003. *Exploring the needs of young people with a prisoner in the family*. Action for Prisoners' Families.

¹⁶⁰ Prison Reform Trust Bromley Briefing, November 2009.

¹⁶¹ Stewart, D. 2008. *The problems and needs of newly sentenced prisoners: results from a national survey*. London: Ministry of Justice.

¹⁶² Prison Reform Trust Bromley Briefing, November 2009.

¹⁶³ Social Exclusion Unit 2002. See pt A.31.

Prison conditions

Learning disabilities can affect people's ability to cope with institutional regimes.¹⁶⁴ Moreover, a third of those interviewed in a survey by HM Prisons Inspectorate said that they had felt unsafe recently, compared with 15% of those without a disability.¹⁶⁵

Prisoners with disabilities report higher than average levels of victimisation and intimidation – both from staff and from prisoners. The Bradley Report highlights that prisoners with mental health conditions and learning disabilities are often excluded from offender behaviour programmes.¹⁶⁶ Of those prisoners who experience control and restraint or segregation, a large proportion has learning disabilities or mental health conditions.¹⁶⁷

Despite these trends, it is rare for prisons to monitor potential victimisation or bullying of prisoners with a disability.¹⁶⁸

Ethnicity

Prison population

On average, five times more Black people than White people in England and Wales are imprisoned.¹⁶⁹ Overall, the ethnic minority prison population has doubled in a decade: from 11,332 in 1998 to 22,421 in 2008 in England and Wales, although the growth of the ethnic minority prison population has been more gradual since 2005 (see Figure 7.3.3, below).¹⁷⁰

¹⁶⁴ S Jacobson, J. with Talbot, J. 2009. *Vulnerable Defendants in the Criminal Courts: a review of provision for adults and children*. Prison Reform Trust.

¹⁶⁵ HM Chief Inspector of Prisons for England and Wales 2009b. *Disabled prisoners: A short thematic review on the care and support of prisoners with a disability*. London: HMIP 2009. Page 8.

¹⁶⁶ Bradley, Lord K. 2009. *The Bradley Report*. London: Department of Health.

¹⁶⁷ Prison Reform Trust Bromley Prison Briefing, June 2009. Page 36. Note that these data are from interviews rather than monitoring data.

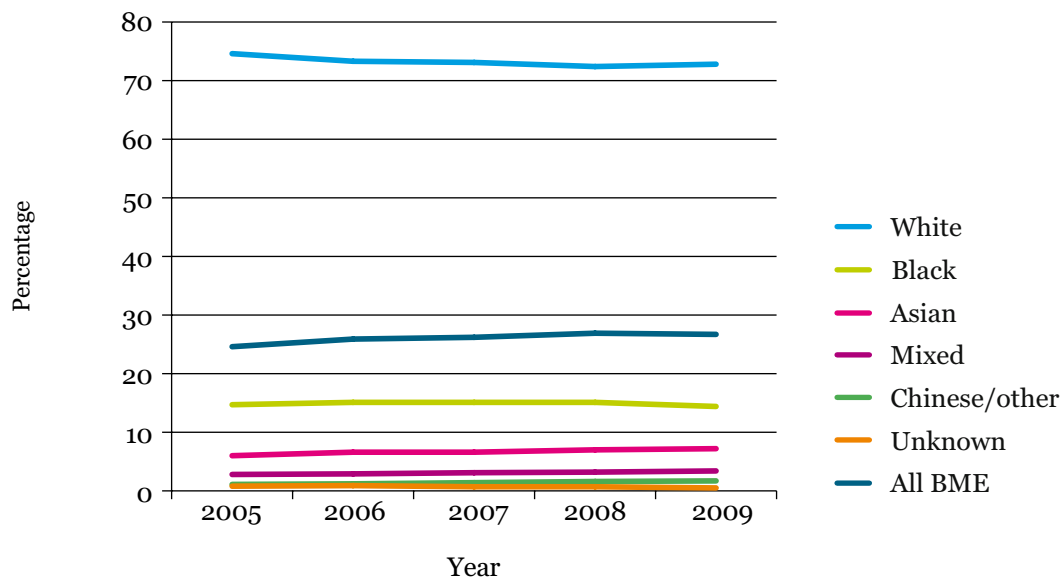
¹⁶⁸ HM Chief Inspector of Prisons for England and Wales, 2009b. Page 8.

¹⁶⁹ Ministry of Justice 2008b. *Race Equality Review 2008: Implementing Race Equality in Prisons – Five Years on*. National Offender Management Service. Page 6.

¹⁷⁰ Ministry of Justice 2008b. Page 5.

This has caused the proportion of ethnic minority prisoners to rise to around 25% of the prison population (while they make up 11% of the population in England and Wales):¹⁷¹ there is now greater disproportionality in the number of Black people in prisons in the UK than in the United States.¹⁷²

Figure 7.3.3 Total prison population (including foreign nationals) by self-defined ethnicity in England and Wales, June 2005-09¹⁷³



Source: Statistics on Race and the Criminal Justice System 2008/09.

Notes:

1. Figures include foreign national prisoners (11,350) and those with nationalities not recorded (874).
2. Figures include foreign nationals who have served their sentence and are awaiting deportation.
3. Figures include prisoners aged 15 and over.

In Scotland, the prison population is 97% White, corresponding to 98% in the population at large. Although the 1% who are Black is about eight times the share of the Scottish population who are Black, the numbers are very small, with fewer than 100 Black prisoners in total (see Table 7.3.1).¹⁷⁴

¹⁷¹ Office for National Statistics Population estimates by ethnic group (PEEG) figures 2007. Available at: <http://www.statistics.gov.uk/StatBase/Product.asp?vlnk=14238>

¹⁷² Ministry of Justice 2008b. Page 5.

¹⁷³ Ministry of Justice 2010a. Table 5.03.

¹⁷⁴ Walby, S. *et al.* 2010. Page viii.

Table 7.3.1 Prisoners in custody by ethnicity and gender in Scotland, 2007¹⁷⁵

Ethnic origin	Men	Women	Total	Percentage of total prison population	Percentage of total population
Total	6,810	344	7,154	100	100
White	6,588	322	6,910	96.6	97.9
Black-Caribbean	38	4	42	0.59	0.04
Black-African	31	3	34	0.48	0.10
Black-Other	12	6	18	0.25	0.02
Indian	7	2	9	0.13	0.30
Pakistani	58	-	58	0.81	0.63
Bangladeshi	3	-	3	0.04	0.04
Chinese	19	2	21	0.29	0.32
Other Asian	21	2	23	0.32	0.12
Mixed Race	13	1	14	0.20	0.25
Other	20	2	22	0.31	0.19

Source: Prison Statistics Scotland 2009.

Note: Figures include people awaiting deportation.

Prison conditions

Historically, racism and discrimination have been features of prison life in the three nations, although there have been significant improvements in recent years.¹⁷⁶ The 2008 Race Review by the Ministry of Justice and the National Offender Management Service concluded that – in part due to the introduction of equality policies – instances of explicit racism are less frequent.¹⁷⁷

¹⁷⁵ Scottish Government 2008b. *Statistical Bulletin Crime and Justice Series: Prison Statistics Scotland, 2007/08*, Edinburgh: Scottish Government. Table 7. Note that these figures have not been updated in subsequent statistical bulletins.

Scottish Executive 2004. *Analysis of ethnicity in the 2001 census. Summary Report*. Office of the Chief Statistician. Table 1 and Table 6.1 are used to provide population estimates. See <http://www.scotland.gov.uk/Resource/Doc/47210/0025543.pdf>

¹⁷⁶ In 2003, the Commission for Racial Equality (CRE) and HM Prison Service jointly established an action plan on race relations in prisons. The aim was to follow up a CRE investigation into race relations following the murder in 2000 of Zahid Mubarek at Feltham young offenders' institute in west London. The action plan was devised to ensure compliance with the Race Relations (Amendment) Act 2000, which placed public agencies (including prisons) under the obligation to promote race equality.

¹⁷⁷ Ministry of Justice 2008b.

Despite this, HM Inspectorate surveys carried out within English prisons shows that Asian and Mixed Race prisoners report having more negative experiences than White or Black prisoners – particularly in relation to safety and victimisation by other prisoners.¹⁷⁸

Box 7.3.3 Related issue: The experience of ethnic minority prison staff

A small-scale study of the experiences of members of the RESPECT network of prison staff identifies a culture of discrimination. The majority of those interviewed (71 out of 117) say they have experienced direct racial discrimination while employed in the service.¹⁷⁹

Religion or belief

Prison population

The percentage of Muslim prisoners in England and Wales almost tripled from 3,681 in March 1997 to 9,975 in December 2008.¹⁸⁰ Muslim prisoners currently make up 12% of the prison population.¹⁸¹ A third of these (34% of Muslim prisoners) are foreign nationals, compared to 14% of the total population.¹⁸²

¹⁷⁸ HM Chief Inspector of Prisons for England and Wales, 2009a.

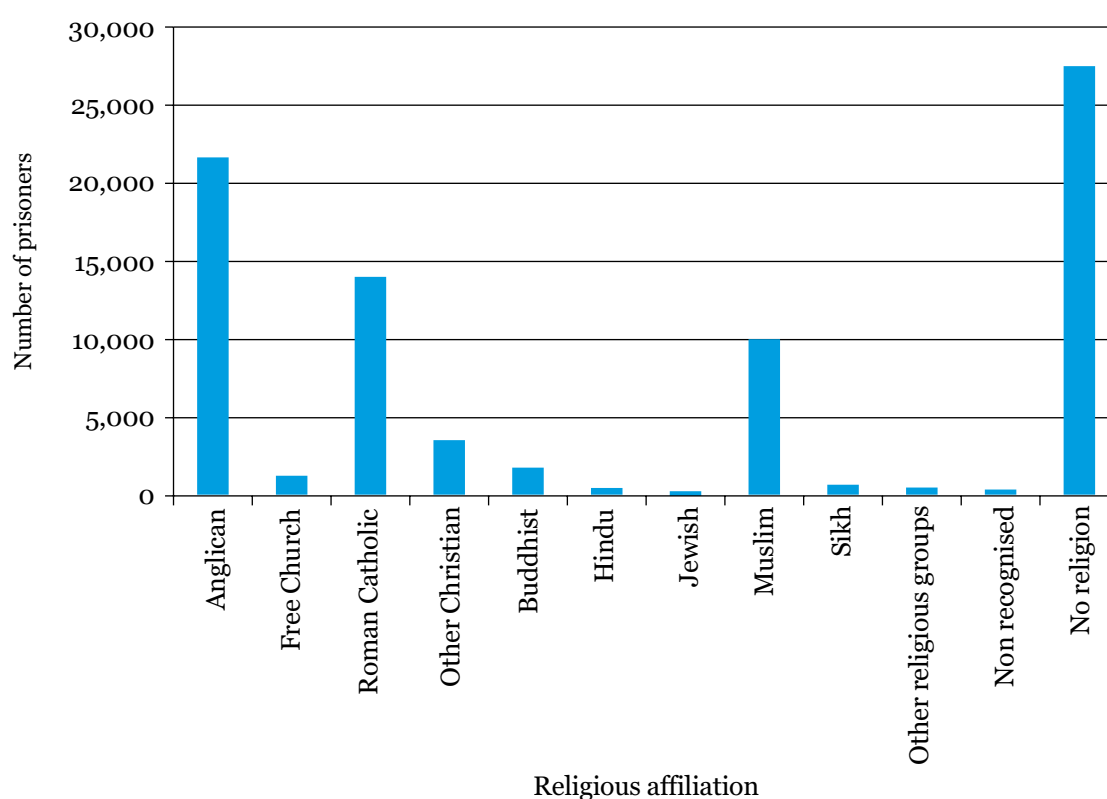
¹⁷⁹ Prison Reform Trust 2006, *Experiences of Minority Ethnic Employees in Prisons*. London: Prison Reform Trust.

¹⁸⁰ National Offender Management Service 2009. 'Muslim Prisoner Scoping Study' (unpublished).

¹⁸¹ HM Chief Inspector of Prisons 2010. *Muslim Prisoners experiences: a thematic review*. http://www.justice.gov.uk/inspection/hmi-prisons/docs/Muslim_prisoners_2010_rps.pdf, page 9.

¹⁸² National Offender Management Service, 2009.

Figure 7.3.4 Prison population by religious affiliation in England and Wales, 2008¹⁸³



Source: HM Inspectorate of Prisons 2010.

Prison conditions

The 2008 Race Review points out that while religious provision is made for Muslim inmates, that made for those from other minority religions is less consistent.¹⁸⁴

Moreover, an unpublished study by the National Offender Management Service (NOMS) highlights that Muslim male prisoners are more likely to be on the basic regime (i.e., without privileges) than non-Muslims – particularly if they are foreign nationals. However Muslim women are less likely than non-Muslim women to be on the basic regime.¹⁸⁵

Just under a quarter of Muslim prisoners responding to Inspectorate surveys say that they feel unsafe ‘at the moment’, and over a third say they have been victimised by a member of prison staff: both significantly higher than the findings for non-Muslims.¹⁸⁶

¹⁸³ HM Chief Inspector of Prisons 2010. Page 45.

¹⁸⁴ Ministry of Justice 2008b.

¹⁸⁵ National Offender Management Service 2009.

¹⁸⁶ HM Chief Inspector of Prisons for England and Wales 2009a.

Sexual orientation

There is a lack of reliable information on the experiences of lesbian, gay and bisexual offenders in Britain. However, Stonewall's study into the attitudes of LGB people towards the CJS – *Serves You Right* – found that 6 in 10 gay men (and half of lesbian women) think that they would be treated worse in prison if it was known that they were gay.¹⁸⁷

Transgender

There is evidence to suggest that some imprisoned transgender people have been convicted of theft, having stolen to raise the money required for surgery.¹⁸⁸ Where they have not received gender reassignment treatment transgender people may also be imprisoned with people of their birth sex, given that prison allocation is determined by gender, or may not receive ongoing treatment while in prison.¹⁸⁹

Foreign nationals

At present, 21% of women prisoners and 13% of men are foreign nationals:¹⁹⁰ overall, over 14% of the total prison population in England and Wales is made up of foreign nationals (compared to one-ninth of the UK population).^{191 192}

Box 7.3.4 Related issue: Asylum seekers in detention

The total number of immigration detainees in the UK has increased by nearly 70% from 1,545 in 2001 to 2,595 in 2009 (even though the number detained in prison establishments has not been included since June 2006). The majority of immigration detainees recorded since 2001 are adult men – 91% as at 31 December 2009: the majority are seeking asylum.

¹⁸⁷ Hunt, R. and Dick, S. 2008.

¹⁸⁸ Poole, L., Whittle, S. and Stephens, P. 2002. 'Working with Transgendered and Transsexual People as Offenders in the Probation Service', *Probation Journal*, 49: 227-232.

¹⁸⁹ Mitchell, M. and Howarth, C. 2009. *Trans research*. Research Report 27. Manchester: Equality and Human Rights Commission.

¹⁹⁰ Ministry of Justice, 2010b.

¹⁹¹ See Annual Population Survey tables below showing estimate population in the UK by nationality and most common nationalities in the UK. Population by Country of Birth and Nationality, October 2008 to September 2009. Available at: <http://www.statistics.gov.uk/StatBase/Product.asp?vlnk=15147&Pos=&ColRank=1&Rank=240> Table 1.1 calculated by adding UK and non-UK totals and then dividing by the non-UK figure.

¹⁹² HM Prison Service website. *Foreign National Prisoners*. Accessed 01/09/2010 http://www.hmprisonservice.gov.uk/adviceandsupport/prison_life/foreignnationalprisoners/

Box 7.3.4 Continued

Since recording of children in detention began in 2004, children have accounted for less than 2% of immigration detainees at each data recording date. As at 31st December 2009, there were no children recorded as being in detention (see Table 7.3.2, below). However, published management information suggests that 115 children entered detention and were held under Immigration Act powers in the second quarter 2010: of these, 50 children had entered between 6 May and 30 June.¹⁹³ The government has recently stated its intention to ‘minimise’ the detention of children.¹⁹⁴

Table 7.3.2 Immigration detainees by gender and age in the UK, 2001-2009¹⁹⁵

Total detainees held solely under Immigration Act powers ⁽¹⁾⁽²⁾⁽³⁾⁽⁴⁾					
Year	Gender		Of whom asylum seekers ⁽⁵⁾	Adults	Children ⁽⁶⁾
As at 31 December 2009	Men	2,350	1,630	2,350	-
	Women	245	140	245	-
	Total	2,595	1,770	2,595	-
As at 27 December 2008	Men	1,965	1,340	1,940	25
	Women	285	185	270	15
	Total	2,250	1,525	2,210	40
As at 29 December 2007	Men	1,820	1,255	1,805	20
	Women	275	200	255	15
	Total	2,095	1,455	2,060	35

Continued

¹⁹³ Hansard, 8 September 2010, column 569 and 570W: <http://www.publications.parliament.uk/pa/cm201011/cmhansrd/cm100908/text/100908w0002.htm#1009091000133>. The latest published information on children detained solely under Immigration Act powers relating to the second quarter 2010 are presented in Table 3.4 of Home Office, 2010, *Control of Immigration: Quarterly Statistical Summary, United Kingdom, April to June 2010*. Available at: <http://www.homeoffice.gov.uk/rds/immigration-asylum-stats.html>

¹⁹⁴ Hansard, 6 September 2010, Column 21: <http://www.publications.parliament.uk/pa/cm201011/cmhansrd/cm100906/debtext/100906-0001.htm>

¹⁹⁵ Home Office, 2009b, *Control of Immigration: Quarterly Statistical Summary, United Kingdom October – December 2009*. Available at: <http://rds.homeoffice.gov.uk/rds/pdfs10/immiq409.pdf> Accessed 02/09/2010.

Home Office 2009a. *Control of immigration: Statistics United Kingdom 2008*. Statistical Bulletin. Available at: <http://www.homeoffice.gov.uk/rds/pdfs09/hosb1409.pdf> Accessed 02/09/2010. Home Office 2008. Statistical Bulletin. *Control of immigration: Statistics United Kingdom 2007*. Available at: <http://www.homeoffice.gov.uk/rds/pdfs08/hosb1008.pdf> Accessed 02/09/2010.

Table 7.3.2 Continued

Total detainees held solely under Immigration Act powers ⁽¹⁾⁽²⁾⁽³⁾⁽⁴⁾					
Year	Gender		Of whom asylum seekers ⁽⁵⁾	Adults	Children ⁽⁶⁾
As at 30 September 2006 ⁽⁷⁾	Men	1,880	1,365	1,870	10
	Women	130	90	120	10
	Total	2,010	1,455	1,990	20
As at 31 December 2005	Men	1,670	1,245	1,655	15
	Women	280	205	265	20
	Total	1,950	1,450	1,920	30
As at 25 December 2004	Men	1,735	1,345	1,725	15
	Women	215	165	200	10
	Total	1,950	1,515	1,925	25
As at 27 December 2003	Men	1,455	1,165	••	••
	Women	155	120	••	••
	Total	1,615	1,285	••	••
As at 28 December 2002	Men	1,030	720	••	••
	Women	115	75	••	••
	Total	1,145	795	••	••
As at 29 December 2001	Men	1,375	1,145	••	••
	Women	170	135	••	••
	Total	1,545	1,280	••	••

¹⁹⁵ Continued:

Home Office 2007. *Control of Immigration: Statistics United Kingdom 2006*.

Available at:

<http://www.official-documents.gov.uk/document/cm71/7197/7197.pdf> Accessed 02/09/2010

Home Office 2006. *Control of immigration: Statistics United Kingdom 2005*.

Available at:

<http://www.official-documents.gov.uk/document/cm69/6904/6904.pdf>
Accessed 02/09/2010

Home Office 2005. *Asylum Statistics: 4th Quarter 2004 United Kingdom*.

Available at: <http://www.homeoffice.gov.uk/rds/pdfs05/asylumq404.pdf>

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<http://www.archive2.official-documents.co.uk/document/cm63/6363/6363.pdf>

Home Office 2003. *Asylum Statistics: 4th Quarter 2002 United Kingdom*.

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Home Office 2002. *Control of Immigration: Statistics United Kingdom 2001*.

Available at: <http://www.homeoffice.gov.uk/rds/pdfs2/hosb1102.pdf> Accessed 02/09/2010

Table 7.3.2 Continued

Source: Home Office Control of Immigration statistics, 2009.

Notes:

1. Figures rounded to the nearest 5 and may not sum to the totals shown because of independent rounding.
2. Due to changes in working practices, figures prior to September 2006 include persons detained in Prison Service Establishments and are not directly comparable with figures collated after this date, collated only from Immigration Removal Centres and Short term holding facilities.
3. •• Figures not available.
4. Figures include dependants.
5. Persons detained under Immigration Act powers who are recorded as having sought asylum at some stage.
6. Children: People recorded as being under 18. These figures will overstate if any applicants aged 18 or over claim to be younger.
7. Figures for detainees as at the end of December 2006 are not available.

Asylum seekers are particularly at risk of having inadequate legal protection and support.¹⁹⁶ Since 2004, legal aid funding for asylum and immigration cases has been restricted, limiting access to legal advice. Lawyers were only paid to work for fixed hours per case, with any additional work needing permission from the Legal Services Commission: there is now a fixed fee system. However legal experts still say this is too low. Many asylum seekers now represent themselves at tribunals (often without an interpreter). This has contributed to many of the poor decisions resulting in only 3% of asylum applications being granted refugee status in 2004.

The recent Independent Asylum Commission report identified a ‘culture of disbelief’ that pervades much of the policy and decision making of the last decade, which has made it increasingly difficult for asylum seekers to receive a fair hearing.¹⁹⁷

This systematic failure has led to a large backlog of asylum cases – estimated to have reached 450,000 in 2006¹⁹⁸ – although the Home Office states that it is making good progress and is on track to clear this backlog by June 2011 or earlier.¹⁹⁹

¹⁹⁶ The Children’s Society 2008. *Living on the edge of despair: destitution amongst asylum seeking and refugee children*. London: The Children’s Society.

¹⁹⁷ Asylum and Destitution Working Group 2008. *Asylum Matters: Restoring Trust in the UK Asylum System*. A Report by the Asylum and Destitution Working Group. London: Centre for Social Justice.

¹⁹⁸ Hansard, 6 September 2010, Column 15: <http://www.publications.parliament.uk/pa/cm201011/cmhansrd/cm100906/debtext/100906-0001.htm>

¹⁹⁹ Information supplied via private correspondence with the Home Office and UK Border Agency.

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Chapter 8:

Physical security

Summary

Violent crime and sexual assault affect a small proportion of the population. Most of us do not greatly fear becoming victims of crime. Some groups, however, are still more likely than average to experience physical or sexual crime, and are more worried about the possibility of becoming victims.

Men in general, and young men in particular, are more likely to experience physical assault than women. However, women are much more likely to be victims of rape than men, and are more likely to experience domestic violence or partner abuse. They are also more likely to experience forced marriage and violence at the hands of relatives in so-called 'honour' attacks; they are uniquely likely to experience female genital mutilation (FGM).

Young people are disproportionately likely to be victims of violence, with 16-24 year-olds three times more likely than average to experience physical assault. Older people show high levels of concern about violent crime, but evidence suggests that they are less likely on average to experience it. However, older people who rely on carers and relatives for support and who experience domestic abuse at their hands may be particularly vulnerable to repeat occurrences.

Racist and religiously aggravated attacks are a persistent phenomenon in British life. People from ethnic minority backgrounds are roughly twice as likely as White people to report being worried about violent crime. People who are not Christian are roughly 10 times more likely to report being attacked or harassed because of their faith than Christian people.

Attacks directed against disabled and lesbian, gay or bisexual and transgender (LGBT) people are now being recognised as specific forms of hate crime and this helps to encourage victims to report such incidents and ensures that they are dealt with appropriately. The figures paint a stark picture, though, suggesting that significant proportions of people among these groups have experienced attacks – some of a very serious nature. There is evidence to suggest that a large proportion of victims of hate crime are still reluctant to report such attacks.

Lesbian, gay and bisexual (LGB) people are more likely than average to have experienced sexual assault and domestic violence during their lifetimes. They are also more likely than average to be worried about violent crime. Similarly, the evidence suggests that disabled people are more likely than average to experience sexual and domestic violence, and have above average fear of being the victim of attack.

Finally, the evidence suggests a strong association between socio-economic background and experience of crime. People who are unemployed are twice as likely to experience violent crime as people who are employed. There are also differences in relation to educational background: people who hold degrees are less likely to experience violence than people whose highest qualifications are O levels or GCSEs; and people living in deprived areas and social housing are more likely than average to fear crime.

Introduction

Physical security means being safe and feeling safe. It means being able to go about daily life free from harm, and free from the fear of harm.

The state has a positive duty to protect people by punishing crime and preventing it, as well as by rehabilitating offenders. Britain has pioneered many elements of modern criminal justice and influenced policing practice across the world. Historically, however, the criminal justice system (CJS) has offered greater protections to some groups than others. As little as 50 years ago it was responsible for enforcing laws that discriminated against some minority groups (such as gay men). Meanwhile, victims of certain types of crime including rape, domestic violence and targeted violence (such as racist attacks), have not always had confidence that the CJS would deal with their concerns effectively. In some cases, confidence has been so low that many have chosen not to report serious crime.

It is comparatively recently that the state has taken measures in law and in policy to attempt to address the CJS's historic failures to meet the needs of vulnerable and marginalised groups.

The link between experience of crime and perception of crime is not always straightforward. Yet fears and perceptions represent a problem in and of themselves, especially when they have the result of making some vulnerable people reluctant to go about their day-to-day business, such as going to the shops alone, or walking in the dark.

This chapter draws on three indicators identified by the Equality Measurement Framework (EMF) as important aspects of physical security:

Indicators

1. Crimes against the person
2. Targeted violence
3. Fear of crime

We examine three key measures under **crimes against the person**: the percentage of people reporting that they have been victims of violent crime, the percentage of people reporting that they have been victims of sexual assault (focusing on rape), and the percentage of people reporting that they have been victims of domestic violence and abuse or partner abuse.

Under **targeted violence**, we show the percentage of people reporting that they have been victims of violence either thought to be, or which might have been, motivated by their ethnicity, religion, age, disability, sexual orientation or transgender status.

For **fear of crime**, we give the percentage of people reporting that they are worried about physical and sexual violence, and the percentage who report that they feel unsafe alone at home or in the local area.

As in the rest of Part II, this chapter explores what we know about these indicators and what the evidence tells us about the experiences of different groups.

8.1 What we know about crimes against the person

Measures:

Violent crime – Percentage that are victims of violent crime

Sexual violence – Percentage that are victims of sexual violence, including attempts (focusing on rape)

Domestic violence and partner abuse – Percentage that are victims of domestic violence and partner abuse

How these measures work:

Violent crime

Data for this measure come from the face-to-face module of the 2009/10 British Crime Survey (covering England and Wales) and from the 2008/09 Scottish Crime and Justice Survey. There are methodological differences between the British Crime Survey and Scottish Crime and Justice Survey which means that data on violent crime are not directly comparable.¹

Data from the British Crime Survey can be disaggregated by gender, age (16+), socio-economic factors and limiting long-term illness (LLTI) or disability. Disaggregation is possible by ethnicity and by religion or belief – often only by pooling data as the numbers are generally too small to yield statistically significant results. Data from the British Crime Survey relating to this measure cannot be disaggregated to reflect the experiences of LGB or transgender people. There is limited related literature for this measure on groups defined by sexual orientation and transgender status. They are therefore not covered in this section.

Data from the Scottish Crime and Justice Survey can be disaggregated by gender, age (16+). Respondents' postcodes are matched to the Scottish Index of Multiple Deprivation, which we use as a proxy for socio-economic status.

¹ The Scottish Crime and Justice Survey prioritises coding a crime as assault over other crimes such as damage or theft when both crime types occur in a single incident. This may account for some of the difference between Scottish figures and those for England and Wales.

Sexual violence

The sources for this measure are the British Crime Survey and Scottish Crime and Justice Survey self-completion modules: these provide a more accurate reflection of the levels of domestic and partner abuse than do the face-to-face survey data.² We focus here on rape, which – as we describe in more detail below – is one of the most persistent forms of Violence Against Women and Girls.

While the British Crime Survey allows us to illustrate trends over time, there are no comparable Scottish Crime and Justice Survey data: instead, we use the latter to illustrate current estimated levels of sexual abuse in Scotland.³

Both self-completion modules are administered only to those aged 16 to 59, meaning that we are missing information about elder and child abuse, although we use supplementary sources of information where possible.

The British Crime Survey disaggregates by gender, and contains information about the experiences of lesbian, gay and bisexual (LGB) people, but due to the small number of respondents disclosing a non-heterosexual identity, this comes with a health warning.⁴

² See discussion in Walby, S., Armstrong, J. and Strid, S. 2010. *Physical and Legal Security and the Criminal Justice System: A Review of Inequalities*. UNESCO Chair in Gender Research Group Lancaster University. This paper is available on the Equality and Human Rights Commission's Triennial Review web pages.

³ MacLeod, P., Kinver, A., Page, L., Iliasov, A. and Williams, R. 2009b. *Scottish Crime and Justice Survey 2008-09, Sexual Victimisation and Stalking*. Table A1.1. Edinburgh: Scottish Government. Figure 2.2. Page 9.

⁴ Smith, K., Flatley, J., Coleman, K., Osborne, S., Kaiza, P., and Roe, S., 2010. *Homicides, Firearm Offences and Intimate Violence 2008/09: Supplementary volume 2 to Crime in England and Wales 2008/09*. London: Home Office. See page 62. 'Since April 2007, the self-completion section of the British Crime Survey questionnaire has included a question asking respondents about their sexual orientation. This makes it possible to produce figures for experience of intimate violence by sexual orientation... Around 500 out of the 25,000 self-completion respondents in each year identified themselves as gay, lesbian or bisexual. Due to this relatively small number, data from the 2007/08 and 2008/09 British Crime Survey have been combined for the purposes of analysis. These data show that 94% of adults aged 16 to 59 identified themselves as heterosexual/straight, 2% as lesbian/gay or bisexual and a further 4% selected either the 'do not know' or 'do not want to answer' response options... The small numbers of respondents identifying themselves as gay/lesbian or bisexual, combined with the significant proportions of respondents unable or refusing to answer the question on sexual orientation means that figures on incidence of domestic abuse by sexual orientation should be treated with caution.'

We draw on police figures to identify levels of police recorded rape affecting people aged under-16. In addition, we draw on preliminary analysis of 2007/08 British Crime Survey data for the Equality Measurement Framework (EMF) to highlight socio-economic and disability related differences.⁵

The Scottish Crime and Justice Survey also disaggregates by gender and age, and matches respondents' postcodes to the Scottish Index of Multiple Deprivation: we use these data as a proxy for socio-economic status.

Domestic violence and abuse (partner abuse in Scotland)

Data for this measure are derived from the self-completion modules of both surveys (as discussed immediately above).

No comparisons can be made between the survey data contained in the British Crime Survey and the Scottish Crime and Justice Survey, as they are measuring different things.

The British Crime Survey self-completion module asks about partner and family abuse (including emotional, financial and sexual abuse, and the use of threats or force). We also draw on the face-to-face British Crime Survey for information about domestic violence.

⁵ Alkire, S., Bastagli, F., Burchardt, T., Clark, D., Holder, H., Ibrahim, S., Munoz, M., Terrazas, P., Tsang, T., and Vizard, P., 2009. *Developing the Equality Measurement Framework: selecting the indicators*. Research Report 31. Manchester: Equality and Human Rights Commission.

In the development of the Equality Measurement Framework indicators, the technical phase was to check sample size rather than generate final data analysis tables, so these are preliminary results for group means and the significance of the variations in group means, as well as a report on sample size. Significance tests are reported at the 95 per cent level. A series of cross-checks are required at the next stage of the development of the Equality Measurement Framework before final data tables can be produced.

The Scottish Crime and Justice Survey asks about partner abuse only, but lists a broader range of physical and emotional forms.

The British Crime Survey data on domestic violence and abuse have been disaggregated by gender, age, socio-economic status, LLTI/disability, ethnicity and sexual orientation, but due to the small number of respondents disclosing a non-heterosexual identity, this comes with a health warning.⁶

The Scottish Crime and Justice Survey also disaggregates by gender and age, and matches respondents' postcodes to the Scottish Index of Multiple Deprivation: we use these data as a proxy for socio-economic status.

In addition, we have drawn on literature relating to the experiences of victims of forced marriage, trafficking, female genital mutilation (FGM) and 'honour' crimes. We have also consulted literature about the experiences of children and older people; disabled people; ethnic and religious minorities including asylum seekers and Gypsies and Travellers; LGB people; and transgender people in relation to domestic violence and abuse.

⁶ Smith, K. *et al.* 2010. See footnote 4.

Overview

Violent crime is heavily concentrated among young men. This does not mean that violence is only an issue for young men: some other groups are particularly vulnerable to sexual assault and hate crimes.

The age concentration explains patterns of crime recorded in national surveys: Mixed Race adults are disproportionately young⁷ and they have more than average levels of violent crime committed against them.

However, ethnicity is not independently associated with the risk of general victimisation: other factors – like age, gender and socio-economic status – are.⁸

Although levels of recorded sexual and domestic violence and abuse are falling, these forms of violence continue to affect large sections of the female population. Over 1 in 4 women and around 1 in 6 men have experienced domestic abuse since reaching the age of 16 in England and Wales. Meanwhile, 1 in 7 women in Scotland and 1 in 9 men have experienced physical partner abuse since reaching the age of 16.

In England and Wales, around eight times as many women as men say that they have been raped (including attempts) since they were 16.⁹ In some communities, women are particularly vulnerable to crimes such as ‘honour’ killings, sexual violence and human trafficking.

What we know about the overall situation and trends

Violent crime

The number of violent incidents reported in the British Crime Survey fell by half in England and Wales between 1995 and 2009/10. There were 2 million fewer police-reported incidents and around 800,000 fewer victims.¹⁰ Meanwhile in Scotland, the number of violent incidents almost doubled in this period – from nearly 160,000 incidents in 1995 to nearly 320,000 in 2008/09.¹¹

⁷ Sources: Census, April 2001, Office for National Statistics; Census, April 2001, General Register Office for Scotland.

⁸ Nicholas, S., Kershaw, C. and Walker, A. (eds.) 2007. *Crime in England and Wales 2006/07*. Home Office Statistical Bulletin 12/06. London: Home Office.

⁹ Smith, K., *et al.* 2010. Table 3.01.

¹⁰ Flatley, J., Kershaw, C., Smith, K., Chaplin, R., and Moon, D., 2010. *Crime in England and Wales 2009/10: Findings from the British Crime Survey and police recorded crime*. London: Home Office. Table 2.03, and page 45.

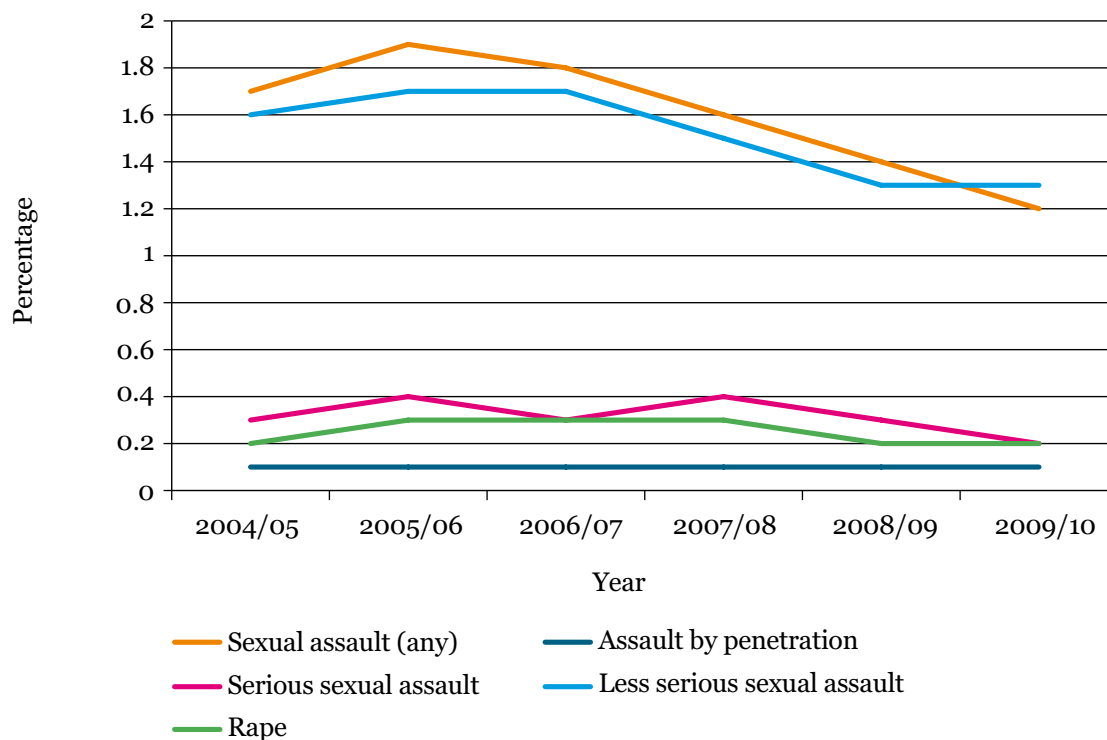
¹¹ MacLeod, P., Page, L., Kinver, A., Iliasov, A., Littlewood, M. and Williams, R. 2009c. *Scottish Crime and Justice Survey: First Findings*. Scottish Government Social Research. Table A1.2.

It is estimated that the incidence rate for assault is higher in Scotland than in England and Wales, although the data are not directly comparable: in 2008/09, the Scottish Crime and Justice Survey calculated 698 assaults per 10,000 adults while the rate calculated by the British Crime Survey was 417 per 10,000 adults.¹² Around 30% of crime as measured by the Scottish Crime and Justice Survey in 2008/09 was violent crime compared with 20% of crime measured by the British Crime Survey in England and Wales in the same period.¹³

Sexual assault (focusing on rape)

It appears that overall levels of sexual assault in England and Wales have fallen (see Figure 8.1.1, below).

Figure 8.1.1 Percentage experiencing sexual assault in the last year in England and Wales, 2004/05-2009/10¹⁴



Source: British Crime Survey, 2009/10.

Notes:

1. The fall in less serious sexual assault since 2004/05 is statistically significant – as is the drop in levels of sexual assault overall. The other changes (in levels of rape and serious sexual assault) are not.
2. The levels measured against each crime include attempts.

¹² MacLeod, P. *et al.* 2009c. Figure 2.5.

¹³ MacLeod, P. *et al.* 2009c. Pages 2-3.

¹⁴ Flatley, J. *et al.* 2010. Table 3.16.

There has been no significant fall in the level of rape or serious sexual assault recorded in the British Crime Survey since 2004/05. However, there has been a rise in the number of rapes reported to the police (see Chapter 7: Legal security).¹⁵ The decline overall in levels of sexual assault can be attributed to a drop in the level of ‘less serious sexual assault’ which forms the majority of cases recorded in by the British Crime Survey.

For the rest of this section, therefore, we focus primarily on rape (including attempted rape).

Domestic violence and abuse, and partner abuse

Overall, levels of domestic abuse in England and Wales have fallen significantly since 2004/05 when it affected 6% of adults: in 2009/10, domestic abuse affected almost 5%.¹⁶ However, there is a smaller rate of decline in domestic abuse measured in the self-completion data and there has been a rise in the number of cases referred to the Crown Prosecution Service – see Chapter 7: Legal security. Moreover, there is a link between partner violence and homicide (see Chapter 6: Life).

Domestic violence is associated with a higher rate of repeat-victimisation than any other kind of violent or acquisitive crime: in 2009/10, three-quarters (76%) of all incidents of domestic violence in England and Wales were repeat offences.¹⁷ Almost half (47%) of victims experienced domestic violence on more than one occasion between 2009 and 2010, compared to 31% of victims of acquaintance violence and 16% of victims of stranger violence.¹⁸

Levels of domestic abuse (by family and partners including emotional, financial and sexual abuse, and the use of threats or force) recorded in the British Crime Survey have fallen since 2004/05 (see Figure 8.1.2, below).¹⁹

¹⁵ This may – in part – reflect changing counting rules and the National Crime Recording Standard (NCRS) in 1998 and 2002 respectively.

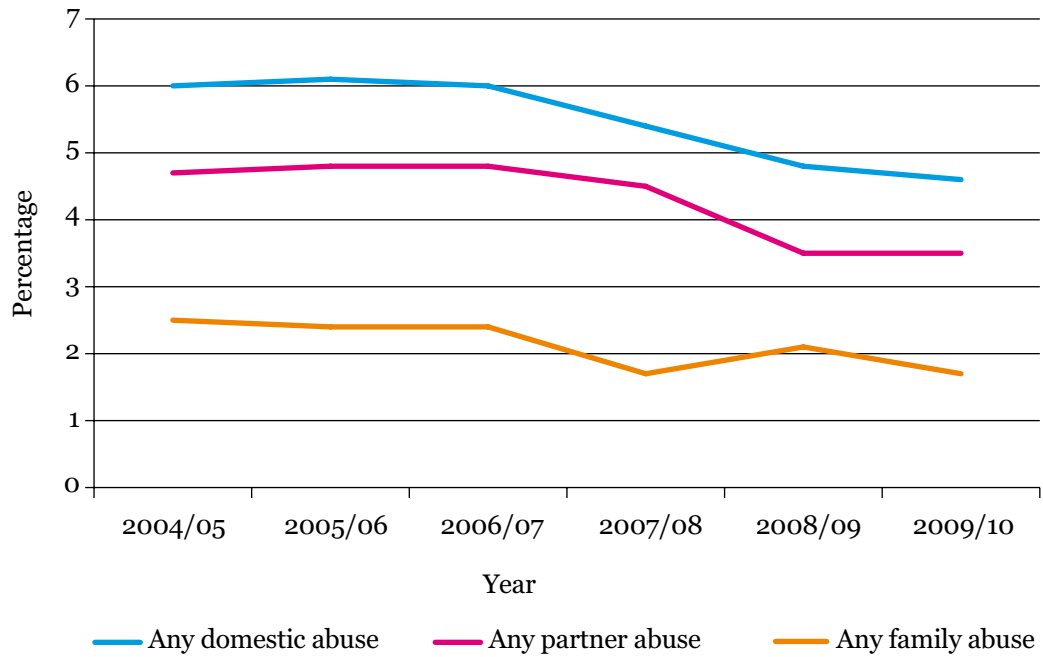
¹⁶ Flatley, J. *et al.* 2010. Table 3.16.

¹⁷ Flatley, J. *et al.* 2010. Page 24.

¹⁸ Flatley, J. *et al.* 2010. 2010. Figure 2.10.

¹⁹ Flatley, J. *et al.* 2010. Table 3.16.

Figure 8.1.2 Percentage experiencing domestic abuse in the last year in England and Wales, 2004/05-2009/10²⁰



Source: British Crime Survey, 2009/10.

Notes:

1. The decline in each kind of domestic abuse since 2004/05 is statistically significant.
2. The decline in family abuse between 2008/09 and 2009/10 is statistically significant.
3. 'Partner abuse (any)' and 'Family abuse (any)' do not include domestic violence. They include threats, force, sexual assault and stalking.

²⁰ Flatley, J. *et al.* 2010. Table 3.01.

What we know about the situation for different groups

Gender

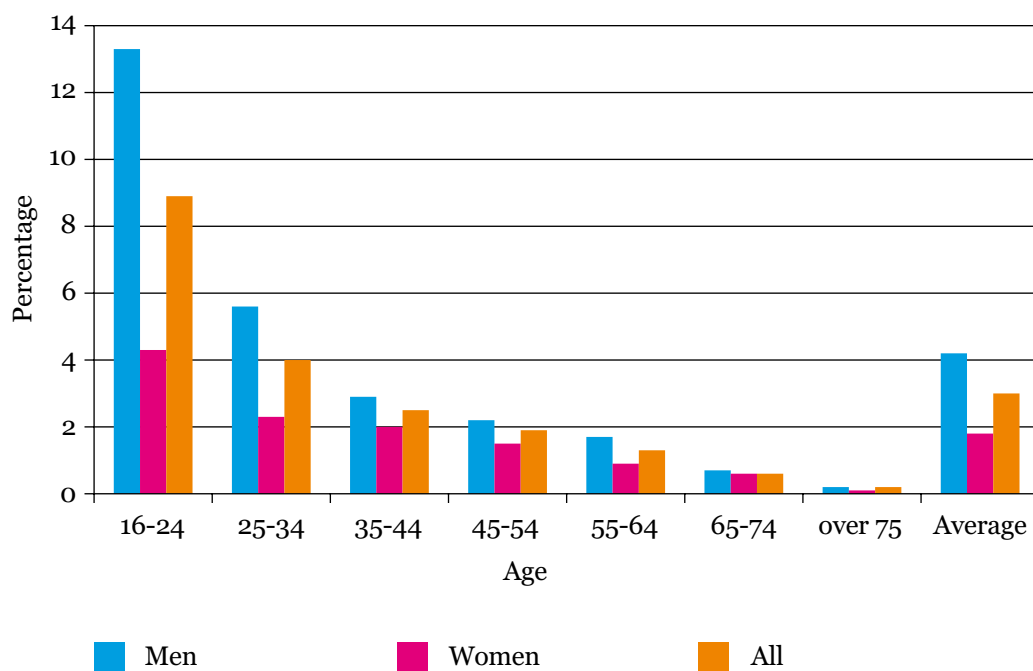
Violent crime

Levels of violent crime victimisation vary greatly by gender and age.

In England and Wales, men are twice as likely to experience violence as women. In 2009/10, the proportions affected were 4% and 2%, respectively (see Figure 8.1.3, below) – men were victims in two-thirds (67%) of violent incidents in 2009/10 – women in one-third (33%).²¹

Men living in England and Wales are more likely than women to be attacked by strangers (79% of stranger violence affected men in 2009/10; 21% affected women): they are also more likely to be attacked by acquaintances (66% of acquaintance violence affected men in 2009/10; 34% affected women).²² Women are more likely than men to be attacked in a domestic context (see section on domestic violence, below).

Figure 8.1.3 Percentage experiencing violent crime by gender and age in England and Wales, 2009/10²³



Source: British Crime Survey, 2009/10.

²¹ Flatley, J. *et al.* 2010. Table 3.01.

²² Flatley, J. *et al.* 2010. Table 3.01.

²³ Flatley, J. *et al.* 2010. Table 3.05.

Similar patterns are apparent in Scotland: men were twice as likely to experience violence as women in 2008/09 (the Scottish Crime and Justice Survey recorded levels of 6% and 3%, respectively).

Rape

In England and Wales, women are significantly more likely than men to have been raped (levels for women and men (respectively) recorded in the British Crime Survey in 2009/10 were 0.4% and 0.1% attempts in the previous 12 months, and 4% and 0.5% attempts since reaching the age of 16).²⁴

Similarly, in Scotland, significantly more women than men have been forced to have sexual intercourse since reaching the age of 16 (3% and 0%, respectively).²⁵

Domestic violence and abuse and partner abuse

Women were the victims of just under three-quarters (73%) of the domestic violence recorded in the 2009/10 British Crime Survey.²⁶

Over 1 in 4 women (27%) and around one in six men (15%) have experienced some form of domestic abuse since reaching the age of 16 in England and Wales.²⁷

Figure 8.1.4 (below) highlights that significantly more women than men report experiencing partner abuse in the last year in England and Wales; the gender differences in relation to family abuse are less marked.

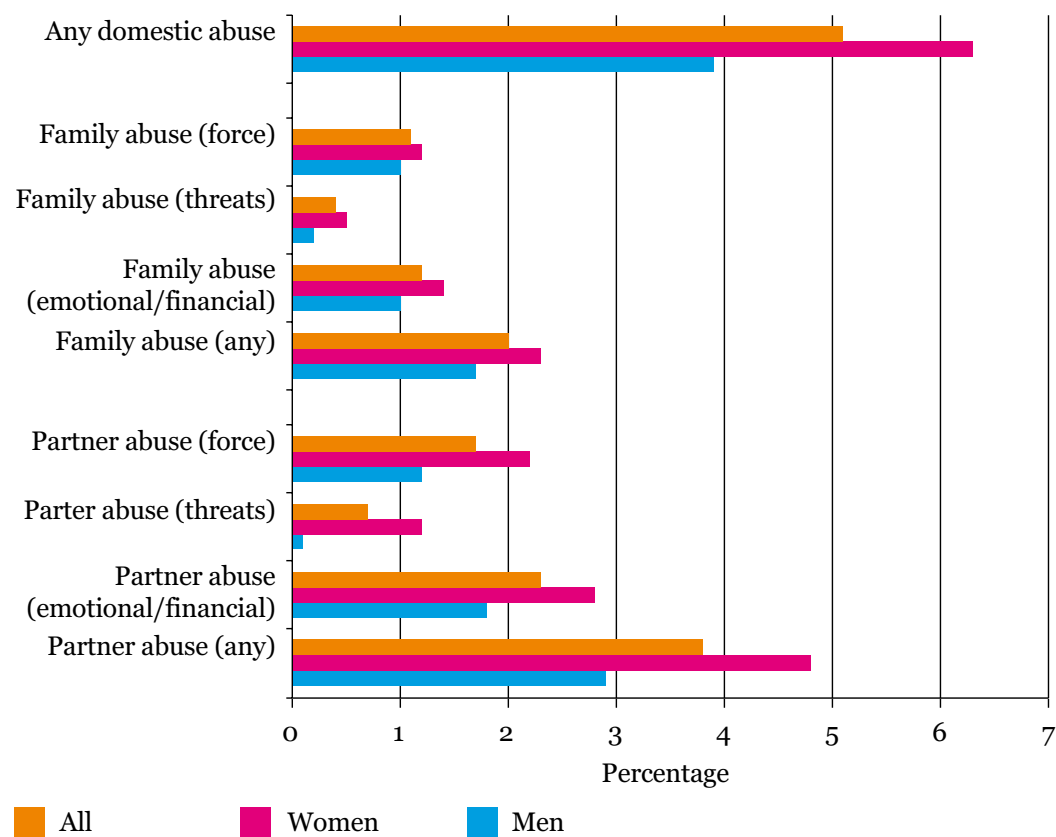
²⁴ Smith, K. *et al.* 2010. Table 3.01.

²⁵ MacLeod, P. *et al.* 2009b. Table 4.1.

²⁶ Flatley, J. *et al.* 2010. Table 3.01. Note, however, that these data are from the full survey and not the self-completion module, and therefore are less reliable.

²⁷ Smith, K. *et al.* 2010. Table 3.01.

Figure 8.1.4 Percentage experiencing domestic abuse in the last year by gender in England and Wales, 2009/10²⁸



Source: British Crime Survey, 2009/10.

Notes:

1. 'Partner abuse (any)' does not include domestic violence. It includes threats, force, sexual assault and stalking – as does 'Family abuse (any)'.

According to the 2008/09 Scottish Crime and Justice Survey, around 1 in 7 women (15%) and around 1 in 9 men (11%) in Scotland have experienced physical forms of partner abuse since reaching the age of 16. Around 1 in 5 women (19%) and 1 in 9 men (11%) have experienced psychological abuse since reaching the age of 16.²⁹

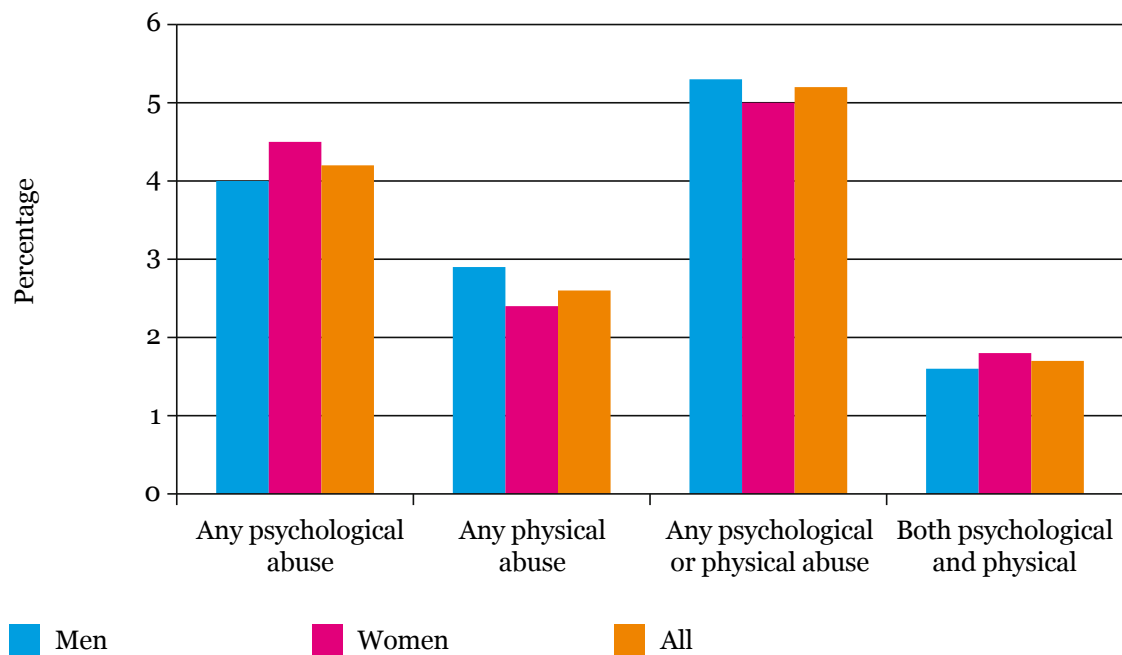
As Figure 8.1.5 (below) highlights, men and women in Scotland experienced similar levels of partner abuse overall in 2008/09, with men slightly more likely than women to report having experienced physical abuse.

²⁸ Smith, K. *et al.* 2010. Table 3.16.

²⁹ MacLeod, P., Kinver, A., Page, L., Iliasov, A. and Williams, R., 2009a. *2008/09 Scottish Crime and Justice Survey: Partner abuse*. Scottish Government Social Research.

However, in relation to experiences of abuse since reaching the age of 16, men are most likely to say that they have had an object thrown at them (57%, compared to 46% of women): women are more likely to say that they have experienced all other forms of physical abuse including choking or strangulation (21%, compared to 3% of men), forced sexual intercourse (20%, compared to 3%), and being pushed or held down (47%, compared to 11% of men).³⁰ This difference may be reflected in the figures relating to experiences in the last year.

Figure 8.1.5 Percentage experiencing partner abuse in the last year by gender in Scotland, 2008/09³¹



Source: Crime and Justice Survey, 2008/09.

Notes:

1. Partner abuse as measured by the Scottish Crime and Justice Survey in 2008-09 is any psychological or physical abuse undertaken against a man or a woman carried out by a male or female partner or ex-partner (including any boyfriend, girlfriend, husband, wife or civil partner).
2. Psychological partner abuse includes emotional, financial and other forms of psychological abuse.
3. Physical partner abuse includes physical and sexual violence, but also the use of force or having objects thrown at them.
4. Experienced any psychological or physical abuse means that a respondent has experienced at least one of the forms of psychological or at least one of the forms of physical partner abuse listed in the questions.
5. Experienced both psychological and physical abuse means that a respondent has experienced at least one of the forms of psychological and at least one of the forms of physical partner abuse listed in the questions.

³⁰ MacLeod, P. *et al.* 2009a. Page 18.

³¹ MacLeod, P. *et al.* 2009a. Table A1.2.

The data in Figures 8.1.4 and 8.1.5 suggest that in all three nations, psychological forms of abuse are the most common. Moreover, the Scottish data suggest that physical abuse is often accompanied by psychological abuse

Box 8.1.1 Related issues: ‘Honour’ killings, Female Genital Mutilation, forced marriage and trafficking

Women are disproportionately subject to ‘honour’ killings, forced marriage and trafficking, which often occur alongside other kinds of sexual and domestic violence and abuse: they are uniquely affected by Female Genital Mutilation (FGM).

There is no national survey data, given the dangers of disclosure to those who are victims.³² Levels of prosecution and conviction are also low for similar reasons (see Chapter 7: Legal security).

In place of national survey data, a range of estimates based on numbers from academic research, the voluntary sector, government reports and specialised governmental units is summarised by Walby *et al.* 2010.³³

In 2008 an estimated 5000–8000 cases of either actual or threatened forced marriage were reported in England alone, according to a data collection exercise within 10 Local Authorities commissioned by the former Department for Children Schools and Families. The majority originated from within Asian communities (97%), with forced marriage found to affect Pakistani families in particular (72%). The overwhelming majority of cases involved female victims (96%), but the report notes that this might reflect the lack of services available to male victims in the agencies involved. Of the reported cases, 41% involved children aged under 18 (14% were under 16 and 26% were aged 16-17), 40% involved adults aged 18-23 and 20% involved adults aged 24 or over.³⁴ There is growing evidence of a rise in forced/sham marriages among LGB people.³⁵

³² Home Office 2009. *Together we can end violence against women and children*. London: Home Office.

³³ Walby, S. *et al.* 2010. See Table 4.18.

³⁴ Kazimirski, A. *et al.* 2009. *Forced Marriage – Prevalence and Service Response*. Department for Children, Schools and Families Research Report 128. Note, figures do not add up to 100% due to rounding.

³⁵ A leaflet has been produced by the Forced Marriage Unit to help gay and lesbian people facing forced marriage in the UK. Available at: <http://www.fco.gov.uk/resources/en/pdf/foced-marriage-lgbt>.

Box 8.1.1 Continued

Where a forced marriage has taken place, courts can make orders to protect the victim and help remove them from that situation.³⁶ Table 8.1.1 below shows that the highest number of protection order applications is made for children.

Table 8.1.1 Forced marriage protection order applications made since implementation in England and Wales, November 2008 – end of October 2009³⁷

Location	Total applications ³	Adult victims	Child victims	Third party applicants	Other applicants ¹	Outside jurisdiction ²
England and Wales	83	18	39	15	11	13

Source: Ministry of Justice, 2009.

Notes:

1. This may include cases where courts have noted third party applications under 'other'.
2. This category is intended to capture those applications made while the Person To Be Protected (PTBP) is out of the UK but some courts may have recorded cases that have come from out of their local area.
3. This figure does not include 'Outside jurisdiction'.

Refugee women are more affected by violence against women than any other women's population in the world.³⁸ Large numbers of refugees report suffering physical and sexual violence before, during and after their journey to the UK – the risk is heightened among those who are unable to access the limited available support.³⁹

³⁶ The Forced Marriage (Civil Protection) Act 2007 came into force on 25 November 2008. The Act enables family courts to make Forced Marriage Protection Orders to protect someone from being forced into marriage. An order can also be made to protect someone who has already been forced into marriage, to help remove them from the situation.

³⁷ Ministry of Justice, 2009a. *One year on: the initial impact of the Forced Marriage (Civil Protection) Act 2007 in its first year of operation*. Available at: <http://www.justice.gov.uk/publications/docs/one-year-on-forced-marriage-act.pdf> Accessed 25/08/2010 Table 1.

³⁸ The 'Stop Violence Against Women' website gives evidence for the heightened levels of violence against refugee women, and is often cited by the UN, UNHCR, Human Rights Watch, and World Health Organisation. See http://www.stopvaw.org/Sexual_Assault_Against_Refugees.html.

³⁹ See Refugee Council 2009. *The Vulnerable Women's Project: Refugee and asylum seeking women affected by rape or sexual violence; a literature review*. London: Refugee Council.

Age

Violent crime

New figures from the British Crime Survey experimental children's module show that though there are difficulties in interpreting what should be counted as a 'crime' in the context of children, in general they are at higher risk of crime than adults; and they are at highest risk of violence, though much of it does not result in injury. The experimental statistics also show that children frequently do not interpret as criminal offences incidents of which they may be counted as victims.⁴⁰

Figure 8.1.6, below, highlights that those aged between 16 and 24 experienced around three times the average levels of violence in 2009/10 (levels are 9% and 3%, respectively). Young men in this age-group experienced four times the average levels of violence (levels in 2009/10 were 13%) although this difference has not been tested for statistical significance.⁴¹

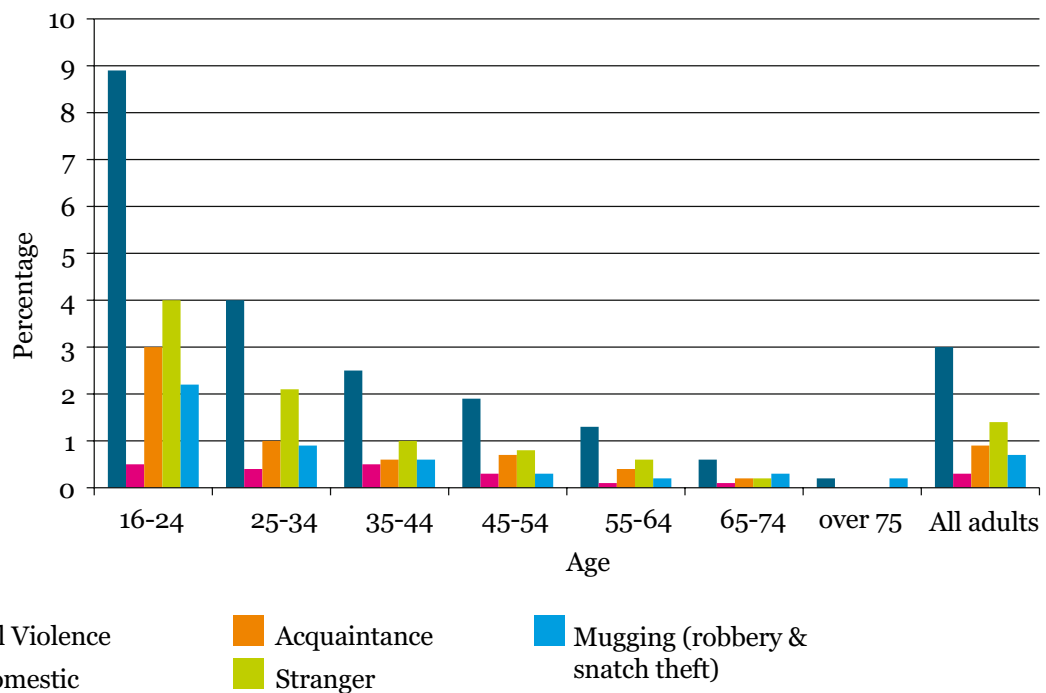
Proportionately fewer older people experience violent crime: women aged over 75 were much less likely to experience violence than the average person in 2009/10, although this has not been tested for statistical significance.⁴²

⁴⁰ Millard, B. and Flatley, J. 2010. *Experimental statistics on victimisation of children aged 10 to 15: Findings from the British Crime Survey for the year ending December 2009 England and Wales*. Home Office Statistical Bulletin 11/10. Page 11. The experimental children's module is the extension of the British Crime Survey to children aged 10 to 15 years resident in households in England and Wales.

⁴¹ Flatley, J. *et al.* 2010. Table 3.05.

⁴² Flatley, J. *et al.* 2010. Table 3.05.

Figure 8.1.6 Proportion of adults who were victims of violence in the last year by type of violence and age in England and Wales, 2009/10⁴³



Source: British Crime Survey, 2009/10.

Similar patterns are found in Scotland, where young men (aged 16-24) are over four times more likely than average to have experienced violence – levels in 2008/09 were 18% and 4%, respectively; women aged over 60 are around 14 times less likely – in 2008/09, 0.3% were affected.⁴⁴

Rape

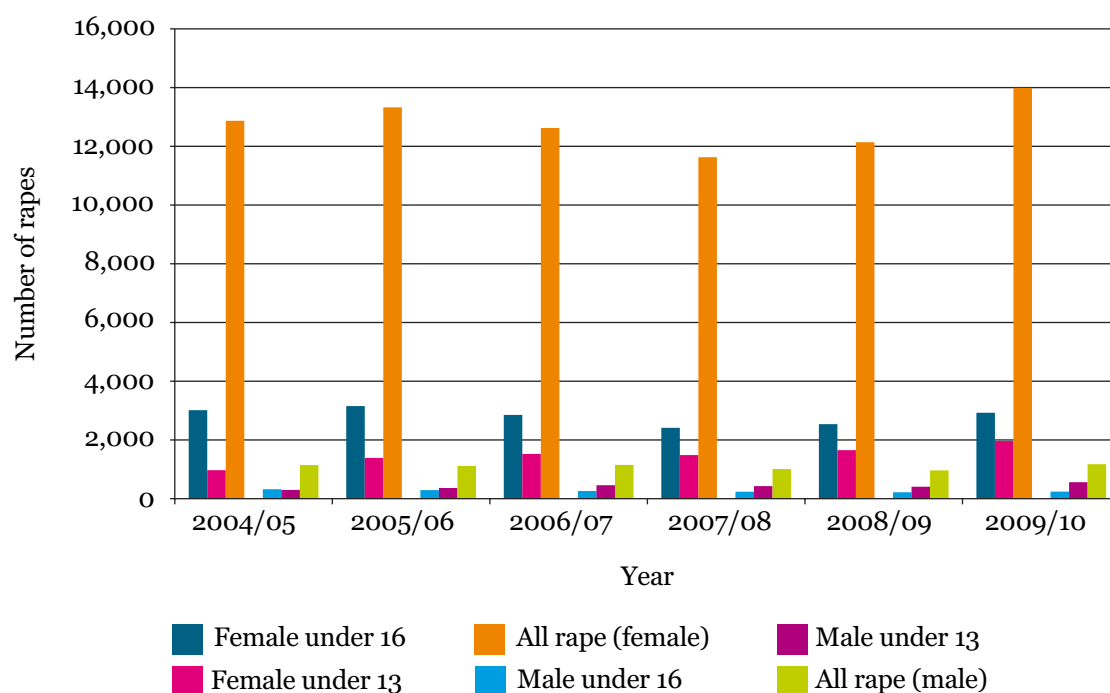
In England and Wales, the amount of police-recorded rape affecting girls aged under 13 years rose by over 70% in just 5 years to 2008/09 (see Figure 8.1.7, below). Such trends need to be interpreted with caution however, because crimes reported to the police are more susceptible to changes in reporting rates than other data presented in this chapter.

⁴³ Flatley, J. *et al.* 2010. Table 3.05.

⁴⁴ MacLeod, P. *et al.* 2009c. Table A1.6.

The percentage increase in levels of rape reported to the police between 2008/09 and 2009/10 was 15% for girls and 22% for boys (with a 38% increase in reported rapes of males under 13). Over a quarter of all rapes reported to the police in 2009/10 were committed against children aged under-16: over half of all male rapes reported to the police that year were of children aged under-16.⁴⁵

Figure 8.1.7 Recorded crime – rape of children by gender in England and Wales, 2004/05-2009/10⁴⁶



Source: British Crime Survey, 2009/10.

Notes:

1. The Sexual Offences Act 2003 introduced in May 2004 altered the definition and coverage of sexual offences.
2. The categories 'under 16' and 'under 13' are not overlapping in this Figure. They are added together in the text to provide a composite picture of the proportions of under 16s who have experienced rape.

⁴⁵ Flatley, J. *et al.* 2010. Table 2.04.

⁴⁶ Police statistics.

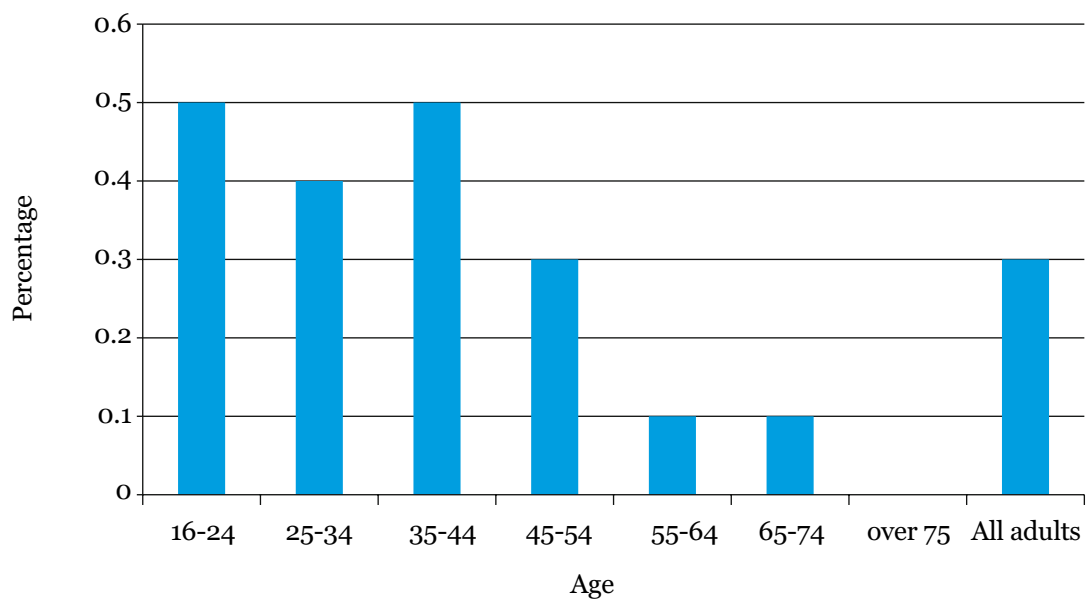
It is estimated that as many as 95% of cases of child sexual abuse go unreported to the police in the UK.⁴⁷ In a study into child abuse in the UK, the National Society for the Prevention of Cruelty to Children (NSPCC) found that 11% of the 2,869 children being surveyed had been sexually abused by an acquaintance; another 4% by parents, carers or other relatives; 4% by strangers.⁴⁸

In Scotland, those aged between 16 and 24 are disproportionately affected by all forms of sexual violence occurring ‘in the last year’.⁴⁹

Domestic violence and partner abuse

People aged under 44 are more at risk of domestic violence and partner abuse than people over 45 as Figures 8.1.8 and 8.1.9 (respectively) highlight. The difference has not been tested for statistical significance, however.

Figure 8.1.8 Proportion of adults who were victims of domestic violence in the last year by age in England and Wales, 2009/10⁵⁰



Source: British Crime Survey, 2009/10.

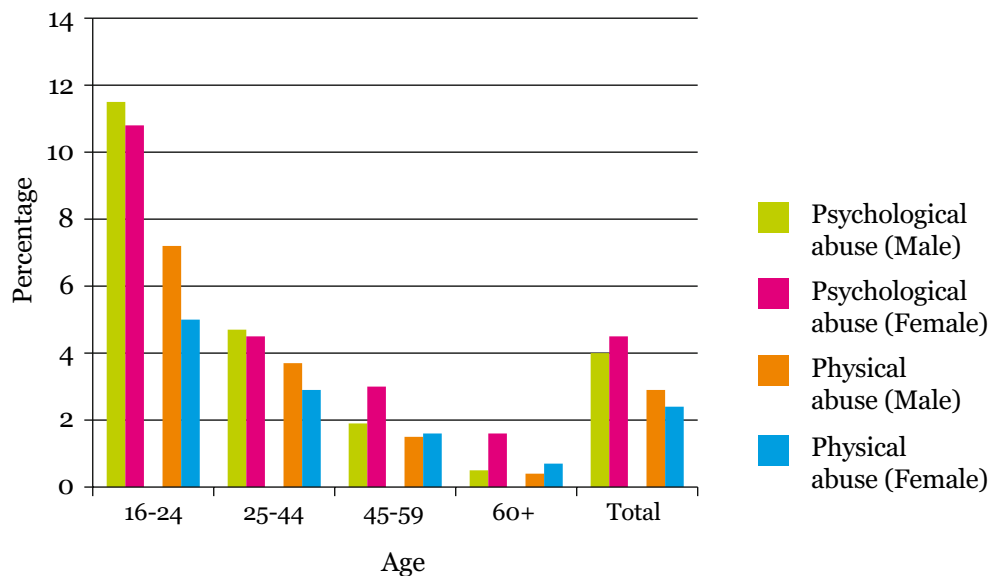
⁴⁷ National Crime Intelligence Service. 2005. *UK threat assessment: the threat from serious and organised crime 2004/5–2005/6*. NCIS.

⁴⁸ Cawson, P. Wattam, C., Brooker, S. and Kelly, G. 2000. *Child Maltreatment in the United Kingdom: A Study of the Prevalence of Child Abuse and Neglect*. London: NSPCC. Available at: http://www.nspcc.org.uk/Inform/publications/downloads/childmaltreatmentintheukexecsummary_wdf48006.pdf Accessed 25/08/2010.

⁴⁹ MacLeod, P. *et al.* 2009b. Table A1.1.

⁵⁰ Flatley, J. *et al.* 2010. Table 3.05. Note, however, that these data are from the full survey and not the self-completion module, and therefore are less reliable.

Figure 8.1.9 Experience of partner abuse in last 12 months by age and gender in Scotland, 2008/09⁵¹



Source: Crime and Justice Survey, 2008/09.

Notes:

1. Partner abuse as measured by the Scottish Crime and Justice Survey in 2008-09 is any psychological or physical abuse undertaken against a man or a woman carried out by a male or female partner or ex-partner (including any boyfriend, girlfriend, husband, wife or civil partner).
2. Psychological partner abuse includes emotional, financial and other forms of psychological abuse.
3. Physical partner abuse includes physical and sexual violence.
4. The data displayed are not comparable with those used in Figure 8.1.8, above, which are based on face-to-face interviews rather than self-completion surveys and focus on domestic violence. They are, however, more closely comparable with the data in Table 8.1.4.

⁵¹ MacLeod, P. *et al.* 2009a. Table A1.2.

Box 8.1.2 Related issue: Particular age vulnerabilities for domestic violence**Children**

In a study into child abuse in the UK in 2000, the NSPCC found that 7% of the 2,869 children surveyed had been severely physically abused either by their parents or carers during childhood; the same study suggests that 6% of children experienced a serious absence of care (neglect) during their childhood; 6% experienced emotional or mental maltreatment.⁵²

Older people

Evidence submitted to the Joint Committee on Human Rights by the former Age Concern suggests that around half of those who experience domestic abuse in older age are victimised by a relative/partner; around a third are victimised by paid carers. Around a fifth of complaints received by Age Concern relate to care homes.⁵³

Meanwhile, 4% of people aged over 65 and living in private residences (nearly 350,000 people if extrapolating to the UK population) report that they experience abuse from family, care workers or acquaintances.⁵⁴ The issues facing elderly and disabled people are often invisible to those who are providing health services, meaning that signs of domestic violence are often overlooked.⁵⁵

⁵² Cawson, P. *et al.* 2000.

⁵³ Joint Committee on Human Rights 2007. *The Human Rights of Older People in Healthcare. Eighteenth Report of Session 2006-7. Volume 1: Report and Formal Minutes.* Available at: <http://www.publications.parliament.uk/pa/jt200607/jtselect/jtrights/156/156i.pdf> Accessed 25/08/2010.

⁵⁴ Walby, S. *et al.* 2010. Table 4.23. O’Keeffe, M. *et al.* 2007.

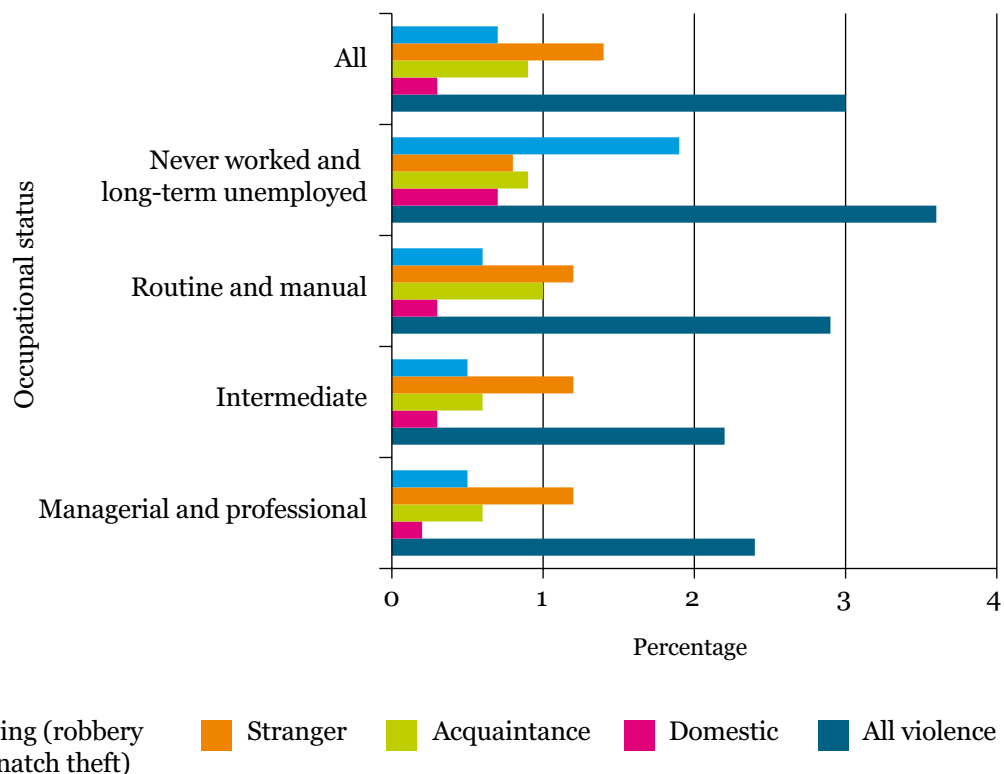
⁵⁵ Age UK, 2004. *Older Women and Domestic Violence.* Available at: http://www.helptheaged.org.uk/NR/rdonlyres/A26E0211-C671-48329190-55F79AC9A96D/0/older_women_and_domestic_violence.pdf Accessed 25/08/2010.

Socio-economic groups

Violent crime

Figure 8.1.10, below, shows that there is a probable link between social class and experience of violence, with those from lower occupational groups more likely to say that they have experienced violence in the past year. Although these figures have not been tested for statistical significance, in 2009/10 people with highest qualifications of O levels or GCSEs experienced more violence than those with degree-equivalent qualifications (4% and 3%, respectively).⁵⁶ In the same year, over twice as many unemployed people experienced violence as employed people (8% and 3%, respectively).⁵⁷

Figure 8.1.10 Proportion of adults who were victims of violence by type of violence and occupational status in England and Wales, 2009/10⁵⁸



Source: British Crime Survey, 2009/10.

⁵⁶ Flatley, J. *et al.* 2010. Table 3.05.

⁵⁷ Flatley, J. *et al.* 2010. Table 3.05.

⁵⁸ Flatley, J. *et al.* 2010. Table 3.05.

Sexual violence

In some preliminary analysis for the Equality Measurement Framework by Alkire *et al.* It was found that 3% of those who had never worked or who were long-term unemployed said that they had experienced sexual violence in 2007/08 – a significantly higher percentage than for any other socio-economic group in England and Wales (1% of those in semi-routine and routine occupations reported having experienced sexual violence; and 1% of those in lower supervisory and technical occupations did so). However, this does not necessarily point to a social gradient: the same analysis shows that nearly 2% of those in intermediate positions, and 1% of those in managerial and professional occupations experienced sexual violence in 2007/08.⁵⁹

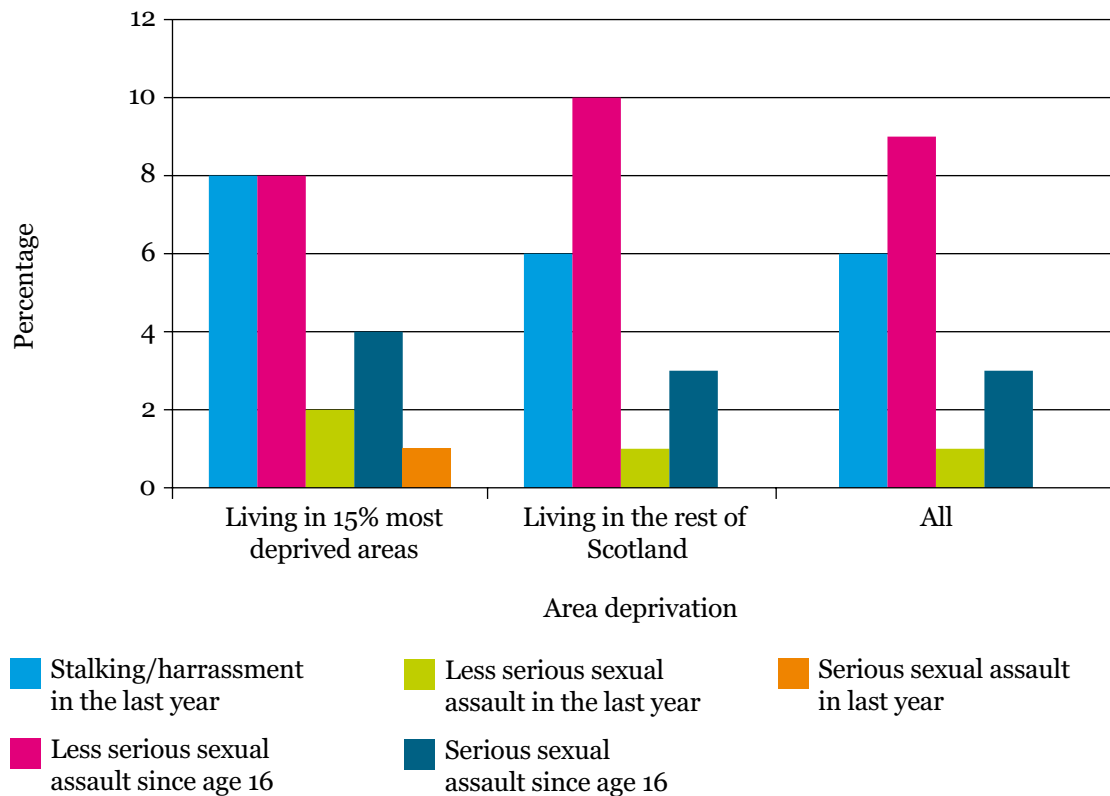
In Scotland, those living in the most deprived areas are more likely to experience serious sexual assault than those living in the rest of the country: this difference is reversed in the reported levels of less serious sexual assault since reaching the age of 16 (see Figure 8.1.11, below).⁶⁰

⁵⁹ Alkire, S. *et al.* 2009. Chapter 16, page 16.

In the development of the Equality Measurement Framework indicators, the technical phase was to check sample size rather than generate final data analysis tables, so these are preliminary results for group means and the significance of the variations in group means, as well as a report on sample size. Significance tests are reported at the 95 per cent level. A series of cross-checks are required at the next stage of the development of the Equality Measurement Framework before final data tables can be produced.

⁶⁰ MacLeod, P. *et al.* 2009b. Table A1.1.

Figure 8.1.11 Percentage experiencing different kinds of sexual victimisation since reaching the age of 16 and in the past year by area deprivation in Scotland, 2008/09⁶¹



Source: Scottish Crime and Justice Survey, 2008/09.

Notes:

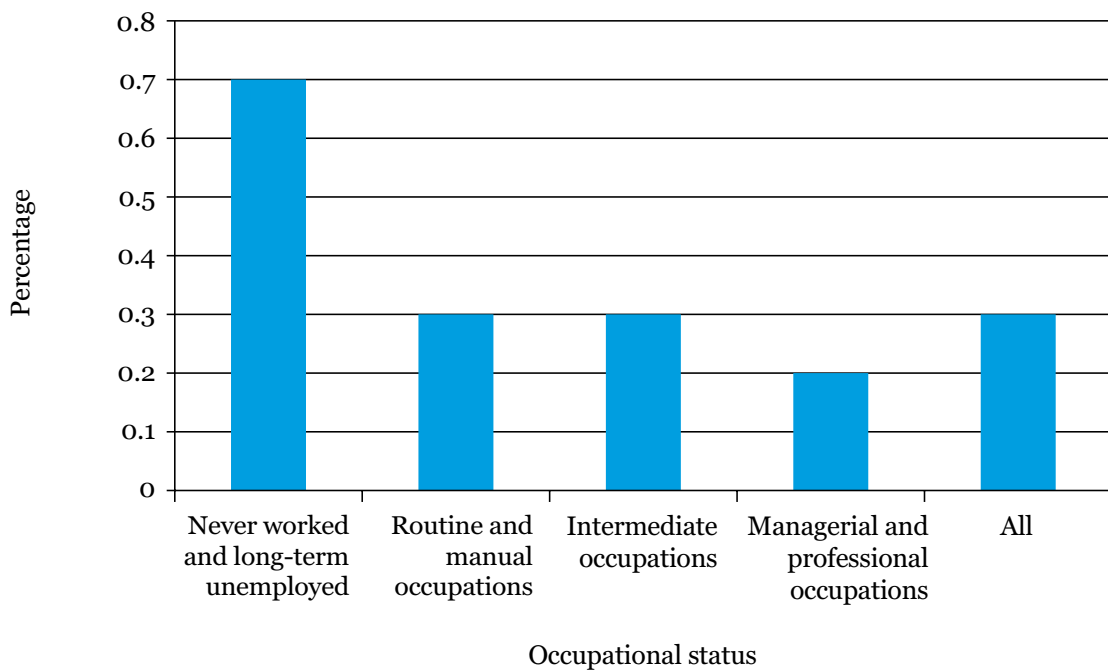
1. There is no information about levels of stalking/harassment since reaching the age of 16.

⁶¹ MacLeod, P. *et al.* 2009b. Table A1.1.

Domestic violence and partner abuse

Although it is not known whether differences measured in the British Crime Survey are statistically significant, the data from 2009/10 suggest that domestic violence was more commonly reported in households earning under £10,000 (0.7%), while those earning above £40,000 experienced below-average levels (0.1%): the average across all income groups was 0.3%.⁶² There are also differences by occupation (see Figure 8.1.12, below).

Figure 8.1.12 Percentage of adults experiencing domestic violence by occupational status in England and Wales, 2009/10⁶³



Source: British Crime Survey, 2009/10.

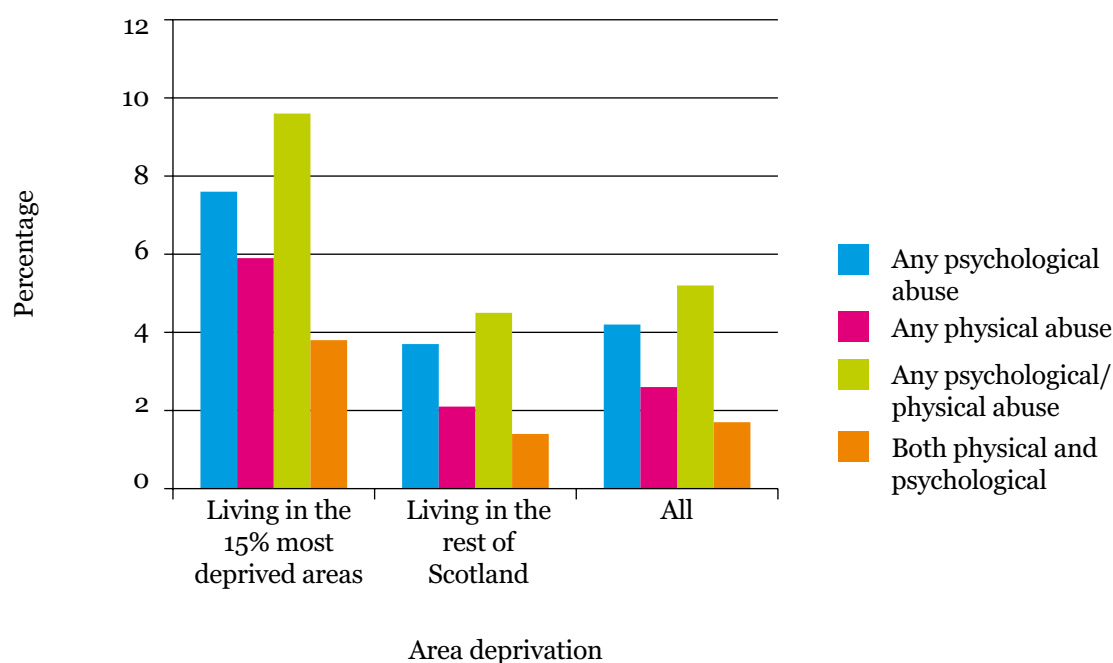
Note: these data are from the full survey and not the self-completion module, and therefore are less reliable.

⁶² Flatley, J. *et al.* 2010. Table 3.06. Note, however, that these data are from the full survey and not the self-completion module, and therefore are less reliable.

⁶³ Flatley, J. *et al.* 2010. Table 3.05.

In Scotland, partner abuse is twice as commonly reported among the most deprived areas as it is in the rest of the country (see Figure 8.1.13, below).

Figure 8.1.13 Percentage experiencing partner abuse in last 12 months by area deprivation in Scotland, 2008/09⁶⁴



Source: Scottish Crime and Justice Survey, 2008/09.

Notes:

1. Partner abuse as measured by the Scottish Crime and Justice Survey in 2008/09 is any psychological or physical abuse undertaken against a man or a woman carried out by a male or female partner or ex-partner (including any boyfriend, girlfriend, husband, wife or civil partner).
2. Psychological partner abuse includes emotional, financial and other forms of psychological abuse.
3. Physical partner abuse includes physical and sexual violence.
4. Experienced any psychological or physical abuse means that a respondent has experienced at least one of the forms of psychological or at least one of the forms of physical partner abuse listed in the questions.
5. Experienced both psychological and physical abuse means that a respondent has experienced at least one of the forms of psychological and at least one of the forms of physical partner abuse listed in the questions.

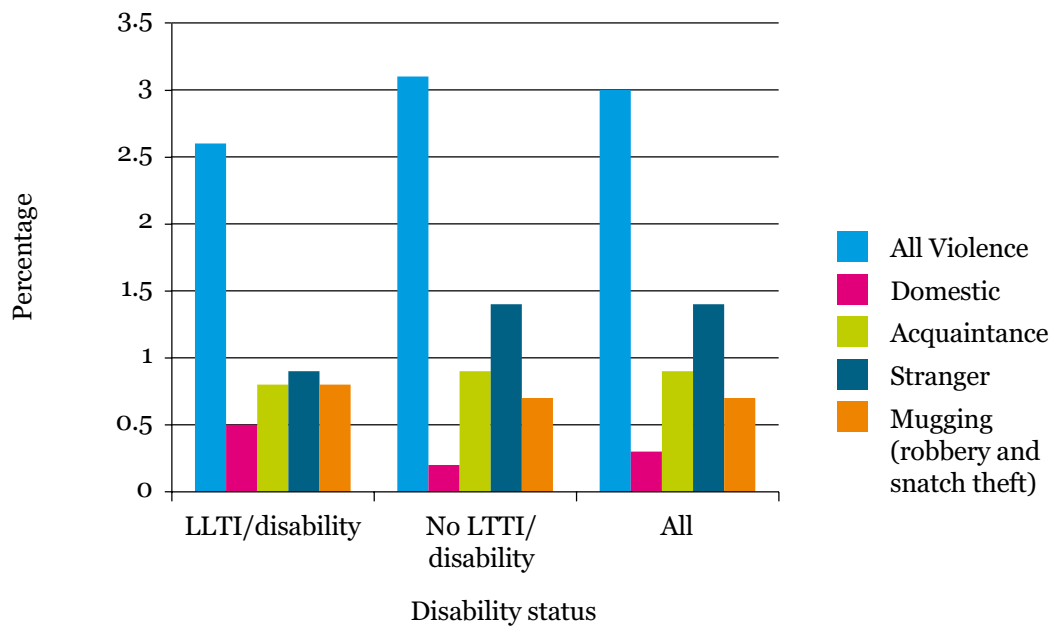
⁶⁴ MacLeod, P. *et al.* 2009a. Table A1.2.

Disability

Violent crime

Although we don't know if the difference is statistically significant, data from the British Crime Survey suggest that disabled people or those with LLTIs experience slightly below average levels of all violent crime except mugging (see Figure 8.1.14, below).

Figure 8.1.14 Proportion of adults who were victims of violence by LLTI or disability in England and Wales, 2009/10⁶⁵



Source: British Crime Survey 2009/10.

Different estimates exist: a study of people with mental health conditions suggests that as many as 1 in 10 of this group has been assaulted in the past 2 years.⁶⁶

⁶⁵ Flatley, J. *et al.* 2010. Table 3.05. Note, however, that data on domestic violence are from the full survey and not the self-completion module, and therefore are less reliable.

⁶⁶ Mind, 2007. *Another Assault*. London: Mind.

Sexual violence

Preliminary analysis of 2007/08 British Crime Survey data for the EMF suggests that sexual violence is more commonplace among people with LLTIs and disabilities than it is among those without.⁶⁷

Domestic violence and partner abuse

Although we do not know if the differences are statistically significant, British Crime Survey data suggest that people with LLTIs or disabilities are more likely to have experienced domestic violence than those without, and there is evidence that they face particular barriers to leaving abusive relationships (see box 8.1.3, below): in 2009/10, the percentage experiencing domestic violence in England and Wales was 0.5% and 0.2% respectively, against an average of 0.3% recorded in the British Crime Survey (see Figure 8.1.14, above).⁶⁸

Box 8.1.3 Related issue: Disabled people's experience of domestic violence

People with disabilities who are reliant on the person who is abusing them (often their partner or carer) are often trapped – especially if their home has been adjusted to accommodate their physical, communication or psychological/mental health needs. This can leave them at risk of further sexual violence and emotional or financial abuse.⁶⁹

This is a particular issue when information about available help is not readily available in accessible formats. In addition, many refuges are ill-equipped to meet the needs of disabled women. Those who leave their registered address risk losing their access to welfare entitlements, personal assistants and so on (i.e., their 'care' package): only a small proportion of refuges are able to compensate. Where a victim of abuse is disabled and has children, this can create overlapping difficulties.⁷⁰

⁶⁷ Alkire, S. *et al.* 2009. Chapter 6, page 16. In the development of the Equality Measurement Framework indicators, the technical phase was to check sample size rather than generate final data analysis tables, so these are preliminary results for group means and the significance of the variations in group means, as well as a report on sample size. Significance tests are reported at the 95 per cent level. A series of cross-checks are required at the next stage of the development of the Equality Measurement Framework before final data tables can be produced.

⁶⁸ Flatley, J. *et al.* 2010. Table 3.05.

⁶⁹ Women's Aid 2008. *Making the Links: Disabled women and domestic violence*. Available at: http://www.womensaid.org.uk/core/core_picker/download.asp?id=1481 Accessed 25/08/2010.

⁷⁰ Women's Aid 2008.

Ethnicity and religion or belief

Violent crime

There are no significant differences between ethnic groups in relation to violence – partly because of the small numbers involved. However, prevalence seems to be higher than average among Mixed Race people (4%) – partly because they are disproportionately young.⁷¹ Violence seems to be less common among other ethnic minority groups (2%) than it is among White people (3%).⁷²

Domestic violence

Data from the British Crime Survey suggest that there are no significant differences between ethnic and religious minority groups in relation to domestic violence. However, they face particular vulnerabilities (particular examples are given in box 8.1.4, below).

Box 8.1.4 Related issues: Support needs of ethnic and religious minority groups suffering domestic abuse

Women from ethnic and religious minority communities (including refugees and migrants, see below) often face difficulties accessing domestic violence support services because of language difficulties and discrimination: concerns about family and community ‘honour’ can also deter victims from reporting abuse.⁷³ As a result, there is low recognition of the needs of ethnic and religious minority people experiencing domestic violence when developing services.⁷⁴

Gypsies and Travellers

A recent Friends, Families and Travellers conference on domestic violence indicated that emotional and physical abuse was commonplace.⁷⁵ By divorcing an abusive partner, Gypsy and Traveller women risk being asked to leave their camp. This is all the more challenging because of the prejudice and discrimination they may face from local communities once they have left, leaving many trapped in abusive relationships.⁷⁶

⁷¹ Census, April 2001, Office for National Statistics.

⁷² Flatley, J. *et al.* 2010. Table 3.05.

⁷³ Women’s Aid/YouGov 2004. *Domestic violence FAQs Survey*. The Body Shop: London. Available at: www.womensaid.org.uk/downloads/FAQs.pdf Accessed 25/08/2010.

⁷⁴ Gill, A. and Banga, B. 2008. *Black, minority ethnic and refugee women, domestic violence and access to housing*. London: Race Equality Foundation.

⁷⁵ Friends, Families and Travellers Event 2009. 1st National Conference on ‘Supporting Gypsies & Travellers Living with Domestic Violence’.

⁷⁶ Cemlyn, S., Greenfields, M., Burnett, S., Matthews, Z., and Whitwell, C., 2009. *Inequalities experienced by Gypsy and Traveller communities: A review*. Research Report 12, Manchester: Equality and Human Rights Commission.

Box 8.1.4 Continued***Asylum seekers and migrants***

Victims who do not have Indefinite Leave to Remain, or whose immigration status is linked to an abusive partner can find it difficult to seek support: they have no access to public funds and services (including housing), although those with children may be entitled to discretionary funds if they feel able to contact local authorities for help.⁷⁷

Many do not report abuse because they fear that disclosure of their immigration status will lead to deportation.⁷⁸ Those who leave the family home are often dependent on voluntary organisations for financial and other support,⁷⁹ without which they face destitution and further danger.⁸⁰ For many, leaving the family home will lead to more vulnerability if they have children – particularly for those who do not feel able to approach local authorities and other statutory bodies.⁸¹ Many children in this situation have become vulnerable to sexual exploitation.⁸²

⁷⁷ The local authority in such situations would be able to use powers within the Children Act 1989 to provide support to the children. Such assistance may be extended to the parent.

⁷⁸ The Children's Society, 2008. *Living on the edge of despair: destitution amongst asylum seeking and refugee children.*

⁷⁹ The Home Office is currently working with the voluntary sector and is funding a scheme where support is provided to certain migrant victims of domestic violence in the UK.

⁸⁰ The Children's Society, 2008.

⁸¹ Kofman, E., Lukes, S., D'Angelo, A. and Montagna, N. 2009. *The equality implications of being a migrant in Britain.* Research Report 19. Manchester: Equality and Human Rights Commission.

⁸² The Children's Society 2008.

Sexual orientation⁸³ and transgender

Sexual violence

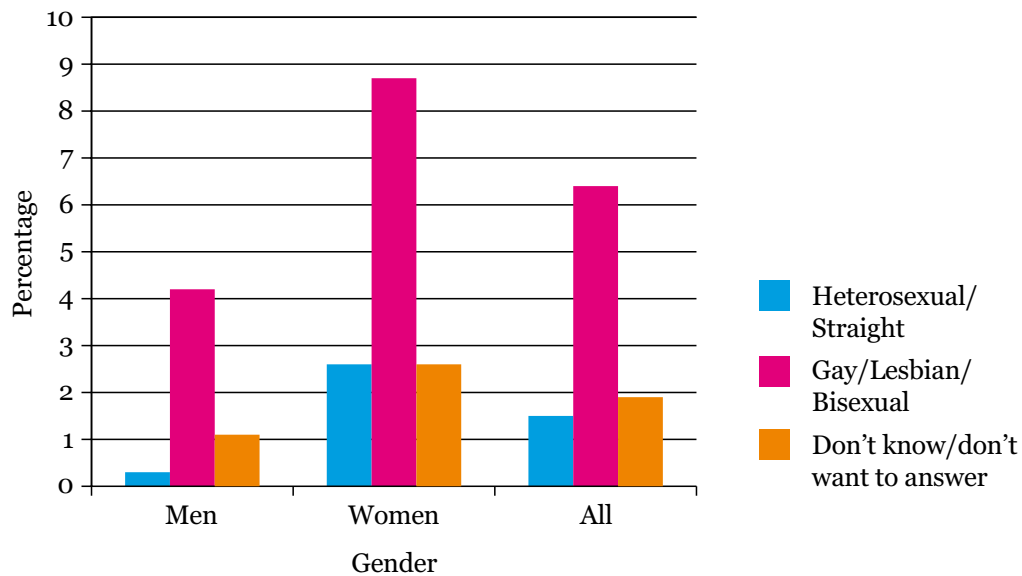
As Figure 8.1.15 (below) highlights, gay men are much more likely than straight men to have experienced sexual assault (the rates from pooled data suggest that 0.3% of heterosexual/straight men have experienced sexual assault in the last year, compared to 4% of gay or bisexual men).⁸⁴ Lesbians or bisexual women are also more likely than heterosexual/straight women to have experienced sexual assault in the last year (pooled data suggest that the levels are 9% and 3% respectively).⁸⁵

⁸³ Smith, K. *et al.* 2010. 'Since April 2007 the self-completion section of the British Crime Survey questionnaire has included a question asking respondents about their sexual orientation. This makes it possible to produce figures for experience of intimate violence by sexual orientation. There have been previous surveys of domestic abuse in same-sex relationships (e.g. Donovan and Hester, 2007) but the samples have tended to be restricted to the lesbian, gay, bisexual or transgender community rather than being part of a wider general population survey. Around 500 out of the 25,000 self-completion respondents in each year identified themselves as gay, lesbian or bisexual. Due to this relatively small number, data from the 2007/08 and 2008/09 British Crime Survey have been combined for the purposes of analysis. These data show that 94% of adults aged 16 to 59 identified themselves as heterosexual/straight, 2% as lesbian/gay or bisexual and a further 4% selected either the 'do not know' or 'do not want to answer' response options (data not shown). The small numbers of respondents identifying themselves as gay/lesbian or bisexual, combined with the significant proportions of respondents unable or refusing to answer the question on sexual orientation means that figures on incidence of domestic abuse by sexual orientation should be treated with caution.' Page 62.

⁸⁴ Smith, K. *et al.* 2010. Table 3.07.

⁸⁵ Smith, K. *et al.* 2010. Table 3.07.

Figure 8.1.15 Percentage experiencing sexual violence in the last year by sexual orientation in England and Wales, 2007/08-2008/09⁸⁶



Source: British Crime Survey 2009/10.

Notes:

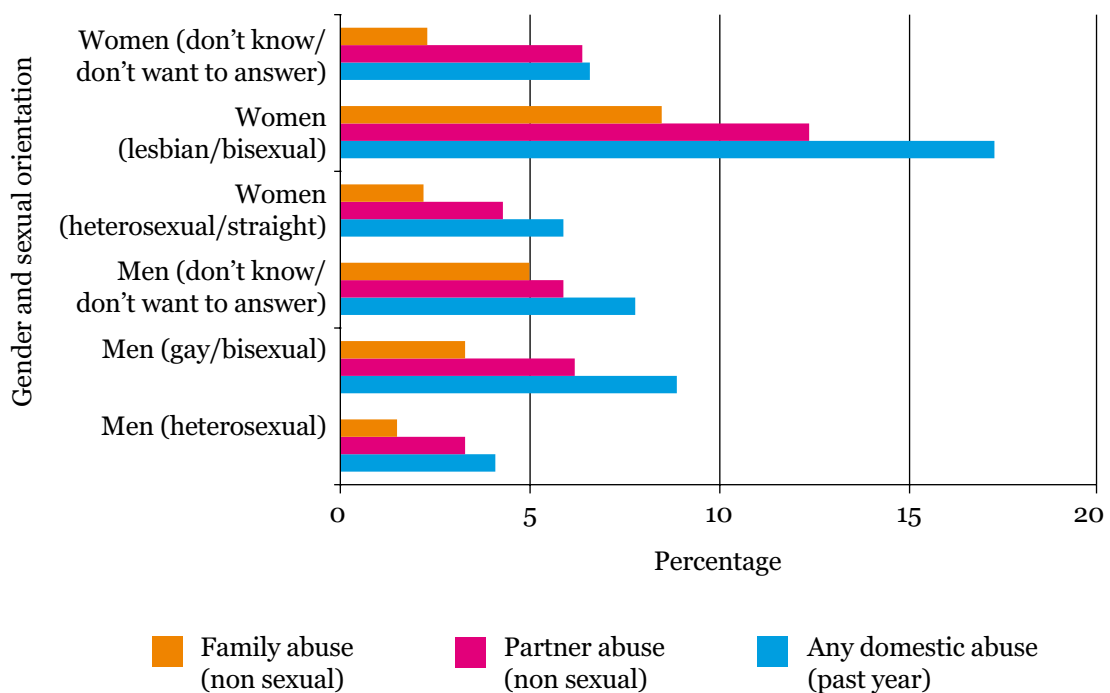
1. The number of respondents identifying as LGB was low (men = 515; women = 473). A slightly larger number responded to the question on sexual orientation saying that they 'don't know/don't want to answer' (men = 705; women = 886).

Domestic violence

Figure 8.1.16, below, highlights that gay or bisexual men are more likely than heterosexual/straight men to have experienced partner abuse. Similarly, lesbian and bisexual women are more likely than heterosexual/straight women to have done so. The gap between LGB and heterosexual women is larger than the gap between LGB and heterosexual men.

⁸⁶ Smith, K. *et al.* 2010. Table 3.07.

Figure 8.1.16 Percentage experiencing domestic violence by sexual orientation in England and Wales, 2007/08-2008/09⁸⁷



Source: British Crime Survey 2009/10.

Notes:

1. The number of respondents identifying as LGB was low (men = 515 out of 20,892; women = 473 out of 24,795). A slightly larger number responded to the question on sexual orientation saying that they 'don't know/don't want to answer' (men = 705; women = 886).

Box 8.1.5 Related issues: LGB and transgender people

A study by Donovan et al 2007 looking at domestic abuse and same-sex relationships found that nearly 4 in 10 of their sample of 692 had experienced domestic abuse in a same-sex relationship (35% men, 40% women). The study also found that being under 35, having a low income, having few qualifications and being in a first relationship were risk factors.⁸⁸

⁸⁷ Smith, K. *et al.* 2010. Table 3.07.

⁸⁸ Donovan, C. 2007. *Comparing Love and Domestic Violence in Heterosexual Relationships*. Swindon: Economic and Social Research Council.

Box 8.1.5 Continued

According to a 'Count Me In Too' survey on domestic violence, 64% of the 39 transgender respondents experienced domestic violence/abuse, with family members involved in 30% of cases.⁸⁹ In 2007, a Scottish Transgender Alliance survey found that nearly half of 71 transgender respondents had previously experienced transphobic abuse in their relationships.⁹⁰

⁸⁹ Browne, K. and Lim, J. 2008. *Trans Report: Count Me In Too additional analysis report*. Brighton: Spectrum. Pages ix, 86.

⁹⁰ Scottish Transgender Alliance 2008. *Transgender Experiences in Scotland: Research Summary*. Equality Network.

8.2 What we know about targeted violence

Measure:

Hate crime – Percentage of people reporting to the British Crime Survey and the Scottish Crime and Justice Survey that they have been victims of violence either thought to be or which might have been motivated by their ethnicity, religion, age, disability status, sexual orientation or transgender status.

How this measure works:

Data on racially motivated incidents are available from the British Crime Survey, covering England and Wales.⁹¹ The British Crime Survey measures offences that were thought by the victim to have been motivated by the offender's attitude to one of a range of characteristics.

Trend analysis is difficult because hate crime is a relatively new concept, and its recording might be expected to fluctuate until it has become embedded in institutional practice. Moreover, analysis based on a single year is limited, with the only types of offence with more than 100 respondents reporting that they had been victims relating to 'age' and 'race and religion'. Smaller numbers are estimated by British Crime Survey data to be affected by hate crimes relating to disability and sexual orientation.

We are unable to distinguish between the different experiences of people based on type of disability from the British Crime Survey data, although there is evidence that people's experience varies by type of disability.⁹² Moreover, the British Crime Survey reports on adults over 16, meaning that the experiences of younger people are not recorded.

⁹¹ Walby, S. *et al.* 2010. Tables 4.19 and 4.20.

⁹² SCOPE 2008. *Hate Crime Report – Getting Away With Murder: Disabled People's Experience of Hate Crime in the UK*. Available at: http://www.scope.org.uk/sites/default/files/pdfs/Campaigns_policy/Scope_Hate_Crime_Report.pdf Accessed 25/08/2010.

Scottish Crime and Justice Survey data focus on racist incidents, and disaggregates the data by the age and gender of victims only. It does not allow us to identify trends over time.

Although we have drawn on supplementary literature to illustrate the experience of smaller groups there is still very limited related literature for this measure for groups defined by socio-economic background, therefore they are not covered in this section.

Overview

Racially and religiously aggravated attacks remain a persistent phenomenon. Targeted violence against people on grounds of their ethnicity and religion is now a well recognised form of crime: the figures on trends are mixed, with incidents reported to the police falling (see Chapter 7: Legal security) while levels reported in surveys have fluctuated.

Attacks directed against disabled, gay, lesbian and transgender people have not been recognised as hate crimes until recently. Yet the evidence suggests these forms of attack affect very large proportions of the populations concerned. Substantial numbers report physical attack, including very serious forms of violence such as sexual assault. However, harassment is even more widespread, and is the most frequently identified form of targeted abuse in police figures.

Victims still often do not report hate crime, sometimes feeling it is part of the accepted order. Research suggests in particular that disabled people fear that they will not be listened to if they report abuse, and can also blame themselves or feel that hostility is just part of day-to-day life. Others (e.g. Gypsies and Travellers) fear that they will face further harassment or discrimination if they report targeted crime.

What we know about the overall situation

Given that legislation on hate crime (as applied to people on the basis of disability, transgender status and sexuality) is relatively new, no information exists about trends over time. Table 8.2.1 shows the current levels of survey-recorded hate crime in England and Wales.

Table 8.2.1 Current levels of hate crime in England and Wales, 2008/09⁹³

Type of incident	Percentage of population
Racial	0.4%
Religious	0.1%
Age	0.4%
Disability	0.1%
Sexual orientation	0.1%

Source: British Crime Survey data, 2008/09.

Note: incidents relating to age are not officially recognised as hate crimes.

What we know about the situation for different groups

Gender

According to the British Crime Survey, there is a difference between the percentages of men and women who experience race- and age-motivated crime – in both cases the proportions affected are 0.5% and 0.3% respectively.⁹⁴ This gender pattern is reflected in the crimes referred to the Crown Prosecution Service in 2008/09, which highlights that men are the victims in two-thirds of the hate crimes that are referred.⁹⁵

Age and disability/LLTI

As with other kinds of violent crime (described above), younger people are disproportionately at risk of racially motivated offences: 0.6% of those aged under 44 were victims of racially motivated incidents in the last year, compared to 0.2% of those over 45.⁹⁶

Younger people (aged between 16 and 24) are also more likely to be victimised on the basis of age – as are those aged over 75: in 2008/09, similar proportions (1%) of both experienced age-motivated offences (Figure 8.2.1, below).

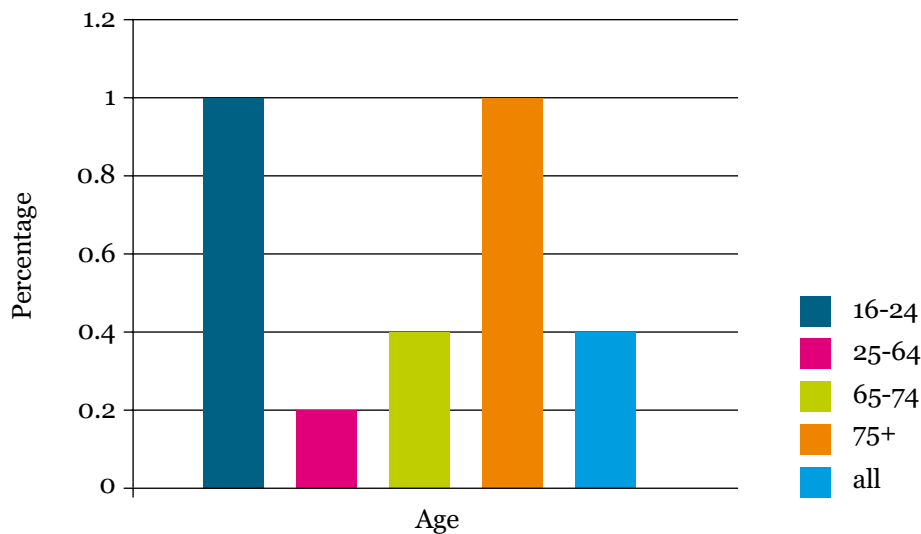
⁹³ Equality and Human Rights Commission analysis of unpublished 2008/09 British Crime Survey data.

⁹⁴ Equality and Human Rights Commission analysis of unpublished 2008/09 British Crime Survey data.

⁹⁵ Crown Prosecution Service 2009, *Hate Crime Report 2008/09*, CPS Management Information Branch.

⁹⁶ Equality and Human Rights Commission analysis of unpublished 2008/09 British Crime Survey data.

Figure 8.2.1 Perceived age-related crime by age in England and Wales, 2008/09⁹⁷



Source: British Crime Survey, 2008/09.

Data from the 2008/09 British Crime Survey suggest that people with an LLTI/disability are four times more likely than those without to experience disability related incidents: 0.4% of those with disabilities had experienced an incident in the past year, compared to 0.1% of those without.⁹⁸

Box 8.2.1 Related issues: Small groups

Children with learning disabilities

One study by Mencap found that 82% of their sample of 507 children with learning disabilities had been bullied.⁹⁹

LGB children

A survey of 1145 LGB secondary school pupils commissioned by Stonewall found that 65% had experienced homophobic bullying at school (see Chapter 10: Education).¹⁰⁰

LGB older people

There is evidence of heightened risk of homophobic violence affecting older gay men.¹⁰¹

⁹⁷ Equality and Human Rights Commission analysis of unpublished 2008/09 British Crime Survey data.

⁹⁸ Equality and Human Rights Commission analysis of unpublished 2008/09 British Crime Survey data.

⁹⁹ Mencap 2007. *Bullying Wrecks Lives: The experiences of children and young people with a learning disability*. London: Mencap.

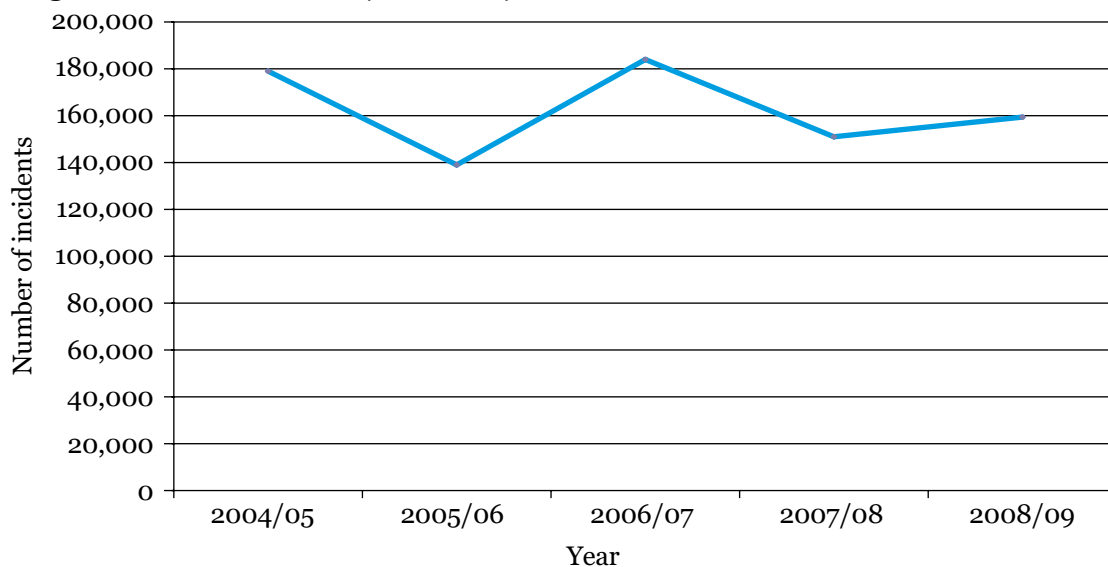
¹⁰⁰ Dick, S. 2008. *Homophobic Hate Crime: The Gay British Crime Survey*. Equality and Human Rights Commission Research Summary 38. London: Stonewall.

¹⁰¹ Cited in Fish, J., 2007. *Briefing 4: Older Lesbian, Gay and Bisexual (LGB) people*. Briefings for health and social care staff. London: Department of Health.

Ethnicity and religion or belief

Estimated numbers of incidents perceived to be racially or religiously motivated recorded in the British Crime Survey have fluctuated over time, although changes are not necessarily statistically significant (see Figure 8.2.2, below).

Figure 8.2.2 Racially and religiously motivated hate crime over time in England and Wales, 2004/05-2008/09¹⁰²



Sources: British Crime Survey, 2008/09.

Notes: the figure for 2007/08 has been revised down from the previously published figure (207,000). The estimate for 2008/09 is provided by the Home Office, based on the 0.4% prevalence reported in the British Crime Survey for that year. The estimate for 2009/10 is 122,205 incidents.

The 2008/09 British Crime Survey recorded that 0.2% of White people in England and Wales had experienced racially motivated crime, compared to 2% of people from all other ethnic groups. The average across the population overall is 0.4%.¹⁰³

Similarly, 2% of non-Christians had experienced religiously motivated hate crime (including almost 3% of Muslims), compared to 0.2% of Christians. This includes offences that target places of worship and burial as well as those targeting individuals.¹⁰⁴

¹⁰² Walby, S. *et al.* 2010. Table 4.19 British Crime Survey estimates from 2007/08 provided by the Home Office.

¹⁰³ Equality and Human Rights Commission analysis of unpublished 2008/09 British Crime Survey data.

¹⁰⁴ Equality and Human Rights Commission analysis of unpublished 2008/09 British Crime Survey data. Note, only 30 people said that they had experienced a religiously motivated incident in the last year.

The number of crimes recorded by the police as part of racist incidents in Scotland has risen since 2004/05 (from 5,053 to 6,002 in 2008/09) – see Chapter 7: Legal security.¹⁰⁵

Box 8.2.2 Related issue: Other marginalised groups suffering from racism and hate crime

Gypsies and Travellers

A survey of Gypsies and Travellers in Devon found that half of respondents had experienced racism.¹⁰⁶ Out of 121 Gypsies and Travellers surveyed in the West of England, 58 had experienced harassment and intimidation.¹⁰⁷ Such studies consistently find that Gypsies and Travellers downplay their experiences, and that they don't expect assistance from the authorities; many see harassment and racism as inevitable.¹⁰⁸

Over half of Travellers interviewed for a study in Scotland said that they would report prejudice and harassment for serious cases of physical abuse – not always to the police – whereas less than a third had complained about harassment.¹⁰⁹

Refugees and asylum seekers

Refugees and asylum seekers also rarely report hate crime. The Home Office's Cross Government Action Plan on hate crime notes a range of factors that explain this, such as fear that reporting crime to the police or other statutory agencies will affect their immigration status.¹¹⁰

People whose first language is not English

In Scotland, a significant proportion of victims of racist incidents do not speak English as a first language (in 2008/09, 17% of all victims where language was known did not speak English. This compares with 29% in 2007/08).¹¹¹

¹⁰⁵ Scottish Government, 2010. *Racist Incidents Recorded by the Police in Scotland, 2004/05 to 2008/09*. Table 7a.

¹⁰⁶ Southern, R. and James, Z., 2006. *Devon-wide Gypsy and Traveller Housing Needs Assessment*, University of Plymouth, November 2006. Page 58.

¹⁰⁷ Greenfields, M., Home, R., Cemlyn, S., Bloxson, J., and Lishman, R., 2007. *West of England; Gypsy Traveller Accommodation (and Other Needs) Assessment 2006–2016*. Buckingham: Buckinghamshire Chilterns University College.

¹⁰⁸ Greenfields, M. *et al.* 2007. Page 130.

¹⁰⁹ Taggart, I. 2007.

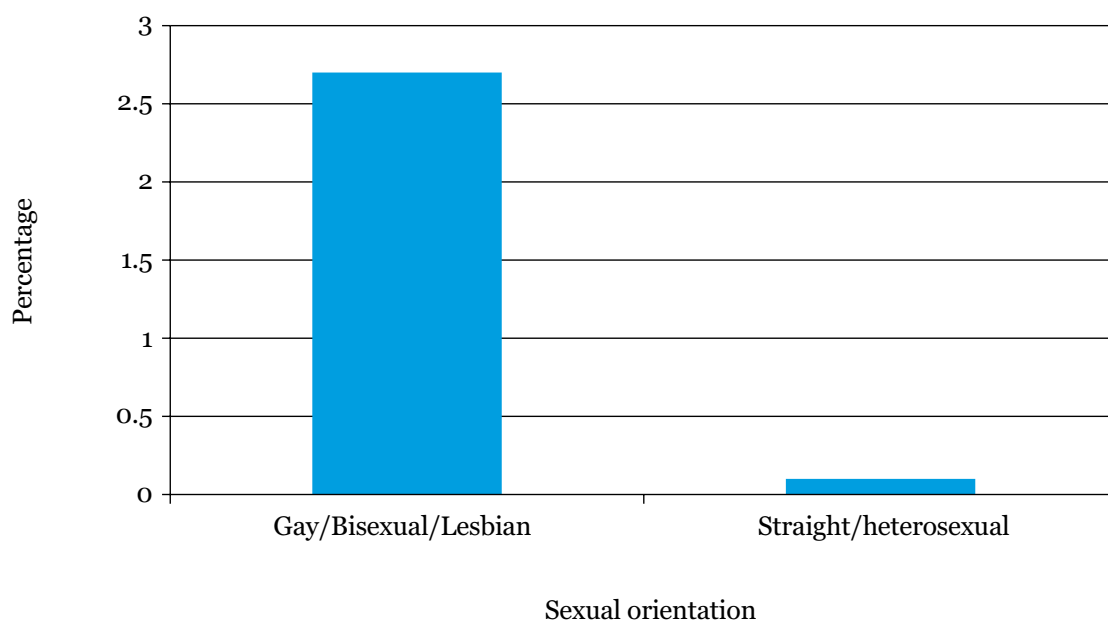
¹¹⁰ HM Government 2009. *Hate Crime: The Cross Government Action Plan*. London: Home Office. Available from: <http://library.npia.police.uk/docs/homeoffice/hate-crime-action-plan.pdf>.

¹¹¹ Information supplied in private correspondence with the Scottish Government.

Sexual orientation and transgender

Offences motivated by sexual orientation mainly affect gay, lesbian and bisexual people. However, there is some evidence – on the basis of data collected by the 2008/09 British Crime Survey – that a very small percentage of heterosexual people are also targeted – possibly because of their association with LGB people (Figure 8.2.3, below). Note however that these figures are based on very small numbers of reports.

Figure 8.2.3 Perceptions of homophobic victimisation in England and Wales, 2008/09¹¹²



Source: British Crime Survey, 2008/09.

Note: Base = 36.

¹¹² Equality and Human Rights Commission analysis of unpublished 2008/09 British Crime Survey data.

Box 8.2.3 Related issues: Experience of hate crime***Gay people's experience of hate crime***

Stonewall's *Gay British Crime Survey* estimates that 1 in 5 gay men, lesbians and bisexual people had experienced a homophobic crime or incident in the last 3 years (between 2005 and 2008).¹¹³ 1 in 8 incidents recorded by men in the *Gay British Crime Survey* and 1 in 20 of those experienced by lesbians involved unwanted sexual contact, which was more frequently reported by those aged between 18 and 24 than it was by those aged over 35.¹¹³

Transgender people's experience of hate crime

In a small study of the experience of 71 transgender people, over half said that they had experienced harassment, and a smaller proportion (12 people) said that they had been physically assaulted: a large amount of crime against this group appears to go unreported.¹¹⁴

¹¹³ Dick, S. 2008.

¹¹⁴ Morton, J. 2008. *Transgender Experiences in Scotland: Research Summary*, Scottish Transgender Alliance.

8.3 What we know about fear of crime

Measures:

Worry about violent crime - Percentage reporting to the British Crime Survey that they are worried about violent crime; or to the Scottish Crime and Justice Survey that they are worried about being physically or sexually assaulted.

Feeling unsafe - Percentage reporting to the British Crime Survey that they feel unsafe alone at home after dark or walking alone in local area during the day or after dark; or percentage reporting to the Scottish Crime and Justice Survey that they feel unsafe walking alone after dark.

How these measures work:

The British Crime Survey and Scottish Crime and Justice Survey measure different types of fear of crime so they are not directly comparable.

The ability to disaggregate English and Welsh data by equality characteristics is dependent on sample size, which is often too small to yield a meaningful analysis: in this section, we have described differences in relation to age, gender, socio-economic status, disability, ethnicity and religion or belief. We have drawn on supplementary sources of information to describe the experience of LGB people, but limited information is available about the perceptions of transgender people in relation to this measure. Therefore they are not covered in this section.

The Scottish data about feelings of being unsafe walking alone after dark can be disaggregated by age and gender, but not by any other group.

Overview

People's fears of crime are affected by the type of crime they may be subject to, rather than their overall risk. Young men have the greatest chance of being attacked, yet women and older people have the highest level of fear.

Some groups – e.g. those living in deprived areas – are more fearful because they are more at risk overall. The fear of being attacked because of one's identity can generate a different kind of fear from that of being a more 'random' victim of violent crime, such as robbery.

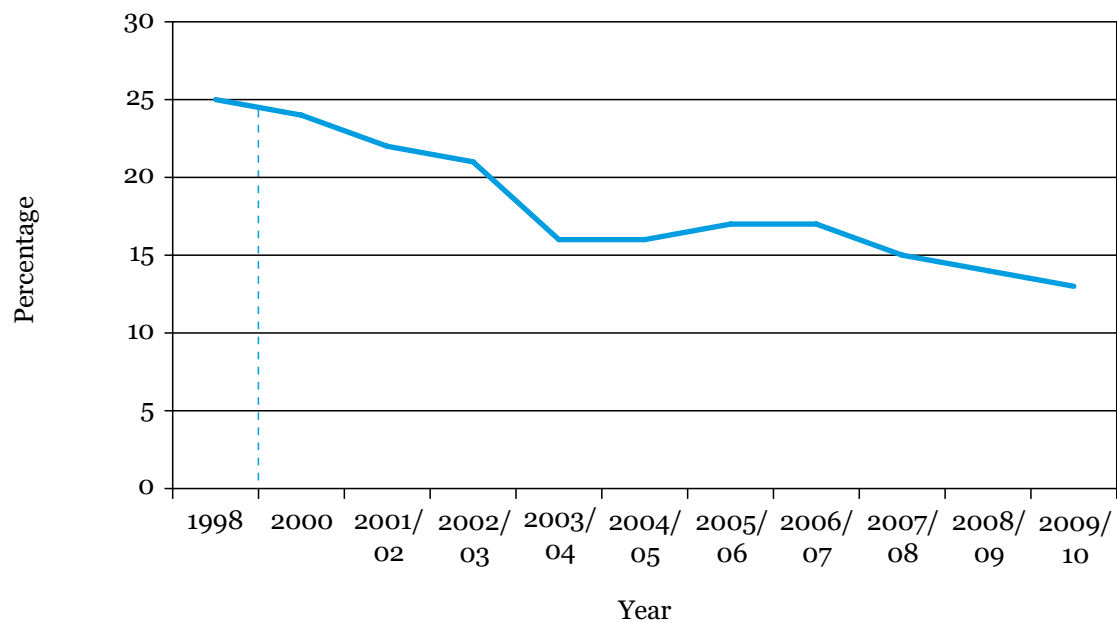
What we know about the overall situation and trends

Worry about violent crime

There has been a gradual fall in the proportion of the population in England and Wales with high levels of worry about violent crime (see Figure 8.3.1, below).

Figure 8.3.1 Worry about violent crime in England and Wales, 1998-2009/10¹¹⁵

Percentage having a high level of worry about violent crime



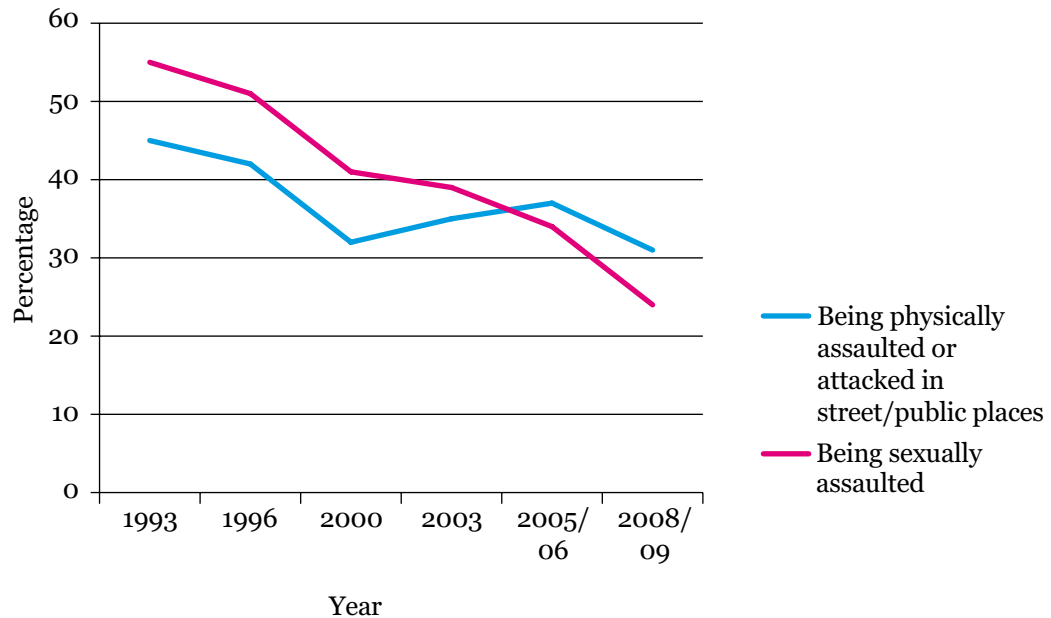
Source: British Crime Survey, 2009/10.

Note: Questions on worry about crime were only asked of a quarter of the British Crime Survey sample from 2008/09.

¹¹⁵ Flatley, J. *et al.* 2010. Table 5.07.

Similar trends are apparent in Scotland (see Figure 8.3.2, below):

Figure 8.3.2 Percentage of respondents either 'very' or 'fairly worried' about being physically and sexually assaulted, Scotland, 1993-2008/09¹¹⁶



Source: Scottish Crime and Justice Survey, 2008/09.

Notes:

1. Results for worry about being sexually assaulted included responses from women only until 2008/09, From 2008/2009 figures for men are also available. But for better comparison we are only including female percentage in this graph.
2. The decline in worry about sexual assault is statistically significant.

¹¹⁶ MacLeod, P. *et al.* 2009c. Table A1.9.

What we know about the situation for different groups

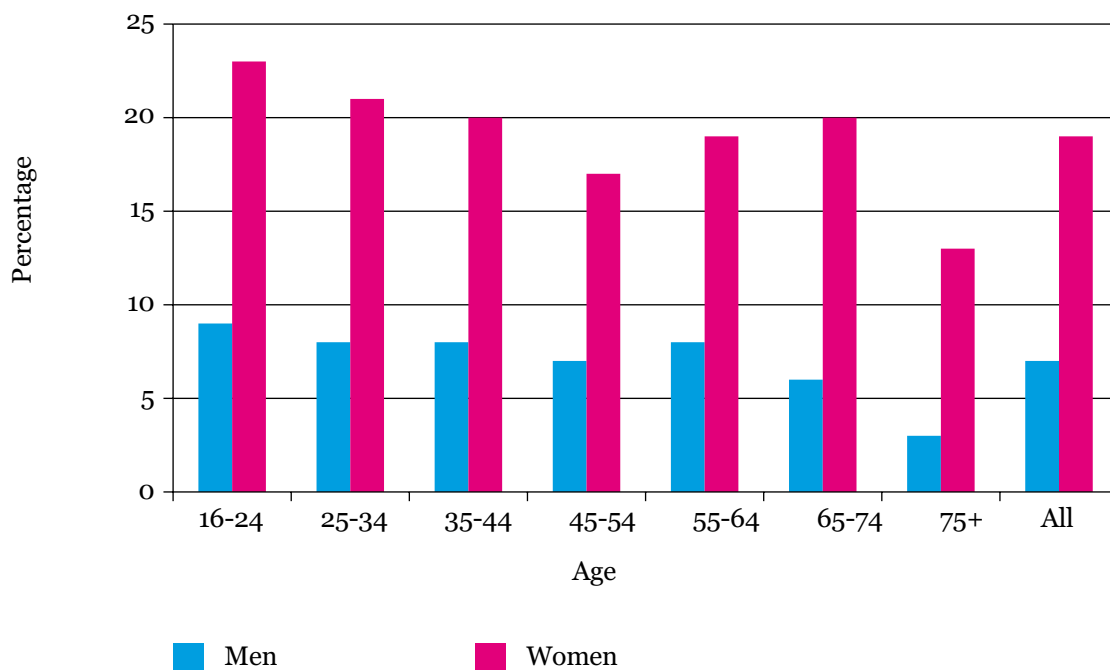
Age and gender

Worry about violent crime

Women display higher levels of worry than men about violent crime (Figure 8.3.3, below), even though their risk of general violence is much lower than that of men: this may reflect women's worry about sexual violence (as in Figure 8.3.2, above).

Younger people are more likely than older people to worry about violent crime, with levels falling more sharply for women over 74 than for men.

Figure 8.3.3 Percentage with high levels of worry about violent crime by age and gender in England and Wales, 2008/09¹¹⁷



Source: British Crime Survey, 2008/09.

Notes:

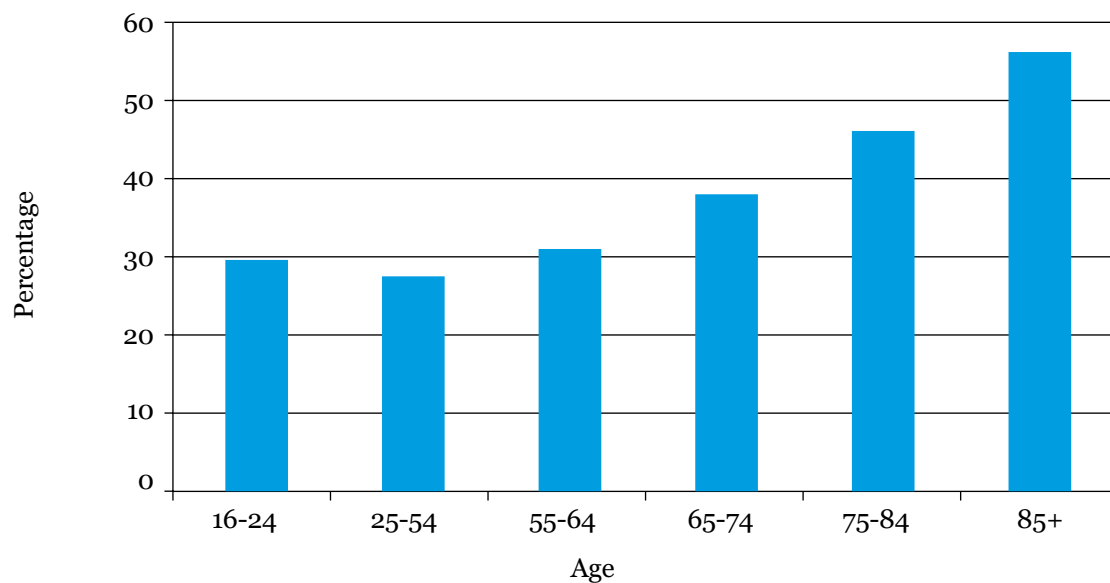
1. 2008/09 data used here as it disaggregates by age and gender (combined).

¹¹⁷ Walker, A., Flatley, J., Kershaw, C. and Moon, D. (eds) 2009. *Crime in England and Wales 2008/09: Volume 1 Findings from the British Crime Survey and police recorded crime*. Table 5.08.

Feeling unsafe

Feelings of being unsafe alone at home after dark or walking alone in the local area during the day or after dark rise with age in England and Wales (see Figure 8.3.4, below). Generally, 31% of the population feels unsafe in these situations, but more than twice as many women (45%) as men (17%) say they feel unsafe in such contexts.¹¹⁸

Figure 8.3.4 Percentage feeling unsafe alone at home after dark or walking alone in local area during the day or after dark by age in England and Wales, 2008/09¹¹⁹



Source: British Crime Survey, 2008/09.

In England and Wales, women over 60 live with the greatest worry about their safety when they are alone at home after dark or walking alone in the local area during the day or after dark, followed by young women (16-29), other women (30-59), older men (60+) and finally men aged under 60.¹²⁰

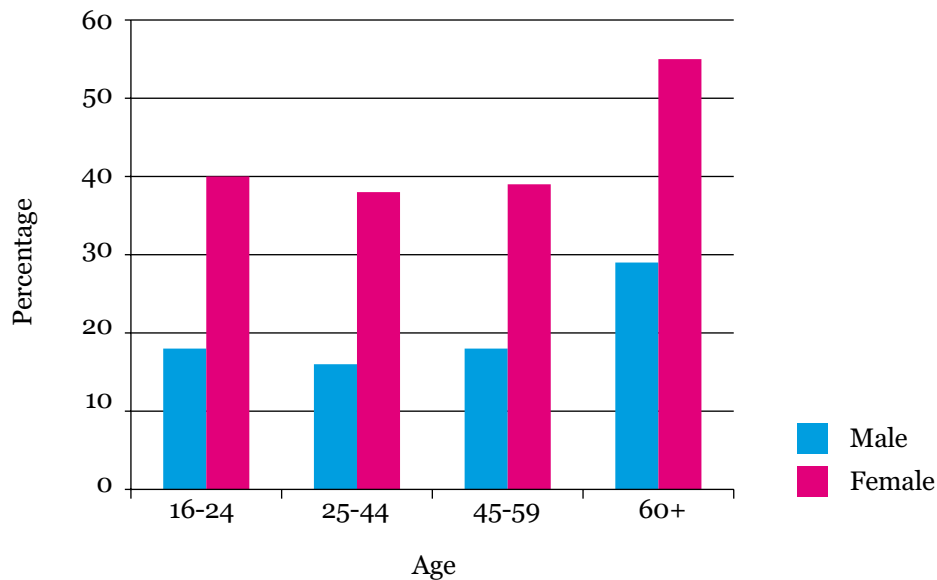
¹¹⁸ Equality and Human Rights Commission analysis of unpublished 2008/09 British Crime Survey data.

¹¹⁹ Equality and Human Rights Commission analysis of unpublished 2008/09 British Crime Survey data.

¹²⁰ Equality and Human Rights Commission analysis of unpublished 2008/09 British Crime Survey data.

In Scotland, around twice as many women as men of all ages feel 'very' or 'a bit' unsafe when walking alone after dark (Figure 8.3.5, below): the overall age and gender patterns are similar to those found in England and Wales.¹²¹

Figure 8.3.5 Percentage feeling 'very' or 'a bit' unsafe when walking alone after dark by age and gender in Scotland, 2008/09¹²²



Source: Scottish Crime and Justice Survey, 2008/09.

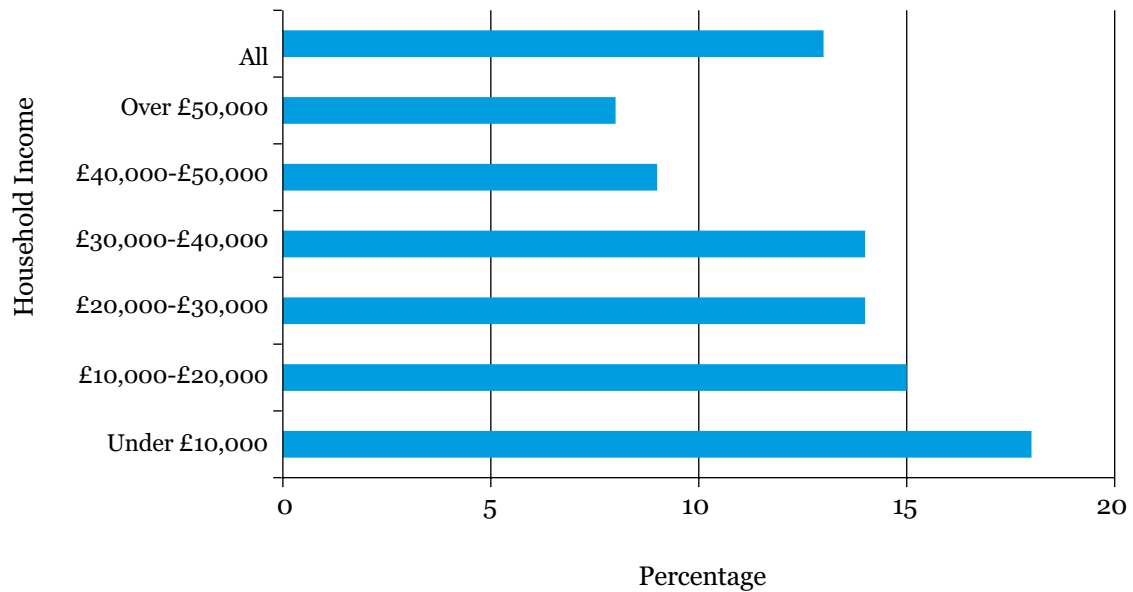
¹²¹ MacLeod, P. *et al.* 2009c. Page 119.

¹²² MacLeod, P. *et al.* 2009c. Figure 6.7.

Socio-economic groups***Worry about violent crime***

There is a strong income gradient with worry about violent crime declining with rising incomes (see Figure 8.3.6, below).

Figure 8.3.6 Percentage with high levels of worry about violent crime by household income in England and Wales, 2009/10¹²³

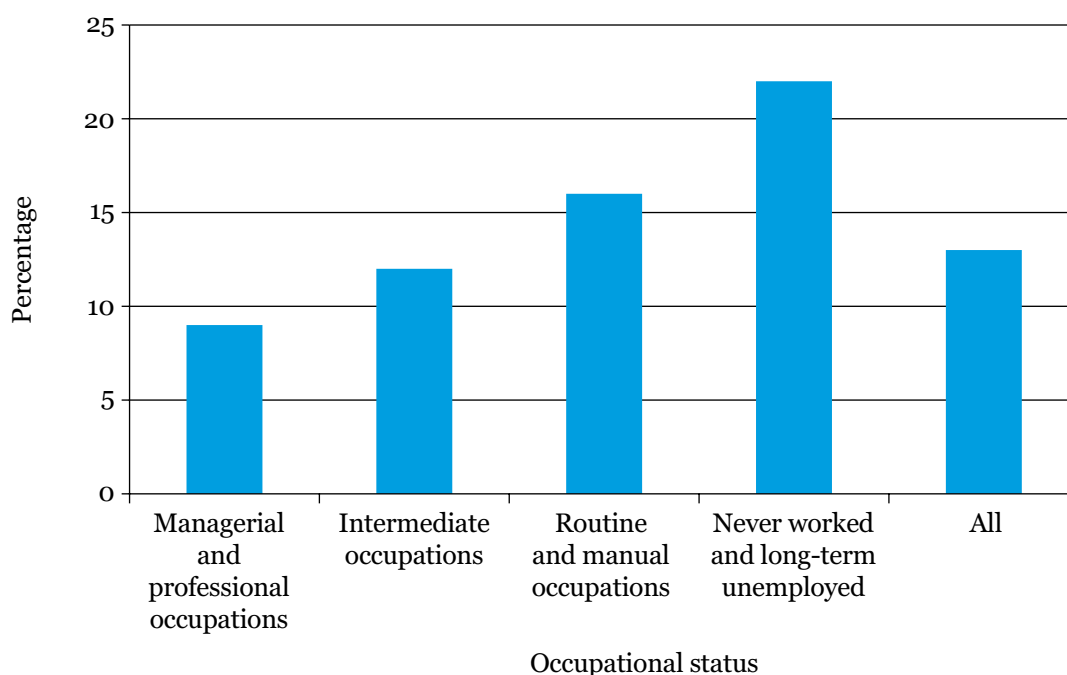


Source: British Crime Survey, 2009/10.

¹²³ Flatley, J. *et al.* 2010. Table 5.09.

People living in more deprived areas are also more likely to worry about violent crime, as are those in social housing. Social renters are about twice as likely (19%) to worry about violent crime as owner occupiers (11%).¹²⁴ A similar trend can be found in relation to worry about violence by occupational status (see Figure 8.3.7, below).

Figure 8.3.7 Percentage with high levels of worry about violent crime by occupational status in England and Wales, 2009/10¹²⁵



Source: British Crime Survey, 2009/10.

Feeling unsafe

Similarly, those in higher managerial and professional occupations are around half as likely as those who have never worked to feel unsafe alone at home after dark or walking alone in local area during the day or after dark (at 18% and 47%, respectively).¹²⁶

Disability

Fear of violent crime

Disabled/LLTI people are significantly more likely to worry about violent crime: 16% of those with an LLTI or disability have high levels of worry about violent crime compared to 12% of those without.¹²⁷

¹²⁴ Flatley, J. *et al.* 2010. Table 5.09.

¹²⁵ Flatley, J. *et al.* 2010. Table 5.08.

¹²⁶ Equality and Human Rights Commission analysis of unpublished 2008/09 British Crime Survey data.

¹²⁷ Flatley, J. *et al.* 2010. Table 5.08.

Box 8.3.1 Related issue: The impact of fear of crime

In the 2006/07 British Crime Survey, 44% of people with an LLTI/disability said that their fear of crime has a high or moderate impact on their quality of life compared to 36% of people with no LLTI or disability.¹²⁸

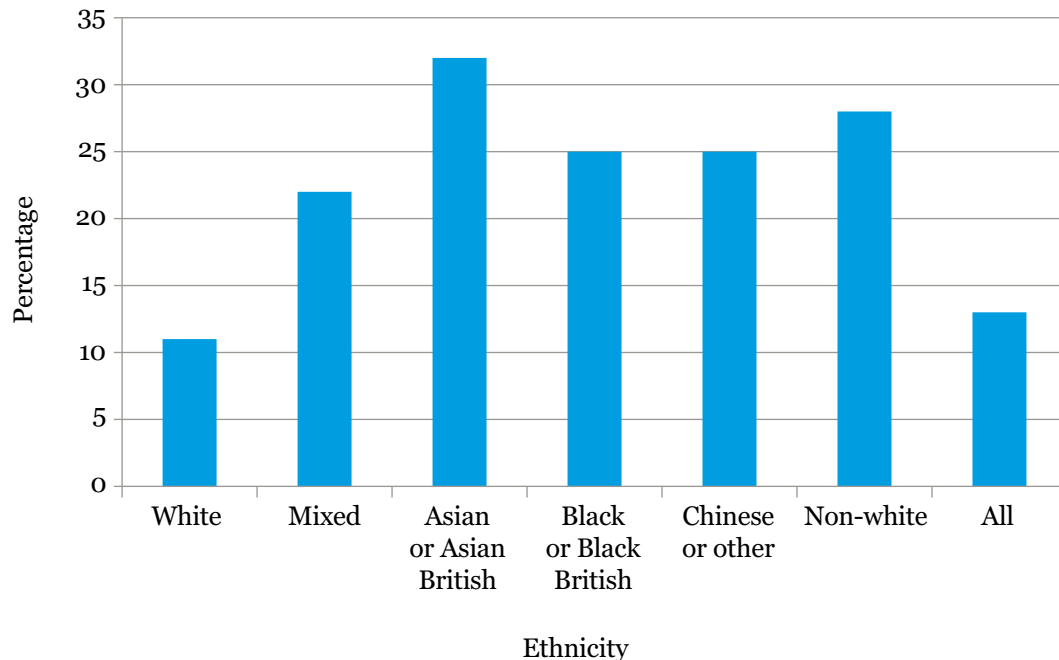
Feeling unsafe

Those with an LLTI/disability are more likely to feel unsafe alone at home after dark or walking alone in their local area during the day or after dark (47%) compared with those with no LLTI/disability (28%).¹²⁹

Ethnicity and religion or belief**Fear of violent crime**

People from ethnic minorities are more likely than White people to worry about violent crime (Figure 8.3.8, below).

Figure 8.3.8 Percentage with high levels of worry about violent crime by ethnicity in England and Wales, 2009/10¹³⁰



Source: British Crime Survey, 2009/10.

¹²⁸ Nicholas, S., *et al.*, 2007. Table 5.03.

¹²⁹ Equality and Human Rights Commission analysis of unpublished 2008/09 British Crime Survey data.

¹³⁰ Flatley, J. *et al.* 2010. Table 5.08.

Feeling unsafe

Asian people (39%) are more likely than Black or White people to feel unsafe alone at home after dark or walking alone in their local area during the day or after dark (33% and 31%, respectively).¹³¹

Those who report no religious affiliation report the lowest level of feeling unsafe alone at home after dark or walking alone in their local area during the day or after dark (24%), followed by Christians (33%), then those reporting non-Christian affiliation (38%). Within the latter group, 39% of Muslims feel unsafe.¹³²

Sexual orientation

Fear of violent crime

LGB people worry about being the victim of crime to a greater degree than other minority groups.¹³³ Around 40% of LGB people responding to Stonewall's *Gay British Crime Survey* said they were worried about being the victim of a crime: even more (70%) think they are at greater risk of being insulted or harassed than someone who is heterosexual and almost half said they think they are at greater risk of being physically assaulted.¹³⁴

Feeling unsafe alone at home after dark or walking alone in local area during the day or after dark

There is no significant difference between heterosexual/straight and LGB groups in terms of feelings of safety: the only difference is between those who answer the question (27%) and those who say don't know or don't wish to answer (39%).¹³⁵

¹³¹ Equality and Human Rights Commission analysis of unpublished 2008/09 British Crime Survey data.

¹³² Equality and Human Rights Commission analysis of unpublished 2008/09 British Crime Survey data.

¹³³ Dick, S. 2008.

¹³⁴ Dick, S. 2008.

¹³⁵ Equality and Human Rights Commission analysis of unpublished 2008/09 British Crime Survey data.

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Chapter 9: Health

Summary

Good health is not only an asset in itself; it also enables people to further their careers, look after families, and pursue their other interests to the full. Many Britons think that their health is 'good' or 'very good'. Most of us are confident that when we need help the National Health Service will treat us with respect and dignity.

The evidence suggests, however, that there are some groups of people who are more likely than average to experience 'poor' health, and some who find it difficult to access care and support that meets their particular needs.

While there are obvious differences in the health needs of men and women, the evidence does not suggest a clear trend of either gender experiencing worse health than the other. Both genders may find that their health needs are not met: men are less likely to use their GP; women have specific concerns about maternity services. Both genders have a mixed record when it comes to looking after health. Men are more likely to take exercise but less likely to eat the recommended amounts of fruit and vegetables, and women vice-versa.

Our health needs change as we age. The incidence of disability rises with age and older people (65 and over) also have a higher rate of depression than younger people. There is evidence to suggest that the health service sometimes deals with some older people in ways that they find humiliating or distressing.

Overall, around 1 in 5 of us report a disability or limiting long-term illness. The available evidence suggests that people who report a disability or limiting long-term illness are as likely as average to say that the health services treats them with dignity and respect.

In terms of ethnicity, evidence indicates that Pakistani and Bangladeshi groups are more likely to report 'poor' health than average. These groups are more likely to experience poor mental health, more likely to report a disability or limiting long-term illness, and more likely to find it hard to access and communicate with their GPs than other groups. Among groups defined by religion, Muslim people tend to report worse health than average. It is unclear how far these worse-than-average outcomes are related to Pakistani, Bangladeshi and Muslim people's relatively poor socio-economic position.

Research has suggested that there may be an association between harassment and poor mental health. Some evidence suggests that lesbian, gay and bisexual (LGB) and transgender people, Gypsies and Travellers and asylum seekers, who are perhaps more likely than other groups to face hostility and misunderstanding, are all more likely to experience poor mental health.

Sometimes, these same groups can feel misunderstood by the health services themselves. Some transgender people do not feel that their doctor supports their decision to seek gender reassignment, and some Gypsies and Travellers find it difficult to register with a GP.

Finally, there is a strong association between low socio-economic status and poorer health: in England and Wales, those who have never worked or are long-term unemployed have the highest rates of self-reported 'poor' health; people in routine occupations are more than twice as likely to say their health is 'poor' than people in higher managerial and professional occupations; and people from lower socio-economic groups are more likely to have a poor diet and less likely to take regular exercise.

Introduction

Good health is an end in itself. Good health also liberates; it enables individuals to do more in life, at home and in work.

Every individual's health is influenced by a number of factors, including their genes, their experiences in life, and the quality of care and treatment they receive when they need it. For the purpose of this chapter, we look at different groups' experience of health with a particular focus on health outcomes, and the extent to which they follow a healthy lifestyle, with a balanced diet and regular exercise.

The majority of Britons rely on the National Health Service (NHS) for advice and treatment. The NHS is founded on the principles of dignity for its patients and respect for their human rights. This chapter also gives some evidence which shows how successfully the NHS puts the ideals of respect and dignity into practice when dealing with certain groups, but this is an area that needs much more research.

Following the 2010 election, the government said that NHS budgets would be protected from cuts to a greater extent than other areas of public expenditure. In July 2010, the government published a White Paper which set out proposals for reform to the NHS.¹ They include changes in management structures, and proposals to hand greater control to patients and frontline care providers. These proposals have the potential to change the way different groups access advice and support.

¹ Department of Health, 2010. *Equity and Excellence: Liberating the NHS*. London: Department of Health.

The White Paper also included a renewed focus on public health. There is an ongoing public debate about what the state should do, if anything, to encourage people to take greater responsibility for managing their own health (by, for example, eating more sensibly, taking regular exercise, stopping drinking to excess, or stopping smoking). Some indicators of public health have improved over the past 10 years (smoking rates and excess drinking rates have fallen), while levels of obesity have risen. The evidence in this chapter suggests that different groups vary in the extent to which they live a healthy lifestyle. This evidence could help illuminate public debate.

Indicators

1. **'Poor' health and limiting long-term illness or disability**
2. **Poor mental health**
3. **Living a healthy lifestyle**
4. **Dignity and respect in health treatment**

Under **'poor' health and limiting long-term illness or disability**, we give the percentage of people who report their current health as 'poor', and the percentage who report a limiting long-term or long-standing illness or disability.

Under **poor mental health**, we give the percentage of people who attain a score in psychological questionnaires that indicate possible mental health conditions, such as depression or anxiety.

For **living a healthy lifestyle**, we give the percentages of people who: currently smoke; exceed recommended alcohol limits; achieve recommended levels of physical activity; or eat five portions of fruit and vegetables a day. We also give the percentages of people who are obese, and who are of healthy weight, according to body mass index.

For **dignity and respect in health treatment**, we give the percentages of people who feel they are treated with respect when using health services.

As in the rest of Part II, this chapter explores what we know about these indicators and what the evidence tells us about the experiences of different groups.

9.1 What we know about ‘poor’ health and limiting long-term illness or disability

Measures:

‘Poor’ Health – Percentage of people who report ‘poor’ current health status

LLTI/Disability – Percentage of people who report a limiting long-term or long-standing illness or disability (LLTI/disability)

How these measures work:

These two measures use the Health Surveys for England, Scotland and Wales. Two measures are used to allow comparison between a measure where an individual is asked to rate their general health against a set of options such as ‘fair’ or ‘bad’; and a second measure which asks people to report on the existence of a condition (‘Limiting Long-Term Illness’ or disability). Because they are ‘reported’ they are in general subjective measures, and there may be other more objective measures (for example, vital signs such as blood pressure) that could be used to measure health.

Such generalised measures also need to be interpreted carefully as a measure of health equalities, since they do not take account of some natural differences between certain population groups (e.g. by age, gender) in their tendency to have certain conditions. More specific information is needed to compare the ‘capabilities’ of different groups to achieve their health potential.

Ethnicity data are only available from the Census 2001 for England and Wales, and Scotland, and the booster sample in the 2004 Health Survey for England. Although the focus of this latter booster was ethnicity, they did collect information on religion and do allow some exploration of health across the largest religious groups.

Lack of impairment-specific data for disabled people in the Health Surveys mean that we have evidence of a general association between reported ‘poor’ health and those who also report LLTI/disability, but no evidence of the specific impairments that may have a greater association with poor health.

For socio-economic groups, the 2001 Census for England and Wales provides data against socio-economic categories; the Health Surveys for Scotland and Wales look at the most deprived areas (based on the Indices of Multiple Deprivation) which limits the extent we can compare them.

There are very limited data for sexual orientation and transgender, so we are reliant on smaller studies which limits the extent to which we can make any generalisations to the wider population.

‘Poor’ health

Except in the Welsh Health Survey, ‘poor’ is not one of the available options that respondents can select to describe their own health status. Moreover, the possible responses on health status differ between the Census and the Health Surveys for England, Scotland and Wales (and also between the Health Survey in Wales and those in the other two nations) making it difficult to compare surveys directly.

In the Health Surveys for England and Scotland, the options in 2008 (the most recent available source) were: ‘very good/good/fair/bad/very bad’. In this report, the responses ‘fair’/‘bad’/‘very bad’ have been included within the definition of ‘poor’ health. In the Health Survey for Wales, the options were ‘excellent/very good/good/fair/poor’ and our ‘poor’ health definition consists of the ‘fair’ and ‘poor’ categories only.²

In the 2001 Census which we use in part for ethnic minority groups, the options were ‘good/fairly good/not good’; therefore ‘not good’ rather than ‘poor’ health has been used as the measure of poor health when the Census is cited.

LLTI or disability

The three Health Surveys for England, Scotland and Wales use very slightly different questions to define these terms. However, for the purposes of this section we will compare their results.

Overview

These two complementary measures of people’s state of health show very similar patterns in terms of trends and group differences. **The proportion of people with Limiting Long-Term Illness (LLTI) or disabilities rises with age, so that a large proportion of people over 75 report these conditions.**

The likelihood of having such impairment is not evenly spread across the population. **Women are more likely than men overall, and people from some ethnic and religious groups – especially some Asian Muslims**

² The full definitions used in all health surveys are set out in Allmark, P. *et al.* 2010. *Life and Health: An evidence review and synthesis for the Equality and Human Rights Commission’s Triennial Review 2010*. Sheffield Hallam University. This paper is available on the Equality and Human Rights Commission’s Triennial Review web pages. Chapter 3, page 20.

– **appear more likely to report an LLTI or disability.** In both cases, the differences tend to become more accentuated at older ages, so for example nearly 2 in 3 Pakistani and Indian women over 65 had a LLTI or disability in 2001. **A similar pattern applies to Welsh people in general and to older Welsh women in particular,** two-thirds of the latter group have disabilities or LLTIs at age 75+, compared to only half of women in England and Scotland.

What we know about the overall situation and current trends

Around 1 in 5 people in Britain have an LLTI/disability (over 10 million),³ which is strongly associated with self-reported poor general health. Trend tables are routinely produced for the Health Survey for England. Data from 1993 to 2007 do not suggest any consistent patterns among men or women in the proportion reporting ‘poor’ health. The differential between men and women has remained reasonably stable throughout this period.⁴

What we know about the situation for different groups

Gender and age

‘Poor’ health

Overall, from the 2008 Health Surveys in England, Scotland and Wales, although measured slightly differently, the following proportions of adults aged 16+ reported their health to be ‘poor’: England 24% of men and 25% of women; Wales 21% of men and 23% of women; and Scotland 25% of men and 25% of women – these were small differences that were not statistically significant.⁵

Figure 9.1.1 below shows that in the Health Surveys, when examined by age group, the proportion of the population reporting ‘poor’ health clearly increases with age for both men and women across all three nations.

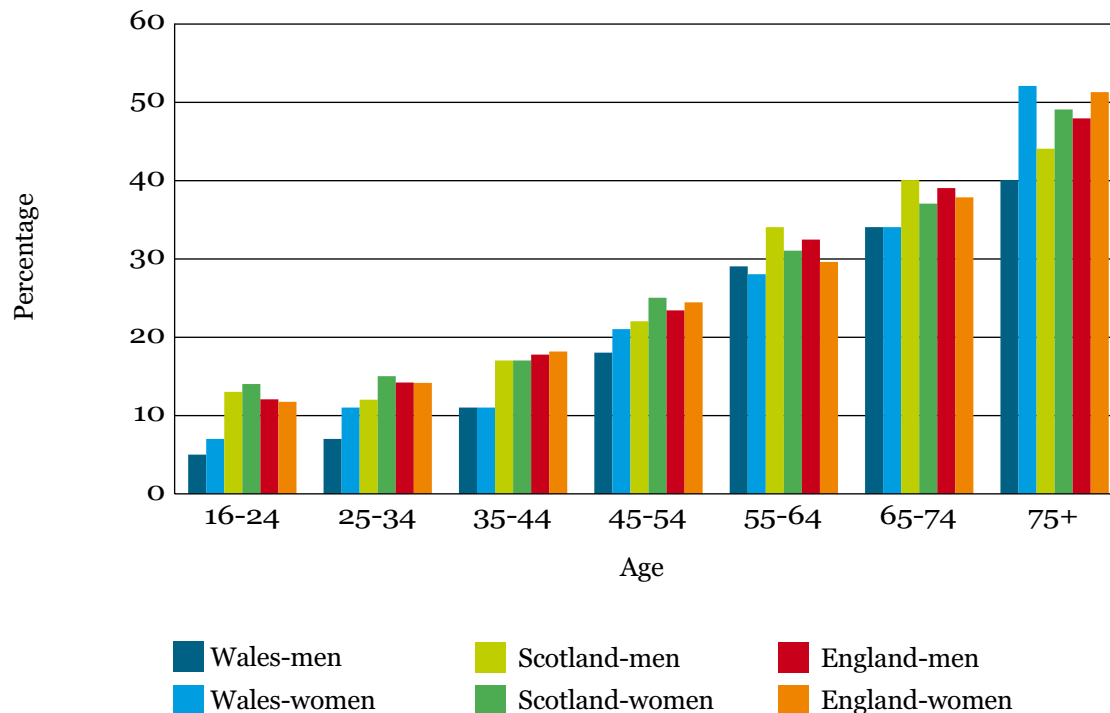
There are no clear patterns of difference between the genders and generally the likelihood of one gender reporting ‘poor’ health fluctuates. There are sharp increases for some groups in older age ranges, such as for women in Wales.

³ Office for Disability Issues (ODI) 2009. *Prevalence Estimates 2008/9*. ODI Factsheet. Available at: <http://www.odi.gov.uk/docs/res/factsheets/disability-prevalence.pdf> Accessed 02/09/2010.

⁴ Allmark, P. *et al.* 2010. Chapter 8. Page 52.

⁵ Allmark, P. *et al.* 2010. Chapter 8. Page 50.

Figure 9.1.1 Percentage reporting 'poor' health in gender in England, Scotland and Wales, 2008⁶



Source: Health Survey for England 2008, Scottish Health Survey 2008, Welsh Health Survey 2008.

Note: Question wording varied slightly between the surveys. Welsh figures group responses 'fair' and 'poor', while Scottish and English figures group responses 'fair', 'bad' and 'very bad'.

LLTI/disability

Overall results from the 2008 Health Surveys show that women's level of reported LLTI was statistically significantly higher than men's in the Health Survey for England, in which 22% of men and 25% of women aged 16+ reported having at least one LLTI or disability. Similar patterns are shown in the Scottish Health Survey, where 23% of men and 28% of women reported an LLTI and in the Welsh Health Survey, where 26% of men and 29% of women reported an LLTI.⁷

Broken down into age groups, a large proportion of the working-age population of England, Scotland and Wales report having an LLTI/disability (see Figure 9.1.2, below: for the 45-54 age group, percentages range from 20% for men in England to 26% of women in Scotland and Wales).

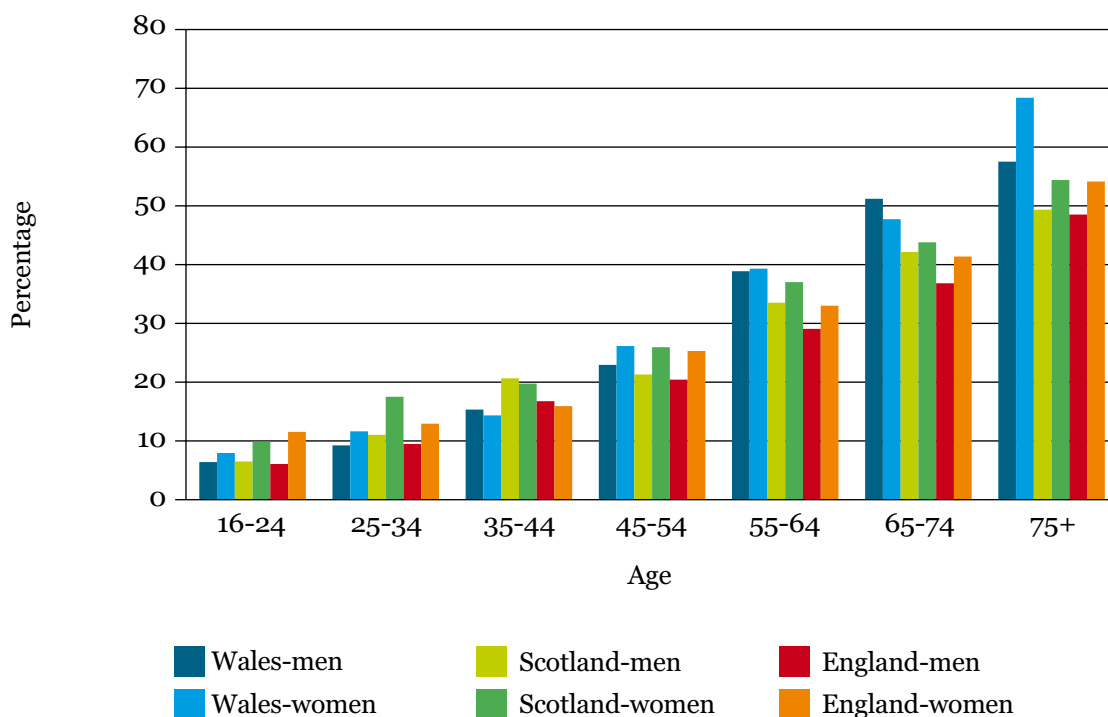
The proportion of people reporting an LLTI/disability increases with age. Moreover, the increase was greater for women in Wales than for any other group. In Wales, the proportion of women reporting an LLTI/disability rose by 29

⁶ Allmark, P. *et al.* 2010. Chapter 8. Page 50.

⁷ Allmark, P. *et al.* 2010. Chapter 8. Page 51.

percentage points from 39% for those aged 55-64 to 68% for those aged 75+. The equivalent increases were 21 percentage points in England (from 33% to 54%) and 17 percentage points in Scotland (from 37% to 54%).

Figure 9.1.2 Percentage of people reporting a limiting long-term illness or disability by gender and age in England, Scotland and Wales, 2008⁸



Source: Health Survey for England 2008, Scottish Health Survey 2008, Welsh Health Survey 2008.

Note: Question wording varied slightly between the surveys as in Figure 9.1.1.

Socio-economic groups

‘Poor’ health

In England and Wales using the 2001 Census which measures ‘not good’ health, those who had never worked or were long-term unemployed had the highest rates of ‘not good’ health (19%), although as set out in the ‘how this measure works’ section, ‘not good’ health is not directly comparable to the ‘poor’ health measure. Rates of ‘not good’ health for people in routine occupations were more than double those for people in higher managerial and professional occupations (9% compared to 3%).⁹

For Wales and Scotland, both 2008 Health Surveys show an association between ‘poor’ health and area deprivation.

⁸ Allmark, P. *et al.* 2010. Chapter 8. Page 51.

⁹ Allmark, P. *et al.* 2010 analysis of the Census Longitudinal Study 2001. Chapter 4. Page 62.

LLTI/disability

For England, Scotland and Wales, although variously measured, evidence shows a strong association with having never worked, or being in the more deprived or lower quintiles and having an LLTI or disability.

- Across Britain as a whole, more than 40% of those aged 45-64 who have never worked or are long-term unemployed report an LLTI or disability, compared to around 18% with managerial or professional backgrounds (figures given for 2006-08).¹⁰
- Wales – 41% of adults aged 16+ who have never worked or are long-term unemployed report an LLTI or disability, compared to around 23% with managerial or professional backgrounds.¹¹
- Scotland – 32% of adults 16+ in the most deprived areas reported a long-standing illness, disability or health problem compared to only 14% in the least deprived areas.¹²

The association between adults with LLTI/disability and poor socio-economic position, as also set out in Chapter 11: Employment and Chapter 12: Standard of living, is possibly due to the poor employment prospects of disabled people. Chapter 12 also shows that families with disabled children live in greater levels of poverty – in part due to the cost of providing care and the limits that caring for a disabled child can place on parents' economic prospects. There is also evidence that you are possibly more likely to have a child with a disability if you are from a lower socio-economic background.¹³ This flags up a potentially more complex relationship between socio-economic status and disability in part due to lower levels of general health, and healthy lifestyle among those with lower socio-economic backgrounds – discussed further under the healthy living section below.

Box 9.1.1 Related issue: Poor health and socio-economic status

In discussing socio-economic groups and health, it is worth examining the overlap between many equality groups and their socio-economic status. Worse health outcomes for those who are poor are often compounded when equality characteristics are 'added', for example, disability or ethnicity.

Just one example is the excess risk of 'poor' health for some ethnic minority groups due to poorer socio-economic circumstances. Controlling for

¹⁰ Allmark, P. *et al.* 2010 Chapter 4. Page 69.

¹¹ Allmark, P. *et al.* 2010 analysis of the Welsh Health Survey 2008. Chapter 4. Page 70.

¹² Allmark, P. *et al.* 2010, comparing 5 (most deprived) to 1 (least deprived) on the Scottish Index of Multiple Deprivation quintile 07/08 Scottish Household Survey. Chapter 4. Page 72.

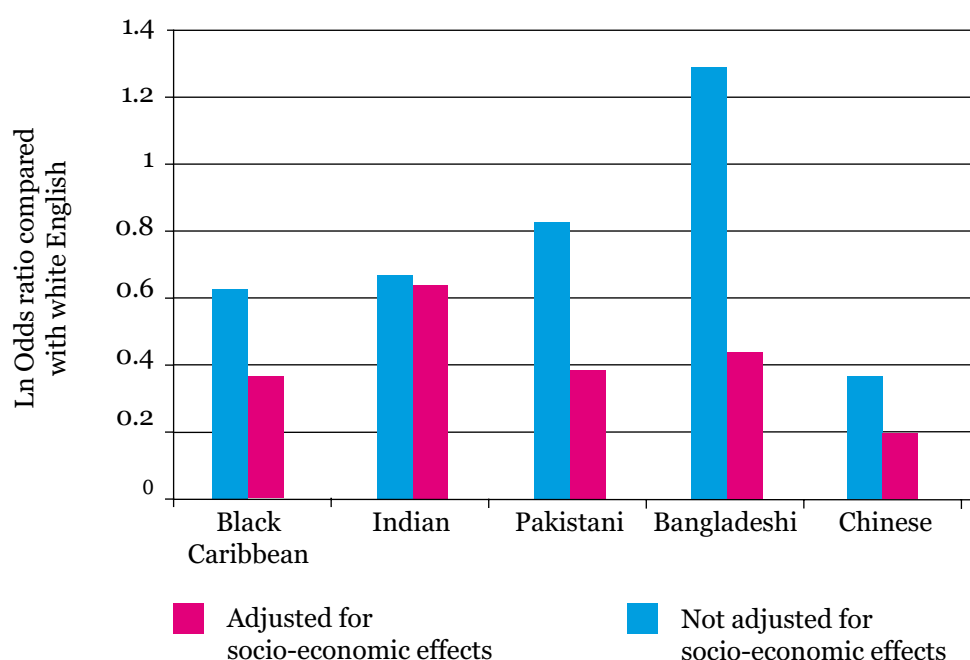
¹³ Spencer, N. 2008. *Health Consequences of Poverty for Children*. London: End Child Poverty.

Box 9.1.1 Continued

socio-economic status in any analysis of the poorer health outcomes of ethnic minority groups is difficult. Within any measure of socio-economic status, the profile for ethnic minority groups tends to be less favourable, so that there will always be some degree of socio-economic effect that cannot be accounted for.¹⁴

An analysis using data from the Health Survey for England 1999 allows us to show the relationship between health and socio-economic circumstances across a large number of ethnic groups. Looking at the outcome of self-reported 'poor' health (defined by the authors as 'fair or poor' health), and controlling simultaneously for several socio-economic indicators (income, housing tenure, economic activity), this analysis found a clear and large reduction in relative risk compared to the White British comparator group for most groups (shown in Figure 9.1.3, below). Only the White minority (predominantly Irish) group (which had odds close to 1) and the Indian group (for whom the reduction in relative risk was small) were the exceptions.

Figure 9.1.3 Effect of adjusting for socio-economic factors on odds ratio of reporting 'poor' health minority ethnic groups in England, 1999¹⁵



Source: Health Survey for England 1999.

Notes: An odds ratio of 1 means there is no difference in odds of a given outcome between a particular ethnic minority group (e.g. Black Caribbean) and the White English population; an odds ratio of < 1 means the event is less likely to occur for a particular ethnic minority group; an odds ratio of > 1 means the event is more likely to occur for a particular ethnic minority group.

¹⁴ Allmark, P. *et al.* 2010. Chapter 7. Page 97.

¹⁵ Allmark, P. *et al.* 2010. Chapter 7. Page 99.

Box 9.1.1 Continued

A second analysis using pooled data from the Health Survey for England 1999 and 2004 of religion, ethnicity and socio-economic status, found that the odds of reporting 'poor' health were reduced for all groups when controlling for socio-economic status, and particularly so for Pakistani and Bangladeshi Muslims, but less so for Christian Black Caribbean. These findings suggest that lower socio-economic status is playing an important role in the excess risk of 'poor' health for these groups, but it is not the whole story.¹⁶

Disability

The Office for Disability Issues estimate around 1 in 5 people in Britain have an LLTI/disability (over 10 million).¹⁷ Those with LLTI unsurprisingly report higher rates of 'poor' health status compared to those without:

Reporting 'poor' health¹⁸ (for all adults 16+):¹⁹

- England – 64% of those with LLTI, compared to 10% without LLTI
- Scotland – 64% of those with LLTI, compared to 9% without LLTI
- Wales – 57% of those with LLTI, compared to 6% without LLTI

One study found 15% of those with a learning disability reported their health as not good. The rates were highest for those who were unemployed, socially isolated, older and from an ethnic minority community.²⁰

Ethnicity**'Poor' health**

Using the measure of 'not good' health in the 2001 Census for England and Wales, the Pakistani and Bangladeshi groups stand out as having the worst health (Figure 9.1.3 below shows for England and Wales combined, age-standardised rates of over 13% for men and over 15% for women, compared to around 8% for all ethnic groups reporting "not good" health), whilst Chinese men and women report the best health.²¹

¹⁶ Allmark, P. *et al.* 2010. Chapter 9. Page 55.

¹⁷ ODI. 2009.

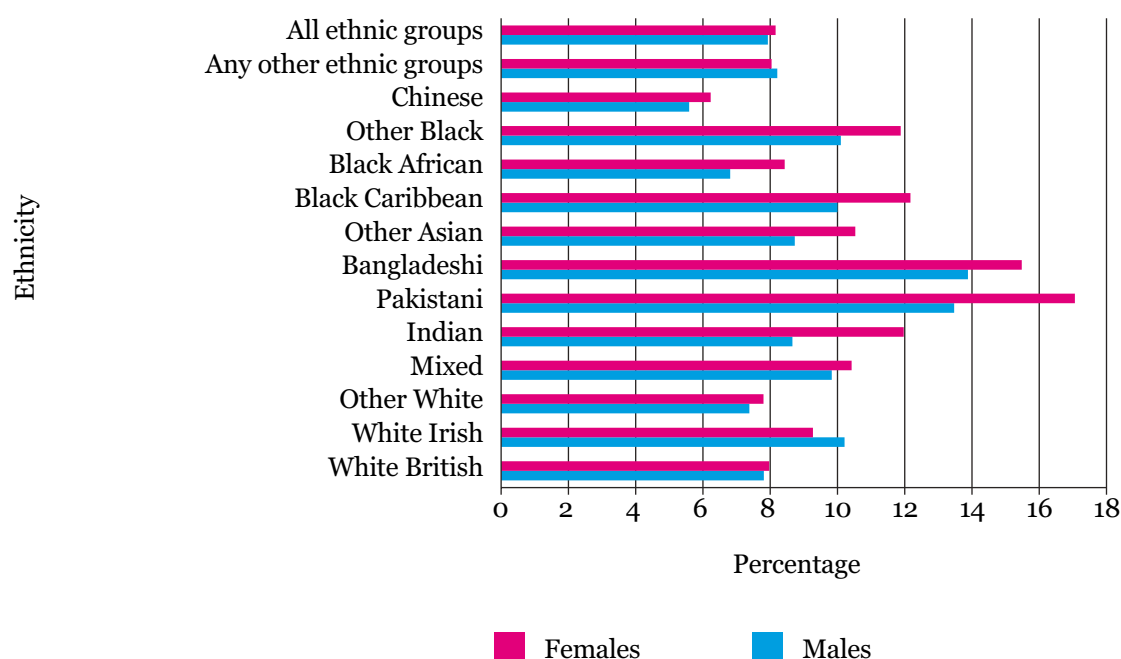
¹⁸ Welsh figures group responses 'fair' and 'poor', while Scottish and English figures group responses 'fair', 'bad' and 'very bad' as in the Gender and Age analysis above.

¹⁹ Allmark, P. *et al.* 2010 analysis of Health Surveys for England, Scotland and Wales. Chapter 6. Pages 19-21.

²⁰ Allmark, P. *et al.* 2010. Chapter 6. Page 21.

²¹ Allmark, P. *et al.* 2010. Chapter 7. Page 56.

Figure 9.1.4 Age-standardised percentages of people reporting ‘not good’ health by ethnicity in England and Wales, 2001²⁴



Source: Census, April 2001, ONS.

Note: Differences between males and females were significant for White British, White Irish, Indian, Pakistani, Other Asian, Black Caribbean and Black African groups.

Looking at age-specific breakdowns of the raw 2001 Census data, although there is variation between age groups, Bangladeshi and Pakistani men and women stand out as being most likely to report not good health, and Chinese men and women being most likely to report good health at most ages.²³

A similar analysis of the age breakdowns of the 2001 Census in Scotland shows that Bangladeshi and Pakistani people again stand out as reporting ‘not good’ health in high numbers. Over age 60 years, a high proportion of Indian and Pakistani men, and particularly women, report their health to be ‘not good’. The White Irish and White Scottish groups are more likely to report ‘not good’ health than the other White British and Other White groups at almost all ages.²⁴

²² Office for National Statistics 2001. *Focus on ethnicity*. Available at: <http://www.statistics.gov.uk/statbase/Product.asp?vlnk=10991>. Accessed on 23/08/2010.

²³ Allmark, P. *et al.* 2010. Chapter 7. Pages 57-59 for a full breakdown by age and ethnicity.

²⁴ Allmark, P. *et al.* 2010, figures calculated from raw figures supplied by General Register Office (Scotland) (GRO(S)). Chapter 7. Pages 60-61.

More recent data are available for England from the 2004 Health Survey for England which included a 'booster' sample of people from seven main enumerated ethnic minority groups. This uses same the measure of 'poor' health as used for gender and age above (i.e. all those who described their health as fair, bad or very bad) so it allows us to show patterns by ethnicity, and to compare to gender/age results in the previous section.

The percentages of women reporting 'poor' health for each group were:

- Bangladeshi 52%
- Pakistani 48%
- Black Caribbean 40%
- Indian 33%
- Black African 30%
- Chinese 26%

Among men, a similar pattern was seen for each group:

- Bangladeshi 47%
- Pakistani 34%
- Indian 33%
- Chinese 26%
- Black Caribbean 25%
- Black African 24%.²⁵

As with the wider population, health inequalities experienced by ethnic minorities increases with age. In England and Wales:²⁶

- Among younger men (16-49 years), the Irish are more likely to report 'not good' health than other groups.
- The disadvantaged position of the Bangladeshi and Pakistani populations worsens with increasing age among both genders – Bangladeshi men are the most likely to report 'not good' health in the 50-64 and 65+ age groups; Pakistani women are the most likely to report 'not good' health in the same age groups.
- Among the Indian group, the proportion reporting 'not good' health increases steeply with age, especially for women.

It should be remembered that smaller ethnic groups that remain un-enumerated or hidden within larger categories, such as Somalis within the broad Black African group, may experience even worse health than the Bangladeshi and Pakistani groups.

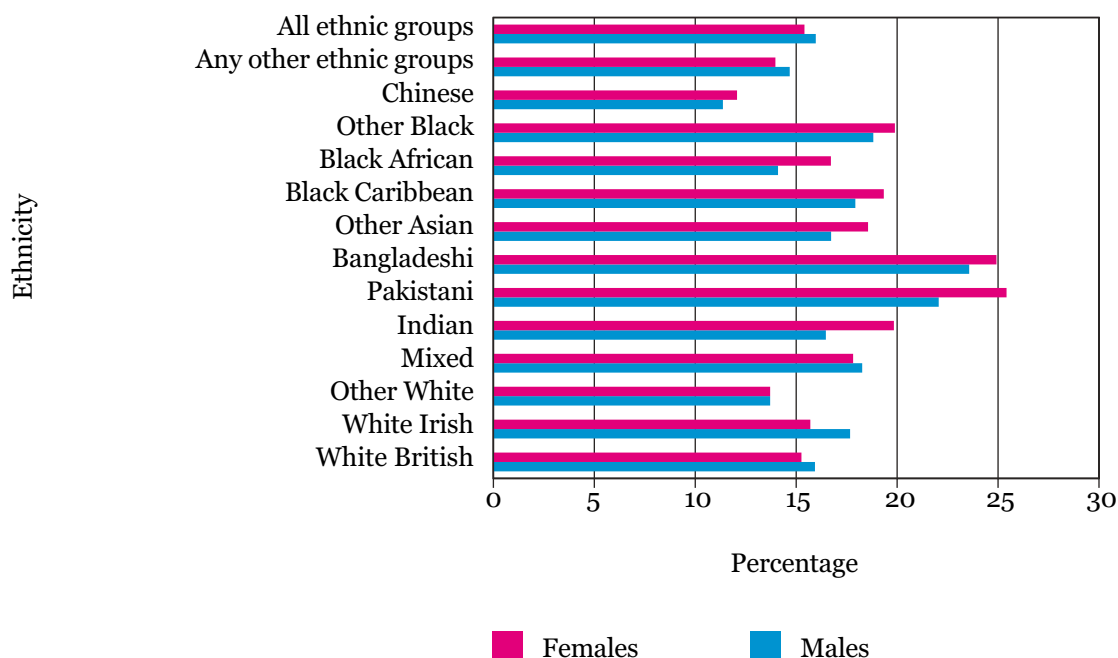
²⁵ Allmark, P. *et al.* 2010. Chapter 7. Page 62.

²⁶ Allmark, P. *et al.* 2010, figures calculated from Census 2001 raw figures. Chapter 7. Page 59.

LLTI/disability

The 2001 Census for England and Wales shows that, among males, in comparison with the White British group, the White Irish, Mixed, Indian, Pakistani, Bangladeshi, Black Caribbean and Other Black groups all had higher age-standardised rates of reporting LLTI or disability, while the Other White, Black African and Chinese had lower rates. Among women, only the Other White and Chinese groups had lower rates than the White British, with all other ethnic minority groups having higher rates. The highest rate was for Pakistani and Bangladeshi women – 25% reported ‘LLTI or disability’, compared to 15% for all ethnic groups.

Figure 9.1.5 Age-standardised percentages of people reporting ‘disability or LLTI’ by ethnic group and gender in England and Wales, April 2001²⁷



Source: Census, April 2001, ONS.

Note: Differences between males and females were significant for White British, White Irish, Indian, Pakistani, Black Caribbean and Black African groups.

An analysis of raw 2001 Census data shows that the prevalence of LLTI/disability increases with age across all age groups: in England and Wales, very high levels of LLTI/disability are found for the over 65s among Indian, Pakistani, Bangladeshi and Black Caribbean groups. The highest rates were for Indian and Pakistani women aged 65 years or over, with over 65% reporting an LLTI/disability. While rates of LLTI/disability are markedly lower among the Chinese than in all other ethnic groups

²⁷ Office for National Statistics 2001. *Focus on ethnicity*. Available at: <http://www.statistics.gov.uk/statbase/Product.asp?vlnk=10991>. Accessed on 23/08/2010.

in the two younger age-groups (16-49 and 50-64 years), at ages over 65 their advantageous position is less apparent.²⁸

In Scotland, small numbers of ethnic minority groups in the 2001 Census data make analyses by age more difficult. Nevertheless, similar patterns are observed to those in England and Wales, with the Chinese having particularly low rates of LLTI/disability at younger ages, Pakistani men and women having high rates across all ages, and Indian women having high rates at older ages. White Scottish and White Irish have rates that are higher than Other White British for both genders and all ages.²⁹

Gypsies and Travellers

A 2004 study of Gypsy and Traveller health (with a sample of 293) found high levels of self-reported 'poor' health. Overall, around 30% of the sample reported 'not good' health, with a further 31% reporting 'fairly good' health and just 40% reporting 'good health'. Whilst these are small samples, the figures diverge considerably from the overall national estimates for even the worst-off Pakistani and Bangladeshi groups. The same study found 39% of respondents had an LLTI or disability, far higher than the comparator sample (N=260) included in the study, and higher than figures from other sources for any of the regularly enumerated ethnic minority groups.³⁰

Asylum seekers

Asylum seekers and refugees have particular health concerns due to the impact of relocation and possible past experience of trauma. Research is generally limited on their general levels of health due to the hidden nature of the population.³¹ The specific health issues that may face them include the impact of detention, particularly on children if they are detained.³² This is an issue of concern raised by the 2006-07 Joint Committee on Human Rights.³³

²⁸ Allmark, P. *et al.* 2010, figures calculated from Census 2001 raw figures. Chapter 7. Page 66.

²⁹ Allmark, P. *et al.* 2010, figures calculated from raw figures supplied by GRO(S). Chapter 7. Page 68.

³⁰ Allmark, P. *et al.* 2010. Chapter 7. Page 63 [see also page 27].

³¹ Allmark, P. *et al.* 2010. Chapter 7. Page 14. Also see: Roberts, K. and Harris, J. 2002. *Disabled people in refugee and asylum-seeking communities in Britain*. Joseph Rowntree Foundation Findings. York: JRF.

³² HM Chief Inspector of Prisons 2006. *Inquiry into the quality of healthcare at Yarls Wood immigration removal centre*. 20-24 February 2006. London:HMIP Available at: <http://www.medicaljustice.org.uk/images/documents/yarlswoodhealthcarereport.pdf>. Accessed on 23/08/2010.

³³ Joint Committee on Human Rights 2007. *The Treatment of Asylum Seekers*. Tenth Report of Session 2006-07. Volume I – Report and formal minutes. London: The Stationery Office. Pages 69-95.

Religion or belief

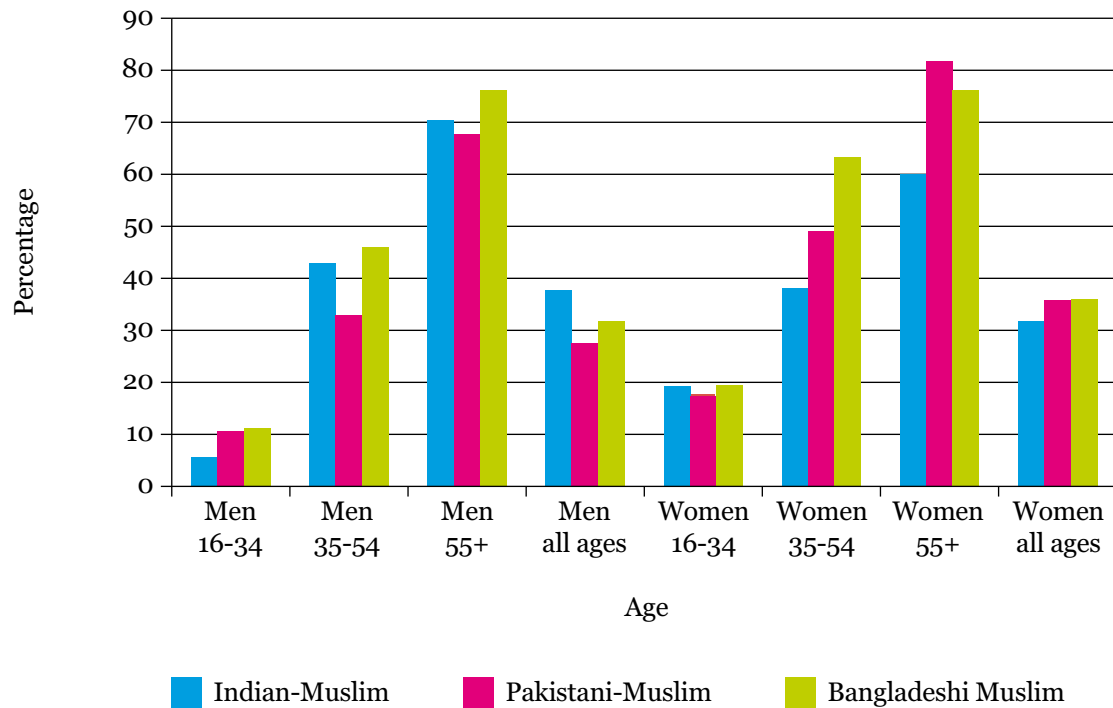
‘Poor’ health

2001 Census data for Britain as a whole reveal large differences in self-reported ‘not good’ health between religious groups. Among men, the age-standardised percentage of people reporting ‘not good’ health was highest among Muslims (13%) and those reporting ‘Any other religion’ (12%) and lowest among Jewish men (7%). Among women, the highest percentage was again among Muslims (16%) with the percentage among Sikhs (14%) and ‘Any other religion’ (14%) also being high, and lowest again among the Jewish group (7%) (compared to around 8% for Christian men and women).³⁴

The figures below, using Health Survey for England (2004) data, illustrate the variation in ‘poor’ health within ethnic groups by religion, and within religious groups by ethnicity. Sample sizes for other religion–ethnicity combinations are too small to sustain analyses, but it is clear that this type of exploration is helpful. Numbers of Black African Muslims were very small in the survey and so are not included. The patterns by age and gender are complex – particularly among the men, and the Indian Muslim rates are based on small numbers meaning that the estimates are imprecise. Among women aged 35 and over, the data suggest that levels of ‘poor’ health may be higher among Pakistani and Bangladeshi Muslims than among Indian Muslims, though small numbers preclude any firm conclusions.

³⁴ Allmark, P. *et al.* 2010. Chapter 9. Page 25.

Figure 9.1.6 Percentage of people reporting 'poor' health at 34, 54 and 55 by gender and Muslim-ethnic group compared in England, 2004³⁵



Source: Health Survey for England 2004.

Note: All age estimates are crude rates, not standardised for age.

LLTI/disability

2001 Census data for Britain also show that the prevalence of LLTI/disability varies between religious groups. Age-standardised rates of LLTI for Britain as a whole were highest among Muslims for both men (21%) and women (24%), though men and women reporting 'any other religion' and also Sikh women, had high rates. Jewish men (13%) and women (13%) were the least likely to report an LLTI when age-standardised rates were compared. Levels of 'not good' health and LLTI among Muslims appear to be particularly high in comparison to other religious groups in the middle age-range 30-74.³⁶

More recent data for England only, from the Health Survey for England (1999 and 2004 pooled data), examine odds of reporting LLTI/disability for different religious-ethnic groups – highest odds were for Bangladeshi Muslim men (1.79) and Pakistani Muslim women (1.75) but notably also for Black Caribbean women with 'no religion' (2.15).³⁷

³⁵ Allmark, P. *et al.* 2010. Chapter 9. Page 30.

³⁶ Allmark, P. *et al.* 2010 analysis of Census, April 2001. Chapter 9. Page 34.

³⁷ Allmark, P. *et al.* 2010. Chapter 9. Page 37.

Sexual orientation

Data for England and Wales from the Citizenship Survey 2007 indicate that perceived health levels for the LGB respondents were largely similar to heterosexual respondents, and similarly that there is no significant difference between levels of LLTI/disability.³⁸

Prescription for change, a large-scale opportunistically recruited survey which explored the general health of over 6,000 lesbian women from England, Scotland and Wales reports similar findings; 80% of lesbians who completed the survey reported good or excellent health whilst 2% reported 'not good' health.³⁹

Transgender

'Poor' health

The 'Count me In Too Survey' undertaken in Brighton and Hove in 2008, which had a small sample (N=800) and was geographically specific, nonetheless shows *possible* differences in the experience of transgender people compared to the population as a whole: 30% (N=13) transgender respondents said that their physical health was 'poor or very poor' compared to 8% non-transgender; 44% (N=19) transgender respondents reported 'good or very good' health status compared to 77% non-transgender.⁴⁰

There is no clear evidence from the small amount of data available about the levels of long-standing health problems or disability in this population.⁴¹

Box 9.1.2 Related issues: Patterns of access and take up of services

There is evidence across a range of health services that patterns of access, uptake and treatment diverge between women and men. The patterns are, however, complex, so that both men and women appear to be disadvantaged in some areas of healthcare.⁴²

Men tend to access GP services less often than women – this may only in part be based on need but on the appropriateness of services and how accessible they are to men. They also appear to ignore symptoms of ill health and delay seeking healthcare more often than women. Men may be more likely than women to self-medicate in harmful ways, e.g. through use of alcohol and drugs when experiencing mental distress. However, there is evidence that maternity services frequently fail to provide satisfactory services to women, and particularly to women from ethnic minority backgrounds.⁴³

³⁸ Allmark, P. *et al.* 2010. Chapter 10. Pages 20-22.

³⁹ Allmark, P. *et al.* 2010. Chapter 10. Page 20.

⁴⁰ Allmark, P. *et al.* 2010. Chapter 11. Page 15.

⁴¹ Allmark, P. *et al.* 2010. Chapter 11. Page 16.

⁴² Allmark, P. *et al.* 2010. Chapter 8. Pages 100-108.

⁴³ Allmark, P. *et al.* 2010. Chapter 8. Page 60.

Box 9.1.2 Continued

Women are more likely than men to receive treatment for minor mental health conditions. However, more than twice as many male as female psychiatric inpatients are detained and treated compulsorily.⁴⁴

New migrant communities have different health needs from established minority communities, and increasing ethnic, linguistic and cultural diversity demands new responses from health services. Asylum seekers and refugees may be affected by:

- Difficulties accessing GP treatment and consequent increased reliance on Accident and Emergency services.
- Uncertainty and lack of clarity among service providers about asylum seekers' eligibility for secondary healthcare services resulting in care being withheld in some cases.
- Inadequate response to communicable diseases, particularly Tuberculosis.
- The health of asylum seekers with HIV/AIDs is negatively affected by the policy of dispersal at short notice and chargeable HIV treatment for refused asylum seekers. Also the human rights implications around the deportation of failed asylum seekers with HIV/AIDs.
- The Joint Committee on Human Rights has highlighted the need to address health concerns of asylum seekers in detention through adequate provision.⁴⁵

Effective diagnosis and treatment may be undermined when ethnic minority people do not present with the 'typical' symptoms that have been identified on the basis of research and clinical experience with the majority White British population.

There is also evidence that Gypsies and Travellers have poorer access to GPs and other primary care services. One study reported difficulties in registering with a GP among Gypsies and Travellers. It found that 16% (N=47) of respondents were not registered with a GP and the proportion was as high as 38% (N=111) for those living in trailers on empty land and 37% (N=108) for those who travel all year.⁴⁶

Take-up of screening services: There is evidence also from varied sources that men are less likely than women to take up preventive measures, such as screening. For instance, the evaluation of phase 2 of the National bowel cancer screening programme in England found lower rates of uptake in men than women (48% versus 56%).⁴⁷

⁴⁴ Allmark, P. *et al.* 2010. Chapter 8. Page 12.

⁴⁵ Allmark, P. *et al.* 2010. Chapter 7. Page 14. UK Borders Agency Research into GP access for refugees is forthcoming in September 2010 which will add to this evidence base.

⁴⁶ Allmark, P. *et al.* 2010. Chapter 7. Page 106.

⁴⁷ Allmark, P. *et al.* 2010. Chapter 8. Page 105.

Box 9.1.2 Continued

Several studies have documented lower levels of screening among ethnic minority groups and also specific issues relating to access for asylum seekers and refugees.⁴⁸

There are specific issues related to health screening in relation to transgender people. For some screening programmes, such as breast and cervical screening, GP action is required to ensure invitations to attend are sent, and appropriate screening may not be offered when it relates to an individual's former gender. However this is a complex and under-researched area.⁴⁹

⁴⁸ Allmark, P. *et al.* 2010. Chapter 7. Page 107.

⁴⁹ Allmark, P. *et al.* 2010. Chapter 11. Page 27.

9.2 What we know about poor mental health

Measure:

Poor mental health – Percentage of people that attain a score in specific psychological questionnaires indicating possible mental health conditions.

How this measure works:

These questionnaires vary between nations which limits comparability – in England and Scotland, this is based on in the General Health Questionnaire (GHQ)-12, where a score of 4 or more indicates a possible mental health condition. In Wales, a mean Mental Component Summary (MCS) score from the SF-36 questionnaire of health status is used to determine mental health – a higher score is better. We report generally against a benchmark of 50 as the ‘norm’.⁵⁰

These scores are available in the 2008 Health Surveys for England, Scotland and Wales.

In terms of socio-economic groups in Scotland, we use a score of less than 50 in the Warwick–Edinburgh Mental Wellbeing Scale (WEMWBS). Consequently, as socio-economic groups are also variously measured in England and Wales, using income level and occupation, we cannot compare socio-economic groups in Scotland to other groups, or compare England, Scotland and Wales but we can look at patterns within the socio-economic groups of each nation.

A lack of disaggregated data for disabled people means that we have a general association between poor mental health and disability but no more detailed information of the particular impairments that may be associated with poor mental health.

Data on ethnicity and religion or belief are only available for England, from the 2004 booster sample to the Health Survey for England.

⁵⁰ Welsh Assembly Government 2009. *Welsh Health Survey 2008*. Cardiff: Welsh Assembly Government. Glossary, Pages 119-120. In the WHS: ‘...norm-based scoring has been used, to transform all scores to a mean of 50 and standard deviation of 10 using the general United States population (for the purpose of comparability and simplicity). Higher scores indicate better health.’

There is limited evidence for sexual orientation and transgender groups and therefore we are reliant on varied literature which limits the extent to which we can make any generalisations to the wider population.

There are issues with under-reporting and diagnosis that apply across all groups, and which limit the reliability of the indicator – particularly for men. This is because reporting and diagnosis of mental illness are generally low, which contradicts, for example, the higher suicide levels for men reported in Chapter 6: Life. Issues of diagnosis also apply to the use of such questionnaires for those who do not speak English as a first language, or who have a different cultural background.

Overview

Over 1 in 10 adults in England, Scotland and Wales report potential mental health difficulties. While the incidence is significantly higher for women, reporting of mental health difficulties does not have as pronounced a pattern across groups as some health and other outcomes. For example, there appears to be no overall pattern for age.

Nevertheless, more specific data on particular conditions show, for example, that **from the age of about 65, older people have a much higher rate of depression than younger people.**

However, some groups do seem to be at greater risk than others – including Pakistanis and Bangladeshis, LGB and transgender people, Gypsies and Travellers and asylum seekers. In some cases, there are signs that mental illnesses may be linked to other disadvantages and pressures felt by such groups. Some analysis has shown an association between the experience of victimisation for different religious groups and poor mental health.

In this sense, **mental health problems can sometimes be seen as a potential symptom of wider difficulties that minorities face within society.** This is particularly pertinent for groups facing the greatest disadvantages. At the extreme, these conditions can lead to suicide, as reported in Chapter 6: Life.

What we know about the general situation and trends

The 2008 Health Survey for England shows that the proportion of all men and women with a 12 item General Health Questionnaire (GHQ-12) score of 4 or more which indicates possible problems have decreased slightly since 1999. There are less clear patterns of change for Scotland and trends are not available for Wales.⁵¹

In both England and Scotland, there is a persistent gender gap, where the proportion of women of different ages with a GHQ-12 score of 4 or more over time is higher than for men.⁵²

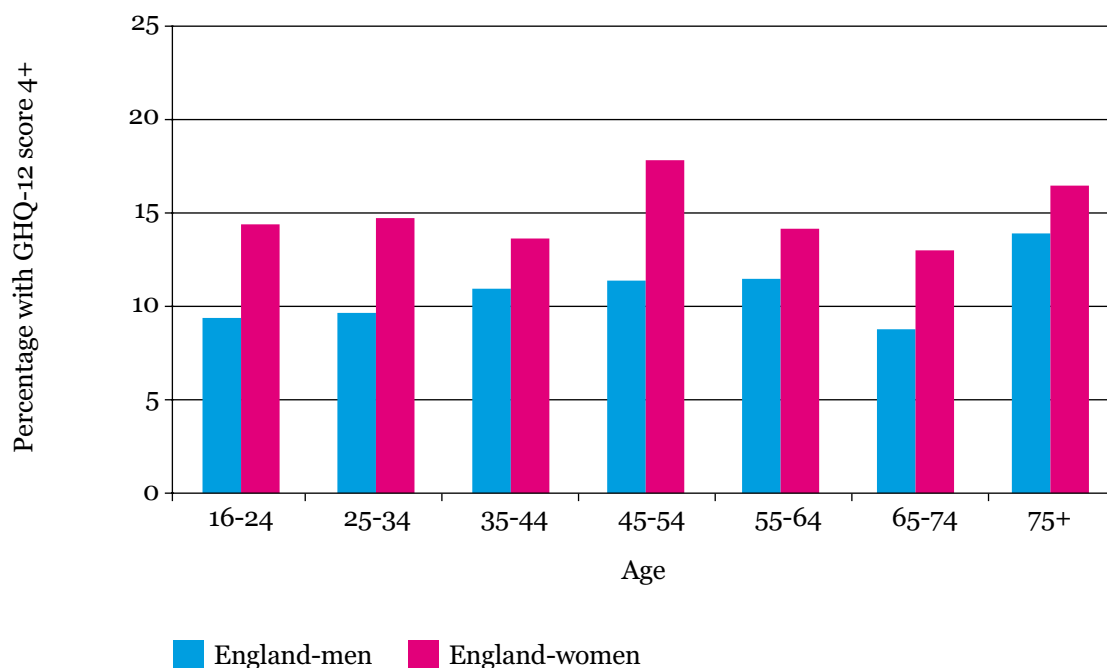
What we know about the situation for different groups

Gender and age

In terms of assessment of poor mental health via these questionnaires, women are more likely than men to have scores that indicate possible mental health conditions but there is little consistency in the pattern across age groups.

In the Health Survey for England, 11% of all men had GHQ-12 score of 4 or more compared to 15% of women, which breaks down across the age groups as follows:

Figure 9.2.1 Percentage of people with GHQ-12 score of 4 or more by age and gender in England, 2008⁵³



Source: Health Survey for England 2008.

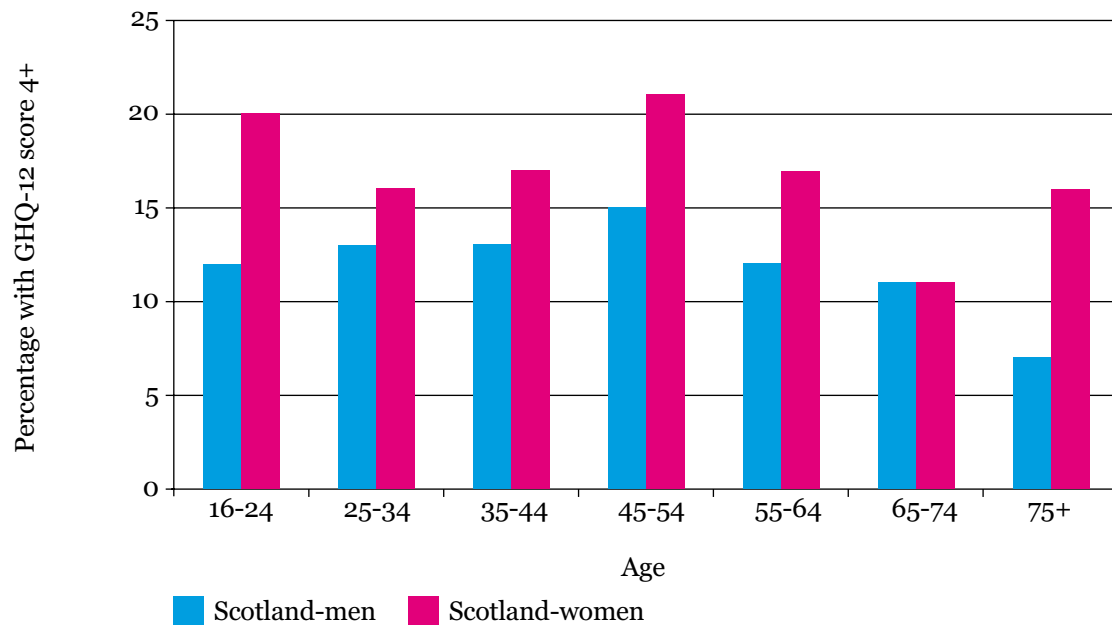
⁵¹ Allmark, P. *et al.* 2010. Chapter 8. Page 56.

⁵² Allmark, P. *et al.* 2010. Chapter 8. Page 56.

⁵³ Allmark, P. *et al.* 2010. Chapter 8. Page 55.

In Scotland, these figures were higher, with 12% of men and 17% of women obtaining GHQ-12 scores of 4 or more.

Figure 9.2.2 Percentage of people with GHQ-12 score of 4 or more by age and gender in Scotland, 2008⁵⁴



Source: Scottish Health Survey 2008.

⁵⁴ Scottish Government 2009. *The Scottish Health Survey 2008, Part 1: Main Report*. Edinburgh: Scottish Government. Table 1.6.

The data available for Wales from the Welsh Health Survey, which uses a different questionnaire, show a similar gender pattern, with women consistently having a lower SF-36 score than men (a lower score indicates possible problems).⁵⁵

Figure 9.2.3 Mean SF-36 Mental Component Summary score by age and gender in Wales, 2008⁵⁶



Source: Welsh Health Survey 2008.

The Health Survey for England (2005) expresses caution about the apparent lack of association between increasing age and mental ill health. The 10-item Geriatric

Depression Scale (GDS-10) was used for the first time in the Health Survey for England in 2005 for those over 65 years. It is a self-administered questionnaire consisting of 10 questions which measure depressive symptoms. Scores of three or more depressive symptoms were more likely among older respondents (of both genders) and higher scores were more prevalent in those reporting LLTI and mobility problems. Around 25% of those over 65 had significant depressive symptoms in 2005. The comparable figure in the general population is around 10%.⁵⁷

There are clear gender differences once specific disorders are examined. Anxiety, depression and eating disorders are more commonly reported in women, substance misuse and anti-social personality disorders are more commonly reported in men.⁵⁸

⁵⁵ Allmark, P. *et al.* 2010. Chapter 8. Page 55.

⁵⁶ Allmark, P. *et al.* 2010. Chapter 8. Page 55.

⁵⁷ Allmark, P. *et al.* 2010. Chapter 5. Page 51.

⁵⁸ Allmark, P. *et al.* 2010. Chapter 8. Page 53.

For men, there are particular concerns around the under-diagnosis, and therefore lack of treatment for mental health conditions which are not captured in evidence in the previous points. These are believed to account, at least in part, for the much higher risk to men of becoming homeless or being imprisoned, for example.

For women, there are particular concerns around the risk of domestic and sexual violence and its links to poor mental and physical health.⁵⁹

Socio-economic groups

In the 2008 Health Survey for England data there appears to be an association between income level and a GHQ score of 4 or more. Women in the poorest 5th of the population are more than twice as likely to have a score of 4 or more than those in the richest 5th. For men, the difference is almost three-fold.

Table 9.2.1 Percentage of people with GHQ score of 4 or more by level of income in England, 2006 and 2008⁶⁰

Income quintile	Men	Women
Poorest fifth	20%	24%
2nd	15%	17%
3rd	8%	15%
4th	8%	13%
Richest fifth	7%	10%

Source: Health Survey for England average between 2006 and 2008.

For Wales, 27% of those who have never worked or are long term unemployed report being treated for depression, anxiety or any other mental illness compared to 11% for those with routine or manual employment and 7% of those with managerial or professional backgrounds.⁶¹ The 2008 mean SF-36 Mental Component Summary score for those who have never worked was 42.6 (indicating possible problems), compared to 51.1 for those with managerial or professional backgrounds.⁶²

In the Scottish Health Survey, the measurement reported for socio-economic groups is the Warwick–Edinburgh Mental Wellbeing Scale. Data for both socio-economic group and income show an association between lower income, and routine employment and poorer mental health but the figures are not statistically significant.⁶³

⁵⁹ Allmark, P. *et al.* 2010. Chapter 8. Page 57.

⁶⁰ Allmark, P. *et al.* 2010. Chapter 4. Page 75.

⁶¹ Allmark, P. *et al.* 2010, citing WHS 2008. Chapter 4. Page 78.

⁶² Allmark, P. *et al.* 2010, analysis of WHS 2008. Chapter 4. Page 78.

⁶³ Allmark, P. *et al.* 2010. Chapter 4. Page 79. See also Scottish Government 2009. Pages 33-34.

Disability

In England and Scotland, more people with LLTI/disability have a GHQ score of 4 or more compared to people with no LLTI/disability:

Table 9.2.2 Percentage of people with a GHQ-12 score of 4 or more, with/without LLTI/disability in England and Scotland, 2008⁶⁴

	England	Scotland
Has LLTI/disability	26%	27%
No LLTI/disability	7%	6%

Source: Health Survey for England 2008; Scottish Health Survey 2008.

In Wales, 52% of people with LLTI/disability have a lower score which indicates poor mental health, compared to 24% of those without LLTI/disability. As these are measured differently, it is not possible to directly compare them to the results for England and Scotland:

Table 9.2.3 Percentage of people with a score 0-46 from SF-36 Mental Component, with/without LLTI/disability in Wales, 2008⁶⁵

	Score 0-46	Score 47+
Has LLTI/disability	52%	48%
No LLTI/disability	24%	76%

Source: Welsh Health Survey 2008.

It is not clear from this evidence how independent LLTI/disability and poor mental health results are. The LLTI/disability itself may in fact be a mental health condition, or be a factor or a consequence of the LLTI/disability or indeed a result of the broader barriers and issues faced by the individual as a consequence of their illness or disability. This is an area where more detailed impairment-specific data are critical to our understanding of the processes at play.

Ethnicity

Patterns of mental wellbeing by ethnicity are complex and there are ongoing debates as to how assessment of this issue is affected by cultural and or linguistic differences. In the Health Survey for England 2004, Pakistani men and women, and Bangladeshi men had higher risk of high GHQ-12 scores than the general population (see Figure 9.2.4, below).

Neither the Scottish Health Survey nor the Welsh Health Survey includes sufficient numbers of people from ethnic minority groups to allow analyses by ethnicity.⁶⁶

⁶⁴ Allmark, P. *et al.* 2010. Chapter 6. Pages 25-27.

⁶⁵ Allmark, P. *et al.* 2010. Chapter 6. Page 26.

⁶⁶ Allmark, P. *et al.* 2010. Chapter 7. Page 71.

Figure 9.2.4 Percentage of people with a GHQ-12 score 4 or more and standardised risk ratios classified by ethnic group in England, 2004⁶⁷

		Black Caribbean	Black African	Indian	Pakistani	Bangladeshi	Chinese	Irish	General Population
Men	% 4+	13	11	16	15	18	9	12	11
	RR	1.21 (0.22)	0.88 (0.17)	1.32 (0.19)	1.56 (0.28)	1.83 (0.35)	0.76 (0.15)	1.08 (0.21)	1
Women	% 4+	18	19	14	20	15	13	15	15
	RR	1.27 (0.17)	1.19 (0.19)	0.99 (0.19)	1.73 (0.24)	1.37 (0.23)	0.83 (0.15)	0.95 (0.13)	1

Source: Health Survey for England 2004.

Notes:

1. Risk ratios were calculated that compared the prevalence for a given ethnic minority group with the prevalence in the general population, after adjusting for age in each group. For example, a risk ratio of 2.0 means that a particular group is twice as likely as the general population to have that condition, allowing for age differences; a risk ratio of 0.5 means that the group is half as likely as the general population to have that condition, allowing for age differences.
2. Figures in bold are statistically significantly different from the general population figure of 1 with standard errors given in brackets.

Findings from a survey in 2000 of Ethnic Minority Psychiatric Illness Rates (England only), suggest very few ethnic differences in the prevalence of common mental disorders once age is adjusted for. Only Bangladeshi women stand out as having a lower risk of mental disorder than White women.⁶⁸

Rates of admission and of compulsory detention in mental health institutions are higher among Black Africans, Black Caribbean, mixed White/Black Caribbean, White/Black African and also Black other groups which represents an enduring and worrying inequality⁶⁹ – a factor which may be reflected in the higher rates of suicide among young Black Caribbean and Black African men aged 13-24 years set out in Chapter 6: Life.

⁶⁷ Allmark, P. *et al.* 2010. Chapter 7. Page 71.

⁶⁸ Allmark, P. *et al.* 2010. Chapter 7. Pages 25 and 75.

⁶⁹ Care Quality Commission 2009. *Count me in 2009* Available at: [http://www.cqc.org.uk/_db/_documents/Count_me_in_2009_\(FINAL_tagged\).pdf](http://www.cqc.org.uk/_db/_documents/Count_me_in_2009_(FINAL_tagged).pdf) Accessed 23/08/2010.

Gypsies and Travellers

One study of 293 Gypsies and Travellers found much higher levels of anxiety and depression among this group than among a group of comparators matched on age and gender.⁷⁰

Asylum seekers

Some studies report that mental health is one of the most commonly reported health issues among **asylum seekers**; disorders commonly reported include anxiety, depression, phobias and post-traumatic stress disorder. Additionally, the provision of mental health services for this group, particularly for those that are survivors of torture and organised violence, is widely regarded as inadequate.⁷¹

Religion or belief

Data for religious groups and those with no religion are available from the Health Survey for England only, for 2004. These data show that the percentage of people with an age-adjusted GHQ-12 score of 4 or more was highest for Muslim men and women (19% and 26% respectively, compared to 12% and 15% for men and women with no religion); however, none of the differences were statistically significant.⁷²

Significance aside, because the data on religion only indicate affiliation with a particular group it does not show the extent to which an individual is practicing their religion and to what degree it affects their life. Therefore, it is not possible to ascertain whether religious identity is affecting mental health outcomes.

Some analysis has shown an association between the experience of victimisation for different religious groups and poor mental health. Nevertheless, we should be wary of assuming that some religious groups are more likely to experience mental ill health due to their religion, victimisation or other reasons, particularly because it is difficult to distinguish whether these experiences are due to religious or ethnic identity.⁷³

Sexual orientation

Although sexual orientation is not captured in large-scale datasets, a number of research pieces suggest that mental health issues may be a cause of concern in relation to sexual orientation.

- A meta-analysis of international data published in 2008, extracted on 214,344 heterosexual and 11,971 LGB people revealed that the risk for depression and anxiety disorder was at least 1.5 times higher in LGB people.

⁷⁰ Allmark, P. *et al.* 2010. Chapter 7. Page 72.

⁷¹ Allmark, P. *et al.* 2010. Chapter 7. Page 72.

⁷² Allmark, P. *et al.* 2010. Chapter 9. Page 38.

⁷³ Allmark, P. *et al.* 2010. Chapter 9. Page 64.

- A survey of 1,285 LGB people in England (2004) found that 43% had a mental disorder as defined by the revised Clinical Interview Schedule.⁷⁴
- In a piece of local research that captured the experiences of LGBT people living in Brighton and Hove, 55% of respondents (N= 302) reported experiencing three or more mental health difficulties in the past five years and 79% (N = 643) reported a wide range of mental health difficulties.⁷⁵

Transgender

Localised and small-scale survey data suggest that levels of poor mental health may be higher in the transgender population. One 2006 study of 819 LGBT people in Brighton and Hove indicated higher levels of the following disorders in the transgender population as compared to the LGB population over the past five years: insomnia, fears and phobias.⁷⁶

⁷⁴ Allmark, P. *et al.* 2010. Chapter 10. Page 23.

⁷⁵ Allmark, P. *et al.* 2010. Chapter 10. Page 23.

⁷⁶ Allmark, P. *et al.* 2010. Chapter 11. Page 18.

9.3 What we know about living a healthy life

Measures:

Smoking – Percentage who currently smoke

Alcohol – Percentage exceeding recommended alcohol limits

Physical activity – Percentage achieving recommended levels of physical activity

Healthy eating – Percentage who consume five or more portions of fruit and vegetables a day

Weight – Percentage who are obese/healthy weight according to body mass index

How these measures work:

The Health Surveys for England, Scotland and Wales provide data for all these indicators. These indicators give good comparisons across gender and age, data for LLTI/disability, although there is no impairment based breakdown.

Ethnicity and Religion or Belief are available for the booster sample in the 2004 Health Survey for England.

There are no data from these surveys for LGB or transgender people and therefore we are reliant on other studies.

Across the surveys, some of the indicators, such as smoking rates, exercise and fruit/vegetable consumption, are measured slightly differently, which means we can show patterns within each nation but we cannot directly compare them.⁷⁷

Overview

On crude indicators, **British adults appear to be less likely to smoke or drink to excess and more likely to eat healthily and take physical exercise than they were a decade ago.** However, the one main trend in the opposite direction, a rise in obesity, shows that a substantial minority of the population is living an unhealthy lifestyle.

⁷⁷ Details of question wording are provided in Allmark, P. *et al.* 2010. Chapter 3. Page 21.

There is no systematic way in which particular groups are unhealthy, but rather there are different areas of concern for different groups.

Women are more likely to eat healthily than men, but many women do not get enough exercise. Among some ethnic minority groups and among older people there is a similar pattern of relatively healthy eating – at least in terms of fruit and vegetables – but a lack of sufficient exercise.

People from lower socio-economic groups are less able to be healthy than those in higher socio-economic groups both in terms of diet and exercise. The majority of the population express a desire to do more exercise. Since 1 in 4 British adults is now classified as obese, this will be a crucial factor influencing health inequalities in the future.

What we know about the overall situation and trends

Smoking has been in decline for some time, with the gap between men and women closing. The proportion of men exceeding four units and women exceeding three units on their heaviest drinking day has also been in decline.

The Health Surveys for England and Scotland show that between 1997 and 2008 the proportion reporting having achieved the recommended levels of physical activity has been increasing for both men and women. Rates in Wales have fluctuated over time, with no clear trend.⁷⁸

In terms of diet, consumption of five or more portions of fruit and vegetables per day has risen in England since 2005, with trends less clear in Scotland and Wales.⁷⁹ Across the three nations, obesity levels have been rising for the past 10 years.⁸⁰

⁷⁸ Allmark, P. *et al.* 2010 analysis of Health Survey for England (HSE) and Scotland (SHeS) 1997-2008. Chapter 8. Page 73.

⁷⁹ Allmark, P. *et al.* 2010 analysis of HSE, SHeS and WHS 2001-08. Chapter 8. Page 76.

⁸⁰ Allmark, P. *et al.* 2010 analysis of the SHeS 1995, 1998, 2003 and 2008; WHS 2003/04-2008; HSE 1993 to 2008. Chapter 8. Page 69.

What we know about the situation for different groups

Gender and age

Indicators of healthy lifestyle show complex patterns across gender and age, with neither men nor women being uniformly disadvantaged.

Smoking

Among adults, differences between men and women are far smaller than in the past.⁸¹ However, among teenagers and the youngest adults, females are as likely as, or more likely than, males to smoke in England, Scotland and in Wales.⁸² There has been a downward trend since 2000 in the proportion of men and women who report that they are current smokers.⁸³

Those aged 65 and over are less likely to smoke than those under 65 years and the highest proportion of non-smokers is found in the oldest age group for both genders.⁸⁴

Alcohol

Patterns of alcohol consumption vary greatly by age, but males tend both to consume more alcohol, and to drink alcohol more frequently than females in all three nations. While trends over time suggest a rise in 'sensible' levels of drinking for both men and women, the increase has been smaller for women than men.⁸⁵ In terms of those who reported that they did not drink above government guidelines on any day in the week prior to interview, the largest gender gaps in 2008 were to be found in Wales (48% of men and 62% of women).⁸⁶

Physical activity

Levels of physical activity tend to be lower in women than in men across the three nations at all ages. However, while a rising minority of women and men now meet the recommended levels of physical activity, the majority in almost every age group in England in 2008 (apart from 16-24-year-old men) fell below them. Recent data for England suggest that physical activity levels are lower among teenagers than among younger children, and there are large differences between teenage girls and boys with girls being less likely to take recommended levels of exercise.⁸⁷

⁸¹ Details of question wording are provided in Allmark, P. et al. 2010. Chapter 3. Page 21.

⁸² Allmark, P. et al. 2010 analysis of Health Survey for England (HSE) and Scotland (SHeS) 1997-2008. Chapter 8. Page 73.

⁸³ Allmark, P. et al. 2010 analysis of SHeS 1995, 1998, 2003 and 2008; HSE 1993 to 2008. Chapter 8. Page 62.

⁸⁴ Allmark, P. et al. 2010 analysis of HSE 2008; WHS 2008; SHeS 2008. Chapter 8. Page 62.

⁸⁵ Allmark, P. et al. 2010 analysis of HSE 2008; SHeS 2008; WHS 2008.

⁸⁶ Allmark, P. et al. 2010 analysis of WHS 2008. Chapter 8. Page 76.

⁸⁷ Allmark, P. et al. 2010 analysis of HSE 2008; SHeS 2008; WHS 2008. Chapter 8. Page 72.

In contrast, in Scotland there were large increases for men among those aged 25-34 and 35-44, both of which saw rises of 10 percentage points of those meeting the recommendations.⁸⁸

Exercise levels are lower in those over 65 years. This is likely to be largely accounted for by the increase in 'poor' health and life-limiting illnesses and the decrease in mobility that is associated with older age; however, social and environmental factors, including increasing personal security concerns may also contribute to this situation.⁸⁹

Healthy eating

Indicators of healthy eating (i.e. eating recommended levels of fruit and vegetables)⁹⁰ tend to show that women have better habits than men. This is consistently the case across the age groups, except among the over-65s where men's rates of healthy eating are better than women's. This may be partly due to the different life expectancy rates for men and women with poor diets. The overall pattern is the same in England, Scotland and Wales.⁹¹

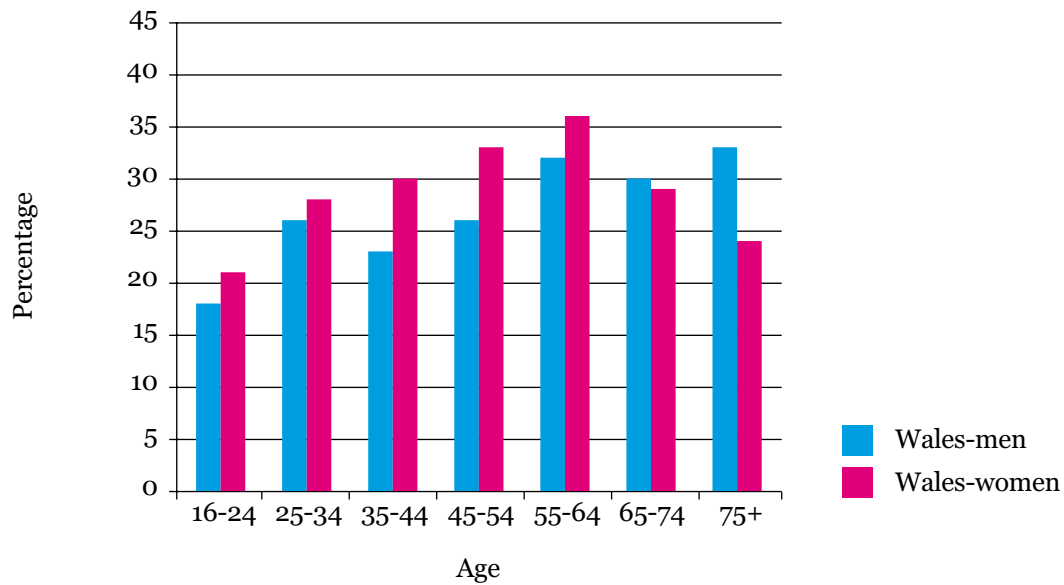
⁸⁸ Allmark, P. *et al.* 2010 analysis of HSE 2008; SHes 2008; WHS 2008. Chapter 8. Page 73.

⁸⁹ Allmark, P. *et al.* 2010 analysis of HSE 2008; WHS 2008; SHes 2008. Chapter 5. Page 68. For more information about fear of crime see Chapter 8: Physical Security. Indicator 3.

⁹⁰ Allmark, P. *et al.* 2010 Chapter 3. Page 21.

⁹¹ Allmark, P. *et al.* 2010 analysis of HSE 2008; SHes 2008; WHS 2008. Chapter 8. Page 74.

Figure 9.3.1 Proportion of people meeting government recommendations for daily fruit and vegetable consumption by gender and age in England, 2008⁹²



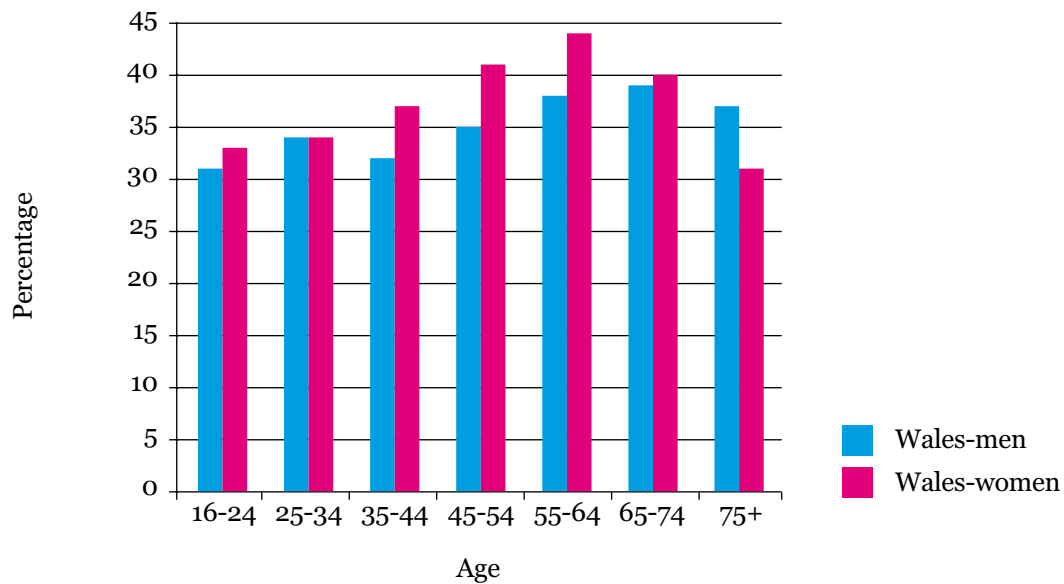
Source: Health Survey for England 2008.

Notes: Measure was based on the reported number of portions of fruit and vegetables consumed in the day prior to interview.

Government recommendations are for 5 or more a day.

⁹² Allmark, P. *et al.* 2010. Chapter 8. Page 72.

Figure 9.3.2 Proportion of people meeting government recommendations for daily fruit and vegetable consumption by gender and age in Wales, 2008⁹³



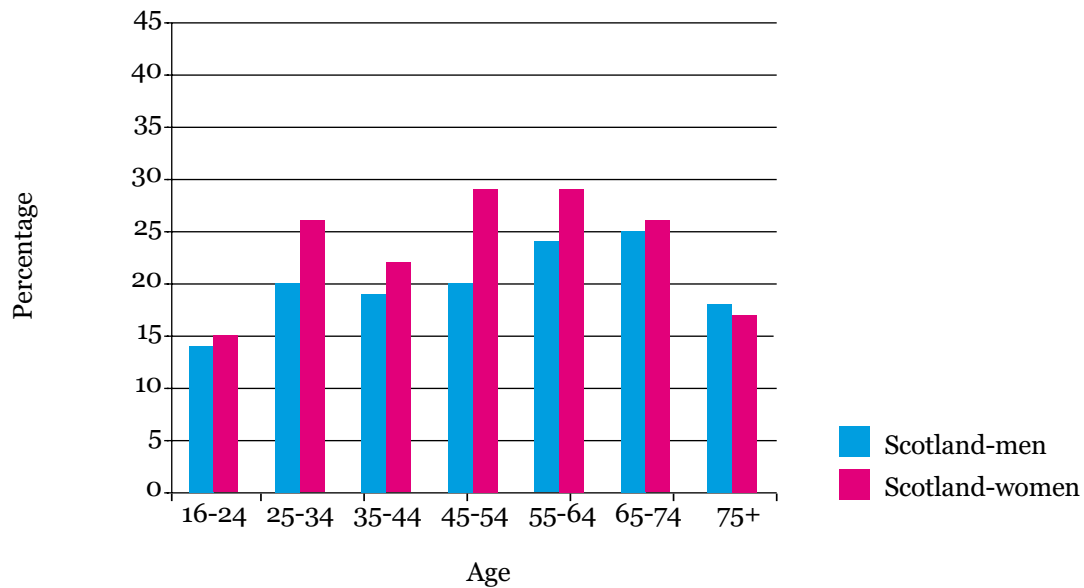
Source: Welsh Health Survey 2008.

Notes: Measure was based on the reported number of portions of fruit and vegetables consumed in the day prior to interview.

Government recommendations are for 5 or more a day.

⁹³ Allmark, P. *et al.* 2010. Chapter 8. Page 72.

Figure 9.3.3 Proportion of people meeting government recommendations for daily fruit and vegetable consumption by gender and age in Scotland, 2008⁹⁴



Source: Scottish Health Survey 2008.

Notes: Measure was based on the reported number of portions of fruit and vegetables consumed in the day prior to interview.

Government recommendations are for 5 or more a day.

The proportion of people who are of normal/healthy weight (neither overweight nor obese, and not underweight) has declined over the last 10-15 years across Britain, and is consistently lower among men than women.⁹⁵ In 2008, 37% of Welsh men and 44% of Welsh women were of normal/healthy weight. In England, the equivalent figures were 32% for men and 41% for women and in Scotland, 30% of men and 36% of women were of 'normal/healthy' weight.⁹⁶

The proportion of men and women with a normal weight declines gradually with increasing age up to the age group 65-74, and then rises again among the oldest age group (75+ years) across all three nations and for both men and women.⁹⁷

⁹⁴ Allmark, P. *et al.* 2010. Chapter 8. Page 72.

⁹⁵ Allmark, P. *et al.* 2010 analysis of SHeS 2008; HSE latest trend tables (1993 to 2008); WHS 2003/2004 and 2008. Chapter 8. Page 68.

⁹⁶ Allmark, P. *et al.* 2010 analysis of HSE 2008; SHeS 2008; WHS 2008. Chapter 8. Page 65.

⁹⁷ Allmark, P. *et al.* 2010 analysis of HSE 2008; SHeS 2008; WHS 2008. Chapter 8. Page 68.

Socio-economic groups

Several markers of unhealthy lifestyle are directly related to lower social class compared to other class groups. Cigarette smoking, lower exercise levels and poor diet are associated with lower social class, but not levels of overweight and obesity.⁹⁸

The pattern for alcohol is more complicated, with some differences across nations and by gender. In England and Wales, those in higher social classes drink most alcohol. In England, this is true also of problematic alcohol use, although in Wales, there is no clear pattern in relation to higher levels of alcohol use.

In Scotland, the situation is even more complex. There is a clear social gradient in the proportion of men drinking above Government guidelines, with those in the highest income quintile most likely to exceed limits. But men in the most deprived areas are the most likely to drink in excess of 50 units a week.⁹⁹

Disability

A summary of the measures show:

- People with LLTI/disability in England are neither more nor less likely to smoke than the rest of the population.¹⁰⁰ In Wales, they are slightly less likely to smoke¹⁰¹ whereas in Scotland, men with an LLTI are slightly more likely to do so.¹⁰²
- People with LLTI in England, Scotland and Wales are less likely to drink alcohol above the Government recommended limit.¹⁰³
- People with LLTI in England, Wales and Scotland are less likely to meet Government guidelines for exercise than those without an LLTI.¹⁰⁴
- In England, Wales and Scotland, there is no noticeable association between LLTI and eating fruit and vegetables.¹⁰⁵

There is a clear association between LLTI and obesity. Medication side effects, reduced mobility and socio-economic circumstances could all increase likelihood of obesity. In England, 72% of people with an LLTI do not have a healthy weight compared with 61% of those without an LLTI.¹⁰⁶

⁹⁸ Allmark, P *et al.* 2010 analysis of HSE 2007 and 2008; WHS 2008; SHeS 2008. Chapter 4. Pages 87-134.

⁹⁹ Allmark, P. *et al.* 2010 analysis of HSE 2008; WHS 2008; SHeS. Chapter 4. Pages 89, 109 and 123.

¹⁰⁰ Allmark, P. *et al.* 2010 analysis of HSE 2008. Chapter 6. Page 34.

¹⁰¹ Allmark, P. *et al.* 2010 analysis of WHS 2008. Chapter 6. Page 39

¹⁰² Allmark, P. *et al.* 2010 analysis of SHeS 2008. Chapter 6. Page 44.

¹⁰³ Allmark, P. *et al.* 2010 analysis of HSE 2008; SHeS 2008. Chapter 6. Pages 35 and 45.

¹⁰⁴ Allmark, P. *et al.* 2010 analysis of HSE 2008; WHS 2008; SHeS 2008. Chapter 6. Pages 36, 41 and 46.

¹⁰⁵ Allmark, P. *et al.* 2010 analysis of HSE 2008; WHS 2008; SHeS 2008. Chapter 6. Pages 37, 42 and 47.

¹⁰⁶ Allmark, P. *et al.* 2010 analysis of HSE 2008. Chapter 6. Page 38.

In Wales, having an LLTI is positively associated with being overweight or obese (66% versus 55%); this difference is true of both genders although it is particularly marked in women (63% versus 50%).¹⁰⁷

In Scotland, 75% of people with LLTI/disability compared to 66% of people without are overweight or obese.¹⁰⁸ Overall, the data on exercise and obesity suggest there may be an important inequality in that disabled people do not have equal access to opportunities to exercise.

Ethnicity

Health-related lifestyle factors vary greatly across ethnic groups. Different ethnic groups exhibit different behaviours which contribute to increased health risks, and there are no clear patterns – consequently, this is an area where further research is needed.

Issues that were of particular cause for concern in the Health Survey for England 2004 included:¹⁰⁹

- High levels of smoking among Bangladeshi men. The Health Survey for England found 60% of Bangladeshi men were ‘not currently smoking’ cigarettes compared with 76% of men in the general population.¹¹⁰
- The Turkish population, who are not currently enumerated as a separate ethnic category, have been found to have very high levels of smoking among both men and women.¹¹¹
- White Irish men were more likely than other ethnic minority groups to report drinking on 3 or more days a week.¹¹²
- Men were less likely to be of normal/healthy weight than women in the general population but among Pakistani, Bangladeshi and Black African populations, women are less likely to be of normal/healthy weight than men.¹¹³
- Levels of physical activity were lower among all the ethnic minority groups (with the exception of White Irish) with men and women in the Indian, Pakistani, Bangladeshi and Chinese groups statistically significantly less likely to meet Government guidelines for physical activity.¹¹⁴

¹⁰⁷ Allmark, P. *et al.* 2010 analysis of HSE 2008. Chapter 6. Page 43.

¹⁰⁸ Allmark, P. *et al.* 2010 analysis of SHeS 2008. Chapter 6. Page 48.

¹⁰⁹ Allmark, P. *et al.* 2010. Chapter 7. Pages 77-83.

¹¹⁰ Allmark, P. *et al.* 2010 analysis of HSE 2004. Chapter 7. Page 79.

¹¹¹ Allmark, P. *et al.* 2010. Chapter 7. Page 79.

¹¹² Allmark, P. *et al.* 2010 analysis of HSE 2004. Chapter 7. Pages 84-85.

¹¹³ Allmark, P. *et al.* 2010 analysis of HSE 2004. Chapter 7. Page 81.

¹¹⁴ Allmark, P. *et al.* 2010 analysis of HSE 2004. Chapter 7. Pages 82-83.

- In contrast, ethnic minority people (except the White Irish) are more likely than the general population to eat the recommended amounts of fruit and vegetables, particularly men.¹¹⁵

Religion or belief

There are differences between religious groups in the extent to which healthy life styles are followed – patterns vary within religious groups and along ethnic lines as well as by gender.

Key patterns include:

- Very low prevalence of alcohol consumption among Muslims, and Hindus and Sikhs are also more likely to report that they do not drink at all or that they drink within the recommended Government guidelines.¹¹⁶
- Overall, there are lower than average smoking rates among Sikhs. But looking at gender differences, Muslim, Hindu and Sikh women stand out at all ages as being less likely than other religions to be current smokers.¹¹⁷
- Research suggests that there may be higher levels of obesity/overweight for some groups such as Pakistani Muslim women, who are more likely to be obese and less likely to exercise than other groups, but sample sizes are small.¹¹⁸

Sexual orientation

Some research suggests that LGB people may be more likely to smoke than heterosexual people, although there is a lack of agreement in terms of differential rates within LGB groups – there are, for example, conflicting findings in relation to lesbians and smoking.¹¹⁹

There is some evidence that alcohol and drug use among LGB people is higher than in the general population.¹²⁰ In general, however, evidence is severely limited in this area, and for the other lifestyle indicators.

Transgender

Data relating to healthy lifestyle and transgender people are very limited, and those available are based on very small samples. In one survey, transgender individuals appeared to be more likely not to consume alcohol than non-transgender LGB. There was also some evidence that a lack of trans-friendly spaces limited physical activity.¹²¹

¹¹⁵ Allmark, P. *et al.* 2010 analysis of HSE 2004. Chapter 7. Page 83.

¹¹⁶ Allmark, P. *et al.* 2010 analysis of HSE 2004. Chapter 9. Page 49.

¹¹⁷ Allmark, P. *et al.* 2010 analysis of HSE 2004. Chapter 9 Page 43.

¹¹⁸ Allmark, P. *et al.* 2010. Chapter 9. Pages 46-48.

¹¹⁹ Allmark, P. *et al.* 2010 Chapter 10. Page 32.

¹²⁰ Allmark, P. *et al.* 2010 Chapter 10. Page 33.

¹²¹ Allmark, P. *et al.* 2010 Chapter 11. Pages 25-26.

9.4 What we know about dignity and respect in health treatment

Measure:

Treatment with respect – Percentage who feel they are treated with respect when using health services

How this measure works:

The Citizenship Survey 2007 is used for this measure for England and asks *‘In general, would you say that you are treated with respect when using health services?’*

The survey provides data for all equality groups with the exception of transgender people. Sample sizes for ethnicity, religion and sexual orientation mean it is hard to draw meaningful results. It should be noted it refers to the general population rather than service users only, and therefore relates to a wide range of service use and experiences.

Additionally, the Living in Wales survey asks respondents to agree/disagree with the statement *‘I was treated with dignity and respect’* in respect of GP services, inpatient, outpatient or day case hospital experiences. Due to the different wording, it is not possible to make direct comparisons with the Citizenship Survey, but this is a useful extra resource.

Better Together, Scotland’s Patient Experience Programme, has undertaken recent surveys of people registered with a GP practice and inpatients but this is the first year these surveys have been completed and national results were not available at time of writing. It should however be possible in the future for Better Together data to allow examination of potential inequalities by gender.

A key limitation of the data is that it only reflects those that have the capacity to report on their perceptions of treatment and does not include for example, groups such as older people with dementia or those who may not feel able to access health services at all, such as Gypsies and Travellers, asylum seekers or the homeless.

Overview

The great majority of people in Britain are able to use the health service confident that they will be treated with respect and dignity.

This is true across different parts of Britain, for men and women and for different socio-economic groups.

However, members of some groups frequently feel otherwise. In particular, Pakistanis and Bangladeshis find it harder to access and communicate with their GPs than other groups. Some difficulties may relate to language difficulties, but this is not the only reason. In some cases, there may be a lack of cultural sensitivity among those providing the service. Other groups encountering difficulties include some transgender people whose doctors do not support their decision to seek gender reassignment and Gypsies and Travellers who find it difficult to register with a GP, suggesting that those outside the mainstream of the system do not find that it respects their individual needs.

One aspect of lack of respect that is difficult to measure overall is the loss of dignity of older people, especially in care. On the one hand, older people who are able to answer surveys seem less likely than younger people to say that the system fails to treat them with respect, but may have lower expectations. On the other, evidence shows that some practices in the care system bring humiliation and disrespect.

What we know about the situation for different groups

Gender and age

Indicators of perception of treatment with dignity and respect within healthcare do not appear to vary by gender. The 2007 Citizenship Survey shows that 91% of both men and women in England answered ‘all the time’ or ‘most of the time’, with 8% and 9% respectively saying ‘some of the time or less’ to the question *‘In general, would you say that you are treated with respect when using health services?’*¹²²

Similarly, the Living in Wales Survey 2008 found no significant difference between men and women in the percentages agreeing with the statement *‘I was treated with dignity and respect’* when referring to: GP services, with just 3% of men and 4% of women disagreeing; or when referring to inpatient, outpatient or day case hospital experience, with 4% of men and women disagreeing.¹²³

A qualitative study of patient preferences and experiences within the Scottish NHS has recently been completed. Being treated with dignity and respect was identified by patients as an important dimension of GP care, but the study did not highlight any particular gendered concerns about lack of respect or dignity in treatment.¹²⁴

¹²² Communities and Local Government (CLG) 2009. *Citizenship Survey 2007/08: Race, Religion and Equalities Topic Report*. London: CLG.

¹²³ Allmark, P. *et al.* 2010. Chapter 8. Page 59.

¹²⁴ Allmark, P. *et al.* 2010. Chapter 8. Page 59.

The Citizenship Survey suggests, for England, that older people are more likely than younger people to feel they are treated with respect; 97% of those aged 75+ said they felt treated with respect 'All the time' or 'most of the time', the highest result for any age group; compared to 88% of those aged 16-24, and 25-34, the lowest of all age groups.¹²⁵

There are, however, some doubts as to the usefulness of these results. Partly they are limited because they are based on perceptions of treatment, and therefore will be governed by differing expectations about 'dignity and respect' in service provision (for example between older and younger people). Also, surveys only reflect the views of people with the capacity to answer and, arguably, exclude the experiences of the most vulnerable groups. This may explain in part the inconsistency of these findings with other research that highlights the poor treatment of elderly patients.¹²⁶

In terms of the experiences of older people in particular, one key area of concern is the use of restraint. In 2007 a report, *Rights, risks and restraints* from the Commission for Social Care Inspection gave many examples of restraint undermining the wellbeing and dignity of vulnerable older people. The Commission used qualitative methods primarily and says it cannot, from this work, give an idea of the prevalence of restraint. The implication of the report, however, is that it is widespread and troubling, and should be the focus of future research.¹²⁷

A second area of concern is the meeting of nutritional needs in hospital, which is a proposed Equality Measurement Framework indicator, not included in depth in this report due to scarcity of data. Initial analysis conducted to test the viability of the measures suggests significant results for the over 81's age group with a long-standing disability or illness, in terms of the percentage reporting 'not always receiving adequate nutritional support' (figures based on responses to the following question: *did you get enough help from staff to eat your meals?*).¹²⁸

¹²⁵ Allmark, P. *et al.* 2010 Chapter 5, Page 53.

¹²⁶ Allmark, P. *et al.* 2010. Chapter 5. Page 53.

¹²⁷ Allmark, P. *et al.* 2010 Chapter 5. Page 54.

¹²⁸ Alkire, S. *et al.* 2009. *Developing the Equality Measurement Framework: selecting the indicators*. Research Report 31. Manchester: Equality and Human Rights Commission. Chapter 5. Page 111. In the development of the Equality Measurement Framework indicators, the technical phase was to check sample size rather than generate final data analysis tables, so these are preliminary results for group means and the significance of the variations in group means, as well as a report on sample size. Significance tests are reported at the 95 per cent level. A series of cross-checks are required at the next stage of the development of the Equality Measurement Framework before final data tables can be produced.

Other literature seems to support the claim that the nutritional needs of elderly people who enter hospital malnourished are not met.¹²⁹

Box 9.4.1 Related issue: ‘Quality Adjusted Life Years’ (QALYs)¹³⁰

The Quality Adjusted Life Years (QALYs) system used by the National Institute for Health and Clinical Excellence (NICE) in deciding whether a treatment should be funded by the NHS, looks at the number of years someone benefits from a treatment and the quality of those years. A cheap treatment that contributes to a long and disability-free life will score highly; an expensive treatment that contributes only a few months of life but that life is of poor quality, will get a low score.

This system has been criticised as unfair and older people have been cited as a group vulnerable to this unfairness. Thus QALY scores will tend to encourage the decision that where a treatment is effective, younger people should receive it as a priority and older people tend to be excluded.

Socio-economic groups

The Citizenship Survey in England suggests there is no clear association between feeling that you are treated with respect when using health services and socio-economic groups. However, those who have never worked or are long-term unemployed appear slightly less likely to perceive they are treated with respect ‘all of the time or most of the time’ compared to those in all other occupations.¹³¹

The ‘Living in Wales’ survey shows no difference in social classes for the corresponding measure.¹³²

Disability

Perceptions of treatment with respect for those with LLTI/disability seem to be very similar to those without. The Citizenship Survey and the Living in Wales survey do not show any significant differences.¹³³

As in the section on Age (above), these results are based on those able to complete the respective survey. Those who face barriers to participating in the survey (i.e. communication barriers) need other measures and modes of research in order to understand their experiences of dignity and respect in healthcare.¹³⁴

¹²⁹ See also Allmark, P. *et al.* 2010. Chapter 5. Pages 59-61.

¹³⁰ Allmark, P. *et al.* 2010. Chapter 5. Page 54.

¹³¹ CLG 2009.

¹³² Allmark, P. *et al.* 2010. Chapter 4. Page 82.

¹³³ Allmark, P. *et al.* 2010. Chapter 6. Page 28.

¹³⁴ Allmark, P. *et al.* 2010. Chapter 6. Page 56.

Ethnicity

The sample numbers are small for some ethnic minority groups in the Citizenship Survey, making it more difficult to detect differences between them. Nevertheless, for England, Chinese, Bangladeshi and Black African people stand out as being least likely to report being treated with respect all of the time or most of the time when using health services, although these results should be regarded as indicative rather than significant.¹³⁵

The National Patient Survey Programme led by the Care Quality Commission shows that people of Asian and Chinese origin report less positive experiences than the White British majority across a range of care settings, but that differences are particularly noticeable in primary care.¹³⁶

The Living in Wales 2008 survey examines perceptions of treatment with dignity and respect by ethnic minority groups but the numbers of ethnic minority individuals included in the survey are too small for analysis.¹³⁷

While poor communication is a commonly cited problem and there are widespread inadequacies in interpretation and translation facilities, this is not merely an issue for those who cannot speak English. Poor listening, dismissiveness, rushed consultations and disrespectful attitudes are factors that have been found to undermine patient–provider communication for ethnic minority people, even where they speak English.¹³⁸

Evidence suggests that Gypsies and Travellers have extremely poor experiences of primary care and may face significant obstacles to registering with a GP.¹³⁹

Religion or belief

The Citizenship Survey shows that the groups most likely to report being treated with respect when using health services ‘some of the time or less’ were Buddhist, Muslim and ‘No religion’, though the differences were not large and did not reach statistical significance.

Qualitative studies have explored healthcare experiences among individuals of ethnic minority and religious minority identity. By-and-large these studies have suggested rather low levels of satisfaction with services for some groups and some significant concerns around feeling unwelcome and disrespected by healthcare professionals. Several studies have highlighted the ways in which

¹³⁵ CLG 2009.

¹³⁶ Allmark, P. *et al.* 2010 Chapter 7. Page 75.

¹³⁷ Allmark, P. *et al.* 2010 Chapter 7. Page 77.

¹³⁸ Allmark, P. *et al.* 2010 Chapter 7. Page 112.

¹³⁹ Allmark, P. *et al.* 2010 Chapter 7. Page 78.

certain religious identities – notably a Muslim identity – may result in particularly negative experiences in healthcare settings (as in other public service settings). For example, this may include Muslim women suffering severe humiliation when being forced to accept care from male health professionals, or opting not to take up recommended exercise programmes when those on offer were for both genders together.¹⁴⁰

Sexual orientation

The Citizenship Survey shows that gay and lesbian people are more likely to say that they have been treated with respect in health services some of the time or rarely, but due to small sample sizes, the difference from the average is not significant. It is suggested that this finding may be borne out in other literature.¹⁴¹

Transgender

The 'Patient Satisfaction with Transgender Services' which surveyed the opinions and experiences of 647 individuals at all stages of treatment/transition, found that 1 in 7 transgender people who responded to the healthcare section of the satisfaction survey felt that they had been treated adversely by healthcare professionals because of their transgender status.¹⁴²

In the same survey, a third of respondents said that their GP was 'always' supportive of their decision to seek gender reassignment, compared to 17% who responded 'never' and 23% 'sometimes'.

¹⁴⁰ Allmark, P. *et al.* 2010. Chapter 9. Pages 60-64.

¹⁴¹ Allmark, P. *et al.* 2010. Chapter 10. Page 26.

¹⁴² Allmark, P. *et al.* 2010. Chapter 10. Page 19.

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Chapter 10: Education

Summary

A wealth of evidence shows that education is a key determinant of life chances. As well as being a right in itself, education is an enabling right, allowing individuals to develop the skills, capacity and confidence to secure other rights and economic opportunities.

Educational attainment has been transformed in recent years. Around half of young people are now getting good qualifications at 16 (5+ A*-C GCSEs or equivalent including English and Maths), and in 2008/09, 2.4 million students enrolled in higher education in the UK – a considerable change from a time when educational opportunities were only available to a minority of young people. The indicators examined in this chapter demonstrate this success, but also show that there remain a number of areas where further progress needs to be made.

The evidence from these indicators shows that educational attainment continues to be strongly associated with socio-economic background, despite some signs that social differences in examination results may have started to reduce. At the same time, the gap in attainment between ethnic groups has narrowed more clearly, with some previously low-performing groups catching up with the average. Whereas a generation ago almost all the students on the university campus were White British, today 1 in 5 are from ethnic minority groups and an increasing number of disabled students are also attending. Women are now ahead of men in many aspects of educational success.

However, in terms of both subjects studied, and in the obtaining of good degrees, differences persist. Women remain less likely than men to study Science, Technology, Engineering and Maths (STEM) subjects, making up 48% of first degree students in STEM despite comprising 55% of first degree students overall. Gender differences in first degree subject choice appear to be declining over time, but extremely high gender segregation in vocational training remains. The proportion of Black students getting first or upper second class degrees is still only at two-thirds of the level of White students.

This chapter also notes that some groups are still not getting a fair deal out of the education system. Young people with Special Educational Needs (SEN) account for 7 in 10 permanent exclusions from school in England, and continue to have low educational attainment. A growing number of disabled students are going to university, but this group is still not achieving its potential. Calls to helpline related to disability and education also indicate that this is an area of concern.

For lesbian, gay and bisexual (LGB) and transgender young people, attainment trends are harder to measure, but there are signs that they are being penalised by unfair treatment and bullying in the education system, at school and beyond.

Education-related inequalities have an impact over the life-span, not just in childhood. Differences in participation in education persist throughout life. Adults with more prior education are much more likely to access learning opportunities in later life. Tools such as the internet are used to varying degrees by different groups to access information and other resources.

Introduction

The right to education is recognised in domestic law and international convention. Education has intrinsic value, helping people grow and develop as individuals. It can also give them the skills and confidence to take up economic opportunities, to improve their standard of living, and to influence the world around them.

Since the Second World War, access to the British education system has gradually widened. Over the past decade, the government has explicitly sought to increase participation rates in formal education or training among young people. The proportion of young people attaining formal academic qualifications at age 16 has grown: today, around half obtain 5 or more GCSEs at grades A* to C including English and Maths, or equivalent. Increasing numbers stay on at school after the age of 16 and increasing numbers enrol every year at university on first degree courses.

Historically, there were lower cultural expectations of what some groups, including women, could or should aspire to in education. This was reflected in admission rates to university: as recently as 1980, less than two-fifths of degrees were awarded to women.¹ Today, these notions are by and large long gone, and women, and many other groups who traditionally performed relatively poorly in formal education, have begun to catch up with the average and in some cases surpass it. However, there remain significant disparities between different groups' experiences of formal education.

The modern British economy puts a premium on skills and 'jobs for life' are increasingly rare. Consequently, many people will want, or need, to acquire new skills during their adult life. The opportunities offered by adult education may be particularly significant to people from groups who, historically, have fared relatively poorly in the formal education system.

¹ Hicks, J. and Allen, G. 1999. *A Century of Change: Trends in UK statistics since 1900*, House of Commons Research Paper, 1999. <http://www.parliament.uk/documents/commons/lib/research/rp99/rp99-111.pdf> Accessed 25/08/2010.

Finally, the internet has become an increasingly important means of accessing education and training (as well as of acquiring other goods and services, and participating in civic life), and we consider different groups' access to the internet in this chapter.

Indicators

1. **Level of development at age 5**
2. **Permanent exclusion from school**
3. **Bullying, respect and support at school**
4. **Educational attainment at age 16**
5. **Participation in higher education**
6. **Adult skills and qualifications**
7. **Adult learning**
8. **Use of the internet**

For **level of development at age 5**, we give the percentage of children achieving a good level of development according to the Early Years Foundation Stage profile.

Under **permanent exclusion from school**, we give the percentage of children permanently excluded from primary, secondary and special schools (and pupil referral units in Wales).

For **bullying, respect and support at school**, we give the percentage of pupils reporting experiencing direct bullying.

For **educational attainment at age 16**, we give the percentage of children getting 5+ grade A*-C GCSEs including English (or Welsh) and Maths or equivalent. The equivalent measure for Scotland is Standard Grade awards at levels 1-3, Intermediate 2 at grades A-C, and Intermediate 1 at grade A.

For **participation in higher education**, we give the percentage of different groups studying on a first degree course.

For **adult skills and qualifications**, we look at 3 specific measures: the percentage of people of working-age achieving functional literacy and numeracy skills; the percentage of adults with no educational qualifications, and the percentage of adults with a first degree level qualification.

Under **adult learning**, we give the percentage of adults aged over 18 who participated in formal or informal learning in the last year.

Under **use of the internet**, we give the percentage who have had access to the internet within the last 3 months.

As in the rest of Part II, this chapter explores what we know about these indicators and what the evidence tells us about the experiences of different groups.

10.1 What we know about level of development at age 5

Measure:

Percentage of children achieving a good level of development according to the Early Years Foundation Stage profile

How this measure works:

The data for this measure come from the Early Years Foundation Stage profile 2008/09. This measure is only relevant to England; no national assessment data are collected in Wales, although measures are in development. No comparable data are collected in Scotland although Early Years Indicators are in development.

The Early Years Foundation Stage profile covers six areas of learning spanning children's physical, intellectual, emotional and social development. This measure looks at the percentage of children who are reaching a good level of development. Data are available for gender, socio-economic groups, disability and ethnicity. There is very limited related literature for this measure for groups defined by religion or belief, sexual orientation and transgender, therefore they are not covered in this section.

Special Educational Needs (SEN) is used in this chapter as a way of measuring disability (disaggregated by impairment types where possible). In England and Wales pupils with SEN are those who require special support as a result of a learning difficulty or disability. There are three levels of SEN that can be assessed. Pupils with the most significant needs requiring high levels of multidisciplinary input are issued with Statements of Need. Pupils requiring some degree of multi-disciplinary support are placed on School Action Plus programmes and pupils requiring additional support from within school resources are placed on School Action programmes. Disabled pupils represent a sub-set of all pupils with SEN.

Free School Meal (FSM) eligibility is used as a measure, albeit imperfect, for parental low income and social class.² The Census occupational categories are also used as a means to report on socio-economic differences.

² For discussion about the relationship between FSM eligibility, parental income and social class see Hills, *J et al.* 2010. *An Anatomy of Economic Inequality in the UK*. Report of the National Equality Panel. London: Government Equalities Office. Page 88.

Overview

By the age of five, girls' development is more advanced in 11 of 13 assessment scales on the Early Years Foundation Stage profile in social and emotional as well as cognitive areas of development. The gap is greatest in writing, in which nearly three-quarters (72%) of girls but only just over half (53%) of boys, reach the expected level.

The role of socio-economic factors in this indicator is an important issue in passing on disadvantage or advantage from generation to generation. Only 35% of pupils known to be eligible for FSMs achieved a good level of development compared to over half (55%) of pupils not eligible for FSM.

Being from certain ethnic groups is associated with disadvantage in this indicator. A higher proportion of pupils from Asian, Indian, Irish, Mixed White and White British ethnic backgrounds achieved a good level of development when compared to all pupils, but pupils from Black and Pakistani ethnic groups did not perform so well.

What we know about the overall situation

In 2008/09, 52% of children achieved a good level of development at age 5, compared to 49% in 2007/08 and 46% in 2006/07.

What we know about the situation for different groups

Gender

Girls outperformed boys on this measure. In 11 of the 13 scales of the Early Years Foundation Stage profile girls scored higher; boys outperformed girls in the categories of problem solving, reasoning and numeracy (calculating) and in knowledge and understanding of the world.³

³ Department for Children, Schools and Families (DCSF) 2010a. *Early Years Foundation Stage Profile Achievement by Pupil Characteristics, England 2008/09*. Statistical First Release 03/10. Available at: http://www.dcsf.gov.uk/rsgateway/DB/SFR/s000911/SFR03_2010v2.pdf Accessed 4/08/2010.

In the 7 key scales of Personal, Social and Emotional development (PSE) and Communication, Language and Literacy (CLL), 61% of girls achieved 6 or more points in each of the scales, compared to only 43% of boys.⁴

One quarter (25%) of boys are classified as being the lowest achieving 20% of pupils (based on all 13 scales in Early Years Foundation Stage profile) compared to 15% for girls.⁵

Socio-economic groups

Pupils not eligible for FSM are more likely to achieve a good level of development at age 5 than those who are eligible for FSM.

- 55% of pupils not eligible for FSM achieved a good level of development in 2008/09, compared to 35% for pupils known to be eligible for FSM.
- 78% of pupils not eligible for FSM achieved 78 or more points across all scales, compared to 58% for pupils known to be eligible for FSMs.
- 55% of pupils not eligible for FSM achieved 7 key scales of PSE and CLL, compared to 35% for pupils known to be eligible for FSM.

Of those pupils known to be eligible for FSM, there are variations in achievement by gender and ethnic group. For example, as shown in Figure 10.1.1, boys eligible for FSM do worse than girls eligible for FSM, for each ethnic group.⁶ Only 25% of White British and Bangladeshi boys and 27% of Black Caribbean boys eligible for FSM achieved a good level of development in 2008/09, compared to 42% of White British and 40% of Pakistani girls eligible for FSM.⁷ Figure 10.1.1 shows the variation in the percentage of pupils who achieve a good level of development in writing by ethnic group, gender and FSM eligibility.

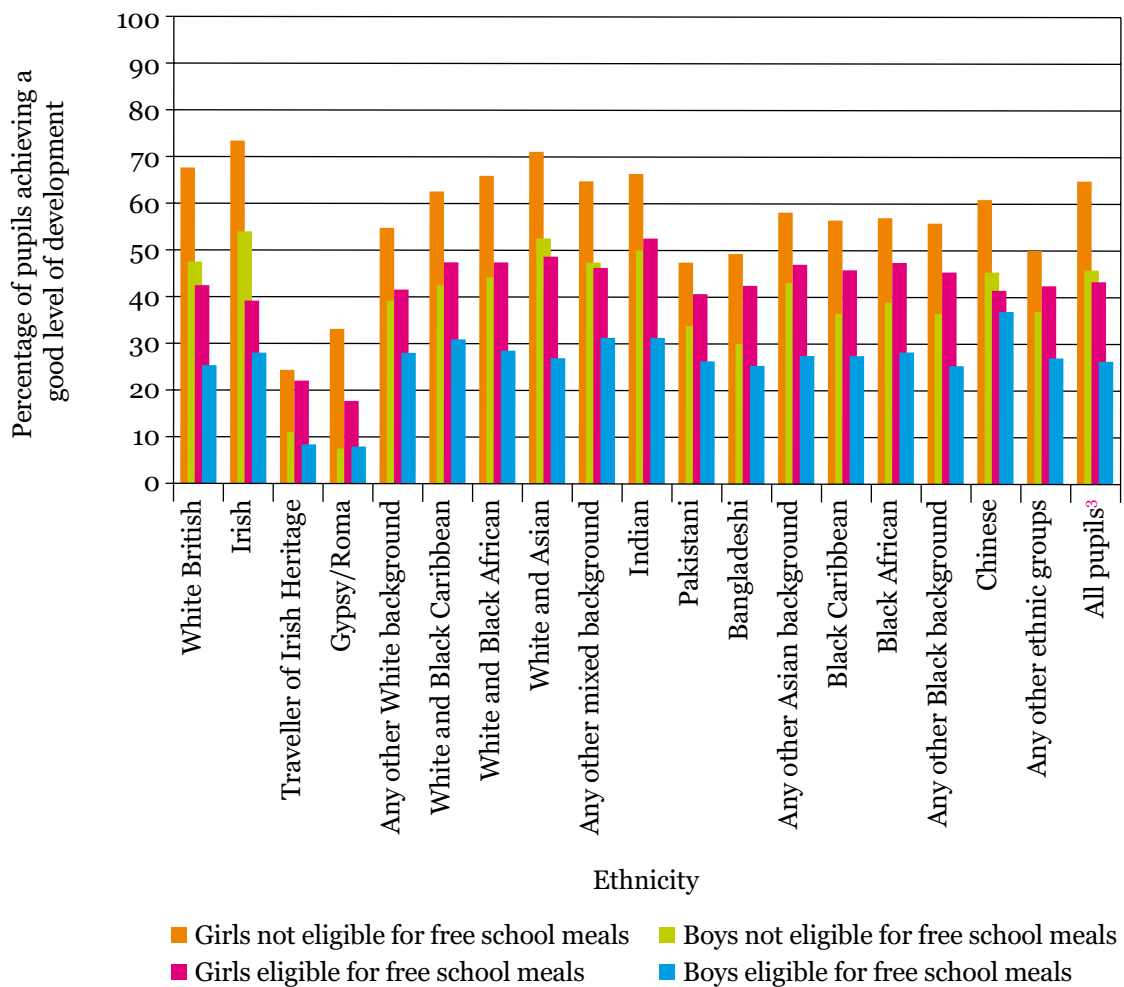
⁴ DCSF 2010a.

⁵ DCSF 2010a.

⁶ DCSF 2010a.

⁷ DCSF 2010a.

Figure 10.1.1 Percentage of pupils achieving a good level of development by ethnicity, FSM eligibility and gender in England, 2009⁸



Source: Early Years Foundation Stage profile. Achievement by Pupil Characteristics, England 2008/09.

There is also a relationship between the socio-economic wellbeing of an area and the percentage of pupils achieving a good level of development. Using the Income Deprivation Affecting Children Indices (IDACI) 2007, 39% of pupils in the most deprived 10% of areas in England achieved a good level of development at Early Years Foundation Stage profile compared to 67% in the least deprived 10% of areas.⁹

⁸ DCSF 2010a.

⁹ DCSF 2010a.

Disability

A higher percentage of pupils without any identified SEN achieved a good level of development in 2008/09. For pupils with SEN (both without a statement and those with a statement of SEN), 15% achieved a good level of development compared to 56% for those pupils with no identified SEN.

As would be expected, pupils with a statement of SEN have lower achievement than those pupils who have SEN without a statement. Of this group only 4% achieved a good level of development, compared to 17% of pupils who have SEN but without a statement.

Where a pupil has a statement of SEN or is School Action Plus, their primary need is recorded. Children whose primary need was visual impairment were around half as likely to achieve a good level of development (29%) compared to pupils with no identified SEN. This dropped to just over 1 in 6 (16%) of pupils whose primary need was speech, language and communication.¹⁰

Ethnicity

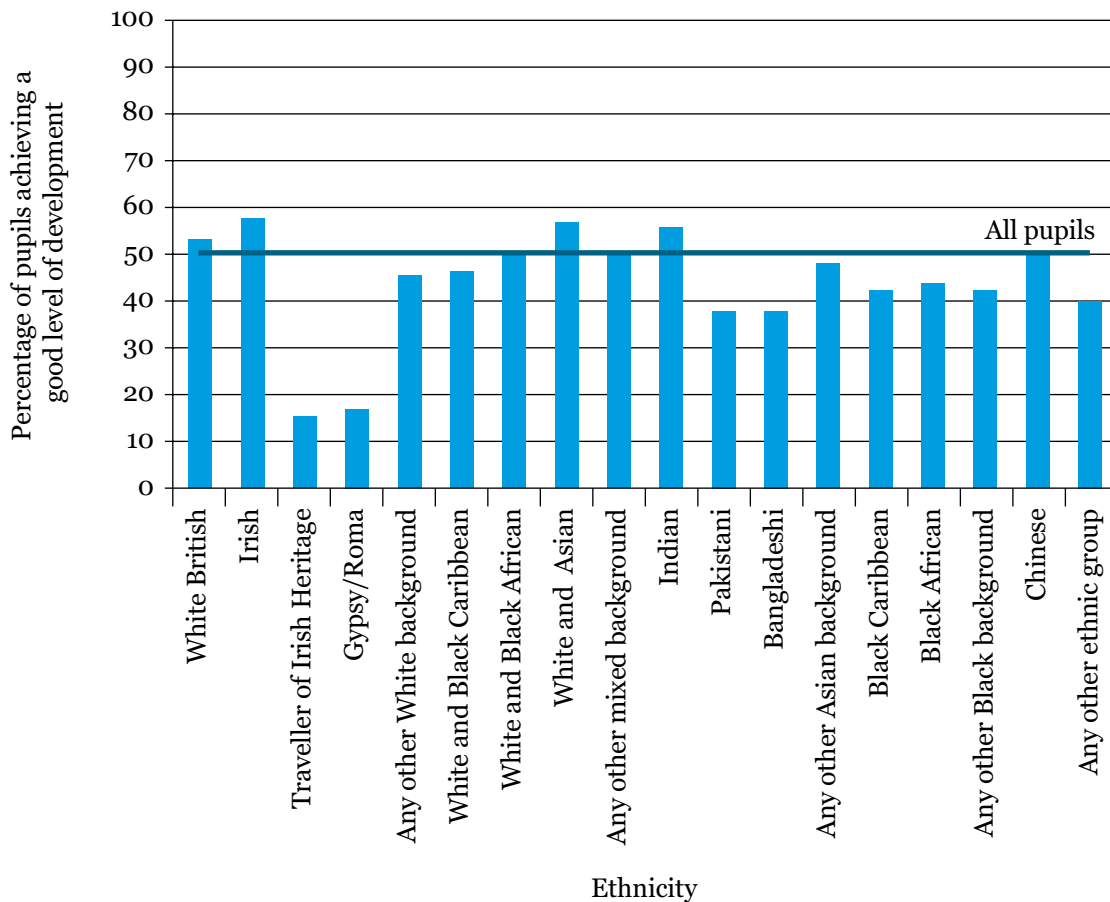
The proportion of pupils achieving a good level of development in the Early Years Foundation Stage profile varies between different ethnic groups. Irish pupils, Indian pupils, White British pupils and pupils from a Mixed White and Asian background achieved above the national average for a good level of development in 2008/09, but pupils from Black and Pakistani ethnic groups did not perform so well. For all ethnic groups girls significantly outperformed boys.¹¹

¹⁰ DSCF 2010a.

¹¹ DCSF 2010a.

Figure 10.1.2 below shows the variation in the percentage of pupils who achieved a good level of development by ethnic group.

Figure 10.1.2 Percentage achieving good level of development by ethnicity in England, 2009¹²



Source: Early Years Foundation Stage profile Achievement by Pupil Characteristics, England 2008/09.

Achievement is higher for those pupils whose first language is English when compared to pupils who have English as an additional language. 54% of pupils whose first language is English achieve a good level of development compared to 42% of pupils for whom English is an additional language.¹³

¹² DCSF 2010a.

¹³ DCSF 2010a.

10.2 What we know about permanent exclusion from school

Measure:

Percentage of children permanently excluded from primary, secondary and special schools (and pupil referral units in Wales)

How this measure works:

We are able to report on England, Scotland and Wales for this measure. The England 2008/09 data are available from the Statistical First Release, *Permanent and fixed period exclusions from schools and exclusion appeals in England, 2008/09*.¹⁴ The data for Scotland are for the number of children who have been permanently removed from the register. The data are available from the Statistics Publication Notice: Education Series, *Exclusions from school 2008/09*.¹⁵ Data for Wales are available from the Statistical First Release, *Exclusions from Schools in Wales 2008/09*.¹⁶

This measure only looks at permanent exclusions, which are a tiny proportion of all exclusions in England, Scotland and Wales. For all data presented in this section, but especially for data relating to Scotland and Wales, care should be taken in interpreting the figures due to the small number of pupils involved.

Data are available by gender, ethnicity, socio-economic differences, and disability where socio-economic differences are measured by Free School Meal eligibility (FSM), and disability is measured by Special Education Needs status (SEN) in England and Wales, and Additional Support Needs (ASN) in Scotland. Disabled pupils represent a sub-set of all pupils with SEN/ASN.

It should also be noted that most of the data refer to cases of exclusion, rather than the number of pupils excluded, as some pupils were excluded more than once during the year. There is very limited related literature for this measure for groups defined by religion or belief, sexual orientation and transgender, therefore they are not covered in this section.

¹⁴ DCSF 2009. *Permanent and fixed period exclusions from schools and exclusion appeals in England, 2007/08*. Statistical First Release 18/2009. Available at: <http://www.dcsf.gov.uk/rsgateway/DB/SFR/s000942/index.shtml> Accessed 18/08/2010.

¹⁵ Scottish Government 2010a. *Exclusions from Schools 2008/09 in Scotland*. Statistics Publication Notice: Education Series. Available at: <http://www.scotland.gov.uk/Resource/Doc/302580/0094711.pdf> Accessed 18/08/2010

¹⁶ Welsh Assembly Government 2010a. *Exclusions from Schools in Wales, 2008/09*. Statistical First Release SDR 46/2010. Available at: <http://wales.gov.uk/docs/statistics/2010/100330sdr462010en.pdf> Accessed 18/08/2010.

Overview

While schools aim to provide equal opportunities for all children, in practice different groups have varying experiences of the system that affect their chances. Most fundamental is being able to attend school itself.

In 2008 the United Nations Committee on the Rights of the Child expressed concern at the number of temporary and permanent school exclusions, especially for children from ethnic minorities. The Committee also raised the issue of the lack of statutory education for some children deprived of their liberty.¹⁷

For most groups the majority of children attend school; however some groups are much more at risk of permanent exclusion than others.

Boys account for the majority of permanent exclusions in all three nations, and in England and Wales pupils with SEN are disproportionately represented.

Permanent exclusion appears to be strongly associated with multiple deprivation in Scotland and FSM eligibility in England and Wales. White pupils comprise the majority of permanent exclusions in Scotland and Wales; in England the rates for White and non-White pupils are very similar though there are clear differences between different ethnic minority groups.

Some groups, notably those who are geographically mobile and/or are in institutions have greater risk of non-attendance, partly due to higher rates of permanent exclusion within these groups.

Gypsy and Traveller children, children in custody, children in immigration detention, refugees and children of asylum seekers lack access to education or to a full curriculum.¹⁸

¹⁷ United Nations 2008. *Committee On The Rights Of The Child*. Forty-ninth session. UN document: CRC/C/GBR/CO/4. 20 October 2008.

¹⁸ Anderson, K. *et al.* 2008. *The Right to Education in England*. Alternative Report to the UN Committee on the Rights of the Child. The Children's Legal Centre. Available at: [http://www.right-to-education.org/sites/r2e.gn.apc.org/files/THE%20RIGHT%20TO%20EDUCATION%20IN%20ENGLAND%20FINAL\(1\).pdf](http://www.right-to-education.org/sites/r2e.gn.apc.org/files/THE%20RIGHT%20TO%20EDUCATION%20IN%20ENGLAND%20FINAL(1).pdf). Accessed 18/08/2010.

What we know about the overall situation and trends

The number of children permanently excluded from primary, secondary and special schools (including pupil referral units in Wales) in 2008/09 was 6,550 in England,¹⁹ 87 in Scotland²⁰ and 213 in Wales²¹ as Table 10.2.1 below shows. In 2008/09 there were considerable falls in permanent exclusion rates compared to 2007/08 in all three nations.

Table 10.2.1 Permanent exclusions by nation and change over time in Britain, 2007/08-2008/09²²

Nation	Exclusions		% change in 2008/09 from
	2007/08	2008/09	2007/08
England ¹	8,130	6,550	19
Scotland ²	164	87	47
Wales ³	241	213	12

Source:

1. *Statistical First Release, Permanent and fixed period exclusions from schools and exclusion appeals in England, 2008/09.*
2. *Statistics Publication Notice: Education Series, Exclusions from school 2008/09.*
3. *Statistical First Release, Exclusions from Schools in Wales 2008/09.*

Note: Figures are for all children in state primary, secondary and special schools (and pupil referral units in Wales).

What we know about the situation for different groups

Gender

In 2008/09, the permanent exclusion rate for boys in England was over 3.5 times higher than that for girls. Nearly 4 out of 5 (78%) of the total permanent exclusions were received by boys. This relative permanent exclusion rate remained unchanged on the previous year's data despite the decline in the absolute level. The situation in Wales was very similar, with boys accounting for 77% of permanent exclusions (down from 83% in 2007/08). Due to the way that data are recorded in Scotland we do not know the gender difference in terms of permanent exclusions, however, the data do show that boys account for 78% of all exclusions.

¹⁹ DCSF 2009.

²⁰ Scottish Government 2010a.

²¹ Wales Assembly Government 2010a.

²² DSCF 2009; Scottish Government 2010a; Wales Assembly Government 2010a.

Age

In all three nations, boys are more likely to be excluded at a younger age than girls. The most common point for both boys and girls to be excluded is at ages 13 and 14 (equivalent to year groups 9 and 10 in England²³ and Wales²⁴ and Stage 4 in Scotland²⁵); In England, around 54% of all permanent exclusions were of pupils from these age groups.

Socio-economic groups

Pupils in England eligible for FSM were over twice as likely to be permanently excluded than the average, accounting for 38% of permanent exclusions. In Scotland, 41% of permanent exclusions were among pupils from the 20% of areas with the highest levels of multiple deprivation in 2006 compared to just 3% among pupils from the 20% of areas associated with the lowest levels of multiple deprivation.

Disability

Nearly three-quarters (71%) of permanent exclusions in England involved pupils with some form of SEN. The likelihood of permanent exclusion was particularly high for those pupils without a statement, who made up 64% of all exclusions in 2008/09. The data for 2008/09 show that 24 out of every 10,000 pupils with statements of SEN are excluded and 30 out of every 10,000 pupils with SEN without a statement are excluded. This compares with 3 in every 10,000 pupils with no SEN. In Wales, 53% of permanent exclusions involved pupils with some form of SEN.

For those for whom the data were available in Scotland, 23% of permanent exclusions were among pupils with some form of Additional Support Need (ASN).

Ethnicity

In 2008/09, 77% of exclusions in England related to White pupils. However in terms of the permanent exclusion rate per 10,000 pupils, pupils from non-White British backgrounds were as likely to be permanently excluded (10 per 10,000 pupils) as pupils overall. However, more detailed analysis of the permanent exclusion data show large differences between ethnic minority groups:

- The lowest permanent exclusion rates were found among members of the Asian community (5 per 10,000 pupils) and children with one White/one Asian parent or from 'Other White' backgrounds (both groups had a rate of 8 per 10,000 pupils).
- The permanent exclusion rate for White British pupils (9 per 10,000 pupils) was similar to the overall rate. Other pupils with average permanent exclusion rates were those from Black African, Irish, Mixed White/Black African and other Mixed. Ethnic backgrounds (all had permanent exclusion rates of 10-11 per 10,000 pupils). These rates were just above that for White pupils showing

²³ DCSF 2009.

²⁴ Welsh Assembly Government 2010a.

²⁵ Scottish Government 2010a.

a large drop from 2007/08 data.

- Mixed White/Black Caribbean pupils were 2.5 times more likely to be excluded than average, with a permanent exclusion rate of 25 per 10,000 pupils. Pupils from Other Black households were twice as likely to be permanently excluded, with a rate of 20 per 10,000 pupils.
- The highest rates of permanent exclusions among ethnic minority groups were found among Black Caribbean pupils (30 per 10,000 pupils), pupils from Irish Traveller backgrounds (30 per 10,000 pupils) and Gypsy/Roma pupils (who had the highest rate at 38 per 10,000 pupils). Taken together these rates are between 3-4 times the overall exclusion rate, although caution is needed in using these estimates due to the possible under-recording of pupils from the Gypsy/Roma and Irish Traveller groups, and the small population sizes.

In Scotland, 78% of permanent exclusions related to pupils from White ethnic backgrounds, and 97% of exclusions were among children with English as their first language (or where they were assessed as being fluent in English). Where data were available in Wales, 93% of permanent exclusions involved pupils from White ethnic backgrounds.

Box 10.2.1 Related issue: The educational experience of the most disadvantaged groups

Some groups of children not only under-achieve in school, but are also among the most likely to be permanently excluded.

Irish Traveller and Gypsy/Roma children are the most likely to be permanently excluded from school in England, and are the only ethnic groups whose performance has deteriorated sharply in recent years, dropping from 42% and 23% of pupils respectively getting 5 GCSEs A*-C in 2003, to just 16% and 14% in 2007. In England, qualitative research indicates that Gypsy and Traveller children have the lowest attendance rate of any ethnic minority group, at around 75%. In Scotland, it has been estimated that only 20% of Gypsy and Traveller children of secondary age regularly attend school and this percentage may be even lower in more remote areas.²⁶ Even those who attend school experience unequal access to an appropriate curriculum, teacher expectations and cultural support.²⁷

²⁶ Cemlyn, S. *et al.* 2009. *Inequalities experienced by Gypsy and Traveller communities: A review*. Research Report 12. Manchester: Equality and Human Rights Commission. Page 92.

²⁷ Ofsted 2009. *The Annual Report of Her Majesty's Chief Inspector of Education, Children's Services and Skills, 2008/09*. London: The Stationery Office. Page 82.

Box 10.2.1 Continued

Looked-after children in England have a similarly low educational performance, with just 15% getting 5 GCSEs A*-C. Looked-after children remain 4 times as likely to be permanently excluded from school as their peers; twice as likely to be convicted or subject to a final warning or reprimand from the police; 4 times as likely to be unemployed at the end of Year 11; and 10 times as likely to have a statement of Special Educational Needs (SEN).²⁸ In Scotland, pupils with Additional Support Needs (ASN) are more likely to be looked after by the local authority. Pupils who are looked after by the local authority and have ASN have particularly low levels of attainment.²⁹

Children with SEN/disabilities are generally recognised as being particularly disadvantaged within the education system. Almost three-quarters (71%) of permanent exclusions in England involved pupils with some form of SEN in 2008/09. Educational performance is also low with only 17% of children with SEN achieving 5 GCSEs A*-C including English and Maths, dropping to 6% of those with a statement. When SEN is combined with pupils eligible for Free School Meals (FSM), outcomes drop even further with only 10% of girls and 8% of boys reaching this level.

Asylum-seeking children are at risk of not receiving an adequate education. Research indicates that despite the requirement of early access to education, wider policies of dispersal and the residential instability experienced by many asylum seekers means that for many children this does not happen.³⁰ For example, the UK National Children's Bureau reported in 2005 that the majority of asylum-seeking children present themselves in the middle of school terms and, in practice 'it can take weeks or months to find a school place and then often only in the lowest performing schools.'³¹ Another study of local authority and schools' responses to asylum-seeking and refugee children concluded that asylum seekers and refugees with families could be dispersed to areas where there may not be any school placement for their children, or where the schools

²⁸ Outcome indicators for children looked after: twelve months to 30 September 2009, England. Available at: <http://www.dcsf.gov.uk/rsgateway/DB/SFR/s000930/index.shtml>

²⁹ Riddell, S., Edward, S., Weedon, E. and Ahlgren, L. 2010. *Disability, Skills and Employment: A review of recent statistics and literature on policy and initiatives*. Research Report 59. Manchester: Equality and Human Rights Commission. Page 21.

³⁰ Aspinall, P. and Watters, C. 2010. *Refugees and Asylum Seekers: A review from an equality and human rights perspective*. Research Report 52. Manchester: Equality and Human Rights Commission. Page 39.

³¹ Aspinall, P. and Watters, C. 2010. Page 39.

Box 10.2.1 Continued

may not have adequate resources to meet their needs.³² Finally, evidence on school performance indicates that refugee children experience significant problems in schools underperforming in national tests.³³

³² Aspinall, P. and Watters, C. 2010. Page 39.

³³ Aspinall, P. and Watters, C. 2010. Pages 42-44.

10.3 What we know about bullying, respect and support at school

Measure:

Percentage of pupils reporting experiencing direct bullying.

How this measure works:

We are able to report on this measure for England using the Youth Cohort Study and the Longitudinal Study of Young People in England: The Activities and Experiences of 16-year-olds. The combined results from the 2007 surveys provide data on the extent to which some groups experienced bullying during the three year period 2004-06. These data have been drawn on for this measure alongside evidence collected from various surveys and reviews for England and as far as possible for Scotland and Wales, though data for these nations cannot be disaggregated by equality characteristics.

The data in the Youth Cohort Study and the Longitudinal Study of Young People in England are collected by gender, parental occupation, young person's ethnic group, Special Education Needs (SEN) status, disability status and Free School Meal (FSM) eligibility. We are using data from 2007 because the Youth Cohort Study and the Longitudinal Study of Young People in England carried out in 2008 did not cover this specific subject.

To supplement these surveys, a survey of 1,750 practicing teachers from 1,201 schools in the maintained sector in England was commissioned for this review as part of the NFER Teacher Voice Omnibus February 2010 survey. The questions explored teachers' perceptions of the levels of bullying experienced, and support received by different groups of pupils including boys, girls, disabled pupils, those from different ethnic minority groups, those practicing different religions, and LGBT pupils (in secondary schools only). The survey was conducted online. The panel included teachers from the full range of roles in primary and secondary schools from head-teachers to newly-qualified teachers. Of the respondents, 52% (N=916) were teaching in primary schools and 48% (N=842) were teaching in secondary schools. There was an under-representation of schools in the highest quintile in terms of eligibility for FSM in both the sample of primary schools and the sample of secondary schools. The sample of secondary schools also had an over-representation of schools with low eligibility for FSM. To address this, weights were calculated using FSM factors to create a more balanced sample.

The Equality Measurement Framework recommended a measure that looks at levels of dignity and respect within the education system. However the data available for this measure are very limited, therefore reported levels of bullying is being used as a proxy measure for this indicator.

The data do not show the frequency of the bullying, only whether or not a pupil has been bullied in a given time period. Large-scale surveys do not collect data on religion or belief, sexual orientation or transgender. Other literature has been drawn on for these groups and findings are indicative only of the issues that these groups may face.

Special Educational Needs (SEN) is used to measure disability (disaggregated by impairment types where possible). In England and Wales, pupils with SEN are those who require special support as a result of a learning difficulty or disability; disabled pupils represent a sub-set of all pupils with SEN.

Free School Meal (FSM) eligibility is used as a measure for parental low income and social class.³⁴ The Census occupational categories are used as a means to report on socio-economic differences.

Overview

Many young people have to navigate the educational system while being treated unfairly. In 2008 the United Nations Committee on the Rights of the Child expressed concern at the extent of bullying in schools.³⁵ Some surveys indicate between a third and a half of children in the UK think that bullying is a problem in their school.

Disabled students, lesbian, gay and transgender students and those from lower socio-economic groups are all more likely to report experiencing high levels of bullying. Surveys suggest that of those sampled, learning disabled and LGBT young people stand out as groups where the majority have experienced bullying. Cyberbullying is now estimated to affect around in 1 in 3 of secondary age young people and may begin to change the pattern of groups most affected by bullying, though further research is required.³⁶

³⁴ For discussion about the relationship between Free School Meal eligibility, parental income and social class see Hills, J. *et al.* 2010. Page 88.

³⁵ United Nations 2008.

³⁶ Cross, E.J., Richardson, B, Douglas, T. and Vonkaenel-Flatt, J. 2009. *Virtual Violence: Protecting Children from Cyberbullying*. London: Beatbullying.

Students who are bullied at school have worse exam results and are more likely to end up not in education, employment or training. They are also less likely to stay in full-time education after the age of 16. (This is covered in more detail in Chapter 11: Employment.)

What we know about the overall situation

The extent to which education systems recognise and address bullying is a sign of their commitment to ensuring that all children at school get equal respect. Nearly half of children say bullying occurs in their school.³⁷ When asked if bullying was a problem in their school, 48% of pupils in England, 43% in Scotland and 32% in Wales said 'yes'.³⁸ In the same survey, 11% of English, 10% of Welsh and 10% of Scottish school children reported that they had directly experienced bullying in the previous three months.³⁹

The Youth Cohort Study and the Longitudinal Study of Young People in England asked pupils in Year 9, Year 10 and Year 11 about their experiences of bullying (between 2004 and 2006) and compared outcomes for those young people who reported and those who did not report having been bullied during the 3 years.⁴⁰

The proportion of young people who reported having been bullied declined from nearly a half in Year 9 (47%) to less than a third in Year 11 (29%). Very nearly two-thirds (66%) of young people reported having been bullied at some point between 2004 and 2006. On average, those who reported having been bullied did worse in their GCSE exams than those who did not (with a difference of 15 percentage points). They were also twice as likely not to be in employment, education and training (NEET) at age 16 (10% of those who had been bullied in the last 3 years were NEET in 2007 compared to 5% of those who had not).⁴¹

³⁷ British Council 2008. 3,500 Students' Voices Across Europe. Full findings available at <http://www.britishcouncil.org/indie-full-survey-results-2.pdf> and data available at <http://www.britishcouncil.org/country-comparisons-summary-chart.xls>

³⁸ British Council 2008.

³⁹ British Council 2008.

⁴⁰ DCSF 2008. *Youth Cohort Study and Longitudinal Study of Young People in England: The Activities and Experiences of 16 year olds: England 2007*. Available at: http://www.dcsf.gov.uk/rsgateway/DB/SBU/b000795/YCS_LSYPE_Bulletin_final.pdf. Accessed 18/08/2010. Section 3: Stay Safe.

⁴¹ DCSF 2008. Section 3: Stay Safe.

A UNICEF report looking at the wellbeing of children in 21 countries found that there was a large variation in the number of children reporting bullying, from about 15% in Sweden and the Czech Republic to more than 40% in Switzerland, Austria, and Portugal. About a third of young people in the countries surveyed report being bullied at least once during the two months prior to the survey. The UK does not perform well in this study, ranking 15th out of 21.⁴²

What we know about the situation for different groups

Teachers responding to the NFER Teacher Voice Omnibus survey indicated different levels of bullying in their respective schools.⁴³ Table 10.3.1 presents the findings from this survey. Response sizes were very small for LGBT students as many teachers did not know whether or not they taught LGBT young people. However, the experiences of these groups at secondary school stand out as particularly problematic as they are identified as a clear target for bullying, yet at the same time teachers do not feel that respect for them is promoted at school, or that as a group they are supported.

Table 10.3.1 Teachers' opinions of the school experience of different groups: Percentage of teachers who think that each group is (A) a bullying target, (B) is very actively promoted as deserving respect and (C) feels supported in school in England, 2010⁴⁴

Primary school teachers views of group	(A) Target for bullying	(B) School is very actively promoting respect for	(C) Seen by teachers as feeling supported at school
Boy	4	83	54
Girl	5	79	53
Disabled	11	89	81
Ethnic minority	11	71	51
Religion	4	61	42

Continued...

⁴² UNICEF 2007. *Child poverty in perspective: an overview of child well-being in rich countries*. Page 32. Available at: http://www.unicef-irc.org/publications/pdf/rc7_eng.pdf

⁴³ National Foundation for Educational Research (NFER) 2010. Teacher Voice Omnibus Survey, February. This paper is available on the Equality and Human Rights Commission's Triennial Review web pages.

⁴⁴ NFER 2010.

Table 10.3.1 Continued

Secondary school teachers views of group	(A) Target for bullying	(B) School is actively promoting respect for	(C) Seen by teachers as feeling supported at school
Boy	8	68	39
Girl	10	70	43
Transgender	15	7	7
LGB	46	16	14
Disabled	25	81	78
Ethnic minority	19	67	47
Religion	11	53	37

Source: NFER Teacher Voice Omnibus survey, February 2010.

Results from the same survey show that teachers also vary in their views of who is likely to underachieve. Boys are identified as the most likely to underachieve in primary and secondary school. Further investigation is needed to ascertain whether these views entrench disadvantage by limiting teacher expectations of some groups, or are a helpful assessment of risk that leads to more support.⁴⁵

Gender

The Youth Cohort Study and the Longitudinal Study of Young People show no difference in the proportions of boys and girls reporting having being bullied in 2004-06: two-thirds (66%) of both boys and girls said that this was the case.⁴⁶

Socio-economic groups

There appears to be a relationship between parents' socio-economic category, and the degree to which young people report being bullied at school. The Youth Cohort Study and the Longitudinal Study of Young People data show that 64% of pupils with parents in higher professional occupations reported being bullied in 2004-06, compared to 70% of those with parents in routine occupations. When FSM eligibility is used to measure socio-economic differences, the data also show differences in reported bullying levels with 65% of pupils who were eligible for FSM reporting having been bullied, compared to 69% of those not eligible.⁴⁷

⁴⁵ NFER 2010.

⁴⁶ DCSF 2008. Section 3: Stay Safe.

⁴⁷ DCSF 2008. Section 3: Stay Safe. Table 3.1.2.

Disability

Young people with a disability or SEN were most at risk of being bullied. More than four-fifths of young people with a statement of SEN (83%) or a disability that affected their schooling (81%) reported having been bullied in 2004-06, compared to under two-thirds (65%) of young people with no SEN or no disability.⁴⁸

According to qualitative research with 507 children and young people in England and Wales, young people with learning disabilities are particularly at risk with 82% of those sampled reporting having being bullied.⁴⁹ Of those, 8 out of 10 children and young people had experienced bullying at school and 3 out of 10 were bullied out on the street, at the park or on the bus.⁵⁰

However, survey evidence from teachers suggests while a quarter of secondary school teachers (and 17% of all teachers) recognise that pupils with disabilities are bullied by other pupils, overall, teachers feel that students with SEN are the most supported group in school.⁵¹

Ethnicity

According to the Youth Cohort Study and the Longitudinal Study of Young People, White pupils were most likely to report being bullied, with around two-thirds (67%) of White pupils reporting being bullied between 2004-06. Mixed Race pupils (66%), Black African (62%) and Black Caribbean pupils (61%) also reported relatively high rates of bullying compared to Pakistani (58%), Bangladeshi (52%) and Indian pupils (49%).⁵²

Religion or belief

The school experiences of pupils of different religions and beliefs are not reflected in large-scale datasets, and there is limited evidence available on bullying from this perspective. However, one survey of over 1,000 pupils in 2007 suggests that it is an issue. The survey found that 23% of young people sampled, who practiced any religion in England, reported being bullied because of their faith.⁵³

⁴⁸ DCSF 2008. Section 3: Stay Safe.

⁴⁹ Mencap 2006. *Bullying wrecks lives: the experiences of children and young people with a learning disability*. Page 3. Available at: <http://www.mencap.org.uk/displaypagedoc.asp?id=164> Qualitative research with 507 children and young people with a learning disability aged between 8 and 19 years. 60% of respondents were boys and 6% were from Black or ethnic minority backgrounds.

⁵⁰ Mencap 2006. Page 6.

⁵¹ NFER 2010.

⁵² DCSF 2008. Section 3: Stay Safe.

⁵³ Interfaith report 2008. *Beat Bullying*. London: Interfaith. Page 5. Based on responses from over 1,000 young people either to a surveyor or through focus groups.

Sexual orientation

Although the school experiences of LGB students are not captured in large-scale datasets, a number of pieces of research have been dedicated to understanding the degree of bullying to which this group is subjected. Research indicates that it is a serious problem. For example, one survey of over 1,000 students in British schools in 2007 showed that almost two-thirds (65%) of LGB young people have experienced direct bullying, rising to three-quarters (75%) in faith schools.⁵⁴ According to the same survey, almost all (97%) LGB young people surveyed reported regularly hearing homophobic language in school. They were subject to verbal and physical attack, and astonishingly almost 1 in 5 had suffered death threats. Of those bullied:

- 92% had been subjected to verbal homophobic bullying
- 41% had experienced physical bullying
- 17% had suffered death threats⁵⁵

The NFER Teacher Voice Omnibus survey found that around half (46%) of secondary school teachers in England acknowledge that bullying of pupils seen as LGB is common, but fewer than 1 in 6 (14%) said that they felt this group was supported by their school. Only 16% of teachers said that their school was ‘very active’ in promoting equality and respect for LGB pupils.⁵⁶

Transgender

In the same survey, transgender students were identified as the group who secondary teachers think are least supported in school (with only 7% of secondary teachers saying that this is the case). Also, only 7% of secondary teachers say that their school is ‘very active’ in promoting equality and respect for transgender pupils.⁵⁷ However, it may be that many teachers have not had any experience in teaching transgender pupils or had any at school that they know about.

The experiences of transgender pupils are least likely to be reflected in data and research. However, one piece of local qualitative research with 24 transgender young people suggests that young transgender people appear to be more likely to experience harassment and bullying than LGB pupils, and the problem appears worse for female-to-male than male-to-female people.⁵⁸

⁵⁴ Stonewall 2007. *Education for all. The Experiences of Young Gay People in Britain's Schools*. London: Stonewall. Page 2.

⁵⁵ Stonewall 2007. Page 3.

⁵⁶ NFER 2010.

⁵⁷ NFER 2010.

⁵⁸ Keogh, P., Reid, D. and Weatherburn, P. 2006. *Lambeth LGBT Matters*. London: Sigma Research. Available at: <http://www.sigmaresearch.org.uk/downloads/report06c.pdf> Accessed 04/08/2010. Page 18.

Box 10.3.1 Related issue: Stereotyping in schools

Stereotyping in schools particularly affects girls, disabled young people, children from lower socio-economic backgrounds and those from some ethnic minority groups.⁵⁹ Stereotypical information and guidance can limit young people's options and aspirations at an early age.⁶⁰ Careers advice often reinforces traditional choices and young people have no information on the pay advantages of non-traditional routes.⁶¹ Nearly 1 in 5 (18%) of young people say that they have not had enough information to make choices for their future. This rises to 23% of disabled young people.⁶²

⁵⁹ Equality and Human Rights Commission 2009. *Staying On*. Available at: http://www.equalityhumanrights.com/uploaded_files/ehrc_education_6opp.pdf. Accessed 18/08/2010. Page 7.

⁶⁰ Equality and Human Rights Commission 2009. Page 11.

⁶¹ Equal Opportunities Commission 2006. *Free to Choose: Tackling gender barriers to better jobs. One year on progress report*. Manchester: EOC. Available at: http://www.employersforapprentices.gov.uk/docs/research/Research_1_338.pdf Accessed 18/08/2010. Page 5.

⁶² Equality and Human Rights Commission 2009. Page 20.

10.4 What we know about educational attainment at age 16

Measure:

Percentage of children getting 5+ grade A*-C GCSEs including English (or Welsh) and Maths or equivalent. The equivalent measure for Scotland is Standard Grade awards at levels 1-3, Intermediate 2 at grades A-C, and Intermediate 1 at grade A. The measure is referred to in the text as 5+ good GCSEs or equivalent including Maths and English

How this measure works:

There are difficulties comparing educational attainment in England, Scotland and Wales.

In England, data are for pupils in the maintained sector only as information is also held on their characteristics (gender, Special Educational Needs (SEN) status, ethnicity, Free School Meal (FSM) eligibility).

In Scotland, data refer to publically funded schools. Data are collected by gender. There are no data available specifically for this measure for pupils from different ethnic minority groups, or by Additional Support Needs (ASN) although general attainment data are collected, which is reflected here.

In Wales, data are for all schools. Data are available for this measure by gender, FSM eligibility, and SEN status. Data are not available for ethnicity.

There are no data collected for religion or belief, LGB and transgender groups. As there is very limited related data for this measure for these groups, they are not covered in this section.

SEN (England and Wales) and ASN (Scotland) are used as a way to measure disability (disaggregated by impairment types where possible). In England and Wales, pupils with SEN are those who require special support as a result of a learning difficulty or disability. There are three levels of SEN that can be assessed – ‘School Action,’ ‘School Action Plus,’ or SEN with a statement – the third implying the greatest level of special needs. In Scotland, pupils with ASN include those who have additional learning difficulties for any reason including learning difficulties, being disabled, and because of wider social factors such as poverty or being looked after by a local authority. In England, Scotland and Wales disabled pupils represent a sub-set of all pupils with SEN/ASN.

In England and Wales, FSM eligibility is used as a measure for parental low income and social class.⁶³ FSM data are not collected for this measure in Scotland.

Overview

Over recent years, there has been **a steady improvement in the proportion of students getting good qualifications at age 16** (5+GCSEs at A* to C or equivalent in Scotland including English/Welsh and Maths). **Girls are ahead of boys** in all three nations, a reversal of the situation for most of the post-war period. This better performance of girls relative to boys is evident in nearly all groups.

Ethnic differences in GCSE results have narrowed in England. The gap between White British and Bangladeshi, Pakistani, Black African and Black Caribbean children has narrowed. By 2008, the proportions gaining 5+ good GCSEs including English and Maths were very similar for Bangladeshi and Black children and for White children. Indian and Chinese children remained well ahead of other groups. At the other end of the scale **the proportion of Irish Traveller and Gypsy/Roma children with good GCSE results fell even further behind that of other groups.** In 2008 the United Nations Committee on the Rights of the Child expressed concern at the significant disparities in terms of school performance and dropout rates between pupils of ethnic, religious and national minorities, in particular Gypsies and Travellers, and also commented on the degree that bullying impacts on educational performance for this group.⁶⁴

The gap between students from different socio-economic backgrounds remains wide, with students eligible for FSM only half as likely to have good GCSE results as those who are not. The combination of being eligible for FSM and being part of another group with a lower probability of obtaining good qualifications (for example boys, those with an identified SEN and certain ethnic minority groups) leads to extremely low results.

⁶³ For discussion about the relationship between Free School Meal eligibility, parental income and social class see Hills, J. *et al.* 2010. Page 88.

⁶⁴ United Nations 2008.

The overall attainment gap between those eligible for FSMs and those who are not appears to have narrowed since 2006, but evidence of a trend in this direction remains tentative.⁶⁵

Only 17% of children with special educational needs get five good GCSEs including English and Maths in England, compared to 61% of children without identified special needs. This does not just apply to people with learning disabilities: only 33% of children whose primary need related to visual impairment attained this level.

The differences in performance at age 16 partly reflect the fact that some of the educational inequalities observed in early years continue to widen in the course of their schooling. In particular, children from deprived backgrounds become more likely to have low relative performance as they get older, even those who start out well. Results at age 16 are therefore influenced both by how well each group is doing early on in their schooling and how well they progress.

What we know about the overall situation and trends

In 2008/09, 51% of pupils in maintained schools in England achieved 5+ good GCSEs or equivalent including English/Welsh and Maths,⁶⁶ as did 48% of those in publicly funded schools in Scotland,⁶⁷ and 47% of those in all schools in Wales.⁶⁸

⁶⁵ Hills, J. *et al.* 2010. Footnote 72 states that “These data need to be treated with some caution because of the change in socio-economic classification and the fact that parental occupational data are reported by young people rather than by parents. There is year-on-year fluctuation and it is impossible to know whether the narrowing of the gap in 2006 represents ‘noise’ in the data or a longer-term trend. Nevertheless, the data show a modest improvement over the period for those from routine/unskilled manual backgrounds that has had the effect of reducing inequality to some extent.”

⁶⁶ DCSF 2010b. *Statistical First Release, Key Stage 4 Attainment by Pupil Characteristics, in England 2008/09*. Statistical First Release 34/2009. Available at: http://www.dcsf.gov.uk/rsgateway/DB/SFR/s000900/SFR34_2009Revised.pdf Accessed 18/08/2010.

⁶⁷ Equality and Human Rights Commission analysis of data provided by the Scottish Government.

⁶⁸ Welsh Assembly Government 2010b. *Examination Results in Wales, 2008/09 (Revised)*. Statistics for Wales. First Release SDR 188/2009(R). Available at: <http://wales.gov.uk/docs/statistics/2010/100514sdr1882009ren.pdf>. Accessed 04/08/2010.

Table 10.4.1 Percentage of pupils achieving 5 GCSE grade A* to C (including English/Welsh and Maths) or equivalent for all pupils in each nation, 2006/09⁶⁹

Year	2006	2007	2008	2009
England ¹	44	46	48	51
Scotland ²	46	44	46	48
Wales ³	Data are not available	44	46	47

Sources:

1. Data from DCSF Statistical First Release, Key Stage 4 Attainment by Pupil Characteristics, in England 2008/09, Time Series of GCSE achievements by pupil characteristics, for maintained schools only.
2. Data tables from Scottish Government. In Scotland, Standard Grades awards at levels 1-3 / intermediate 2 at grades A-C / Intermediate 1 at grade A, for publicly funded secondary schools.
3. Data tables from the Welsh Government, for all schools.

Analysis of the different factors associated with GCSE performance in England was conducted by the Department for Children, Schools and Families in 2007. It looked at the factors that affect performance between 11 and 16. It showed how well a child had done at primary school was a better predictor of their secondary school success than any other single factor. It also showed that there were further negative associations with gender (for boys), receiving FSM, being in care, living in a deprived neighbourhood, having SEN and recent movement between schools. Children affected by these factors all do worse at age 16 than one would predict given their 11-year-old test scores, while girls, in particular do better than expected. Bangladeshi students also make good progress in secondary school – while they are the worst-performing large ethnic minority group when they arrive at school at age 5, by age 16 they are close to the average in their GCSE performance.⁷⁰

What we know about the situation for different groups

Gender

Across all three nations girls out-perform boys. In 2009 54% of girls achieved 5+ good GCSEs including Maths and English, compared to 47% of boys in England.

⁶⁹ English data are from DCSF 2010b. Scottish data are from Scottish Government. Welsh data are from Equality and Human Rights Commission analysis of data provided by the Welsh Government.

⁷⁰ Hills, J. *et al.* 2010. Figure 11.11, page 342.

Girls are furthest ahead of boys in Wales (achievement rates of 51% compared to 43%),⁷¹ and have the narrowest lead in Scotland where 50% of girls achieved this level compared to 46% of boys.

Table 10.4.2 Percentage of pupils achieving 5 GCSE A* to C GCSEs, including English and Maths, or equivalent for boys and girls in England, Scotland and Wales, 2006-09⁷²

Year	2006		2007		2008		2009	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
England ¹	40	48	42	50	44	52	47	54
Scotland ²	44	48	42	46	44	48	46	50
Wales ³	Data are not available		40	49	42	50	43	51

Source:

1. Data from DfES Statistical First Release, Key Stage 4 Attainment by Pupil Characteristics, in England 2008/09, Time Series of GCSE achievements by pupil characteristics.
2. In Scotland, Standard Grades awards at levels 1-3 / intermediate 2 at grades A-C / Intermediate 1 at grade A, for publicly funded secondary schools.
3. Data tables from the Welsh Government.

Socio-economic groups

FSM eligibility reveals one of the starkest differences in achievement at age 16. Being eligible for FSM is associated with a much lower probability of achieving 5+ good GCSEs including English and Maths. In 2009 only 27% of students eligible for FSM achieved this compared to 54% for those not eligible.⁷³

Figure 10.4.1 below shows that inequalities in England vary considerably within different ethnic groups when combined with eligibility for FSM. It reveals, for example, that while both Chinese and Indian students do very well overall, performance of the latter varies much more by socio-economic status. So whereas Indian boys from low income families perform significantly below the overall average, their Chinese counterparts are well above average.

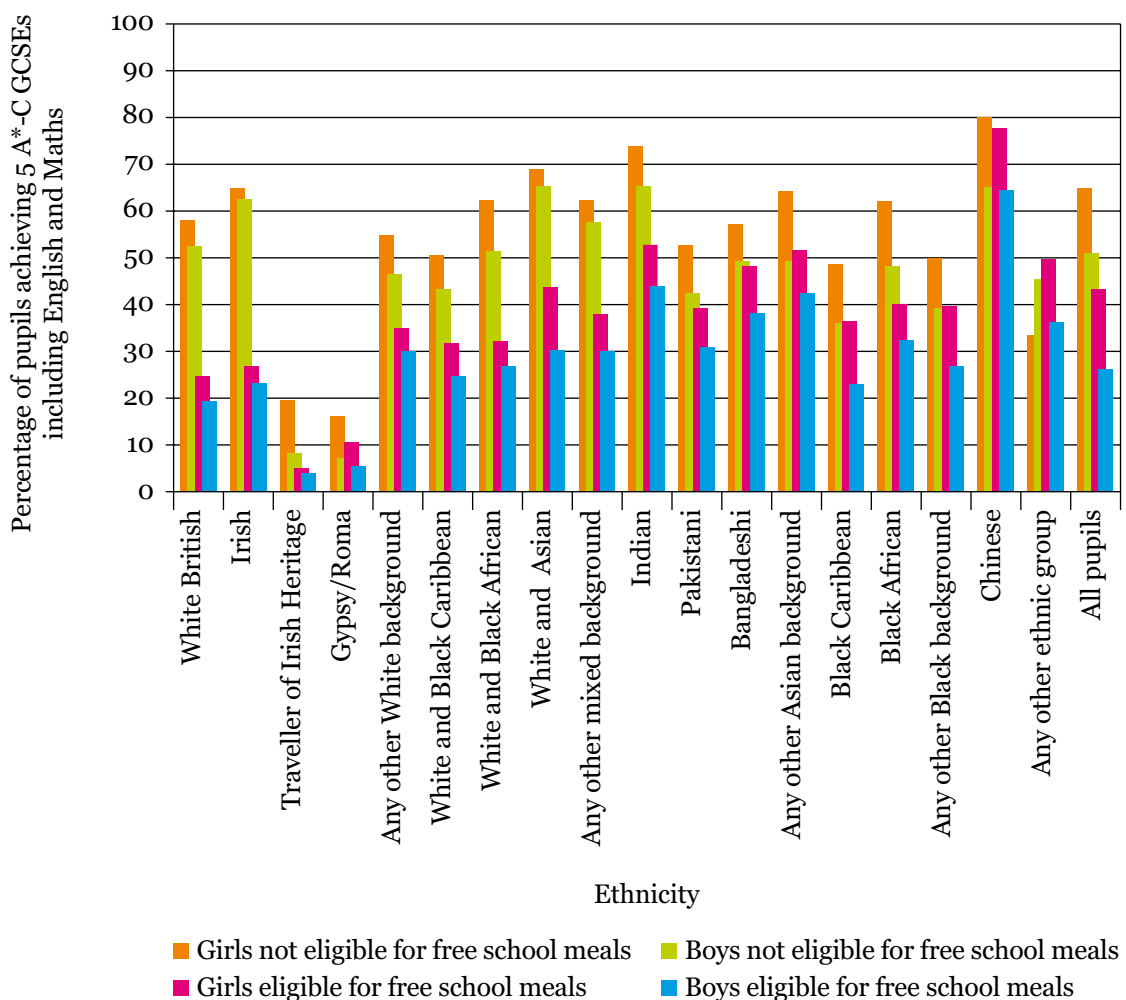
⁷¹ Welsh Assembly Government 2010b.

⁷² Data from DCSF 2010b. Data tables from Scottish Government and Welsh Assembly Government.

⁷³ DCSF 2010b.

When analysing how ethnicity, gender and FSM eligibility affect GCSE performance, the National Equality Panel found that the FSM effect was larger than any of the other associations shown, with the exception of the higher performance of Chinese pupils, and the lower performance of Gypsy and Traveller children.⁷⁴

Figure 10.4.1 Percentage of pupils achieving 5 A*-C GCSEs including English and Maths 2009 by gender, FSM status and ethnic group in England, 2008-09⁷⁵



Source: Key Stage 4 attainment by Pupil Characteristics, in England 2008/09.

Pupils entitled to FSM in Wales are less than half as likely to achieve 5+ good GCSEs as those not entitled to FSM – 20% compared to 52%. This compares to 47% of all pupils in Wales.⁷⁶

⁷⁴ Hills, J. *et al.* 2010. Figure 11.14, page 349.

⁷⁵ DSCF 2010b.

⁷⁶ Equality and Human Rights Commission analysis of Key stage 4 attainment data provided by the Welsh Assembly Government.

Disability

Pupils with SEN perform less well than pupils with no identified SEN at age 16. For all pupils with SEN in England, 17% achieved 5+ good GCSEs or equivalent including English and Maths compared to 61% of pupils with no identified SEN. Students without a statement performed better than those with a statement. The percentage of pupils who achieved 5+ good GCSEs or equivalent including English and Maths was:

- 21% for pupils at School Action
- 13% for pupils at School Action Plus
- 6% for pupils with a statement of SEN

Achievement varies by impairment. In England in 2009, 1 in 5 (20%) pupils whose primary need was autistic spectrum disorder achieved 5+ good GCSEs including English and Maths, dropping to only 11% of those with behavioural/emotional/social needs. Pupils whose primary need was visual impairment were still only half as likely to achieve 5+ good GCSEs or equivalent including English and Maths compared to those with no identified SEN (33% compared to 61% of pupils with no identified SEN).⁷⁷

As Table 10.4.3 shows, when eligibility for FSM is combined with a SEN, it leads to extremely low levels of attainment.

⁷⁷ DCSF 2010b.

Table 10.4.3 Percentage of pupils achieving 5+ GCSEs at A*-C including English and Maths by impairment type and FSM status in England, 2008/09⁷⁸

	Number of pupils	Total Girls	Total Boys	Percentage of pupils achieving 5+ GCSEs at A*-C (inc English and Maths)			
				Not eligible for FSM		Eligible for FSM	
				Girls	Boys	Girls	Boys
No identified SEN	441,568	231,187	210,381	65	62	41	38
Visual impairment	653	265	388	38	35	22	11
Hearing impairment	1,193	588	605	37	30	17	9
Physical disability	1,946	805	1,140	29	26	12	15
Other difficulty/disability	3,673	1,673	2,000	27	23	13	9
Autistic spectrum disorder	3,547	515	3,032	19	22	11	12
Behavioural difficulties ²	21,873	7,530	14,353	17	10	9	6
Communications needs ¹	3,115	963	2,152	8	13	4	6
Specific learning difficulty	7,896	2,286	5,610	14	13	5	6
Moderate learning difficulty	14,602	5,536	9,066	2.7	2.9	2.2	1.9
Severe learning difficulty	2,201	812	1,389	0.2	1.0	-0.4	0.0
Profound learning difficulty	505	202	303	1.9	0.0	0.0	0.0
All SEN pupils ³	137,228	52,850	84,378	21	18	10	8

Source: Data tables provided by the DCSF.

1. Includes speech and language needs.
2. Includes emotional and social difficulties.
3. Also includes 62 people with multi-sensory impairment.

In Wales, young people with SEN also perform less well than those with no identified SEN. Of the total pupils on the SEN register, 13% achieved 5+ good GCSEs or equivalent including English/Welsh and Maths. When broken down by levels of support, young people with a statement were least likely to achieve this

⁷⁸ Equality and Human Rights Commission analysis of Key Stage 4 attainment data provided by the Department for Education.

with only 8% doing so in 2009.⁷⁹ These figures are an improvement on 2007 and 2008 when 11% and 9% of pupils on the SEN register achieved 5+ good GCSEs including English/Welsh and Maths respectively.⁸⁰

In Scotland, data are not collected for this measure for pupils with ASN. However using a different measure (5 or more qualifications at Scottish Credits and Qualification Framework (SCQF) level 3 or above) it is possible to see that within Scotland pupils with ASN perform significantly less well than those with no identified support needs:

- In 2009, almost half (48%) of leavers from publicly-funded secondary and special schools with ASN achieved 5 or more qualifications at SCQF level 3 or above, compared to 92% of those with no ASN.⁸¹
- One in 5 (22%) of those with ASN had no qualifications at SCQF level 2 or above compared to 2.8% of those without ASN, while just over 8% had at least one qualification at SCQF level 6 or above, compared to just over 49% of those with no ASN.⁸²

These data show the difference in performance between pupils with and without ASN in Scotland, but cannot be used to draw comparisons to the performance of pupils with SEN between England, Scotland and Wales as the measures are different.

Ethnicity

In England, there is a large difference in the percentage of pupils achieving 5+ good GCSEs including English and Maths between ethnic minority groups:

- A high proportion of Chinese (72%) and Indian (67%) pupils achieved 5+ good GCSEs in 2009.
- The proportion of Bangladeshi, Black African and White British pupils was close to the average (of 51%).
- Black Caribbean and Pakistani students fell below the average at 39% and 43% respectively (see Figure 10.4.2. below).

⁷⁹ Equality and Human Rights Commission analysis of data provided by the Welsh Government (Table 1: Key Stage 4 by Special Educational Need, 2007-2009).

⁸⁰ Equality and Human Rights Commission analysis of data provided by the Welsh Government (Table 1: Key Stage 4 by Special Educational Need, 2007-2009).

⁸¹ Scottish Government 2010b. SQA Attainment and School Leaver Qualifications in Scotland: 2008-09. Available at: <http://www.scotland.gov.uk/Publications/2010/03/22111037/35>. Accessed 18/08/2010.

⁸² Scottish Government 2010b.

Most worryingly, Gypsy and Traveller children are well below the average with only 9 % of children from these groups achieving this level. Differences between ethnic minority groups have narrowed overall since 2002,⁸³ but Gypsy and Travellers have got further behind.⁸⁴ However, care should be taken when making comparisons between groups due to the low number of eligible Gypsy and Traveller pupils.

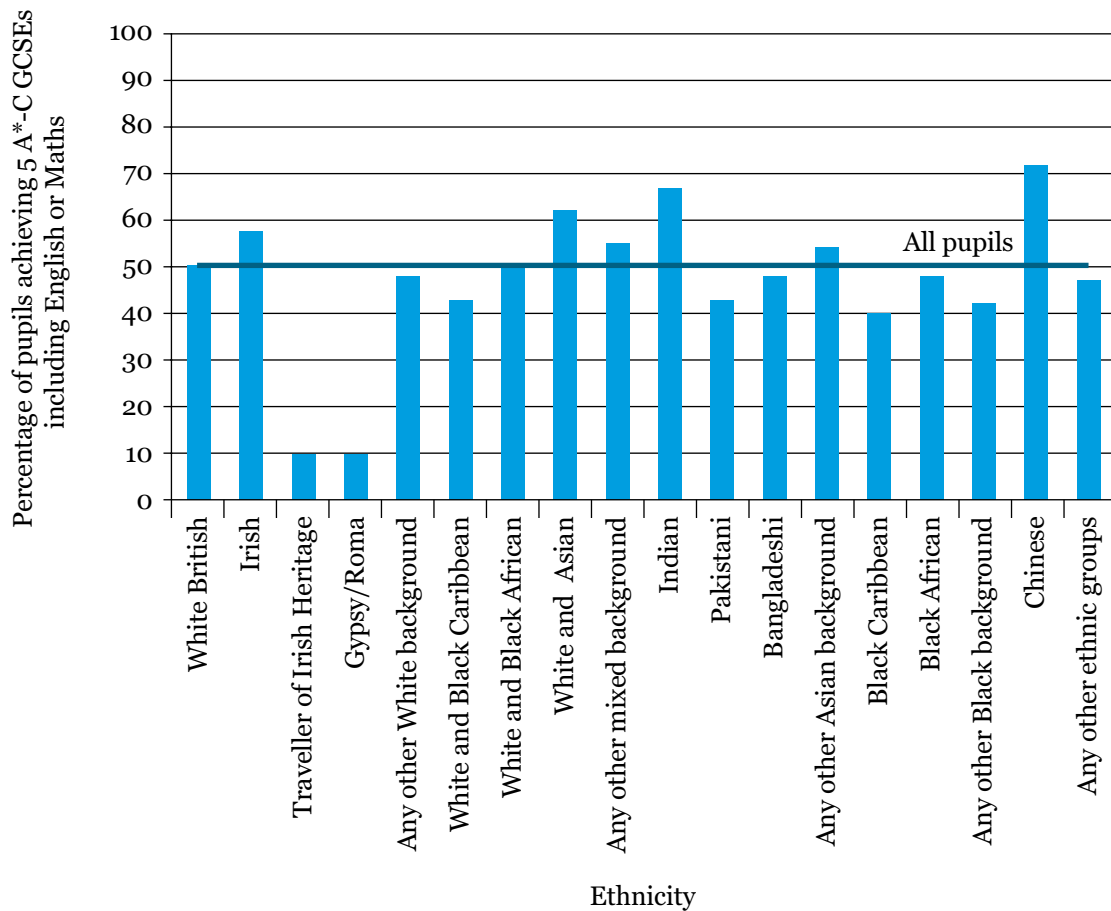
Girls outperformed boys in all ethnic minority groups for this measure. The largest differences were seen in Other Asian and Chinese pupils where there was a gender gap of 14 percentage points and in Black Caribbean pupils where there was a gender gap of 13 percentage points.⁸⁵

⁸³ <http://www.dcsf.gov.uk/rsgateway/DB/SFR/s000448/index.shtml> (Note that data are not directly comparable as 2002 data are only available for 5 A*-C, are only available for some groups, and refer to 15-year-olds on 31/08/2001.

⁸⁴ DCSF 2010b.

⁸⁵ DCSF 2010b.

Figure 10.4.2 Percentage of pupils achieving 5 A*-C GCSEs including English and Maths by ethnicity in England, 2009⁸⁶



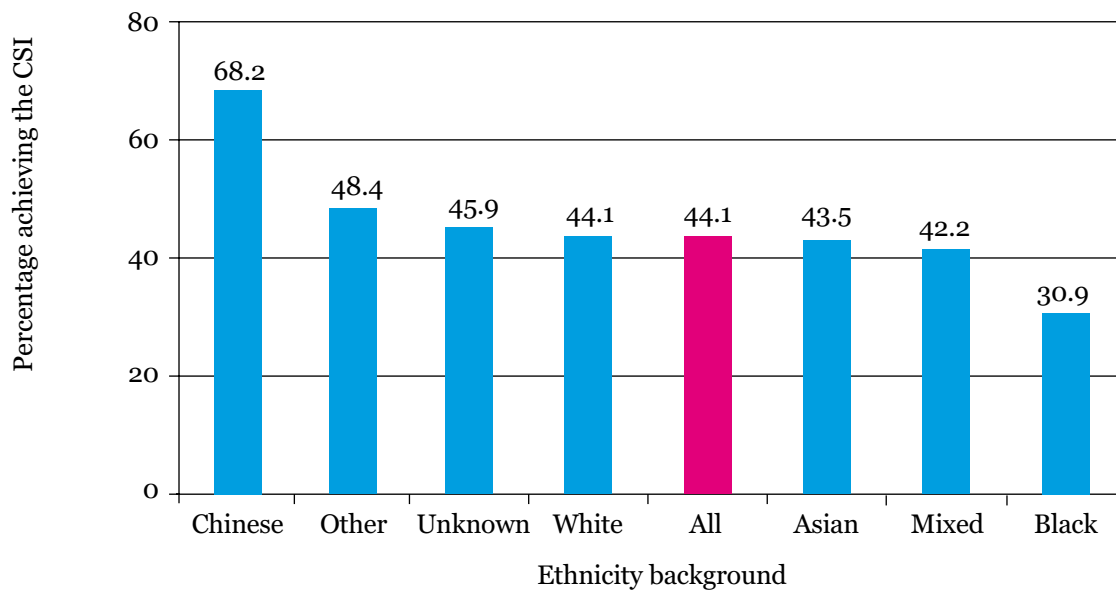
Source: Key Stage 4 attainment by Pupil Characteristics, in England 2008/09.

In Wales, data are not collected by this measure and ethnicity. However they are collected for attainment of the Core Subject Indicator (CSI) at age 16. This relates to the percentage of pupils achieving the expected level or above in English or Welsh (first language), Maths and Science in combination. Data presented here are a combined three-year average for 2007, 2008 and 2009 to enable more robust conclusions.⁸⁷ In 2007-09, 44% of all pupils achieved CSI, but there was considerable variation by ethnicity. Chinese pupils performed considerably above the national average with 68% achieving CSI, and pupils from a Black ethnic background performed below the national average with 31% achieving CSI. These data show the relative difference by main ethnic groups in Wales, but cannot be used to draw comparisons of the performance of different groups between nations as the measure is different.

⁸⁶ DSCF 2010b.

⁸⁷ Welsh Assembly Government. 2010c. Statistical First Release, Academic Achievement by Pupil Characteristics, 2007-2009. Available at: <http://wales.gov.uk/docs/statistics/2010/100330sb162010en.pdf>. Accessed 23/09/2010.

Figure 10.4.3 Percentage of pupils achieving the CSI at Key Stage 4 by main ethnic group in Wales, 2007-09⁸⁸



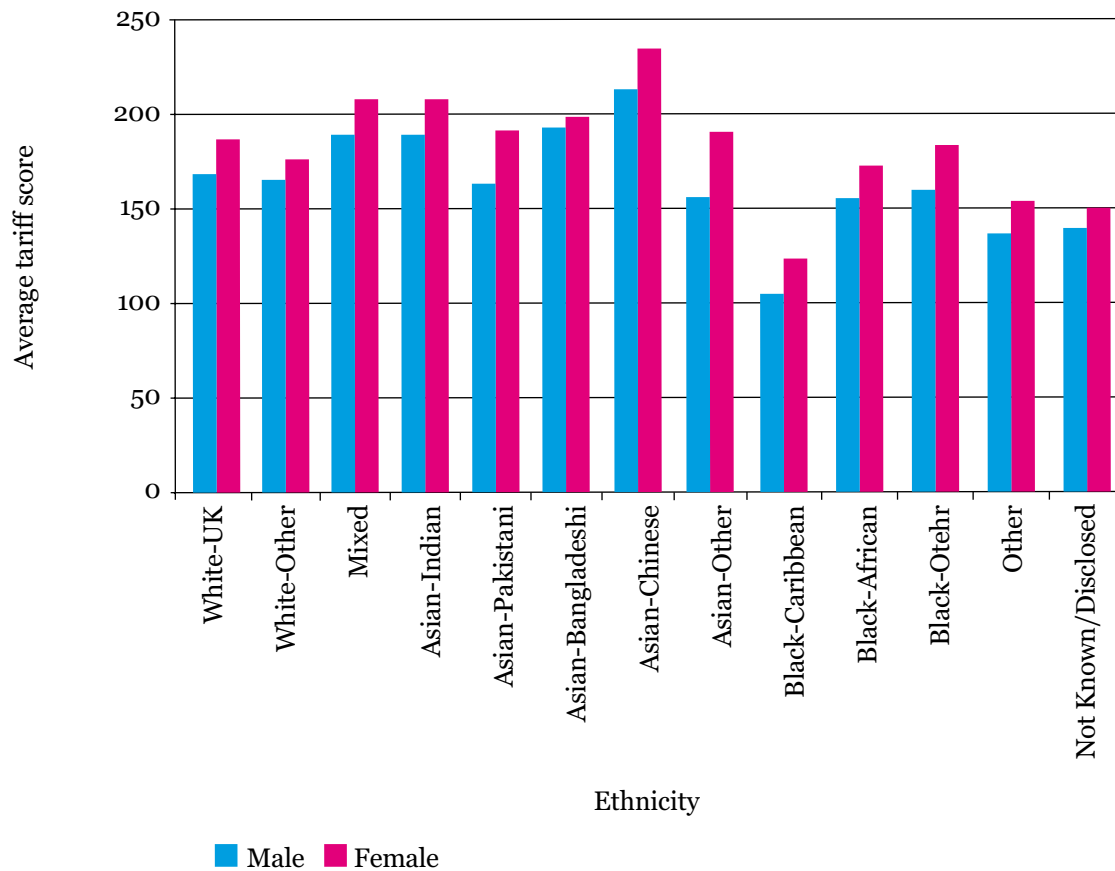
Source: Statistical Bulletin, Academic Achievement by Pupil Characteristics, 2007-2009, Welsh Assembly Government, March 2010.

In Scotland, data are not collected for this measure for pupils from different ethnic minority groups. However using a different measure (average tariff scores at S4) it is possible to see the relative performance of different ethnic minority groups within Scotland. On this measure, Chinese, Indian, Bangladeshi and Mixed Race pupils perform well attaining the highest average tariff scores. However it is important to note that these data cannot be used to draw comparisons of the performance of different groups between nations.⁸⁹

⁸⁸ Welsh Assembly Government. 2010c. Statistical First Release. Academic Achievement by Pupil Characteristics, 2007-2009.

⁸⁹ Scottish Government 2010b. Available at: <http://www.scotland.gov.uk/Publications/2009/03/09154229/20> Accessed 04/08/2010.

Figure 10.4.4 Three year average tariff score of S4 pupils by ethnic background and gender in Scotland, 2006/07-2008/09⁹⁰



Source: Education Series: SQA Attainment and School Leaver Qualifications in Scotland.

Religion or belief

Data are not collected for this measure by religion or belief. However, analysis completed for the National Equality Panel indicated that there is a relationship between religious affiliation and educational outcomes.⁹¹ Results should be treated with caution as sample sizes are very small.

The research shows that, in all measures of GCSE attainment, Hindu boys and girls perform most highly on average: Hindu girls achieve almost 2 GCSE grades A*-C more than Christian girls, and over 2 GCSE grades A*-C more than Muslim girls. Girls tend to do better than boys for all religious groups, and the gender gap is similar across religious groups.⁹²

⁹⁰ Scottish Government 2010b. Table 8.

⁹¹ Hills, J. *et al.* 2010. Page 82.

⁹² Hills, J. *et al.* 2010. Page 82.

An analysis of the average number of GCSE/GNVQ passes at grades A*-C by ethnicity, religious affiliation and gender in England 2003-04 shows that with 8 passes each, Indian Hindu and Indian Sikh girls have one more pass at A*-C than Indian Muslim girls, and two more than Pakistani Muslim girls (who achieve 6 passes). This difference is slightly more pronounced in the case of boys. Within Christians, it is Black African girls who have the highest number of GCSE/GNVQ passes at A*-C on average (7 passes) while, for boys, it is White Christians who outperform others with 6 passes.⁹³

Box 10.4.1 Related issue: Vocational training⁹⁴

While the main indicator used in this section is GCSE attainment, patterns of participation in vocational education and training strongly influence individuals' outcomes. There are differences in the routes taken by boys and girls. For example, in 2008/09 half of all apprenticeships in England were taken by women. However, they comprised over 9 in 10 apprenticeships in the children's care, business administration and hairdressing sectors, but less than 1 in 30 of those in construction or engineering. The Scottish data follow very similar patterns; due to different sector framework groupings the data in Wales are not directly comparable but still demonstrate gender segregation. These choices to some extent feed into occupational segregation (discussed in Chapter 11: Employment).

Some groups are much less likely than average to undertake apprenticeships at all. Fewer than 10% of apprentices have a disability.⁹⁵ In England, we can see from the data that there are significant differences by impairment group. For example, in customer service and business administration, people with visual impairments or other medical conditions are significantly more likely to start an apprenticeship than any other group listed.⁹⁶

The proportion participating from ethnic minority groups in England has risen, from 7% of new apprentices in 2003/04 to 13% in 2008/09. However, this is still lower than would be expected given their population size. The proportion of non-White participation is highest in female-dominated sectors such as early years care, health and social care and business planning, and lowest in male-dominated sectors such as engineering, plumbing and construction.⁹⁷

In Scotland and Wales the participation of ethnic minority groups is very low, and has not changed significantly in the last 5 years.⁹⁸

⁹³ Hills, J. *et al.* 2010. Page 82.

⁹⁴ Fuller, A. 2010. *EHRC Triennial Review: Education (Apprenticeship)*. University of Southampton. This paper is available on the Equality and Human Rights Commission's Triennial Review web pages.

⁹⁵ Fuller, A. 2010. Page 20.

⁹⁶ Fuller, A. 2010. Table 12. Page 20.

⁹⁷ Fuller, A. 2010. Page 13.

⁹⁸ Fuller, A. 2010. Pages 25 and 30.

10.5 What we know about participation in higher education

Measure:

Percentage of each group studying on a first degree course

How this measure works:

We are able to report on the UK only for this measure and not by individual nation. The Higher Education Statistics Agency's collection of data about students in Higher Education Institutes during the academic year 2008/09 covers data supplied by 165 Higher Education Institutes (131 in England, 19 in Scotland, 11 in Wales and 4 in Northern Ireland). The data collection procedure is uniform across all institutions, regardless of size, nature and location; the range of data fields collected is administration-dependent to a limited extent. The Higher Education Statistics Authority does not collect data from Further Education Colleges.

These data are supplemented with data from the Equality Challenge Unit's report, *A statistical overview of the equality challenges facing higher education* which is based mainly on analysis of data for the 2007/08 academic year relating to gender, ethnicity, disability and age. The disability categories indicate the type of disability that a student has on the basis of their own self-assessment. Students are not obliged to report a disability; therefore figures reported in analyses are derived from a subset which may not be representative of the total student population.

There are no data by religion or belief, sexual orientation or transgender. As far as possible, other literature has been drawn on for sexual orientation and transgender, although due to small sample sizes, issues raised are indicative only of possible issues facing these groups. There is very limited related literature for this measure for religion or belief, therefore this group is not covered in this section.

Overview

There has been an increase in the proportion of young people entering higher education and graduating since the mid 1990s. Among most groups, girls are more likely to attend university than boys. They accounted for 59% of all students in 2009, broadly unchanged since 2003/04.

The proportion of university places taken by ethnic minority students increased, from 13% of students in 1994/95 to 23% in 2008/09, a figure broadly proportionate to their size in the young population. Moreover,

all main ethnic groups have increased their share. **The proportion of students declaring a disability increased from 5.5% to 7.3% between 2003/04 and 2008/09.** This is attributed to the number of students declaring a specific learning difficulty such as dyslexia.

Some groups are not doing so well in terms of obtaining good level degrees. In terms of good level degrees, Black students are less than two-thirds as likely to get an upper second or first as White students; and women are more likely to do so than men. Students with a disability are as likely to receive a good degree as those not known to have a disability.

There is continued subject segregation – in 2008/09 women made up 48% of first degree students studying Science, Technology, Engineering and Maths (STEM) subjects despite comprising over half (55%) of first degree students overall. Gender differences in first degree subject choice appear to be declining over time, but there remains extremely high gender segregation in vocational training as discussed in Box 10.4.1, Indicator 4.

What we know about the overall situation and trends

In 2008/09, 2.4 million students enrolled in higher education in the UK. The undergraduate population has been growing rapidly over the past 12 years. In 1996/97 there were 1,392,000 undergraduates. By 2008/09 this had reached 1,796,000. The majority (85%) of those studying for a first degree were attending university full-time, with the remaining 15% studying part-time. A large majority of first degree students (89%) were domiciled in the UK.⁹⁹

What we know about the situation for different groups

Gender

Women make up a higher proportion of those students studying for their first degree in the UK. The proportion of women students rose steadily to 58% in 2005/06 and has remained roughly at this level reaching 59% of UK domiciled undergraduates in 2008/09.¹⁰⁰ Women dominate part-time study, with two-thirds (61%) of all part-time students being women.¹⁰¹

⁹⁹ Higher Education Statistics Authority (HESA) 2010. *Students in Higher Education Institutions 2008/09*. Cheltenham: HESA.

¹⁰⁰ HESA 2010.

¹⁰¹ Equality Challenge Unit (ECU) 2009. *Equality in Higher Education Statistical Report 2009*. London: ECU. Available at: <http://www.ecu.ac.uk/publications/files/equality-in-he-statistical-report-2009.pdf/view>. Accessed 04/08/2010. Pages 38 and 39.

In 2007/08, subject areas with a high proportion of women included subjects allied to medicine (80%), veterinary science (76%), education (76%) and languages (68%). Subject areas with a high proportion of men included engineering and technology (84%), computer science (81%) and architecture, building and planning (69%).¹⁰²

Women and men have different experiences and outcomes when studying for their first degree:

- In 2008/09 women made up 48% of first degree students studying STEM subjects despite making up over half (55%) of first degree students overall.¹⁰³
- Of first degree qualifiers in 2008/09, more women than men obtained first or upper second class degrees (64%) compared to men (59%).¹⁰⁴

Age

In 2008/09 two-fifths (41%) of students in the first year of their first undergraduate degree were 18 years and under. Almost the same number were 19-24-years-old (38%), 7% were aged 25-29 and the remainder (14%) were over 30.

Older students (25 years and over) studying in the first year of their first degree made up a large proportion of those studying part-time (77%) compared to those under 25 (23%). One in 5 (21%) of UK domiciled entrants on full-time first degree courses, and 59 % on other full-time undergraduate courses were aged 21 and over. 58% of part-time first degree entrants were aged 30 or over.¹⁰⁵

Socio-economic groups

Data for this specific measure are not available by socio-economic status. However, we do know from other sources that the proportion of young people entering higher education from lower socio-economic groups has risen over the past few years. However, it still remains substantially below that of those from professional backgrounds.¹⁰⁶

Disability

In 2008/09 1 in 10 students studying for a first degree in the UK were known to be disabled.¹⁰⁷

¹⁰² Equality in Higher Education Statistical Report 2009. Equality Challenge Unite. Table B3 Access on 04/08/2010 at <http://www.ecu.ac.uk/publications/files/equality-in-the-statistical-report-2009.pdf/view>

¹⁰³ HESA. Student Record 2008/09 supplied by the Department for Education.

¹⁰⁴ HESA. Student Record 2008/09 supplied by the Department for Education.

¹⁰⁵ HESA 2010.

¹⁰⁶ See, for example, The Sutton Trust 2008. *Increasing higher education participation amongst disadvantaged young people and schools in poor communities*. Available at <http://www.adcet.edu.au/StoredFile.aspx?id=2028&fn=Sutton+Trust+Research+interim+report+Oct+08.pdf> Accessed 22/09/10.

¹⁰⁷ ECU 2009. Table B8.

Table 10.5.1 Percentage of UK domiciled students studying for first degree by disability and mode of study in the UK, 2008/09¹⁰⁸

	Not known to be disabled	Known to be disabled
% doing a first degree	90	10
Full-time	91	9
Part-time	85	15

Source: Higher Education Statistics Authority (HESA) Student Record. Excludes students with unknown disability status.

During the past 5 years the proportion of students who did not disclose their disability status has dropped from 9% in 2004/05 to 8% in 2008/09. Excluding those with missing data, the proportion of students known to have a disability within the entire student population increased from 6.5% in 2004/05 to 8.0% in 2008/09.¹⁰⁹ This rise was entirely due to a rise in the number with “specific learning disabilities” such as dyslexia.¹¹⁰ An analysis of HESA data in 2005 showed that this group of students was significantly more likely to be male and from middle-class backgrounds compared to non-disabled students.¹¹¹ Students with physical and sensory disabilities have remained at just 0.5% and 0.25% of the entire student population, respectively.¹¹² Figure 10.5.1 below shows they are also the smallest proportion of the undergraduate population.

¹⁰⁸ ECU 2009.

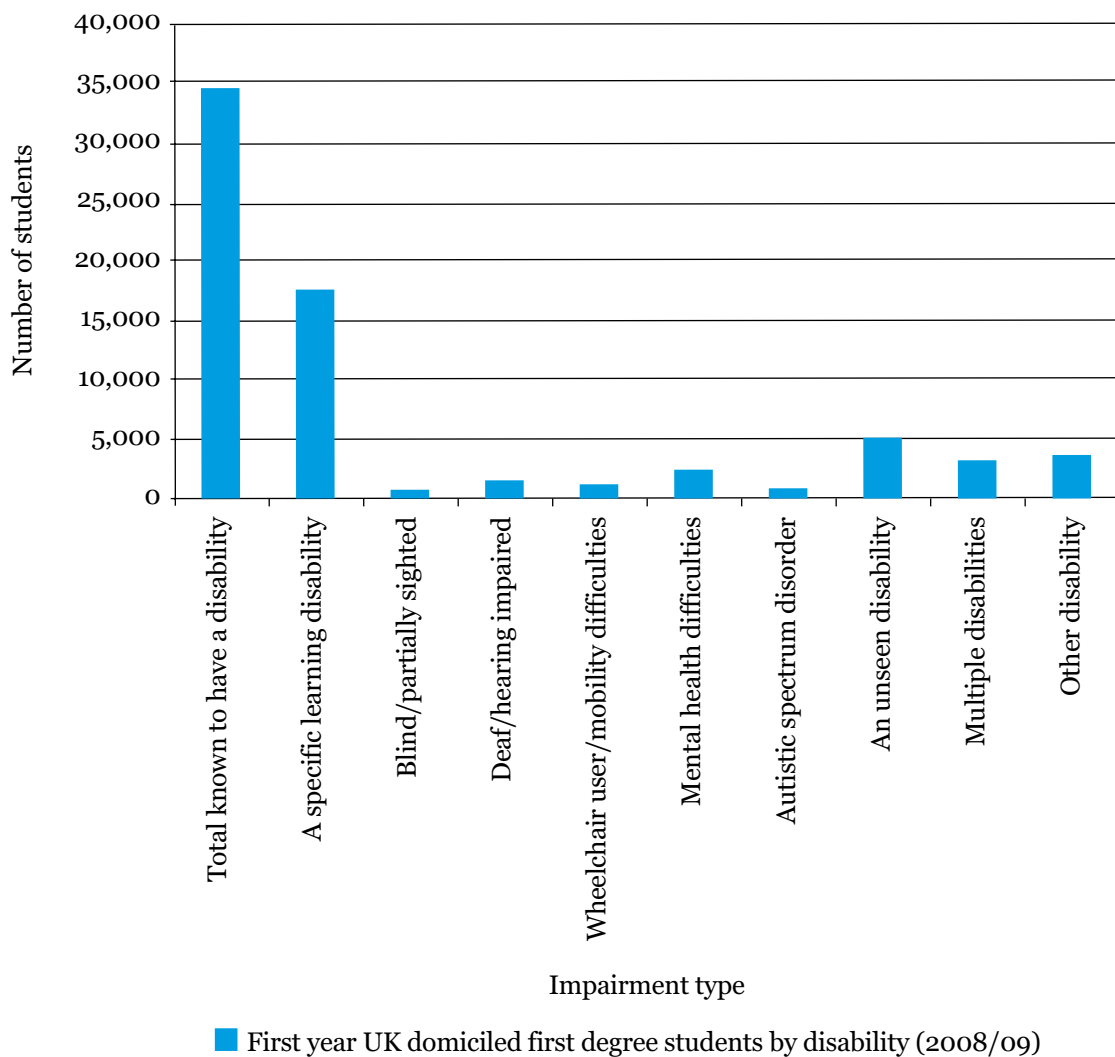
¹⁰⁹ HESA. Student Record 2008/09. supplied by the Department for Education.

¹¹⁰ HESA 2010. Table 11b. Page 58.

¹¹¹ Riddell *et al.* 2010. Page 29.

¹¹² Machin, S., Murphy, R. and Soobedar, Z. 2009. *Differences in labour market gains from higher education participation*. Research commissioned by the National Equality Panel. Section: 3.1. Page 5. Available at: <http://www.equalities.gov.uk/pdf/Variation%20in%20gains%20from%20university%20education.pdf> Accessed 22/09/10.

Figure 10.5.1 Number of first year disabled students by impairment type on first degree courses in the UK, 2008/09¹¹³



Source: Students in Higher Education Institutions 2008/09.

Students with a disability are as likely to receive a good degree as those not known to have a disability. This varies little among students with different impairment types. For example, as Table 10.5.2 below shows, in 2008/09 61% of those who were blind or partially sighted achieved a first or upper second class degree, compared to 65% of those with mental health difficulties and 58% of those with a specific learning difficulty.¹¹⁴

¹¹³ ECU 2009. Table B9.

¹¹⁴ HESA Student Record 2008/09. supplied by the Department for Education.

Table 10.5.2 First degree qualifiers by class of first degree and disability status in the UK, 2008/09¹¹⁵

Disability	First and upper second class honours		Lower second and third class honours/pass		All number (100%)
	Number	Percentage	Number	Percentage	
Total	184,165	62	113,975	38	298,140
No known disability	169,025	62	103,585	38	272,605
Blind/partially sighted	320	61	205	39	530
Deaf/hearing impairment	510	63	305	37	815
Wheelchair user/mobility difficulties	380	58	275	42	655
Personal care support	15	--	20	--	35
Mental health difficulties	735	65	395	35	1,130
An unseen disability e.g. diabetes, epilepsy, asthma	2,460	63	1,455	37	3,915
Multiple disabilities	620	57	470	43	1,090
Autistic spectrum disorder	100	64	55	36	155
A specific learning difficulty, e.g. dyslexia	8,420	58	6,195	42	14,615
A disability not listed above	1,580	61	1,015	39	2,590

Source: Higher Education Statistics Authority (HESA) Student Record. Excludes students with unknown disability status.

Box 10.5.1 Related issue: Variation in the university experience of different groups¹¹⁶

The London School of Economics conducted some analysis into the university experiences of different groups, for the National Equality Panel (2010). Using data on university students who graduated in 2002/03, the analysis considers the likelihood of different groups attending a Russell Group university.¹¹⁷

The research found that:

- A higher proportion of women attended Higher Educational Establishments (non-vocational institutions that have yet to be awarded university status), whilst men were more likely to attend a Russell Group university.
- Comparing across parental social backgrounds, 44% of children from professional family backgrounds attended a Russell Group University, compared to 23% of those from an unskilled family background.

¹¹⁵ HESA Student Record 2008/09. supplied by the Department for Education.

¹¹⁶ Machin, S. *et al.* 2009. Section: 3.1. Page 5.

¹¹⁷ List of establishments can be found in Machin, S. *et al.* 2009, Appendix 1.

Box 10.5.1 Continued

- Black, Indian and Pakistani/Bangladeshi groups all had at least 44% of their graduates coming from a former Polytechnic, whilst the average for the other ethnic groups was around 34%. Black students were least likely to attend a Russell Group university, with only 8%, compared to 24% of White people attending and 29% of Other Asians.
- Disabled students are also less likely to be attending a Russell Group university than non-disabled students. Out of the disability groupings those with dyslexia were the least likely to attend (16%). But generally students registered with a disability had similar attendance rates to the non-disabled students.

Ethnicity

The recording of ethnicity data is compulsory only for UK-domiciled students, so this section is restricted to students domiciled in the UK. In 2008/09, ethnicity data were known for 95% of UK domiciled first-year undergraduates.¹¹⁸

The proportion of students from ethnic minority groups has been rising fairly steadily over the last 12 years. In 2008/09 ethnic minorities constituted 20% of all first-year UK domiciled students of known ethnicity studying for their first undergraduate degree.¹¹⁹ According to analysis conducted for the National Equality Panel, all ethnic minority groups have seen a rise in their share, with the largest increase being among Black students who increased their share of the undergraduate population from 3.6% in 1995 to 5.7% in 2007.¹²⁰

Students from different ethnic minority groups have different outcomes when studying for their first degree, with students from some ethnic minority groups far less likely to leave university with a first or upper second class degree than others. As Table 10.5.3 shows, in 2008/09 White students were most likely to achieve this level with nearly 7 in 10 (67%) White students leaving with a first or upper second class degree, compared to just under 4 in 10 Black students (38%).

¹¹⁸ HESA 2010.

¹¹⁹ HESA 2010. Page 19.

¹²⁰ Machin, S. *et al.* 2009.

Table 10.5.3 Percentage of UK-domiciled first degree qualifiers by class of first degree and ethnicity in the UK, 2008/09¹²¹

Ethnicity	First class honours (%)	Upper second class honours (%)	Lower second class honours (%)	Third class honours/ pass (%)	All: number (100%)
White	15	52	27	6	211,350
Black	5	33	46	15	12,425
Asian	9	42	38	11	24,570
Mixed	13	50	30	7	6,635
Other	10	43	37	10	2,400

Source: Higher Education Statistics Authority (HESA) Student Record. Excludes students with unknown ethnicity status.

Sexual orientation and transgender

The Higher Education Statistics Authority does not collect data on sexual orientation or transgender status and no robust statistics are collected from other sources. Little research has been conducted into the experiences of LGBT students in higher education.

One research project, based on an analysis of 2,704 online responses of LGBT students in Higher Education Institutions in England, Wales and Northern Ireland, 12 focus groups with LGB staff and students and 18 individual interviews found that LGBT students report being treated negatively on the grounds of their sexual orientation or gender status by fellow students and to a lesser degree by tutors, lecturers and other staff. In the same study, transgender students reported encountering higher levels of negative treatment than LGB students.¹²²

¹²¹ HESA. Student Record 2008/09. supplied by the Department for Education.

¹²² Valentine, G., Wood, N. and Plummer, P. 2009. *The experience of lesbian, gay, bisexual and trans staff and students in higher education*. London: Equality Challenge Unit. Chapter 2.

10.6 What we know about adult skills and qualifications

Measures:

Basic skills – Percentage of people of working-age achieving functional literacy and numeracy skills. Functional literacy and numeracy are defined as reaching level one literacy or numeracy or above

Qualifications – Percentage of adults with no educational qualifications and percentage of adults with a first degree level qualification

How these measures work:

Basic skills

Data are available for this measure for England and Wales using the England Skills for Life Survey 2002/03 and the Wales Basic Skills Survey 2004; the surveys were designed to be comparable. The last survey for Scotland was conducted in 1996. The 2009 survey for Scotland has been undertaken but results are not yet published. Data are available for England and Wales for age, gender, socio-economic groups, disability, ethnicity and religion or belief. There is very limited related literature for this measure for groups defined by sexual orientation and transgender, therefore they are not covered in this section. Working age is defined as 16-64 for men, and 16-59 for women.

Qualifications

Data are available for this measure for England, Scotland and Wales using the National Equality Panel's analysis of Labour Force Survey data (2006-08). Data are available for age, gender, socio-economic groups, disability, ethnicity and religion or belief. Data for LGB people are limited to those self-reporting as same-sex couples. There are no data for this measure for transgender groups, therefore they are not covered in this section.

Overview

Skills and qualifications in the adult population remain highly polarised, with some groups far more likely to have a degree level qualification, and others more likely to have no qualifications. For example 1 in 5 of the British population has a first degree level qualification, but 1 in 6 has no qualifications and lacks basic functional literacy. **Black Caribbean people stand out as having lower levels of functional literacy** even among those for whom English is a first language. For other ethnic groups, the level of basic skills is similar for those that have English as a first language.

Women are far less qualified in the older part of the population than men, but are more or less equally qualified below the age of 35. In some ethnic

and religious groups there are large numbers of women without any qualifications: Among Black Caribbean women, Mixed Race women and Muslim women between a quarter and a third have no qualifications compared to 1 in 8 White women. Large groups of Pakistani and Bangladeshi men have no qualifications. Nearly 1 in 3 Bangladeshi men and 1 in 4 Pakistani men are in this situation compared to 1 in 8 White men.

The level of adult skills and qualifications is influenced by an individual's educational patterns as well as the degree to which they have been able to pick up skills and education in adult life. In the case of migrants, this also includes education and training received in other countries, so does not only reflect attainment rates in Britain. **Those without basic skills are less likely to participate in adult learning, reinforcing disadvantage** that has already occurred for these individuals.

What we know about the overall situation and trends

Basic skills

Around half of the English and Welsh working-age population lack functional numeracy skills, and 1 in 6 adults lack functional literacy as Table 10.6.1 shows.¹²³ People in Wales are also more likely to lack functional literacy (25%), which is higher than in any English region. The national differences in numeracy are not as marked with 47% of the working-age population lacking functional numeracy skills in England, and 53% doing so in Wales. Although literacy and numeracy are two different skills, numeracy is strongly correlated with literacy.¹²⁴

Qualifications

Across all three nations there has been an increase in the proportion of people getting qualifications over the past couple of decades. The extent to which the older part of the population has fewer qualifications than the younger part is therefore very striking. Today, 1 in 5 people between 25-34 years have degrees, compared to less than 1 in 10 aged between 55-64, and even fewer in the 65+ age group.¹²⁵ However, it is still the case that around 15% of men and women have no qualifications with people in Wales slightly more likely to have no qualifications than those in England and Scotland.¹²⁶

¹²³ Equality and Human Rights Commission analysis of England Skills for Life Survey data provided by Department for Business, Innovation and Skills.

¹²⁴ Equality and Human Rights Commission analysis of Basic Skills Survey data provided by Department for Business, Innovation and Skills.

¹²⁵ National Equality Panel analysis of Labour Force Survey (LFS) (2006-08). Available at: http://www.equalities.gov.uk/national_equality_panel/publications/charts_and_statistical_annex/statistical_annex/employment.aspx Accessed 02/09/2010.

¹²⁶ Hills, J. *et al.* 2010. Figure 3.15 (1) and 3.15 (b). Page 107.

Britain as a whole is more educationally polarised than most other countries. About a third of working-age adults have university degrees and other ‘tertiary’ qualifications, and a third do not have an upper secondary qualification. This compares to about a quarter in each of these categories in other European countries in the OECD.¹²⁷

Table 10.6.1 Data showing regional and national differences in basic skills and qualifications ranked by basic literacy for working-age population¹²⁸

% of population	Lack functional numeracy	Lack functional literacy	No qualifications	5+ GCSE grades A*-C or equivalent	Degree level qualification*
England¹	47	16	13	26	13
Eastern	41	12	13	28	12
South East	41	12	10	26	15
East Midlands	49	16	14	26	12
North West	49	17	15	27	12
West Midlands	47	18	17	26	12
London	48	19	14	21	20
Yorks and Humb	51	19	15	27	11
North East	54	22	14	27	10
Wales²	53	25	16	27	11
Scotland³	N/A	N/A	14	20	13

Source:

1. Data tables provided by Department for Business Innovation and Skills using England Skills for Life Survey 2002/03 and National Equality Panel Analysis of 2006-08 Labour Force Survey.
 2. Data tables provided by Welsh Assembly Government using Basic Skills Survey 2004 and National Equality Panel Analysis of 2006-08 Labour Force Survey.
 3. National Equality Panel Analysis of 2006-08 Labour Force Survey.
- Note: *Degree level qualification excludes higher degrees.

¹²⁷ Organisation for Economic Co-operation and Development 2009. *Education at a Glance 2009*. Paris: OECD. Table A1.1a.

¹²⁸ Equality and Human Rights Commission analysis of England Skills for Life Survey data, provided by Department for Business, Innovation and Skills using England Skills for Life Survey 2002/03 and National Equality Panel analysis of 2006-08 LFS; . Equality and Human Rights Commission analysis of Basic Skills Survey data, provided by Welsh Assembly Government using Basic Skills Survey 2004, and National Equality Panel analysis of 2006-08 LFS; .and National Equality Panel analysis of the LFS (2006-08) .

What we know about the situation for different groups

Gender and age

Basic skills

The data show no difference in the proportion of men and women in England achieving functional literacy. However, women are less likely to achieve functional numeracy. Just under half (48%) of women aged 16-24 in England achieve functional numeracy, compared to 53% of men of the same age. However the gender gap has narrowed significantly over time. For those aged 55-65 only 37% of women achieved functional numeracy compared to 57% of men.¹²⁹ The patterns in the Welsh data are also very similar. In Wales, there is no gender difference for literacy, but men are more likely than women to achieve functional numeracy (54% compared to 39%).¹³⁰

Qualifications

Long-term rises in qualification rates mean that more old than young adults lack any qualifications as shown in Table 10.6.2 below. Overall, people aged 44 and under do better than those aged 45 and over on every qualification measure. Changes over time are closing the gender gap: while nearly 1 in 4 women in their 50s have no qualifications, compared to only 1 in 6 men, for 25-44-year-olds the numbers are about equal, and for younger age groups women have the advantage.

¹²⁹ Department for Education and Skills 2003. *The Skills for Life Survey: A National needs and impact survey of literacy, numeracy and ICT skills*. DfES Research Report 90. London: DfES. Table 3.23, page 52.

¹³⁰ Equality and Human Rights Commission analysis of Basic Skills Survey data provided by Welsh Assembly Government.

Table 10.6.2 Percentage of the population with each qualification level by age and gender in the UK, 2006/08¹³¹

Age	Degree		GCSE grades A*-C or equivalent		No qualification		Difference men compared to women		
	Men	Women	Men	Women	Men	Women	Degree (women over men)	GCSE (women over men)	No qualification (men over women)
16-19	0	0	46	47	19	16	-	+1	+3
20-24	13	16	24	25	9	8	+3	+1	+1
25-29	20	22	22	24	9	8	+2	+2	+1
30-34	19	20	21	26	9	9	+1	+5	0
35-39	16	15	23	31	10	10	-1	+8	0
40-44	14	13	22	32	11	11	-1	+10	0
45-49	14	12	19	30	13	15	-2	+11	-2
50-54	13	11	16	26	16	21	-2	+10	-5
55-59	11	8	15	24	18	28	-3	+9	-10
60-64	10	6	14	23	24	32	-4	+9	-8
65-69	9	5	13	18	29	46	-4	+5	-17
70+	12	5	13	20	34	40	-7	+7	-16

Source: Labour Force Survey.

Note: Working-age population (men 16-64, women 16-59).

Socio-economic groups

Basic skills

Respondents to the English Skills for Life survey in higher socio-economic categories were more likely to achieve functional literacy and numeracy than those in lower ones. Over 9 in 10 respondents in managerial, professional (93%) and intermediate occupational (94%) households reached functional literacy compared to 84% of all respondents, and 67% of respondents in working class households. The gap was larger for numeracy. Just over 7 in 10 (71%) managerial and professional respondents reached functional numeracy, compared to 53% of all respondents, and 31% of those in working class households.¹³²

As in England, socio-economic category influences basic skills outcomes in Wales. Only 13% of those in managerial and professional occupations failed to achieve functional literacy, compared to 36% of those in working class occupations. The pattern was similar for numeracy with 36% of those in managerial and

¹³¹ National Equality Panel analysis of LFS (2006-08).

¹³² DfES 2003. Tables 3.27 and 3.29, pages 57-59.

professional occupations failing to achieve functional numeracy, compared to 60% of those in working class occupations. However, when broken down by age, a cohort effect is apparent with 33% of 16-25-year olds in working class occupations lacking functional literacy, compared to 44% of 45-65 year olds, with similar differences for numeracy.

Qualifications

Fewer than 5% of men and women in managerial and professional occupations have no qualifications compared to around 25% of men and 30% of women in routine occupations, as shown in Table 10.6.3. Among those who have never worked or are unemployed, similarly high proportions have no qualifications. The same pattern is evident in reverse with around a third of higher managerial and professional people having degrees compared to less than 5% of those in semi-routine or routine occupations.¹³³

Table 10.6.3 Percentage of working-age population with each qualification level by social class in the UK, 2006/08¹³⁴

Percentage with qualification	Degree		GCSE grades A*-C or equivalent		No qualifications	
	Men	Women	Men	Women	Men	Women
Higher managerial and professional	35	39	10	11	1	1
Lower managerial and professional	22	26	19	20	4	2
Intermediate occupations	15	10	27	40	6	6
Small employers and own account workers	7	12	21	29	17	11
Lower supervisory and technical	3	5	24	36	11	13
Semi-routine occupations	4	4	30	39	21	18
Routine occupations	2	2	28	33	24	31
Never worked, unemployed, and NEC	5	5	25	28	28	30

Source: Labour Force Survey.

Note: Working-age population (men 16-64, women 16-59).

Household income is another way of measuring economic differences. As Table 10.6.4 shows, across Britain, about a fifth of people in the top 20% of households (in income terms) has a degree level qualification, compared to less than 7% in the bottom 20% of households in terms of income.¹³⁵

¹³³ National Equality Panel analysis of LFS (2006-08).

¹³⁴ National Equality Panel analysis of LFS (2006-08).

¹³⁵ National Equality Panel analysis of LFS (2006-08).

The extent to which those with low income have no qualifications is stark and indicative of the strong relationship between this and the chances of being in poverty. About a quarter of people in households who are in the bottom 20% of the income distribution does not have any qualifications. Less than 10% of those in the top 20% of households have no qualifications.¹³⁶

Table 10.6.4 Percentage of the working-age population with degree level qualification by household income in the UK, 2006/08¹³⁷

	England		Wales		Scotland	
	Male	Female	Male	Female	Male	Female
Lowest tenth	6	6	6	4	3	5
9th tenth	8	8	3	6	5	7
8th tenth	11	11	9	8	9	9
7th tenth	11	12	6	9	9	9
6th tenth	12	13	8	10	10	11
5th tenth	13	15	11	12	14	14
4th tenth	16	15	14	14	14	15
3rd tenth	16	17	13	14	17	19
2nd tenth	18	17	17	18	18	20
Highest tenth	21	19	21	22	24	24

Source: Labour Force Survey.

Note: Working-age population (men 16-64, women 16-59).

Disability

Basic skills

The English Skills for Life Survey asks respondents whether they have a longstanding illness or disability. Respondents who answered yes were less likely to achieve functional literacy (77% compared to 85% of respondents without a longstanding illness or disability) and less likely to achieve functional numeracy (44% compared to 47% of respondents without a longstanding illness or disability).¹³⁸

In total, 5% of respondents claimed to have a learning disability of some kind. Respondents with a learning difficulty were less likely to reach functional literacy than those without a learning difficulty (57% compared to 85%) and considerably less likely to reach functional numeracy (24% compared to 54%).¹³⁹ The patterns are similar in Wales – those with a learning difficulty were less likely to achieve

¹³⁶ National Equality Panel analysis of LFS (2006-08).

¹³⁷ National Equality Panel analysis of LFS (2006-08).

¹³⁸ DfES 2003. Tables 3.31 and 3.32. Page 61.

¹³⁹ DfES 2003. Tables 3.A15 and 3.A16, page 62.

functional literacy, and significantly less likely to achieve functional numeracy, than those not identified as having a learning difficulty (21% compared to 48%).¹⁴⁰

Qualifications

In 2008, 11% of working-age disabled people held degree-level qualifications, compared to 22% of working-age non-disabled people.¹⁴¹

Disabled people across the UK are three times as likely to have no qualifications as non-disabled people (33% of Disability Discrimination Act (DDA) disabled and work-limiting disabled people have no qualifications compared to 11% of non-disabled people).¹⁴² The difference for those who are work-limiting disabled only or DDA disabled only, is much smaller with 18% and 13% having no qualifications respectively. It is important to note that this will be in part an age effect as older people are both more likely to be disabled and to have no qualifications.

The same pattern is evident in reverse for degree level qualifications. Only 6% of DDA disabled and work-limiting disabled people have a degree level qualification compared to 15% of non-disabled people. The difference for those who were work-limiting disabled only, or were DDA disabled only is much smaller with 10% and 12% having a degree level qualification respectively.¹⁴³

Ethnicity

Basic skills

Differences in basic skills by ethnic group largely disappear if those whose second language is English are excluded (see Figure 10.6.1 below). The low level of the wholly English-speaking Black African/Caribbean population is the main exception to this.¹⁴⁴ Overall, therefore, ethnic differences are partly, but not wholly related to the significant number of people in ethnic minority groups who speak English as a second language.¹⁴⁵

¹⁴⁰ Equality and Human Rights Commission analysis of Basic Skills Survey data provided by Welsh Assembly Government.

¹⁴¹ Office for Disability Issues, Key facts and figures. Analysis of Labour Force Survey, Quarter 2, 2008 Available at: <http://www.officefordisability.gov.uk/research/facts-and-figures.php#11>. Accessed 18/08/2010

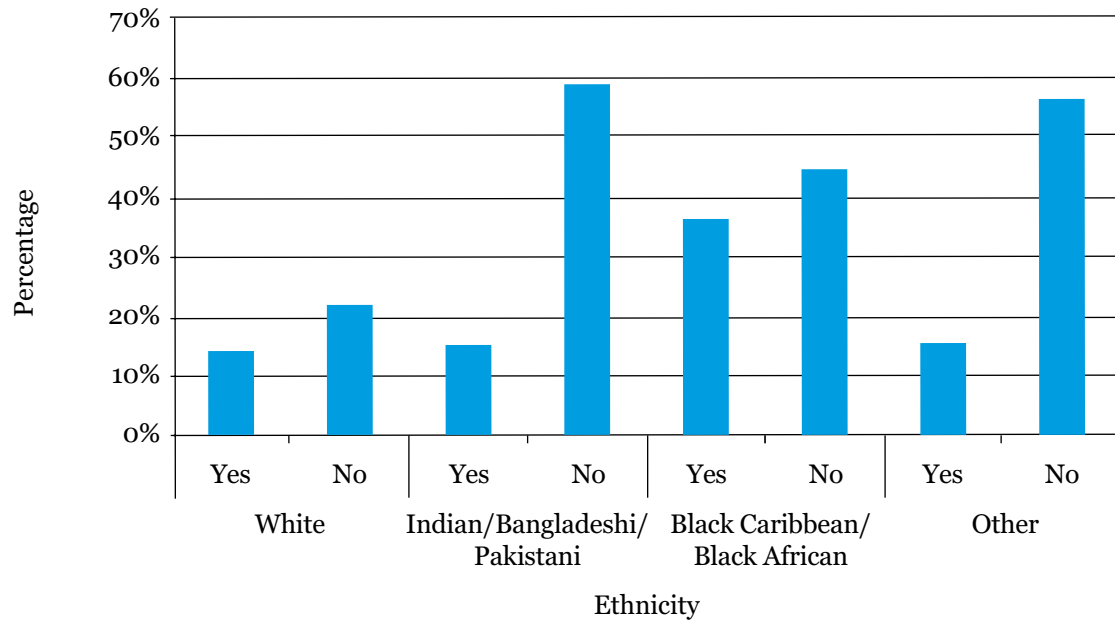
¹⁴² National Equality Panel analysis of LFS (2006-08).

¹⁴³ National Equality Panel analysis of LFS (2006-08).

¹⁴⁴ DfES 2003. Page 20.

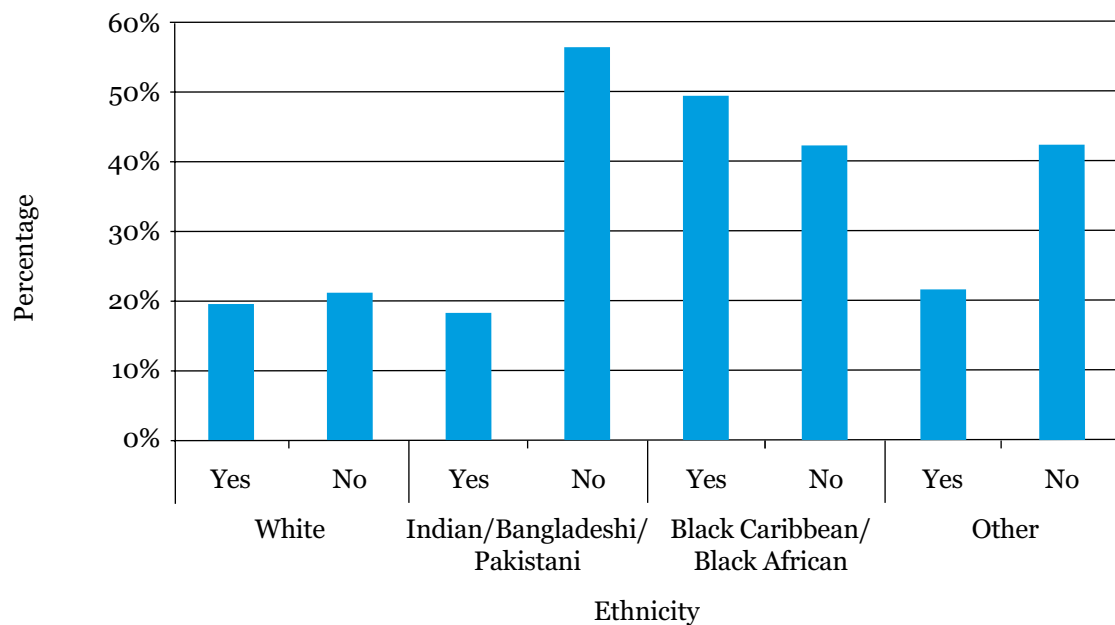
¹⁴⁵ Grinyer, J. 2005. *Numeracy and the labour market: Further analysis of the Skills for Life survey*. Department for Education and Skills Research Report 712. London: DfES. Available at: <http://www.dcsf.gov.uk/research/data/uploadfiles/RR712.pdf> Accessed 04/08/2010. Page 17.

Figure 10.6.1 Percentage of each ethnic minority group without functional literacy (answering yes or no to English as a first language) in England, 2003¹⁴⁶



Source: Data tables provided by Department for Business, Innovation and Skills.

Figure 10.6.2 Percentage of each ethnic minority group without functional numeracy (answering yes or no to English as a first language) in England, 2003¹⁴⁷



Source: Data tables provided by Department for Business, Innovation and Skills.

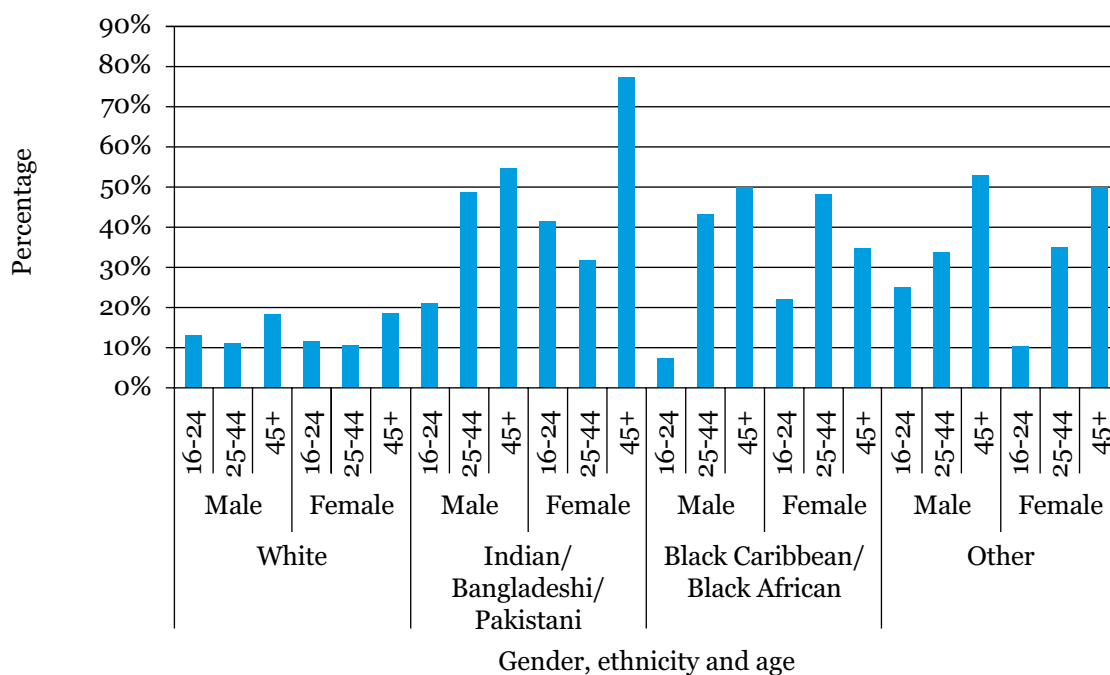
¹⁴⁶ Equality and Human Rights Commission analysis of Skills for Life Survey data provided by Department for Business, Innovation and Skills.

¹⁴⁷ Equality and Human Rights Commission analysis of Skills for Life Survey data provided by Department for Business, Innovation and Skills.

When education levels and English as a first language are controlled for, some differences remain by ethnicity. Being in a Black or Asian ethnic group is strongly correlated with poorer literacy skills, in particular for women. Black men are more likely to lack basic numeracy skills than any other ethnic groups, or those with a learning disability.¹⁴⁸

Gender and ethnic differences in literacy levels are related to age as Figure 10.6.3 demonstrates. With the exception of Black Caribbean/Black African women, ethnic minority people over the age of 45 appear less likely to reach functional literacy.

Figure 10.6.3 Percentage not reaching functional literacy by gender, ethnicity and age in England, 2003¹⁴⁹



Source: Data tables provided by Department for Business, Innovation and Skills.

A study in 2004 into the literacy of Gypsies and Travellers found that 21% of men and 9% of women could not read at all, and 14% of men and women could not write anything. As with the rest of the population, there was a cohort effect, and younger men and women were more likely to be able to read and write.¹⁵⁰

Almost twice as many ethnic minority respondents in Wales failed to achieve functional literacy, compared to White respondents (41% compared to 24%).¹⁵¹

¹⁴⁸ Grinyer, J. 2005. Page 20.

¹⁴⁹ Equality and Human Rights Commission analysis of Skills for Life survey data provided by Department for Business, Innovation and Skills.

¹⁵⁰ Cemlyn, S. *et al.* 2009.

¹⁵¹ Equality and Human Rights Commission analysis of Basic Skills Survey data provided by the Welsh Assembly Government.

(Due to small sample sizes the data cannot be disaggregated further). A smaller yet still significant gap appears for numeracy with 69% of ethnic minority respondents failing to achieve functional numeracy compared to 53% of White respondents. However, once country of birth is taken into account this gap narrows, leaving those born outside Wales most likely to lack basic literacy skills.¹⁵²

Qualifications

In most ethnic minority groups women are more likely to have no qualifications than men. Substantial groups of Black Caribbean and Mixed White women (over 30%) have no qualifications. Other Mixed groups also have large groups of women without qualifications – between 25 and 30%.¹⁵³

Bangladeshi and Pakistani communities stand out in terms of lower levels of qualifications. Far higher proportions of men in these groups have no qualifications compared to men in all other ethnic groups (30% and 25% respectively, and nearly a quarter of women have no qualifications).¹⁵⁴

In most ethnic groups there is little difference between the proportions of men and women who have degrees, the main exceptions being that Bangladeshi women are only half as likely as Bangladeshi men to have them, whilst Black Caribbean men are half as likely as Black Caribbean women to have them. The Chinese population stand out as being the best qualified at this level with nearly a quarter of both Chinese men and women having degrees. Bangladeshi women and Black Caribbean men are much less likely to have a degree than White British people as shown in Figures 10.6.4 and 10.6.5 below.¹⁵⁵

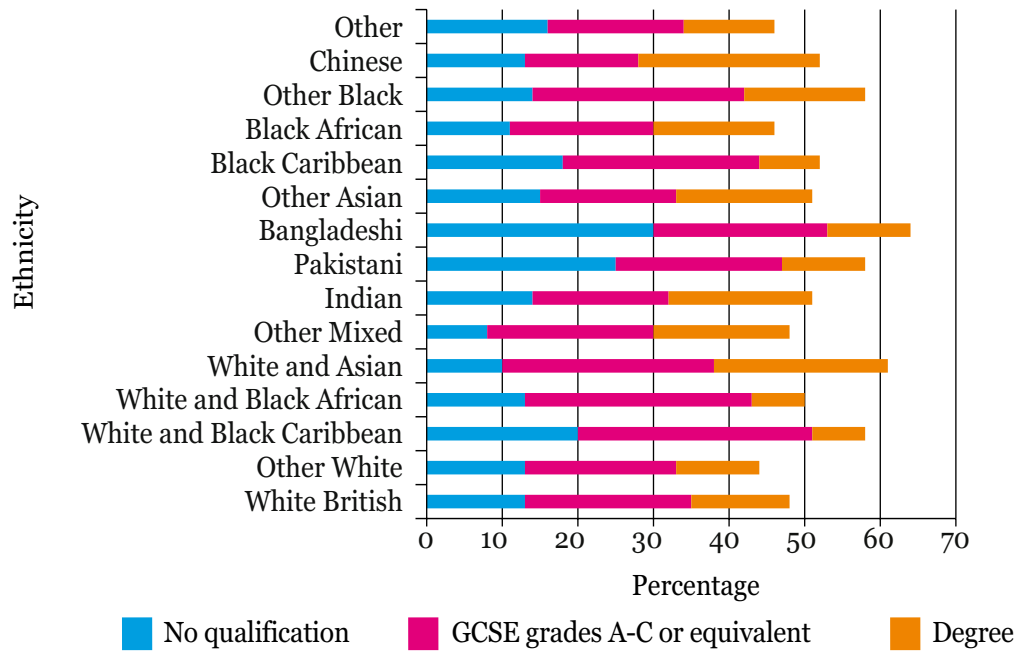
¹⁵² Equality and Human Rights Commission analysis of Basic Skills Survey data provided by the Welsh Assembly Government.

¹⁵³ National Equality Panel analysis of LFS (2006-08).

¹⁵⁴ National Equality Panel analysis of LFS (2006-08).

¹⁵⁵ National Equality Panel analysis of LFS (2006-08).

Figure 10.6.4 Percentage of the men in the working age population with each qualification level by ethnic group in the UK, 2006/08¹⁵⁶

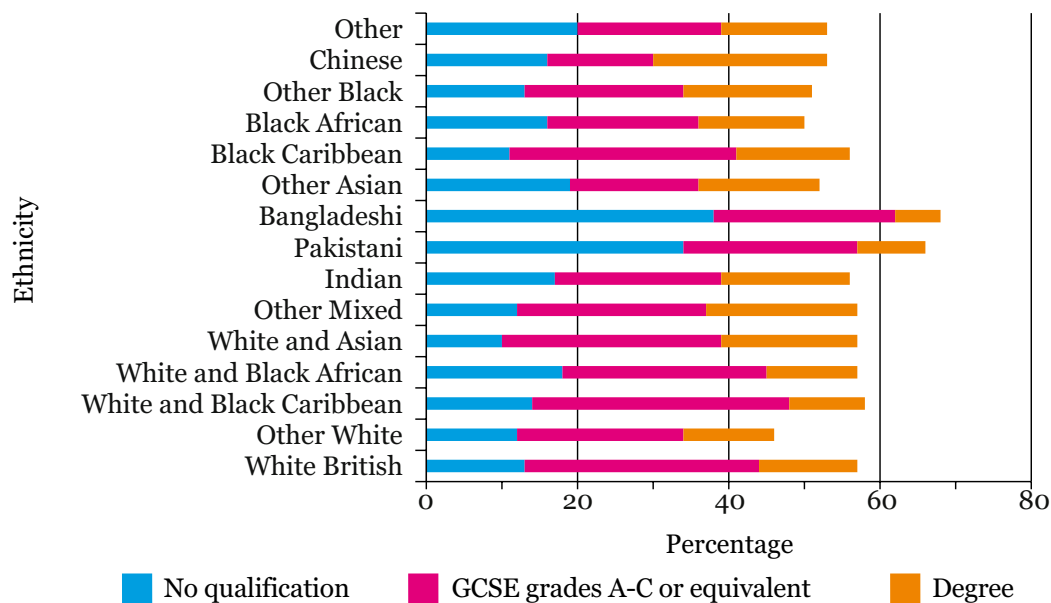


Source: Labour Force Survey.

Note: Table refers to working-age population (men 16-64).

¹⁵⁶ National Equality Panel analysis of LFS (2006-08).

Figure 10.6.5 Percentage of the women in the working-age population with each qualification level by ethnic group in the UK, 2006/08¹⁵⁷



Source: Labour Force Survey.

Note: Table refers to working-age population (women 16-59).

Religion or belief

As with ethnicity, an analysis of qualification levels by religion or belief shows a great degree of polarisation between groups as Figure 10.6.6 illustrates. At one end of the spectrum, 33% of Muslim women (of working-age) have no qualifications, and only 9% have a degree. Conversely, only 4% of Jewish women have no qualifications and 21% have a degree.

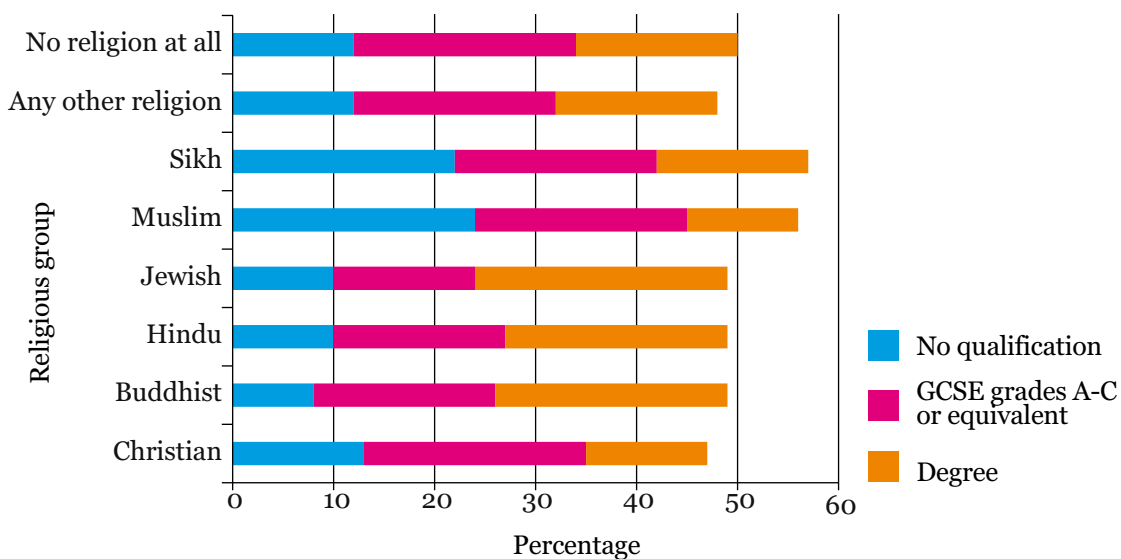
Amongst men, Muslim men are also most likely not to have any qualifications (24%) and again, least likely to have a degree (11%).¹⁵⁸ A fifth of Sikh men also have no qualifications. However, these low numbers could hide qualifications gained outside the UK and qualifications not listed in the survey question, especially for older age groups.¹⁵⁹

¹⁵⁷ National Equality Panel analysis of LFS (2006-08).

¹⁵⁸ Hills. J. *et al.* 2010. Figure 3.10, page 102.

¹⁵⁹ National Equality Panel analysis of LFS (2006-08).

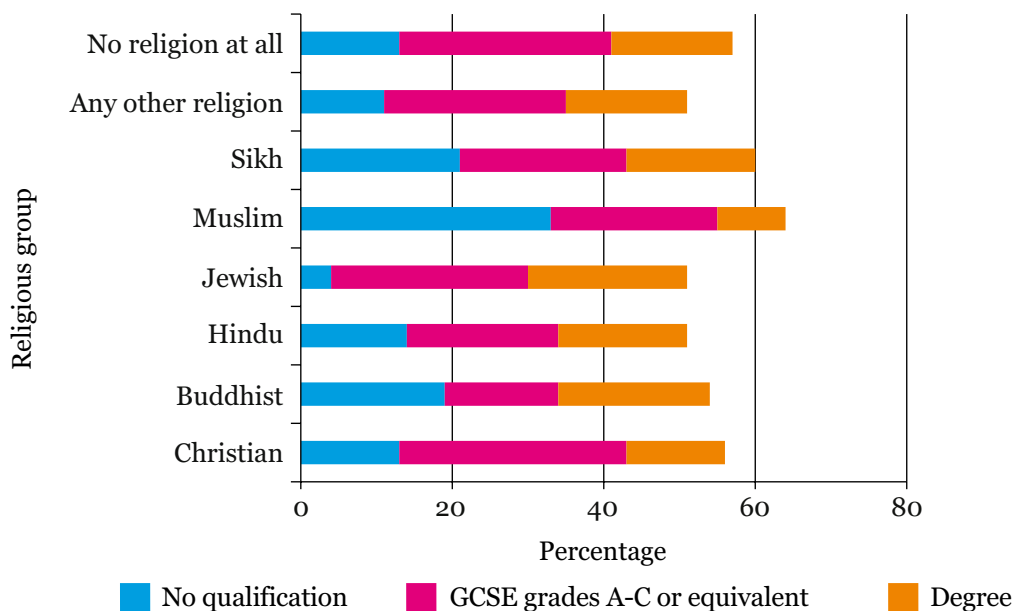
Figure 10.6.6 Data showing percentage of men in the working-age population with each qualification level by religion or belief in the UK, 2006/08¹⁶⁰



Source: Labour Force Survey.

Note: Table refers to working-age population (men 16-64).

Figure 10.6.7 Data showing percentage of women in the working-age population with each qualification level by religion or belief in the UK, 2006/08¹⁶¹



Source: Labour Force Survey.

Note: Table refers to working-age population (women 16-59).

¹⁶⁰ National Equality Panel analysis of LFS (2006-08).

¹⁶¹ National Equality Panel analysis of LFS (2006-08).

Sexual orientation

There are no available data on basic skills and qualification level by sexual orientation. Figures on people living together in same-sex couples available from the Labour Force Survey have a low level of reliability as it is a very small sample and does not reflect the experiences of gay men and lesbian women overall. However, these data show that those declaring that they live in same-sex couples appear to have a higher level of educational qualifications than those not living in same-sex couples. (see table 10.6.5 below)

Table 10.6.5 Percentage of the working-age population with each qualification level by same-sex couple in the UK, 2006/08¹⁶²

	Degree		GCSE grades A*-C or equivalent		No qualifications	
	Male	Female	Male	Female	Male	Female
Not Living in a same sex couple	13	13	22	29	14	14
Living in same sex couple	22	25	21	19	4	5

Source: Labour Force Survey.

Note: Table refers to working-age population (men 16-64, women 16-59).

Box 10.6.1 Related issue: Prisoners and basic skills

Among groups in society with particularly low levels of skill and attainment, 82% of prisoners are at or below the writing level of an 11-year-old and only 1 in 5 people in prison are able to complete a job application form.¹⁶³

¹⁶² National Equality Panel analysis of LFS (2006-08).

¹⁶³ Social Exclusion Unit. Office of the Deputy Prime Minister. 2002. *Reducing re-offending by ex-prisoners*. London: Social Exclusion Unit. Page 19.

10.7 What we know about adult learning

Measure:

Percentage of adults aged over 18 who participated in formal or informal learning in the last year

How this measure works:

We are able to report on Britain, Scotland and Wales for this measure using the Labour Force Survey (2006-08).

Data are collected for gender, age, socio-economic groups and ethnicity. Limited information is available for disability, as information about impairment type is not collected. Limited data are available for religion or belief, and transgender people are not covered by the dataset. Sexual orientation was not covered by the dataset in 2006-08 which is used here, though it is now as it is part of the Integrated Household Survey.

This measure does not measure the extent to which groups are satisfied with the outcomes of their learning.

Additional information has been drawn from a variety of sources including the Adult Learning Survey (England) conducted by the National Institute for Adult and Continuing Education 2009. However due to small sample sizes it is not possible to break these data down by all equality groups.

There is very limited related literature for this measure for groups defined by sexual orientation and transgender, therefore they are not covered in this section.

Overview

4 in 10 adults participate in some kind of adult learning each year.

However, those with low prior educational achievement are least likely to participate. People in older age groups are also less likely than younger adults to participate yet are more likely to have missed out on educational opportunities, thus entrenching existing patterns of educational disadvantage.

People in higher socio-economic groups are more than twice as likely to have participated in adult learning than people in routine occupations or those who have never worked. In Scotland, where overall participation is similar to the rest of Britain, adult learning is even more skewed towards professional workers.

What we know about the overall situation

More than a third of the EU population aged 25-64 years participate in formal or non-formal education and training. Participation rates differ by age. People aged 25-34 are twice as likely to participate (45%) in formal or non-formal education and training than those aged 55-64 (22%). People in the UK at all ages are more likely to be engaged in adult learning than on the average across the EU, having the second highest rate following Sweden.¹⁶⁴

What we know about the situation for different groups

Gender

Men and women participate in adult learning at broadly similar rates across Britain as a whole, and Scotland.

Initial analysis of the Labour Force Survey conducted as part of the development of the Equality Measurement Framework suggests that slightly more men than women participate in Wales as Table 10.7.1 shows.

Table 10.7.1 Percentage participating in Adult Learning in Britain, Scotland and Wales, 2006/08¹⁶⁵

	Britain	Scotland	Wales
Men	41%	43%	37%
Women	41%	42%	40%*

Source: Labour Force Survey

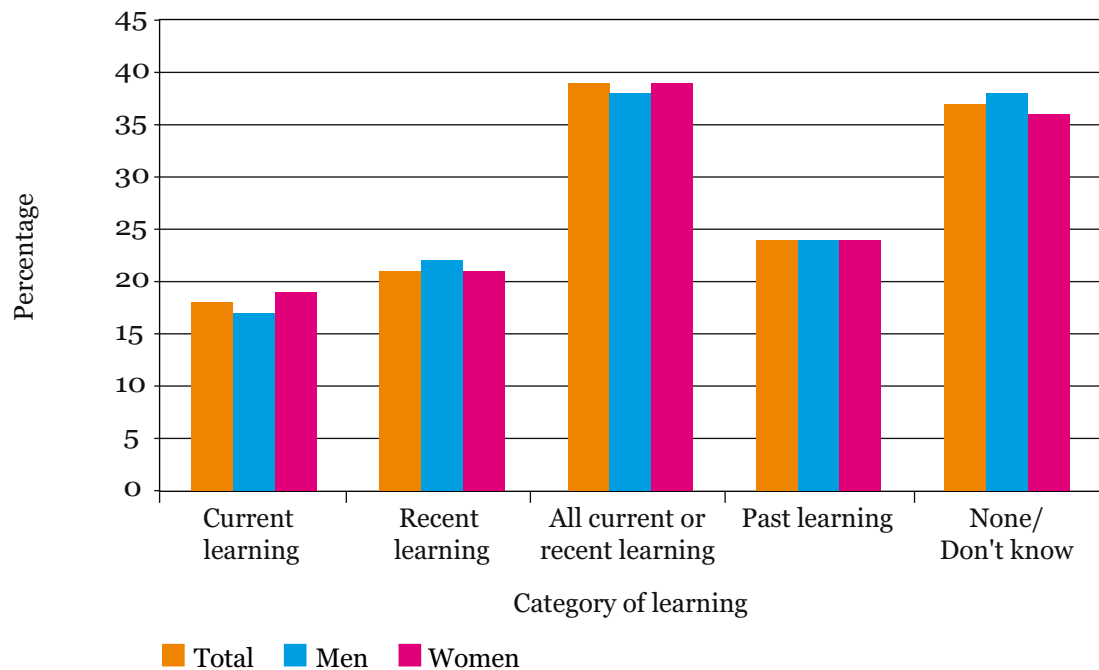
Note: * Indicates statistically significant difference

The Adult Learning Survey confirms this picture of broad parity between women and men. As Figure 10.7.1 below shows, the parity continues across different categories of learning.

¹⁶⁴ Eurostat, Adult Education Survey. Available at: http://epp.eurostat.ec.europa.eu/portal/page/portal/statistics/search_database Accessed 25/08/2010.

¹⁶⁵ Alkire, S. *et al.* 2009. *Developing the Equality Measurement Framework: selecting the indicators*. Research Report 31. Manchester: Equality and Human Rights Commission. In the development of the Equality Measurement Framework indicators, the technical phase was to check sample size rather than generate final data analysis tables, so these are preliminary results for group means and the significance of the variations in group means, as well as a report on sample size. Significance tests are reported at the 95 per cent level. A series of cross-checks are required at the next stage of the development of the Equality Measurement Framework before final data tables can be produced.

Figure 10.7.1 Participation in adult learning by gender and category of learning in England, 2009¹⁶⁶



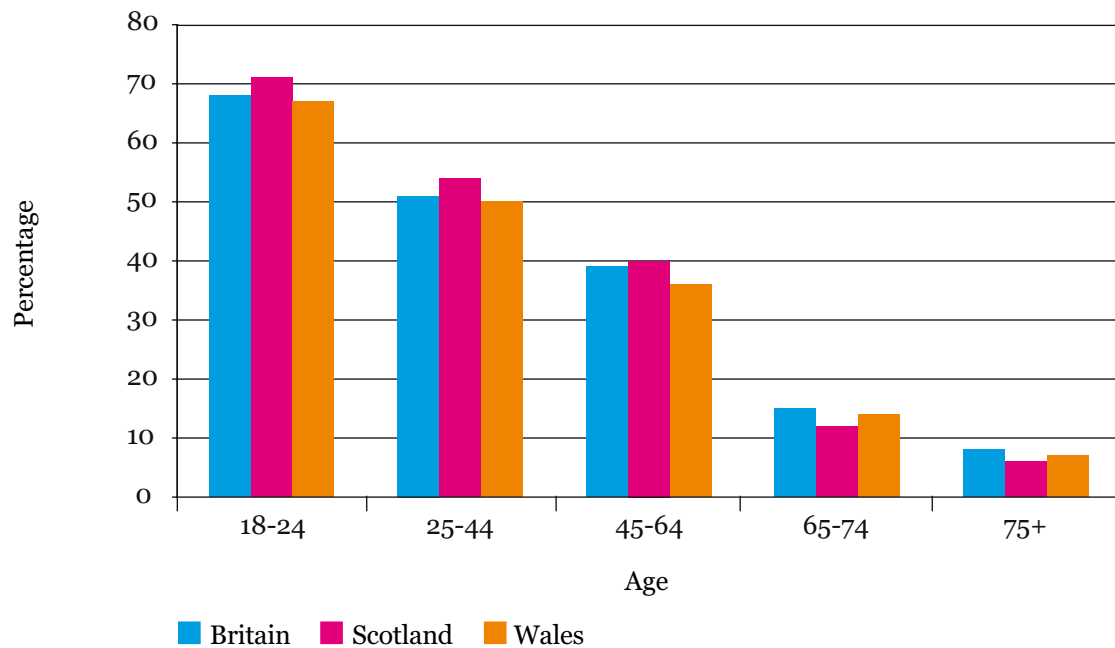
Source: Adult Learning Survey.

Age

According to initial analysis undertaken as part of the development of the Equality Measurement Framework, as age increases, the number of people that report engaging in adult learning decreases, from nearly 70% aged 18-24 to less than 10% aged 75+.

¹⁶⁶ Jones, P. 2010a. *EHRC Triennial Review: Education (Lifelong Learning). Participation in Adult Learning*. University of Southampton. This paper is available on the Equality and Human Rights Commission's Triennial Review web pages. Page 14.

Figure 10.7.2 Percentage participating in adult learning by age in Britain, Scotland and Wales, 2006/08¹⁶⁷



Source: Labour Force Survey.

Socio-economic groups

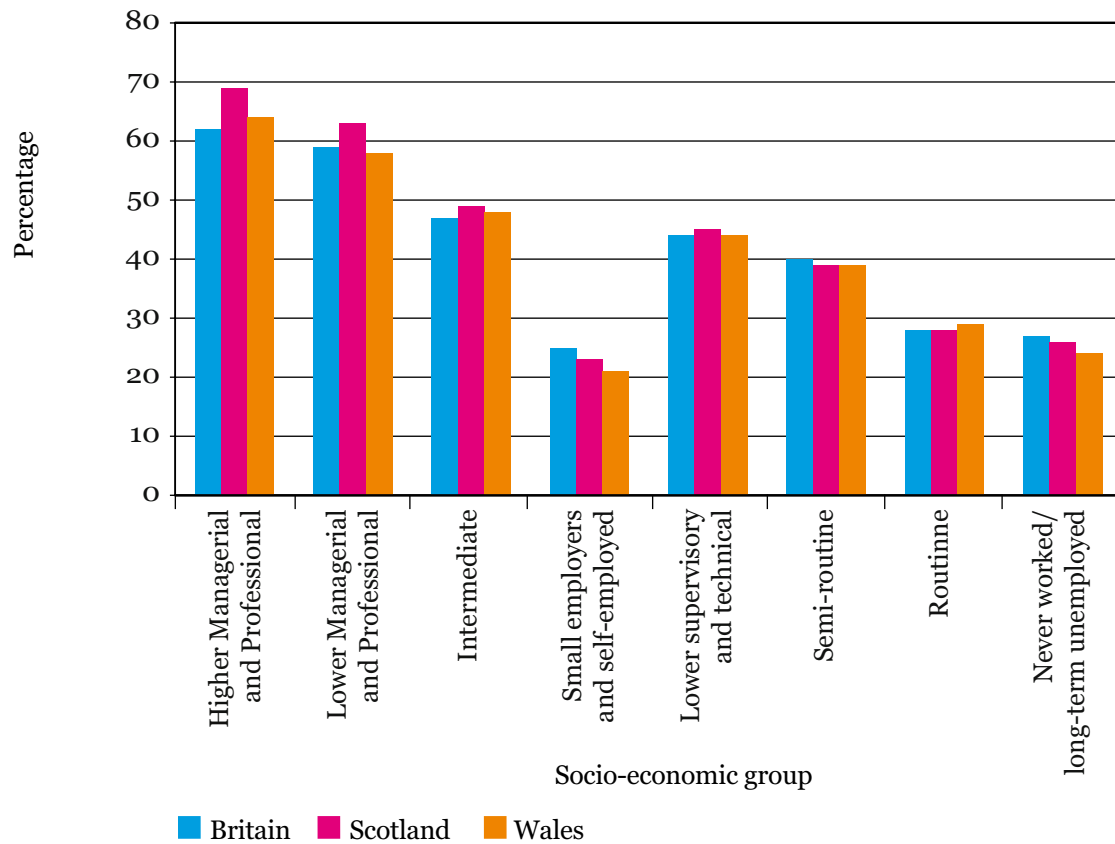
Participation in adult learning is influenced by socio-economic group as Figure 10.7.3 illustrates. According to initial analysis conducted as part of the development of the Equality Measurement Framework, those who are self-employed or working for small firms, those employed in routine occupations and the long-term unemployed participate in adult learning at less than half the rate of professional and higher managerial groups.¹⁶⁸ Public sector employment is a significant factor in increasing opportunities for adult learning particularly for women and disabled people (in 2008 the public sector employed 24% more disabled women and 11% more disabled men than in 1998).¹⁶⁹

¹⁶⁷ Alkire, S. *et al.* 2009. See footnote 165 for information on the development of the Equality Measurement Framework Indicators.

¹⁶⁸ Alkire, S. *et al.* 2009. See footnote 165 for information on the development of the Equality Measurement Framework Indicators..

¹⁶⁹ Jones, P. 2010a. Page 4.

Figure 10.7.3 Participation in Adult Learning by socio-economic group in Britain, Scotland and Wales, 2006/08¹⁷⁰

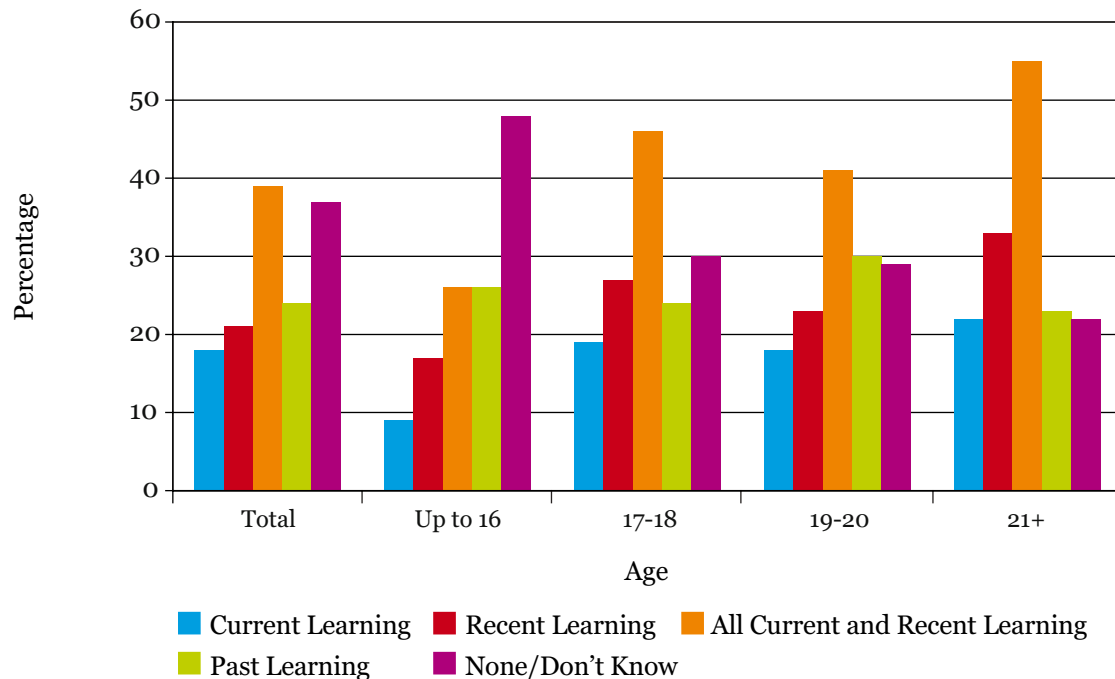


Source: Labour Force Survey.

The Adult Learning Survey shows that there is a relationship between prior educational achievement and participation in adult learning (using terminal age of education as shown in Figure 10.7.4 below). Those who leave formal education earliest are least likely to participate in adult learning; it is those with higher education who are most likely to participate in adult learning.

¹⁷⁰ Alkire, S. *et al.* 2009. See footnote 165 for information on the development of the Equality Measurement Framework Indicators.

Figure 10.7.4 Participation in Adult Learning and Terminal Age of Education in England, 2009¹⁷¹



Source: Adult Learning Survey.

Early school leaving is a major barrier to adult learning. Pakistani and Bangladeshi groups feel the participation penalty of leaving school at 16 most keenly. Of those who leave school at 16, Bangladeshi and Pakistani 16-year-old school leavers are half as likely to participate in adult learning as their White counterparts (29% and 34% compared to 63%).¹⁷²

Disability

Participation of disabled people in adult learning reveals a stark picture of inequality, as disabled people participate at half the rate of non-disabled people. Across Britain 46% of non-disabled people participate in adult learning, compared to only 23% of disabled people.¹⁷³

¹⁷¹ Jones, P. 2010a, Figure 9, page 17.

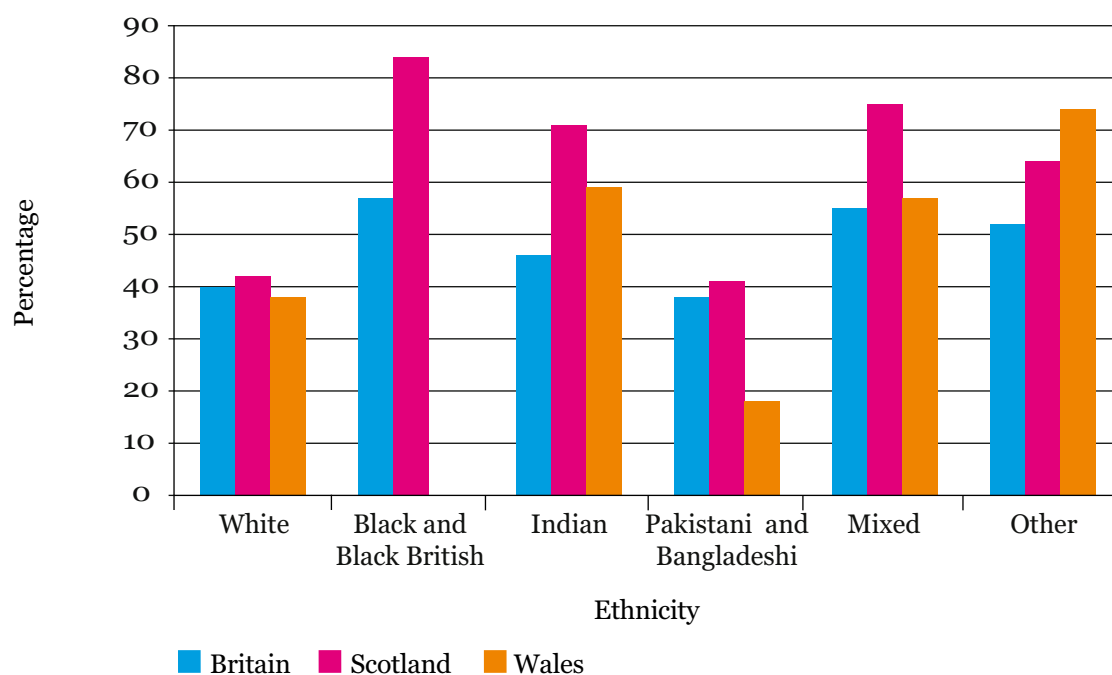
¹⁷² Jones, P. 2010a. Page 17.

¹⁷³ Jones, P. 2010a.

Ethnicity

Initial analysis conducted as part of the development of the Equality Measurement framework indicates that in 2006-08, ethnic minority groups participated in adult learning at higher rates than the White population, with the noticeable exception of the Pakistani/Bangladeshi community.

Figure 10.7.5 Participation in Adult Learning by ethnicity in Britain, Scotland and Wales, 2006/08¹⁷⁴



Source: Labour Force Survey.

¹⁷⁴ Alkire, S. *et al.* 2009. In the development of the Equality Measurement Framework indicators, the technical phase was to check sample size rather than generate final data analysis tables, so these are preliminary results for group means and the significance of the variations in group means, as well as a report on sample size. Significance tests are reported at the 95 per cent level. A series of cross-checks are required at the next stage of the development of the Equality Measurement Framework before final data tables can be produced.

A 2008 study by National Institute of Adult and Continuing Education confirms these findings, showing that within the working-age population, overall ethnic minority groups are more likely to participate in adult learning than the White population.¹⁷⁵ The sharpest contrast is between the lower participation rates of Bangladeshi and Pakistani groups, and the rest.¹⁷⁶ The study also found significant patterns in terms of the mode of learning by ethnicity. Groups with higher rates of participation in adult learning (Black and Mixed ethnic origin) are more likely to be benefiting from taught learning, and learning towards a qualification. Black African people who are economically inactive are also more likely than other groups to participate in adult learning (54% compared to 34% of economically inactive White people).¹⁷⁷

Those groups less likely to participate (particularly Bangladeshi people) tended to be involved in self-directed learning, and are also least likely to be working towards a qualification, and least likely to be participating in job-related training.¹⁷⁸

Disaggregation by ethnicity and gender reveals some interesting patterns. Men in Indian, Pakistani and Bangladeshi communities have higher participation rates relative to women, perhaps reflecting the employment rates of women in those ethnic minority groups.¹⁷⁹

Religion or belief

According to initial analysis as part of the development of the Equality Measurement Framework, data indicate that across Britain Christian groups stand out as having relatively low participation rates compared to those of no religion and other religious groups at 39% in Britain and Scotland and 36% in Wales compared to 48%, 51% and 44% of those of no religion. However, the small size of the relevant populations in the survey means that these results should be treated with caution.¹⁸⁰

¹⁷⁵ Jones, P. 2010a. Page 17.

¹⁷⁶ Jones, P. 2010a. Page 17.

¹⁷⁷ Jones, P. 2010a. Pages 19-21.

¹⁷⁸ Jones, P. 2010a. Pages 19-21.

¹⁷⁹ Jones, P. 2010a. Pages 19-21.

¹⁸⁰ Alkire, S. *et al.* 2009. In the development of the Equality Measurement Framework indicators, the technical phase was to check sample size rather than generate final data analysis tables, so these are preliminary results for group means and the significance of the variations in group means, as well as a report on sample size. Significance tests are reported at the 95 per cent level. A series of cross-checks are required at the next stage of the development of the Equality Measurement Framework before final data tables can be produced.

10.8 What we know about use of the internet

Measure:

Percentage who have had access to the internet within the last 3 months

How this measure works:

Data for this measure are available for the UK from the Office for National Statistics (ONS) Opinions Survey (2009).

The Office for National Statistics Opinions Survey provides data on age, gender and socio-economic groups. Data are not available for disability and ethnicity, but general literature has been drawn on to indicate some possible issues that these groups may face. Very limited related literature for this measure is available by religion or belief, sexual orientation or transgender, therefore these groups are not covered in this section. The measure recommended by the Equality Measurement Framework focused on use of the internet. However, as available data for use were limited, internet access is being used as a proxy for this measure.

Overview

30% of the UK population are unable to access the internet in their homes.¹⁸¹ Almost all adults (95%) aged under 70 who had a degree or equivalent qualification were estimated to live in a household with internet access. Those who had no formal qualifications were least likely to have an internet connection, at 52%.

Access to the internet varies dramatically with age, from 96% of 16-24-year-olds to just 30% of over-65s.¹⁸² Although older age groups are at the centre of the recent growth in internet access, they are also most at risk of non-usage.

There are no large differences in internet use by ethnic group. Among Indian, Pakistani and Black African groups, those with lower socio-economic status use the internet more than other ethnic groups in those socio-economic categories.

¹⁸¹ Office for National Statistics (ONS) 2009. *Internet Access Households and Individuals*. Statistical Bulletin. Available at: <http://www.statistics.gov.uk/pdfdir/iahio809.pdf> Accessed 18/08/2010.

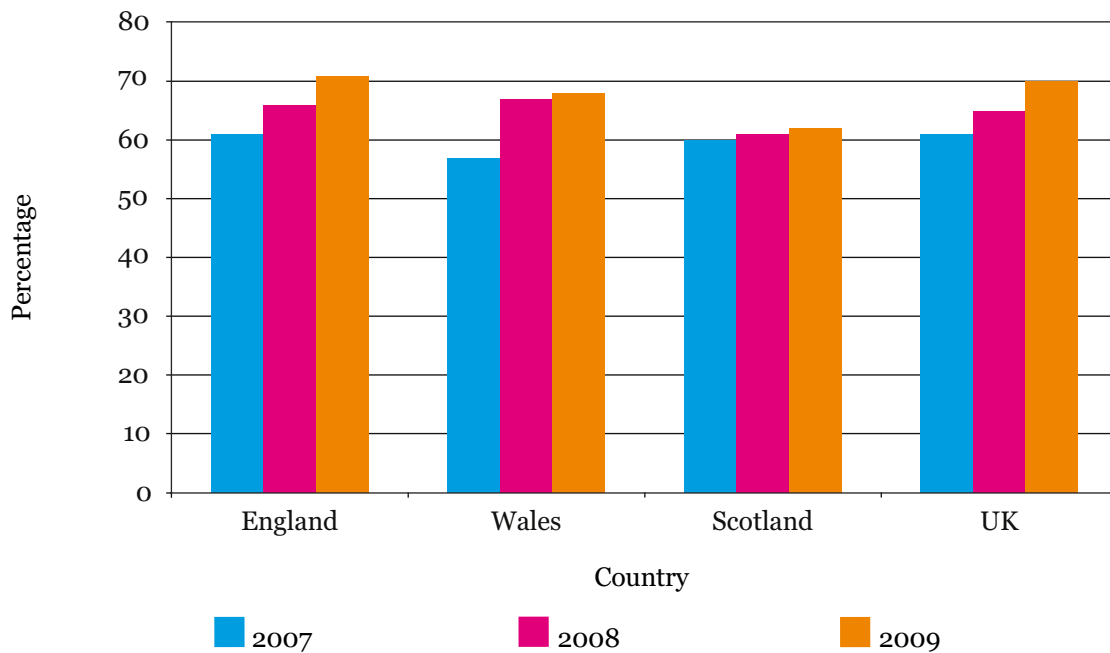
¹⁸² ONS 2009.

Only a minority of people with physical and sensory disabilities have broadband access – 42% of people with visual impairments, 32% of people with hearing impairments and 35% of people with mobility impairments have broadband access. Many websites still remain inaccessible for many groups.

What we know about the overall situation

In 2009, the proportion of households able to access the internet varied between UK regions, and across nations. The region with the highest level of internet access was London at 80%. In terms of national differences, Scotland had the lowest proportion of households with internet access at 62%.¹⁸³

Figure 10.8.1 Percentage of the population with access to the internet and using it in the last 3 months in England, Scotland and Wales, 2007/09¹⁸⁴



Source: Internet Access Households and Individual.

Note: Household internet access.

¹⁸³ ONS 2009. This indicator uses the ONS Opinions Survey for consistency across all three nations, however it is important to note that the Scottish Household Survey (which has a larger sample size for Scotland) found that in 2009 67% of households had internet access.

¹⁸⁴ Jones, P. 2010b. *EHRC Triennial Review: Education (Lifelong Learning). Internet access and use*. University of Southampton. This paper is available on the Equality and Human Rights Commission's Triennial Review web pages. Page 9.

Across the UK, 37.4 million adults (76% of the adult population) accessed the internet in the 3 months prior to interview. This was an increase of 10% (3.5 million adults) from 2008. Subsequently, the number of adults who had never used the internet fell to 10.2 million adults (21%) in 2009.¹⁸⁵

What we know about the situation for different groups

Gender and age

In 2009, men were more likely to have accessed the internet in the last 3 months than women (80% compared to 72%). Of those who used the internet, there were small differences in frequency with men slightly more likely than women to use the internet on a daily, weekly or monthly basis.¹⁸⁶

In 2009, the proportion of adults who accessed the internet every day or almost every day was 73%. The 16-24 age group accessed the internet the most, with 86% using it every day or almost every day. The 65+ age group used it the least with 52% using it every day or almost every day as Figure 10.8.2 shows.¹⁸⁷

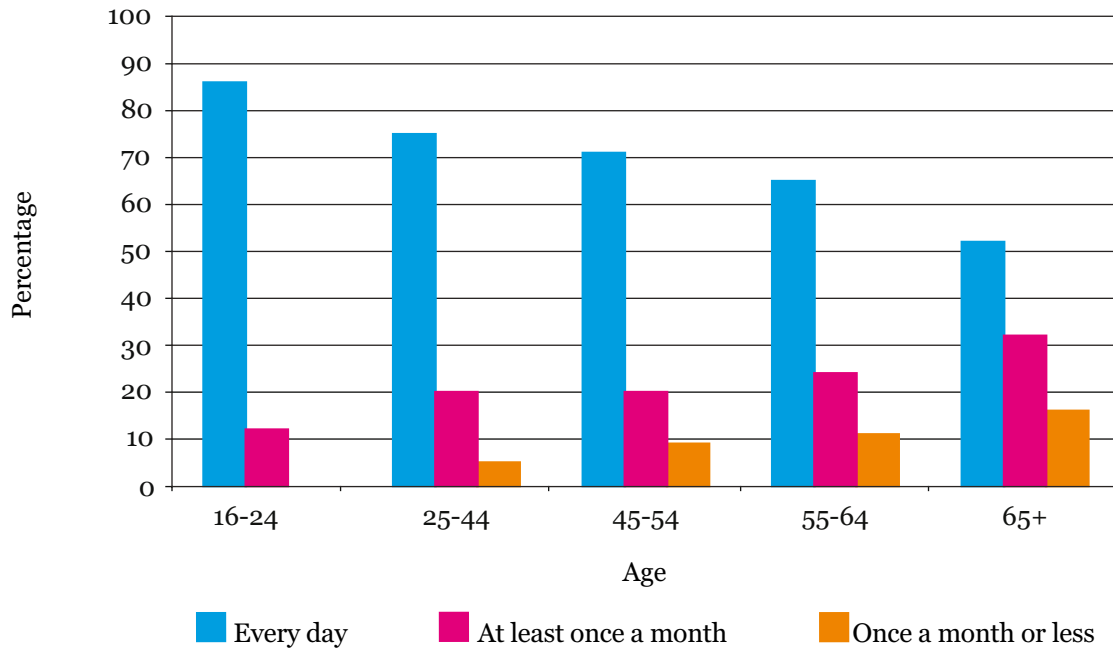
There has been growth in internet access by all age groups between 2008 and 2009. Although the youngest age group (those aged 16-24) had the highest level of access, at 96%, the largest increase in the proportion of those using the internet was in the oldest age group (those over 65 years). Access by those aged over 65 years increased proportionally by 15%, compared with an increase of 3 percentage points for the 16-24 age group.¹⁸⁸

¹⁸⁵ ONS 2009.

¹⁸⁶ ONS 2009.

¹⁸⁷ ONS 2009.

¹⁸⁸ ONS 2009.

Figure 10.8.2 Internet access by age group and regularity in the UK, 2009¹⁸⁹

Source: Internet Access Households and Individuals.

Socio-economic groups

Almost all adults (95%) aged under 70 who had a degree or equivalent qualification were estimated to live in a household with internet access. Those who had no formal qualifications were least likely to have an internet connection, at 52%.¹⁹⁰

In terms of access, low income interacts with a range of issues relating to the financing of access. For example, those with incomes over £40,000 per annum are more than twice as likely to be online compared to those earning less than £12,500.¹⁹¹

Those who are working are more likely than those who are unemployed to use the internet regularly (62% of people who are working use the internet regularly, compared to 46% of the unemployed).¹⁹²

¹⁸⁹ Jones, P. 2010b. Figure 4, page 9.

¹⁹⁰ ONS 2009.

¹⁹¹ Jones, P. 2010b. Page 11.

¹⁹² Jones, P. 2010b. Page 12.

Disability

There is no information by internet access and disability in the major data sets. However, we do know from the Digital Britain Report 2009 that internet access for disabled people is limited with only 42% of people with visual impairments, 32% of those people with hearing impairments and 35% of those people with mobility impairments having broadband access at home compared to around 60% of the general population.¹⁹³ Even for those with internet access, many websites still remain inaccessible for those that do not use a mouse, or who use screen-reading technology or voice recognition software. In addition, many of these tools do not work on a mobile platform, so anyone using a handheld device may be similarly prevented from achieving full access.¹⁹⁴

Ethnicity

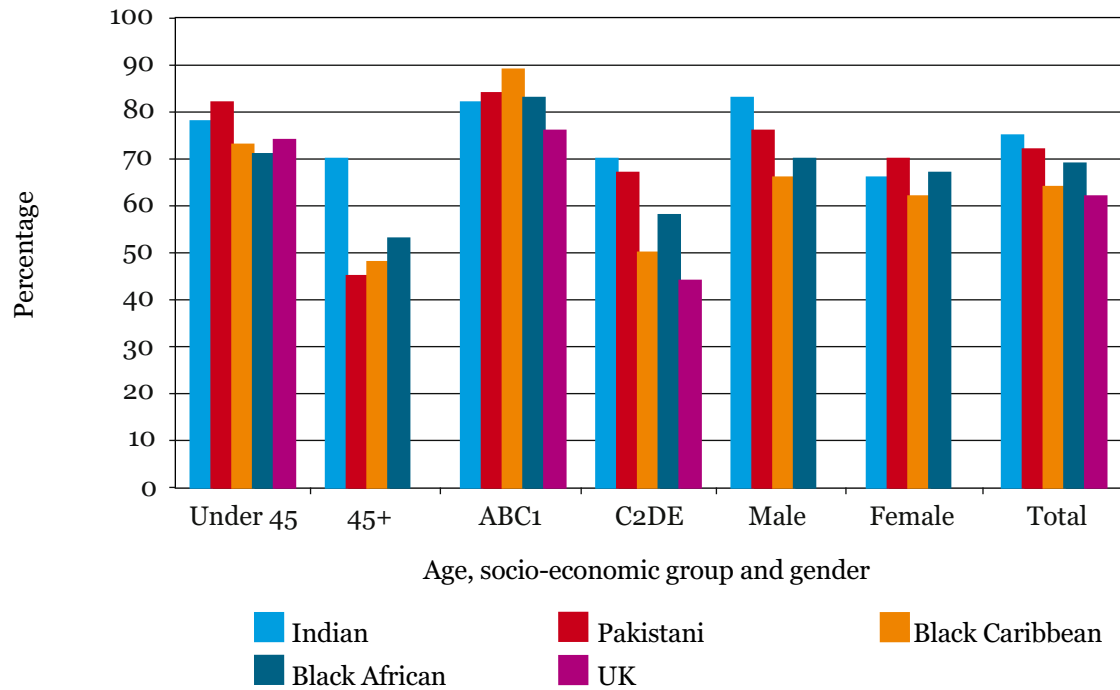
There is no information by internet access and ethnicity in the major data sets; however smaller-scale surveys have found that overall ethnic minority groups access and use the internet at a higher rate than the total UK population. As with the population as a whole, use by ethnic minority group varies by age and socio-economic group; those under the age of 45 appear to access and use the internet at similar rates, whereas in the 45+ age group the high use by Indians stands out as shown in Figure 10.8.3.¹⁹⁵

¹⁹³ Jones, P. 2010b. Page 14.

¹⁹⁴ Saint Freedman, C. 'How to make the web accessible to everyone'. Article for Computerweekly.com Accessed 05/08/2010 at <http://www.computerweekly.com/Articles/2010/05/27/241383/how-to-make-the-web-accessible-to-everyone.htm>

¹⁹⁵ Jones, P. 2010b. Figure 8, page 13.

Figure 10.8.3 Percentage with access to the internet and using in the last 3 months by ethnicity and age in the UK, 2009¹⁹⁶



Source: *Media Literacy Audit: Report on UK Adults from Ethnic Minority Groups* Ofcom 2008.

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Chapter 11: Employment

Summary

Between 1995-97 and 2006-08, a steady growth in the number of jobs raised the percentage of women and of Black people of working-age in employment by twice the average, and the percentage of Bangladeshi and Pakistani people of working-age in employment by three times the average.¹ However, some groups with low employment rates have done badly over the long-term, especially those pushed to the margins of the labour market. For example the employment rate for disabled men without qualifications halved between the mid-1970s and early 2000s. Calls to the Equality and Human Rights Commission's helpline also indicate that employment issues are significant for disabled people with over half of the calls in 2008-09 related to employment issues coming from this group.²

Despite some growth in their employment rates, only 1 in 4 Muslim women work, and many face practical barriers preventing them from doing so. Moreover, Black people and disabled people in their early 20s are twice as likely to be not in employment, education or training (NEET) as White people and non-disabled people. Young Muslims are also more likely than Christians to spend periods out of the labour market. Overall, a more demanding job market is less forgiving of those without qualifications.

Many barriers within employment are breaking down, with for example, a growing proportion of managerial and professional positions taken by women. However, the British labour market continues to be characterised by a high level of occupational segregation. Around 25% of Pakistani men are primarily taxi drivers; women make up 83% of people employed in personal services; and over 40% of female jobs compared to 15% of male jobs are in the public sector, making women particularly vulnerable to public sector cuts.

Occupational segregation continues to feed pay differences, especially in the private and voluntary sectors where at age 40 men are earning on average 27% more than women. The large proportion of women in part-time jobs also contributes to this. Occupational segregation also explains differences in illness and injury rates in the workplace, with people in manual and routine occupations being most at risk.

¹ Hills, J. *et al.* 2010. *An Anatomy of Economic Inequality in the UK*. Report of the National Equality Panel. London: Government Equalities Office. Tables 10.3 and 10.4. See discussion on page 272 for limitations in robustness of comparison between the two periods.

² Calls received by the Equality and Human Rights Commission's helpline 2008-09.

There are few large-scale data on the labour market experiences of lesbian, gay and bisexual (LGB) people. However, we do know that LGB adults are around twice as likely to report experiencing unfair treatment, discrimination, bullying or harassment at work than other employees. This is also mirrored in the nature of the queries received by the Equality and Human Rights Commission's helpline, many of which relate to harassment in the workplace for this group.³ There are even less data available for transgender people, though smaller-scale studies point towards evidence of harassment and other forms of discrimination in the workplace.

Introduction

Most workers need a job because it enables them to support themselves and their families. For many, it is also more than that. Work may be a source of pride, help them make new social contacts, or give them a sense of purpose and meaning.

Over the past decade, government initiatives have sought to enable people from traditionally under-represented groups to play a part in the workplace. Measures such as the right to request flexible working were designed, in part, to help carers (predominantly women) combine paid work with other responsibilities; Government sought to work with business, through such initiatives as the Ethnic Minority Employment Taskforce, to make the business case for inclusive employment practices, including in relation to recruitment and promotion; and new laws outlawed unfair discrimination against workers on the basis of their age, religion or belief, and sexual orientation.

The available evidence from such sources as the British Social Attitudes survey suggest that the majority of us are relaxed about dealing with people from different backgrounds at work, and a growing number of firms recognise that a concern for diversity in their workforce is in their best interests.⁴

Despite this government action, changes in attitudes, and some progress in the employment prospects of some groups, there remained at the start of 2008 significant disparities and inequalities in different groups' experience of work. Then, during 2008, the country entered the sharpest recession for several decades. The recession has already affected different groups of people in different ways. Men have been more adversely affected than women and young people more than older people. Further consequences of the recession and the Government's reaction to it (including a likely reduction in public sector employment) will make themselves felt in the coming years. It is likely that these, too, will affect different groups' experience of work in different ways.

³ Calls received by the Equality and Human Rights Commission's helpline 2008-09.

⁴ For more information see Part III of this report.

This chapter looks at five indicators that relate to people's experiences of work, their chances of getting a job and getting on in a job:

Indicators

1. **Employment**
2. **Pay gaps**
3. **Occupational segregation**
4. **Illness and injury at work**
5. **Discrimination in employment**

Under **employment** we use two specific measures: the percentage of the working-age population who are employed, or self-employed, and the percentage of 16-24-year-olds who are NEET.

For **pay gaps**, we look at the median hourly pay of employees (excluding unpaid overtime).

Occupational segregation means the fact that different groups of people tend to do different kinds of jobs. We use two specific measures to look at this. The first is 'vertical' segregation, which shows the proportion of people in different levels of seniority and types of occupation. The second measure is 'horizontal' segregation, which shows the proportions of the workforce who are drawn from a particular group in different sectors (for example, the numbers of men and women who work in engineering).

Under **illness and injury at work**, we give the weighted average prevalence of work-related illness and injury per 100,000 employed based on occupation.

For **discrimination in employment** we look at the percentage of workers who report experiencing unfair treatment, discrimination, bullying or harassment at work.

As in the rest of Part II, this chapter explores what we know about these indicators and what the evidence tells us about the experiences of different groups.

11.1 What we know about employment

Measures:

Working-age population in paid employment – percentage of working age population employed or self-employed

NEET rate – percentage of 16-24-year-olds not in employment, education or training (NEET)

How these measures work:

Working-age population in paid employment

The 2006-08 Labour Force Survey covers the employment rate in England, Scotland and Wales.

The employment rate is a widely used indicator of basic access to the labour market. The employment rate is used here rather than economic activity or inactivity rates as economic inactivity encompasses a diverse range of situations including some positive (being in full-time education for example) and some negative (being unemployed). However, occasionally data on economic activity and inactivity are used to highlight particularly large differences between groups.⁵

The working-age population is defined as age 16-64 for men, and 16-59 for women.

Data are available for gender, age, socio-economic group, disability, ethnicity and religion or belief. Due to small sample sizes, there are limited data for ethnic minority and religious groups in Scotland and Wales. Sexual orientation data are limited to 'same-sex couple' data collected by the Labour Force Survey. This is a very small sample (0.6% of the working-age population report living in a same-sex couple) and does not reflect the experiences of gay men and lesbian women overall. We are drawing on general literature for transgender people; results are indicative only of possible issues facing this group as sample sizes are small.

NEET rate

We are able to report on England, Scotland and Wales for this measure. NEET data are available for England from the 2006-08 Labour Force Survey and the 2008 *Youth Cohort Study and Longitudinal Study of Young People in England*. NEET data are available for Scotland from the Annual Population Survey 2009 and for Wales from the Annual Population Survey 2009. These sources have been used as they provide the best comparable data between the three nations.

⁵ For further discussion of the definition of employment rate and the choice of indicator please see Alkire, S. *et al.* 2009. *Developing the Equality Measurement Framework: Selecting the Indicators*. Research Report 31. Manchester: Equality and Human Rights Commission. Pages 284-285.

The NEET figures taken from the 2009 Labour Force Survey for different groups in England include those in each age group who are either unemployed or inactive. Publically available Labour Force Surveys no longer contain information that allows identification of academic age. Consequently, the figures presented by age are not suitable for determining education participation rates that relate to schooling years and are not therefore comparable with NEET status at age 16-18 years. The same data limitations apply to all groups however, therefore cross group comparisons can be made and are indicative of differences among distinct sub-groups.

In England, data can be disaggregated by gender, age, disability, ethnicity and religion. However, the sample sizes in this analysis are small for some groups. Where this is the case results are described as indicative rather than conclusive. In Scotland and Wales, data can only be disaggregated by gender and age.

There are no data available for sexual orientation or transgender groups. As there is very limited related literature for this measure for these groups, they are not covered in this section.

Overview

Job chances for some groups improved during the long period of economic growth. The period 1995 to 2008 saw the proportion of the adult population who were employed full-time, part-time or self-employed rise from 71% in 1995-97 to 74% in 2006-08.⁶ The rise was faster for some groups. For example, the proportion of women of working-age who were employed rose by 3 percentage points (from 67% to 70%): the increase was 4 percentage points for Black Caribbean people (63% to 67%).⁷

But some groups remain at the margins of the labour market. The rates for Pakistani and Bangladeshi people each rose considerably (37% to 46% for Pakistani people and 32% to 42% for Bangladeshi people). However, much of the rise for these two groups was due to an increase in the numbers taking part-time work. Also, even after the sharp increase in their employment rates these groups remain considerably less likely to be employed than the White British population.⁸

⁶ Hills, J. *et al.* 2010. Table 10.3, page 272. Data are for the adult working-age population.

⁷ Hills, J. *et al.* 2010. See discussion on page 272 for limitations in robustness of comparison between the two periods.

⁸ Hills, J. *et al.* 2010. See discussion on page 272 for limitations in robustness of comparison between the two periods.

The recession hit some groups harder than others. Since 2008, the employment rate has dipped sharply, but more so for men than for women. The overall result is that the gender gap in the employment rate has almost halved since the mid 1990s, from 10 percentage points to 6.⁹ This trend will not necessarily be reversed by the recession. However, as seen by the current high levels of youth unemployment, groups at the margins of the labour market are likely to remain highly vulnerable, especially those without qualifications.

Certain inequalities remain persistent. Disabled people continue to face barriers to employment, illustrated by their low employment rate. Similarly, mothers of children under the age of 16 are four times more likely than fathers to be economically inactive: being a parent exacerbates the gender gap.

People over 50 who have lost their jobs remain out of work for longer than average: however, older people's employment rates rose faster than any other rates in the past decade, and so far have fallen by less in the recession. Older people have increasingly been using flexible patterns of work, and this could be helping to protect the overall proportion of them employed in the present downturn.

Some groups are more susceptible to being NEET than others.

Circumstances such as geography, age, disability and ethnicity can mean that there is a greater likelihood of being out of work and in training for some groups than others. Research suggests that people's initial experience of the employment market has a strong effect on future career prospects.¹⁰

⁹ These figures use January to March for each year, in order to capture what happened up to early 2010.

¹⁰ Schroeder, A., Miles, A., Savage, M., Halford, S. and Tampubolon, T. 2008. *Mobility, careers and inequalities. A study of work-life mobility and the returns from education*. Research Report 8. Manchester: Equality and Human Rights Commission.

What we know about the overall situation and trends

Working-age population in paid employment

The overall employment rate in the UK (full-time, self-employed and part-time) grew by 3% from 71% to 74% between 1995 and 2008. However, as the recession hit in 2008, it began to decline.¹¹ The overall working-age employment rate is currently at 71%.¹²

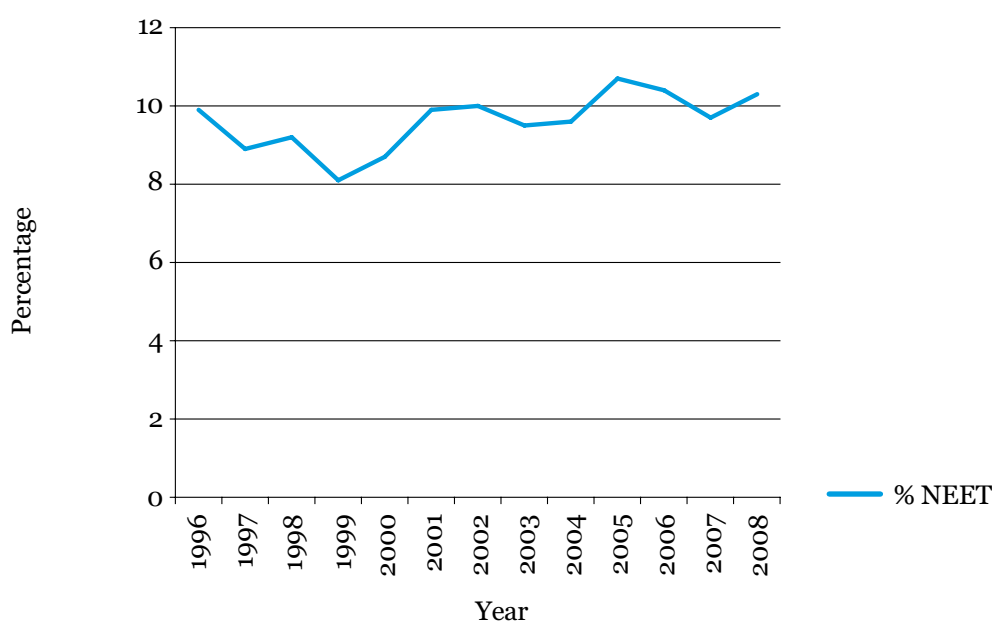
In 2006-08, a higher proportion of men of working-age were employed full-time in Scotland (52%) than in England (49%) or Wales (47%). The proportion of men who were self-employed was slightly higher in England than in Scotland or Wales.¹³

In terms of overall employment rate, the UK compares favourably to other European Union (EU) countries. The employment rate among the EU's population aged 15 to 64 was 65% in 2009.¹⁴ Employment rates above 70% were achieved in six Member States (Denmark, the Netherlands, Sweden, Austria, Finland, and Germany). Cyprus and the UK are just below with 69.9%. In contrast, employment rates below 60% were recorded in Romania, Italy, Hungary, Poland and Malta.¹⁵

NEET rate

Over a period of 12 years, between 1996 and 2008, the proportion of NEETs aged 16-18 varied by just 2.5 percentage points in England, ending much as it had begun at around 10% as illustrated in Figure 11.1.1 below.

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- ¹¹ Equality and Human Rights Commission and Government Equality Office 2009. *Monitoring update on the impact of the recession on various demographic groups*. December 2009.
- ¹² Office for National Statistics. Labour Market Statistics. Employment rate. It corresponds to the employment rate for the three months to July 2010. Available at: <http://www.statistics.gov.uk/cci/nugget.asp?id=12>
- ¹³ National Equality Panel analysis of the Labour Force Survey (2006-08). Available at: http://www.equalities.gov.uk/national_equality_panel/publications/charts_and_statistical_annex/statistical_annex/employment.aspx
- ¹⁴ The employment rate is calculated by dividing the number of persons aged 15 to 64 in employment by the total population of the same age group. The indicator is based on the EU Labour Force Survey. The survey covers the entire population living in private households and excludes those in collective households such as boarding houses, halls of residence and hospitals. The employed population consists of those persons who during the reference week did any work for pay or profit for at least one hour, or were not working but had jobs from which they were temporarily absent.
- ¹⁵ Eurostat Employment rate by gender 2010. Available at: <http://epp.eurostat.ec.europa.eu/tgm/table.do?tab=table&init=1&plugin=1&language=en&pcode=tsiem010> Accessed 23/07/2010.

Figure 11.1.1 Percentage of 16-18-year-olds NEET in England, 1996-2008¹⁶

Source: Labour Force Survey and Client Caseload Information System SFR series data.

A similar proportion of people were NEET across the three countries in 2008: 10% of 16-18-year-olds England,¹⁷ 12% of 16-18-year-olds in Wales¹⁸ and 13% of 16-19-year-olds in Scotland.¹⁹

¹⁶ Department for Children, Schools and Families (DCSF) 2009. *NEET Statistics – Quarterly Brief*. Available at: <http://www.dcsf.gov.uk/rsgateway/DB/STR/d000870/NEETQuarterlyBriefQ22009.pdf> Accessed 06/08/2010.

¹⁷ Department for Education 2010. *NEET Statistics - Quarterly Brief. May 2010*. Available at: <http://www.dcsf.gov.uk/rsgateway/DB/STR/d000924/NEETQ12010final.pdf> Accessed 19/08/2010.

¹⁸ Welsh Assembly Government 2010. *Young people not in education, employment or training (NEET) (Year to 31 December 2009)*. Statistical Bulletin 59/2010. Available at: <http://wales.gov.uk/docs/statistics/2010/100728sb592010en.pdf> Accessed 19/08/2010.

¹⁹ Scottish Government 2010a. *Local Area Labour Markets in Scotland: Statistics from the Annual Population Survey 2009*. Available at: <http://www.scotland.gov.uk/Publications/2010/07/29103916/19> Accessed 19/08/2010.

Within England, a regional picture on NEET young people is available from the Connexions Client Caseload Information System.²⁰ The data show some regional variation. Young people living in the North East are most likely to be NEET (10%) with those living in the East Midlands, South West and South East almost half as likely (5%, 6% and 6% respectively).²¹ In England, the most significant risk factor in being NEET at 17 is low GCSE outcomes. In 2008, over a third (37%) of young people with no qualifications were NEET at 17, compared to 2% of those with 8 GCSEs at grades A*-C.²²

An international analysis in 2007 looking at the 23 richest countries found that the UK has one of the highest percentages of NEET young people. The only countries with higher rates of NEETs were France, Italy, Austria and Finland.²³

What we know about the situation for different groups

Gender

Working-age population in paid employment

Gendered patterns in employment rates are broadly the same across all three nations: women of all ages are significantly more likely to be in part-time employment than men and less likely to be self-employed (see Table 11.1.1 below).

²⁰ The regional picture on NEET is taken from Connexions' Client Caseload Information System (CCIS), so is not directly comparable with other series presented here. Connexions data shows a lower percentage NEET than either the SFR or LFS, as there are a number of differences in the definitions used. For example, it is based on calendar age and young people taking a formal gap year or in custody are not counted as NEET in this regional data. See Department for Education 2010.

²¹ Smeaton, D., Hudson, M., Radu, D. and Vowden, K. 2010. *The EHRC Triennial Review: Developing the Employment Evidence Base*. Policy Studies Institute. This paper is available on the Equality and Human Rights Commission's Triennial Review web pages. See Table 1.1, page 10, for full regional breakdown.

²² DCSF 2009. *Youth Cohort Study and Longitudinal Study of Young People in England: The Activities and Experiences of 17 year olds: England 2008*. Statistical Bulletin B01/2009. Available at: http://www.dcsf.gov.uk/rsgateway/DB/SBU/b000850/Bullo1_2009textvfinal.pdf Accessed 19/08/2010. Page 31.

²³ UNICEF 2007. *Child poverty in perspective: an overview of child well-being in rich countries*. Available at: http://www.unicef-irc.org/publications/pdf/rc7_eng.pdf Accessed 19/08/2010. Page 20.

This follows a similar trend in the EU where, overall, just under a third (32%) of women employed worked part-time in 2009, a much higher proportion than men at only 8%. Women in the UK are more likely than the average to work part-time with a rate of 43%, a similar proportion to Sweden, Norway and Austria, significantly lower than the 76% of all women employed in the Netherlands who worked on a part-time basis in 2009.²⁴

Table 11.1.1 Employment status by gender and nation, 2006/08²⁵

	Men overall (GB)	Men England	Men Scotland	Men Wales	Women overall	Women England	Women Scotland	Women Wales
Full-time employment rate	59	59	62	56	39	39	42	38
Part-time employment rate	6	6	6	5	26	26	26	26
Self-employment rate	14	14	11	13	5	5	5	4

Source: Labour Force Survey 2006-08.

Note: Data refer to working-age population (men 16-64, women 16-59).

Between 1995-97 and 2006-08, the rise in full-time paid work (excluding self-employment) was greater for women, where it tended to replace inactivity, than it was for men, where it tended to replace unemployment.²⁶ The fastest rise in full-time paid work was for women aged 50-54 (31% to 42%) and for men aged 55-59 (47% to 53%).²⁷

²⁴ Eurostat. 'Persons employed part-time'. 2010 Available at: <http://epp.eurostat.ec.europa.eu/tgm/table.do?tab=table&init=1&plugin=1&language=en&pcode=tps00159> Accessed 23/07/2010.

²⁵ National Equality Panel analysis of the Labour Force Survey (LFS) (2006-08).

²⁶ National Equality Panel analysis comparing LFS data on employment status 1995-97 and 2006-08.

²⁷ National Equality Panel analysis comparing LFS data on employment status 1995-97 and 2006-08.

Table 11.1.2 Employment status by age and gender in Britain, 2006/08²⁸

	Men overall (GB)												
	16-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+	
Full-time employment rate	59	20	56	73	73	71	70	67	64	53	33	5	1
Part-time employment rate	6	20	11	4	3	3	2	3	3	5	8	8	2
Self-employment rate	14	1	5	9	13	16	17	18	18	17	16	8	2
	Women overall (GB)												
	16-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70+	
Full-time employment rate	39	14	45	53	42	36	39	44	42	31	10	2	0
Part-time employment rate	26	30	18	17	25	30	31	29	27	26	19	8	1
Self-employment rate	5	0	2	3	5	6	7	7	7	6	4	2	1

Source: Labour Force Survey 2006-08.

Note: Table refers to working-age population (men 16-64, women 16-59).

As Table 11.1.2 above shows, employment rates differ with age as does the gap between employment rates for men and women. More than 80% of men of working-age are in employment from their late 20s to their early 50s. The proportion who are in employment declines sharply after the age of 60. Women are much less likely than men to be employed full-time or self-employed in their early 30s (due to caring responsibilities), and if they return to work are more likely to take and remain in part-time employment.

²⁸ National Equality Panel Analysis of the Labour Force Survey 2006-08.

Table 11.1.3 Employment status by gender and children aged 0-16 in Britain, 2009²⁹

	Employed	Self-employed	Inactive	Number
All	65	10	16	82,859
Men	65	13	11	41,929
Women	66	6	20	40,930
All with children 0-16	64	10	17	33,311
Men	69	16	6	14,570
Women	59	6	26	18,741
All without children 0-16	66	9	15	49,548
Men	63	12	14	27,359
Women	71	5	15	22,189

Source: Labour Force Survey.

Employment rates are lower, particularly for women, for those with children. As Table 11.1.3 above shows, women with children under the age of 16 are over 4 times as likely as men with children up to the age of 16 to be inactive (26% compared with 6%). The figures for men and women without children under the age of 16 show no significant difference in the rate of inactivity.³⁰ Women aged 25-34 are also much more likely to be inactive due to looking after the family or home (70% of women gave this reason compared to 10% of men in the same age group), and men are more likely to be inactive due to disability or long-term sickness.³¹

This trend seems to hold true across Europe. The European Commission analysis of the European Labour Force Survey, in 2008, found that the employment rate for women aged 25-49 with children under 12 was 67%, compared to 79% for those without children under 12. On the other hand, it found that men with children under 12 had a significantly higher employment rate than those without – 92% compared to 85%.³² However in some countries the impact of parenthood on female employment was more significant than in others – in the UK, Estonia and Malta, parenthood had one of the highest impacts in 2008 at a rate of more than 15%. In contrast, the impact of parenthood on the female employment rate was limited (less than 5%) in Belgium, Portugal and Slovenia and even slightly

²⁹ Smeaton, D. *et al.* 2010. Table 2.2a. Page 33.

³⁰ Smeaton, D. *et al.* 2010. Table 2.2a. Page 33.

³¹ Leaker, D. 2009. 'Economic inactivity', *Economic and Labour Market Review*, 3, 2: 42-46. Table 1. Available at: http://www.statistics.gov.uk/elmr/02_09/downloads/ELMR_Feb09_Leaker2.pdf. Accessed 24/09/2010.

³² European Commission 2010a. *Report on equality between women and men 2010*. Available at: <http://ec.europa.eu/social/BlobServlet?docId=4613&langId=en> Accessed 24/08/2010. Page 16.

positive in Denmark (women with children having a higher employment rate than women without).³³

NEET rate

The patterns of NEET by gender are similar in England and Wales with younger men (16-18) slightly more likely than younger women to be NEET, and this gender pattern reversing after the age of 22.³⁴ This pattern may be due to caring responsibilities (see Box 11.1.1 below). In Scotland, there is generally a higher proportion of 16-19 year-old NEET men than women.³⁵

Box 11.1.1 Related issue: Barriers to education, employment and training

In the *Youth Cohort Study and Longitudinal Study of Young People in England 2009* young people who were NEET at age 17 were asked to state the reasons why they found it difficult to get a job or a place on a course or in training; their responses show significant differences by gender.³⁶

Female respondents who were NEET at age 17 cited the following reasons as the top three barriers to employment, education or training:

- 'have my own children/pregnant' (30%)
- 'lack of qualifications/academic ability' (23%)
- 'lack of experience' (17%)

Whilst the top three reasons that male respondents who were NEET at age 17 cited as barriers to education, employment or training were:

- 'lack of qualifications/academic ability' (25%)
- 'lack of experience' (16%)
- 'immigrants taking jobs' (11%)

The Connexions' Client Caseload Information System data can also be used to build up a picture of what the NEET group looks like. It can be divided into three categories:

³³ European Commission 2010a. Page 16.

³⁴ Smeaton, D. *et al.* 2010. For more details see Table 1.3, page 14.

³⁵ Scottish Government 2010a.

³⁶ DCSF 2009. Page 31.

Box 11.1.1 Continued

Category 1 (Out of Scope): Young people who are doing some activity which is not formally counted as education, employment or training. This includes gap year students and those undertaking voluntary work. It also includes those in custody.

Category 2 (Identifiable Barrier): Young people who have an identifiable barrier to participation, as they have a child or are experiencing serious illness or disability. Some of these individuals may be perfectly able to participate now, but others may require specific help to do so.

Category 3 (No Identifiable Barrier): Young people who are NEET but are not in either of the specific categories outlined above.

An analysis of these categories shows that 55% of the 16-18 NEET group in England are in the 'No Identifiable Barrier' category. However, 68% of 16-18-year-old men who are NEET have no identified barrier to participation, while only 38% of women who are NEET fall into this category. Young men who are NEET are much less likely to have an identified barrier to participation (9%) than young women (42%).³⁷

Age***Working-age population in paid employment***

Although the over 50s have the lowest employment rate for any age group, once unemployed, they remain unemployed for the longest period of time.³⁸ This may be to do with age, or factors that are particular to this generation. However, overall this group has seen a rise in employment rates in recent years – the labour market participation rates of older workers have been improving since 2000. Nevertheless, by 2007 a third of men aged 55-64 and around a third of women 55-59 were unemployed, inactive or retired.³⁹

A survey of 1,494 people aged 50-75 found indicative evidence that amongst those who were unemployed or inactive under the State Pension Age, those stating that they definitely wanted a job declined with age. Base numbers were small, but for both men and women, the proportion stating that they definitely wanted a job was higher for those aged 50-54 than for those aged 55-59 (and higher for men, for those aged 55-59 than 60-64).⁴⁰

³⁷ Department for Education 2010.

³⁸ Smeaton, D. and Vegeris, S. 2009a. *Older people inside and outside the labour market: A review*. Research Report 22. Manchester: Equality and Human Rights Commission. Page 15.

³⁹ Smeaton, D. *et al.* 2010. Page 100.

⁴⁰ Smeaton, D, Vegeris, S. and Sahin-Dikmen, M. 2009b. *Older workers: employment preferences, barriers and solutions*. Research Report 43. Manchester: Equality and Human Rights Commission. Page 52.

The use of flexible working among older people is fairly widespread and an important factor in enabling people to remain in paid employment. Unemployment among the over 50s is primarily due to poor health, but also, predominantly for women, because of caring responsibilities. Among the unemployed who want to work, 37% of men and 50% of women state that they need flexitime or other flexible arrangements to enable their transition back into work.⁴¹

NEET rate

See discussion under gender for details about age. By the time people are 22-24 years old, the incidence of NEET reduces for men (compared to those in younger age groups) and rises for women.⁴²

Socio-economic groups NEET rate

According to the Youth Cohort Study and Longitudinal Study of Young People in England (2008), young people whose parents were in lower supervisory occupations, followed by those whose parents were in intermediate and routine occupations, were most likely to have already started work or enrolled in Government Supported Training. Those whose parents were in professional occupations were most likely to have stayed in full-time education and were least likely to have become NEET: only 3% were NEET compared with 18% whose parents' occupations were 'Other or not classified.'

Table 11.1.4 Main activity of 17-year-olds by parental occupation in England, 2008⁴³

Parental Occupation	Full-time education %	Job with training %	Job without training %	Government supported training %	NEET %	Weighted base
Higher professional	78	6	7	5	3	1,138
Lower professional	73	8	9	6	3	6,236
Intermediate	61	10	14	9	6	3,118
Lower supervisory	50	13	17	12	9	1,357
Routine	50	10	17	9	14	2,811
Other/not classified	57	7	11	7	18	1,957

Source: *Youth Cohort Study and Longitudinal Study of Young People in England: The Activities and Experiences of 17-year-olds: England 2008.*

⁴¹ Smeaton, D. *et al.* 2009a. Page 110.

⁴² Smeaton, D. *et al.* 2010. Table 1.3, page 14.

⁴³ DCSF 2009. Table 5.1.1, page 30.

Young people whose parents have a degree were most likely to have stayed in full-time education and were least likely to have become NEET. Only 3% were NEET compared with 15% whose parents' education was below A-level/not sure as illustrated in Table 11.1.5 below.

Table 11.1.5 Main activity of 17-year-olds by parental education in England, 2008⁴⁴

Parental Occupation	Full-time education %	Job with training %	Job without training %	Government supported training %	NEET %	Weighted base
Degree	83	5	5	4	3	3,595
At least 1 A-level	66	10	11	8	5	3,545
Below A-level/ Not sure	65	10	15	8	11	9,476

Source: *Youth Cohort Study and Longitudinal Study of Young People in England: The Activities and Experiences of 17-year-olds: England 2008*.

Eligibility for free schools meals seems to have an association with NEET status. 17% of NEETs in 2008 were entitled to free school meals compared to 7% who were not NEET.

Table 11.1.6 Main activity of 17-year-olds that were entitled to Free School Meals in year 11 in England, 2008⁴⁵

Free School Meal (Year 11)	Full-time education %	Job with training %	Job without training %	Government supported training %	NEET %	Weighted base
No	63	10	13	8	7	13,432
Yes	57	7	11	7	17	1,922

Source: *Youth Cohort Study and Longitudinal Study of Young People in England: The Activities and Experiences of 17-year-olds: England 2008*.

⁴⁴ DCSF 2009. Table 5.1.1, page 30.

⁴⁵ DCSF 2009. Table 5.1.1, page 30.

Finally, those who persistently truant from school are more likely to be NEET: 28% of those who are NEET at 17 were categorised as persistent truants in Year 11 compared to 5% who had never truanted.⁴⁶

Table 11.1.7 Main activity of 17-year-olds by levels of truancy in year 11 in England, 2008⁴⁷

Levels of truancy in year 11	Full-time education %	Job with training %	Job without training %	Government supported training %	NEET %	Weighted base
Persistent truancy	29	14	19	11	28	625
Occasional truancy	52	12	17	9	10	4,247
No truancy	71	8	10	6	5	10,997

Source: *Youth Cohort Study and Longitudinal Study of Young People in England: The Activities and Experiences of 17 year olds: England 2008*.

Disability

Working-age population in paid employment

Across Britain, the employment rates of disabled adults are very low with only around 50% employed compared to 79% of non-disabled adults (a difference of nearly 30% in employment rates). The employment rate for those with no qualifications is particularly low: between 1974-76 and 2001-03 the employment rate for men with limiting longstanding illness (used as a proxy for disability) with no qualifications halved.⁴⁸ Overall, disability affects work status more than gender or lone parenthood.⁴⁹

As Table 11.1.8 below shows, disabled people continue to experience low employment rates within each nation, but are significantly less likely to be in employment in Wales than in England or Scotland. Employment rates for disabled people are highest in the South East of England. There appears to be an inverse relationship between the proportion of the population categorised as disabled and the proportion of disabled people in employment, so that regions with a high proportion of disabled people tend to have low disability employment rates.⁵⁰

⁴⁶ DCSF 2009. Table 5.1.1, page 30.

⁴⁷ DCSF 2009. Table 5.1.1, page 30.

⁴⁸ Hills, J. *et al.* 2010. Page 272.

⁴⁹ The Poverty Site 2010. Available at www.poverty.org.uk/45/c.pdf. Accessed 23/09/2010.

⁵⁰ Riddell, S. *et al.* 2010. Table 2.1, page 8.

Table 11.1.8 Employment rates of working-age disabled and non-disabled people in Britain, 2008/09⁵¹

Country/Region	Employment rate for non-disabled people	Percentage of the population that is not disabled	Employment rate for disabled people	Percentage of the population that is disabled
Britain	79	82	50	18
England	78	82	51	18
East	81	82	57	17
East Midlands	80	81	56	19
London	73	85	45	15
North East	77	78	45	22
North West	77	80	44	20
South East	82	84	60	16
South West	82	81	55	18
West Midlands	76	81	47	19
Yorkshire and Humber	77	81	50	20
Scotland	82	81	47	19
Wales	77	78	40	22

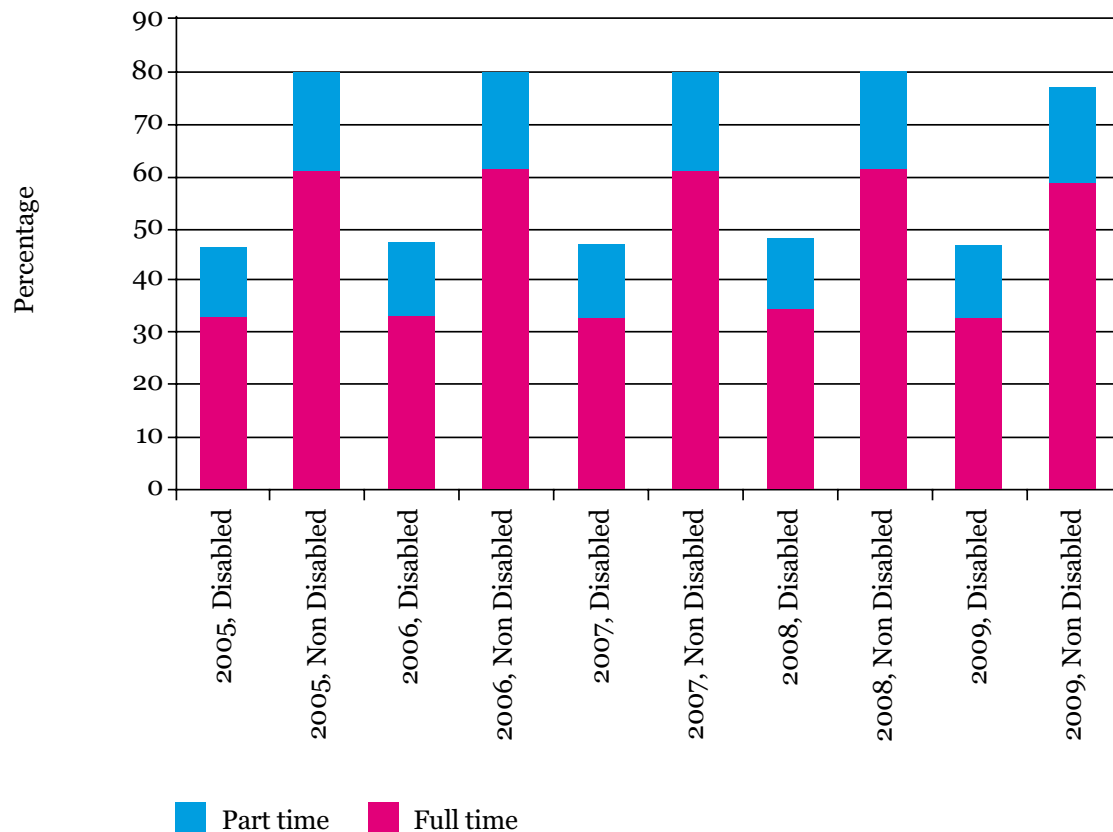
Source: Annual Population Survey July 2008–June 2009.

When disabled people are employed, they are significantly more likely than non-disabled people to work part-time (see Figure 11.1.2, below). In 2009, 33% of disabled people were in full-time employment, compared to 60% of non-disabled people.⁵² The reasons for this (personal choice or discrimination) are not clear.

⁵¹ Riddell, S. Edward, S. Weedon, E. and Ahlgren, L. 2010. *Disability, Skills and Employment: A review of recent statistics and literature on policy and initiatives*. Research Report 59. Manchester: Equality and Human Rights Commission. Table 2.1, page 8.

⁵² Office for Public Management (forthcoming). *Working better for Disabled people: a review of the aspirations, experiences, barriers and solutions for improving labour market opportunities for Disabled people*. Manchester: Equality and Human Rights Commission. Page 13.

Figure 11.1.2 Economic activity of disabled and non-disabled people in Britain, 2002/09⁵³



Source: Labour Labour Force Survey, Q2.

Note: The data cover all working-age adults (men aged 16-64, women aged 16-59) who report they are in employment (including self-employment). Respondents who report a current disability consistent with the Disability Discrimination Act are defined as disabled. The non-disabled population refers to all those not classified as DDA disabled.

Employment rates are particularly low for those that are both DDA and work-limiting disabled. This group includes those that are severely disabled; they experience the greatest labour market disadvantage with an employment rate of 33% in Britain as a whole, and 29% in Scotland and 25% in Wales.⁵⁴ This highlights the importance of not seeing disabled people as a homogeneous group: as shown by Table 11.1.9 below, those with some forms of impairment such as diabetes and skin conditions are almost as likely to be employed as the average. At the other extreme, people with depression or 'bad nerves' have employment rates of around 23%.⁵⁵

⁵³ Equality and Human Rights Commission's analysis for Labour Force Survey data supplied by the Office for Disability Issues.

⁵⁴ Riddell, S. *et al.* citing LFS May 2009. Page 13, table 2.8.

⁵⁵ Office for Disability Issues. *Disability equality indicators*. Employment rate by type of impairment. Available at: <http://www.officefordisability.gov.uk/roadmap2025/indicators.php> Accessed 25/08/2010.

Table 11.1.9 Employment rate (percentages) of working-age adults by type of impairment in Britain, 2008⁵⁶

Impairment type	Employment rate
Arms, hands	42
Legs or feet	39
Back or neck	41
Skin conditions, allergies	62
Chest, breathing problems	60
Heart, blood, pressure, circulation	57
Stomach, liver, kidney, digestion	54
Diabetes	68
Depression, bad nerves	23
Epilepsy	35
Progressive illness	38
Other problems, disabilities	52

Source: Labour Force Survey Q2.

Note:

1. The data covers all working-age adults (men aged 16-64, women aged 16-59) who report they are in employment (including self-employment). Respondents who report a current disability consistent with the Disability Discrimination Act are defined as disabled. Respondents who report a current disability consistent with the Disability Discrimination Act are defined as disabled. The non-disabled population refers to all those not classified as DDA disabled.
2. Some impairment types have been excluded from the table due to consistently small sample sizes over the time period. They are: difficulties in seeing, difficulties in hearing, mental illness, phobias and panics, learning difficulties and speech impediments. Significance testing on these figures has not been carried out.
3. Figures shown are 95% statistically significant. For a more detailed breakdown see source document.

More severe overall impairments are associated with poorer job prospects⁵⁷ and some disabled people face multiple barriers to labour market entry. For example, fewer than 1 in 4 disabled people from a Pakistani background are in employment, and just over 1 in 5 disabled people with no qualifications are employed.⁵⁸

⁵⁶ Office for Disability Issues. *Disability equality indicators*. Employment rate by type of impairment.

⁵⁷ Hills, J. *et al.* 2010. Page 115.

⁵⁸ Office for Disability Issues. Employment Factsheet. Available at: http://www.officefordisability.gov.uk/docs/res/factsheets/Factsheet_Employment.pdf Accessed 06/08/2010.

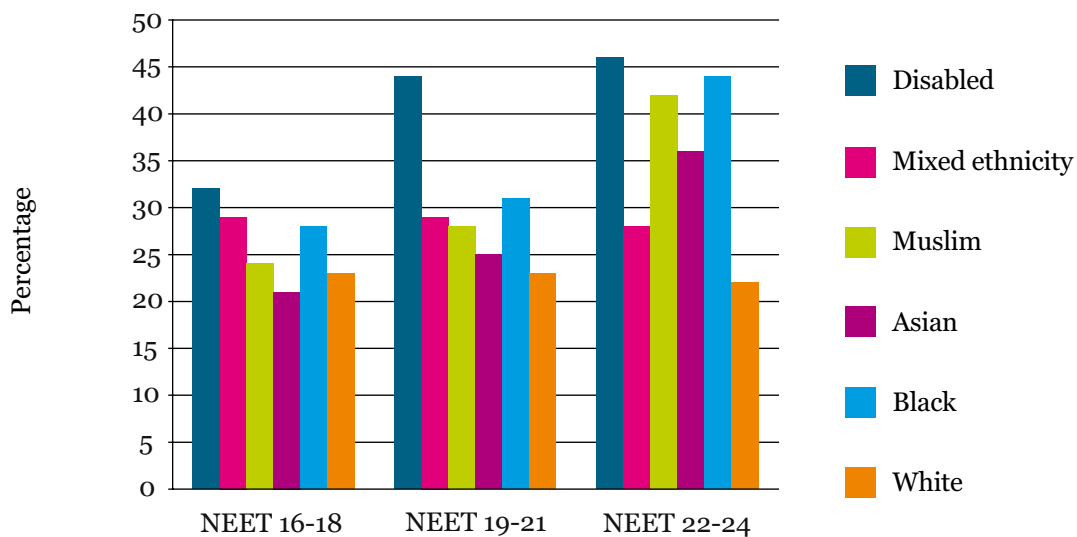
Other research suggests that the employment rate for people with a learning difficulty is as low as 1 in 10.⁵⁹

A large body of research exists on employment barriers for disabled people. Persistent barriers to working for various disabled groups include a lack of access to appropriate transport; a lack of access to information included on websites; and negative attitudes by employers about productivity and the risk of employing disabled people. In addition, in some cases there is a lack of confidence and lack of awareness among disabled people themselves about their rights and opportunities.⁶⁰

NEET rate

Analysis of the 2009 Labour Force Survey indicates that disabled young people in England are more likely to be NEET than any other group at all ages between 16 and 24. Although sample sizes are small, the data indicate that as disabled young people leave the education system their situation deteriorates as they do not get jobs, and by age 19-21 years, nearly half are NEET (44%); this is nearly double the rate for non-disabled people (23%). In 2009 46% of 22-24-year-old disabled people were NEET.⁶¹

Figure 11.1.3 Employment/education status of young people by certain characteristics in England, 2009⁶²



Source: Labour Force Survey 2009q3 and 2009q1 Waves 4 and 5 combined.

⁵⁹ Department of Health 2001. *Valuing people a new strategy for learning disability for the 21st century. A White Paper* London: DH.

⁶⁰ See Office for Public Management (forthcoming). Chapter 6, pages 52-72 for a detailed analysis on barriers to employment.

⁶¹ Smeaton, D. *et al.* 2010, analysis of LFS.

⁶² Smeaton, D. *et al.* 2010, analysis of LFS. Tables 1.3a, 1.3b, 1.3c, 1.3d and 1.3e, pages 15-16.

Ethnicity

Working-age population in paid employment

Overall, it seems that employment gaps for ethnic groups are narrowing over time, although differences remain considerable for the Bangladeshi and Pakistani populations as shown in Table 11.1.9.⁶³

Table 11.1.9 Data showing employment rate for the working-age population by gender and ethnicity in the UK, 2006/08⁶⁴

		Employed full-time	Employed part-time	Self-employed
Men	White British	60	5	14
	Other White	63	5	15
	White and Black Caribbean	41	10	6
	White and Black African	48	12	5
	White and Asian	46	6	11
	Other Mixed	49	8	12
	Indian	58	7	13
	Pakistani	35	10	21
	Bangladeshi	34	17	11
	Other Asian	49	11	13
	Black Caribbean	48	7	12
	Black African	53	11	6
	Other Black	49	9	9
	Chinese	43	8	13
	Other	49	9	11

Continued...

Bangladeshi and Pakistani men and women have a much reduced chance of working with only 1 in 4 Bangladeshi and Pakistani women working compared to nearly 3 in 4 White British women. For men, Pakistanis and Bangladeshis are also least likely to be employed at a rate of 66% and 62% respectively, compared to a rate of around 80% for Indian, Other White and White British men.⁶⁵

⁶³ Hills, J. *et al.* 2010, analysis comparing LFS data on employment status 1995-97 and 2006-08. Page 273.

⁶⁴ National Equality Panel analysis of the Labour Force Survey (2006-08). Employment Table EMO8 2.4.

⁶⁵ Hills, J. *et al.* 2010. Figure 4.2(a) Page 113.

Table 11.1.9 Continued

		Employed full-time	Employed part-time	Self- employed
Women	White British	39	28	5
	Other White	44	19	7
	White and Black Caribbean	35	22	2
	White and Black African	36	23	6
	White and Asian	38	21	5
	Other Mixed	41	19	6
	Indian	39	18	4
	Pakistani	13	10	3
	Bangladeshi	13	9	1
	Other Asian	33	18	4
	Black Caribbean	46	18	3
	Black African	37	17	2
	Other Black	41	16	4
	Chinese	34	18	8
	Other	32	14	4

Source: Labour Force Survey 2006/08.

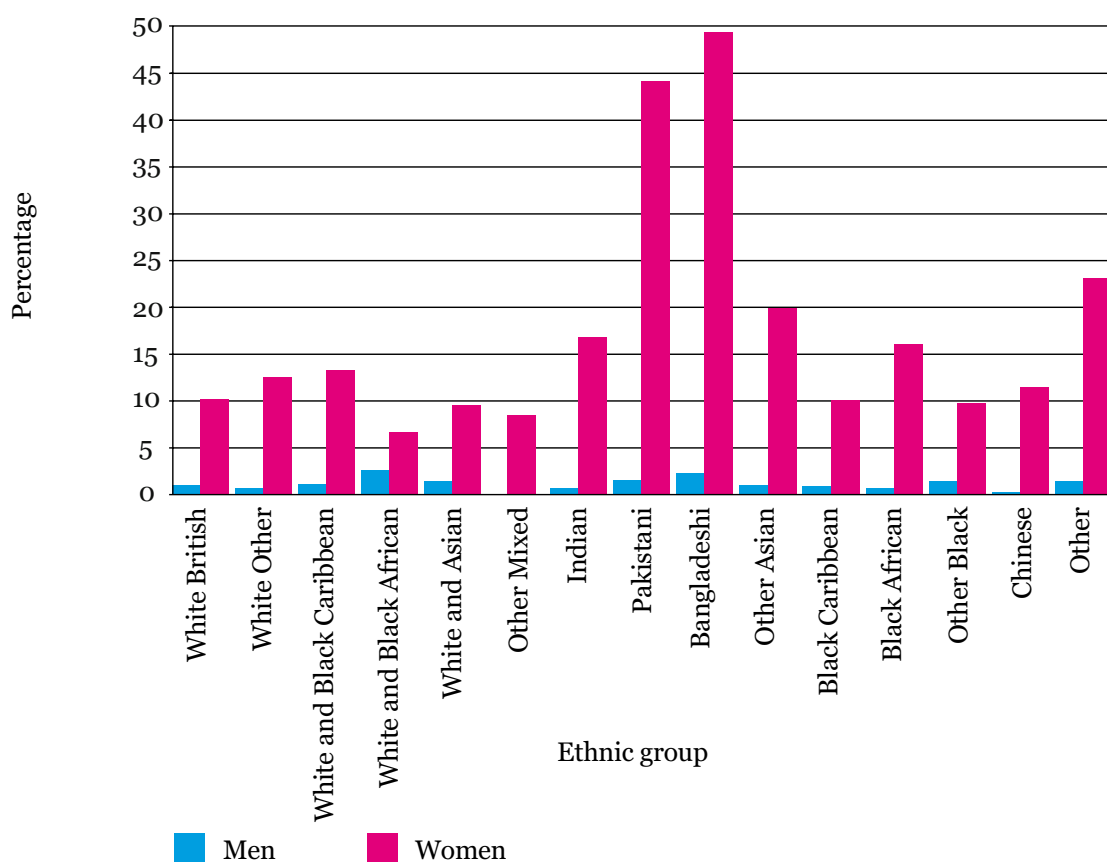
Note: Tables referring to working-age population (men 16-64, women 16-59).

The low labour market participation among Bangladeshi and Pakistani women, which corresponds to a similar picture for Muslim women, persists to include British-born members of this group despite changing attitudes and improved education levels. Almost half of Bangladeshi (49%) and Pakistani (44%) women are economically inactive, looking after the family or home, compared to 20% or fewer of other groups as illustrated in Figure 11.1.4.⁶⁶ It is hard to measure the extent to which this reflects personal choice, cultural pressures, discrimination or lack of opportunities. Even comparing those with degrees, Pakistani and Bangladeshi women are 11 percentage points less likely to be employed than White British women.⁶⁷

⁶⁶ Hills, J. *et al.* 2010. Figure 4.2(b), page 113. Data are for working-age population.

⁶⁷ Hills, J. *et al.* 2010. Page 224.

Figure 11.1.4 Percentage of men and women economically inactive and looking after the family/home by gender and ethnicity in the UK, 2006/08⁶⁸



Source: Labour Force Survey 2006/08 (adjusted for yearly variation).

Note: Working-age population (men 16-64, women 16-59).

Black Caribbean women are more likely than any other group of women to work full-time, although less likely than average to work part-time. There are gender differences in the Black Caribbean population. Out of all ethnic minority women, Black Caribbean women are the most likely to be employed; Black Caribbean men fall around mid-way on the employment scale.⁶⁹ Consequently, the overall employment rates for Black Caribbean women and men are very similar.

Local research shows that on many Gypsy and Traveller sites, only a small minority of households are engaged in paid work. The evidence points towards a strong preference for male self-employment: women tend not to work outside the home, but are sometimes engaged in traditional 'craft' work.⁷⁰ However, some

⁶⁸ National Equality Panel analysis of the Labour Force Survey (2006-08).

⁶⁹ Hills, J. *et al.* 2010.

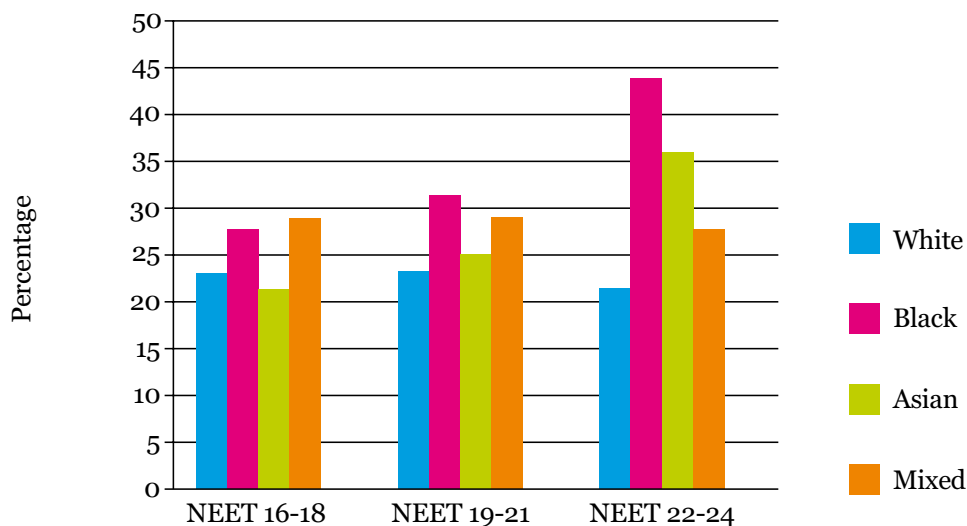
⁷⁰ Cemlyn, S. Greenfields, M. Burnett, S. Mathew, Z. and Whitwell, C. 2009. *Inequalities experienced by Gypsy and Traveller communities*. Research Report 12. Manchester: Equality and Human Rights Commission. Pages 49-53.

recent qualitative evidence suggests that married women whose children are in school are beginning to enter employment.⁷¹

NEET rate

Some ethnic minority groups are also much more likely to experience periods outside employment, education and training as young adults. Around 30% of Black and Mixed Race young people between the ages of 19 and 21 are NEET in England, and 25% of Asian young people.⁷² The number of White and Mixed Race NEET young people declines with age, but rises for Asian and Black people. By the age of 22-24, 44% of Black young people are NEET. When comparing the White British population with ethnic minority groups overall, these differences are not explained by an education gap, as a higher proportion of White people than ethnic minorities leave school at 16,⁷³ and a higher proportion of ethnic minorities than White people go to university.⁷⁴

Figure 11.1.5 Proportion of NEETs by age and ethnicity in England, 2009⁷⁵



Source: Labour Force Survey 2009q3 and 2009q1 Waves 4 and 5 combined.

⁷¹ Cemlyn, S. *et al.* 2009. Page 114.

⁷² Smeaton, D. *et al.* 2010. LFS 2009q3 and 2009q1 Waves 4 and 5 combined. Table 1.3, page 14.

⁷³ The Poverty Site 2010. *Not in education, employment or training*. Analysis of the LFS. Available at: <http://www.poverty.org.uk/32/index.shtml?2> Accessed 19/08/2010.

⁷⁴ Higher Education Statistics Authority (HESA) 2010. *Students in Higher Education Institutions 2008/09*. Cheltenham: HESA.

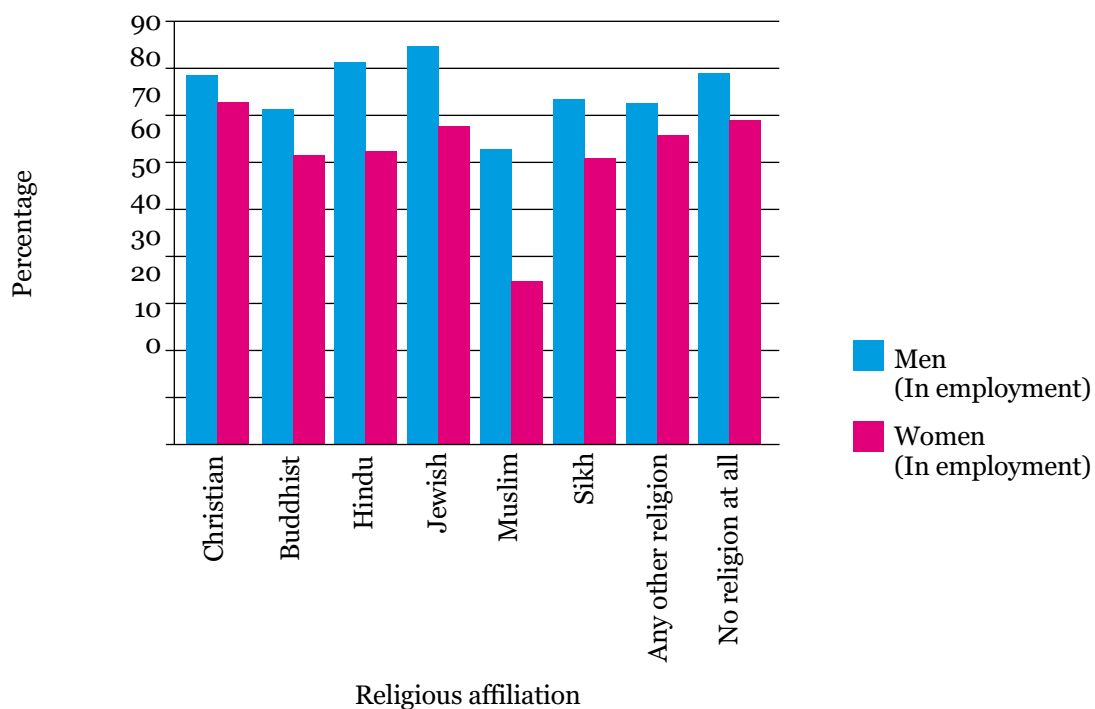
⁷⁵ Smeaton, D. *et al.* 2010. Table 1.3, page 14.

Religion or belief

While there is some variation in employment rates among different religious groups, the most significant gap is for Muslim people who have the lowest rates of employment in the UK as shown in Figure 11.1.6.⁷⁶ In the UK only 47% of Muslim men and 24% of Muslim women are employed; male Muslim unemployment is 9% compared to the national average of 5%.⁷⁷

Research suggests that despite their high levels of education and desire to work, British Muslim women continue to do less well in the labour market. An analysis of 2005 Annual Population Survey statistics shows that 51% of second generation British Muslim women (those born in Britain) are inactive in the labour market, compared to only 17% of second generation Hindu women. Of second generation British Muslim women, 13% are unemployed, compared to 4% of second generation Hindu and Sikh women, and 3% of Christian women.⁷⁸ (See Box 11.1.2 below for further discussion.)

Figure 11.1.6 Percentage of people in employment by gender and religious affiliation in the UK, 2006/08⁷⁹



Source: Labour Force Survey 2006/08 (adjusted for yearly variation).

Note: Working-age population (men 16-64, women 16-59).

⁷⁶ National Equality Panel Analysis of the LFS (2006-08).

⁷⁷ Hills, J. et al. 2010. Page 114.

⁷⁸ Young Foundation and London Development Agency 2008 *Valuing Family Valuing Work: British Muslim Women and the Labour Market*. (London: Young Foundation/LDA). Page 5.

⁷⁹ National Equality Panel analysis of the LFS (2006-08).

Box 11.1.2 Related issue: Reasons for non-employment – Muslim women

Across the UK, according to the 2006-08 Labour Force Survey, 14% of Muslim women were employed full-time, 10% were employed part-time and 2% were self-employed. Moreover, 42% were categorised as 'inactive, looking after the family, home'. This compares to 10% of Christian women and 16% of Hindu women.⁸⁰

However, small-scale survey research of 634 Muslim women with children found that the majority (57%) wanted to work. Of those who said they wanted to work, a quarter (24%) said that they would need more support from their families to do so, 22% said they needed better access to childcare, and 20% said they would need more practical support in terms of English language lessons.⁸¹

While many first generation Muslim women face language barriers, have low qualifications, non-transferable educations and skills, and a limited understanding of the UK labour market, this is far less true of those born in the UK or those who arrived as children. Yet research suggests that despite high levels of education, positive attitudes and family support to work among this second generation of Muslim women, just under half remain economically inactive, almost three times the rate of second generation Hindu women.⁸²

NEET rate

As young adults, Muslims are also more likely to experience periods outside education, employment or training, than Christians or those of no religion. Young Muslims are more likely to be NEET by age 19-21 than Christian young people, or those of no religion (28% compared to an average of 23%). This worsens with age: by age 22-24 Muslims are among those most likely to be NEET (42%). Those of no-religion are also disproportionately likely to be NEET between 16-21 years, but thereafter are close to the average. Christians remain close to the average at all ages.⁸³

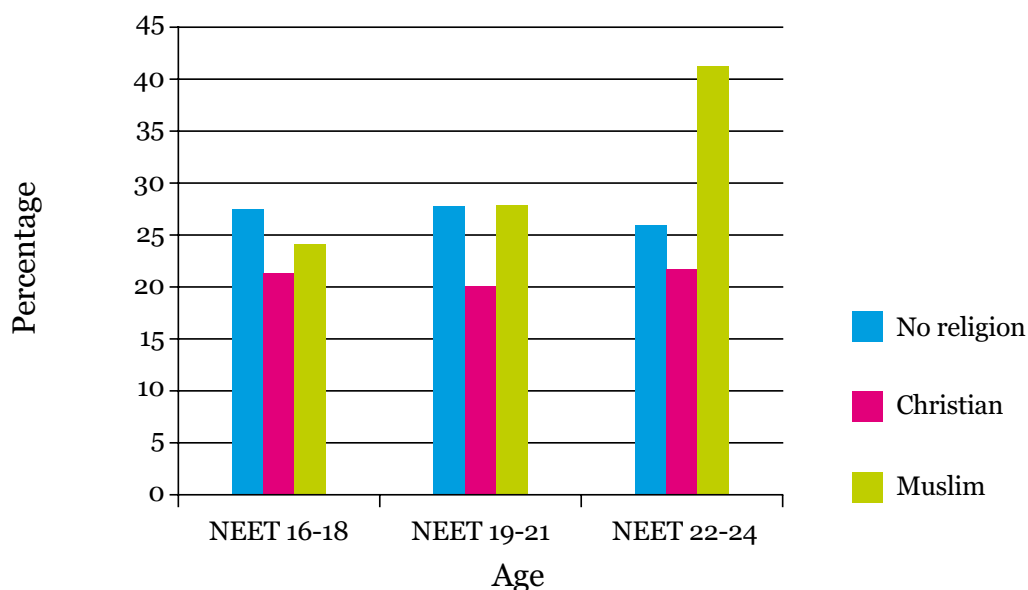
⁸⁰ National Equality Panel analysis of the LFS (2006-08).

⁸¹ Quilliam Foundation 2009. *Religion; Immigrant, Muslim, Female: Triple Paralysis?* Available at: http://www.quilliamfoundation.org/images/stories/pdfs/quilliam_immigrantmuslimfemale_triple_paralysis_july_2009.pdf Accessed 19/08/2010.

⁸² Young Foundation and London Development Agency 2008. Page 5.

⁸³ Smeaton, D. *et al.* 2010, analysis of LFS. Table 1.3, page 14.

Figure 11.1.7 Proportion of NEETs that are Christian, Muslims or have no religion in England, 2009⁸⁴



Source: Labour Force Survey 2009q3 and 2009q1. Waves 4 and 5 combined.

Sexual orientation

There are no available data on employment or NEET status by sexual orientation. For employment rates, the Labour Force Survey collects figures on people living together in same-sex couples, but these have a low level of reliability due to the small sample size and do not reflect the experiences of the wider LGB population. The data suggest that about two-thirds of women living in same-sex couples work full-time – a much higher proportion than women overall, but a similar rate to all women without children. Men in same-sex couples have similar employment rates to men in mixed-sex couples.

Transgender

Given the size of the transgender population, national survey evidence is unable to shed light on their economic position. However, a small 2008 survey of 71 respondents by the Scottish Transgender Alliance found that among respondents there was a high unemployment rate with 37% (N=26) receiving out of work benefits. There was also a high reported self-employment rate at 20% (N=14) perhaps because some members of the transgender community avoid situations where they do not have control over their work environment and the people with whom they have day-to-day contact.⁸⁵

⁸⁴ Smeaton, D. *et al.* 2010, analysis of LFS. 2009q3 and 2009q1. Waves 4 and 5 combined. Table 1.3, page 14.

⁸⁵ Hills, J. *et al.* 2010. Page 221.

In a survey on experiences of the workplace (to which 106 trans people responded overall), 78 out of 91 people were employed at the time of participation, mostly on permanent contracts, while 14% were unemployed, which is a considerably higher percentage than the national average of 5%.⁸⁶ Although the participant numbers are small in this research, and data should therefore be treated with caution, this finding is in line with other research which highlights not only the greater than national-average levels of trans-unemployment, but also the enduring nature of this trend.⁸⁷

⁸⁶ Rundall, E. (forthcoming) Transmen's and Transwomen's Experiences in UK Workplaces, unpublished PhD research findings. Oxford Brookes University.

⁸⁷ Whittle, S. (2002) *Respect and Equality: Transsexual and Transgender Rights*. London: Cavendish Publishing Limited; Whittle, S. Turner, L. and Al-Alami, M. (2007). *Engendered Penalties: Transgender and Transsexual People's Experiences of Inequality and Discrimination*. London: The Equalities Review.

11.2 What we know about pay gaps

Measure:

Pay gap - Median hourly pay of employees (excluding unpaid overtime)

How this measure works:

We are able to report on this measure for Britain using the Annual Survey for Hours and Earnings 2009, and the Labour Force Survey 2006-08.

The gender pay gap is usually calculated from data published in the Annual Survey for Hours and Earnings. The Annual Survey for Hours and Earnings is a survey of employers, rather than of individuals, and as such is more likely to report actual earnings accurately. It is a particularly rich source of data on earnings by occupation, industry and region. This source can also be used to examine pay gaps by age. However, unlike the Labour Force Survey, the Annual Survey for Hours and Earnings contains no information on other equality characteristics. An analysis of the 2006-08 Labour Force Survey for the National Equality Panel therefore provides data for this measure where these are not available in the Annual Survey for Hours and Earnings.

Average pay is measured using either the median or the mean. The median is not affected by extreme values at the top and bottom of the distribution, such as the changes to earnings of small numbers of very high earners. However, unlike the median, the mean captures the full pay gap and does not exclude those on very high earnings (who tend to be the most privileged group – White, non-disabled males). The median has been used here for consistency with the Equality Measurement Framework. Although median hourly pay provides a useful comparison between the earnings of different groups, it does not necessarily indicate differences in rates of pay for comparable jobs. Pay medians are affected by the different work patterns of men and women, such as the proportions in different occupations, their length of time in jobs and whether they work full-time or part-time.

Analysis of the Labour Force Survey allows disaggregation by most equality characteristics, apart from transgender. Sexual orientation data are limited to those living in same-sex couples. In these data, single lesbians and gay men cannot be identified. For these groups we draw on general literature which indicates some possible issues they may face. Overall, the gender pay gap is substantial and the reasons for this have been well researched. There is less evidence on pay gaps by ethnicity, disability, religion or belief and sexual orientation.

Other evidence has been used to draw out relevant related points. For example, the indicator does not include the part-time gender pay gap which hides an enormous area of disadvantage in remuneration. This is calculated by comparing the hourly earnings of men working full-time and women working part-time. A similar calculation can be made for other groups.

Overview

The pay gap is stubbornly persistent. Women, disabled people, Pakistani, Bangladeshi and Muslim men and women have lower pay than White Christian men (the reference group) in England, Scotland and Wales. Between men and women the pay gap is smallest for those in their 20s at 5%, but still in favour of men. This is even though women in this age group have slightly higher qualifications than men.⁸⁸

The gender pay gap has been declining continuously for the last 30 years.⁸⁹ The full-time gender pay gap (as measured by the median hourly pay excluding overtime) narrowed between 2008 and 2009 from 12.6%, to 12.2%. However, longer-term progress seems to have stalled, which was noted with concern by the Committee on the Covenant on Economic, Social and Cultural Rights in 2008.⁹⁰

These positive changes are accompanied by some developments which are less positive: **the decline has been confined to the full-time gender pay gap, and the part-time gender pay gap (women working part-time versus men working full-time) has remained fairly constant.** (A corollary of this is that the pay gap between women working full-time and women working part-time has widened over the past 30 years).⁹¹ Also, for full-time employment, the gap at the lower end of the pay distribution has declined more rapidly than at other parts of the distribution.

The part-time pay gap particularly affects women, disabled people and Bangladeshi men who are disproportionately found in part-time work (see Indicator 1).

⁸⁸ Hills, J. *et al.* 2010. Page 128, drawing on LFS data for 2006-08.

⁸⁹ Metcalf, H. 2009. *Pay gaps across the equality strands: a review*. Research Report 14. Manchester: Equality and Human Rights Commission. Page 15.

⁹⁰ United Nations *Committee on Economic, Social and Cultural Rights*. 42nd session Geneva, 4-22 May 2009. UN document number: E/C.12/GBR/CO/5. Page 5.

⁹¹ Metcalf, H. 2009, drawing on Annual Survey of Hours and Earnings (ASHE) data. Page 15.

The pay gap is greater in some sectors and job types. An important consideration over the next few years, if earlier public sector growth is reversed, is that the pay gap in the public sector is relatively low at 21% for all employees in the UK in 2009, compared to the 29% gap for all employees in the private sector.⁹²

What we know about the overall situation and trends

The gender pay gap (as measured by median hourly pay excluding overtime) narrowed between 2008 and 2009. The gender pay gap for all employees decreased to 22% in 2009 from 22.5% in 2008;⁹³ the full-time gender pay gap fell from 12.6% in 2008 to 12.2% in 2009.⁹⁴ The part-time gender pay gap is the difference between the pay rate of men working full-time and women working part-time. This gap fell from 39.9% in 2008 to 39.4% in 2009.⁹⁵ However, at the same time we know that women working part-time earned 3.6% more than men working part-time in 2008, although this small premium declined to 1.9% in 2009.⁹⁶ These overall figures are the result of a set of interrelated factors including differences in returns to work, qualifications, average hours worked, penalties at different ages, occupational segregation and trends among different ethnic groups.

What we know about the situation for different groups

Gender and age

Across Britain, the gender pay gap varies with age. The average earnings of most groups rise in the early part of the lifecycle and decline in the latter. However, the peak is different for women largely because of the impact of having children (women's pay peaks at 35-39 years compared to men whose pay peaks at 40-44 years).⁹⁷ The full-time gender pay gap is lowest for the under 30s, but is still 5% in favour of men, then steadily grows as workers get older reaching 27% by the time workers are aged 40.⁹⁸

⁹² Office for National Statistics (ONS), Gender pay gap, drawing on ASHE data. Available at <http://www.statistics.gov.uk/cci/nugget.asp?id=167>. Accessed 24/09/2010.

⁹³ ONS, Gender pay gap, drawing on ASHE data.

⁹⁴ Metcalf, H. 2009. Page 5.

⁹⁵ Based on data shown in Office for National Statistics (ONS) 2009. *Annual Survey of Hours and Earnings*. ONS Statistical Bulletin. Available at: <http://www.statistics.gov.uk/pdftdir/ashe1109.pdf>

⁹⁶ ONS 2009. Page 3.

⁹⁷ Longhi, S. and Platt, L. 2008. *Pay Gaps across Equalities Areas*. Research Report 9 Manchester: Equalities and Human Rights Commission. This is based on an analysis of the 2004-07 LFS.

⁹⁸ Hills, J. *et al.* 2010. Page 128.

Figure 11.2.1 highlights age pay gaps in relation to men aged 40-49, using UK data from 2004-07. Differences in levels of pay are small among men and women in their 20s but, for both groups, their average earnings are significantly lower than those of middle aged men with a pay gap of around 50% among 20-24-year-olds and 30% among 25-29-year-olds.⁹⁹ For women in their 30s, 40s and 50s, earnings are far lower than those of men aged 40-49, with pay gaps of between 15% and 28%.¹⁰⁰ Men also experience an age pay gap. Full-time workers in their 50s in 2005 earned, on average, 13% less an hour than full-time workers in their 40s.¹⁰¹ For men aged 60-64 the pay gap reached 25% but was 10% or less for men in their 30s and early 50s.¹⁰²

Box 11.2.1 Related issue: Measuring the gender pay gap

As outlined in the 'How this measure works' box, the pay gap can be measured using either the median or the mean. Measuring the gender pay gap using the mean, and using Annual Survey for Hours and Earnings 2009 data produces the following results for the UK:

Between 2008 and 2009 the **full-time gender pay gap** decreased from 17.3% to 16.4% in the UK, a decline of 0.9 percentage points. The equivalent figures for the median are 12.6% in 2008 and 12.2% in 2009. In 2009, the full-time gender pay gap was 12.2% in Scotland (median-based: 8.6%) and 8.9% in Wales (median-based: 12.7%).

The part-time gender pay gap can also be measured in a number of ways.¹⁰³ Here we use women's average hourly part-time pay compared to men's full-time pay.

The **part-time gender pay gap**, decreased from 36.9% to 35.3%, a decline of 1.6 percentage points between 2008 and 2009. (Equivalent median-based figures are 39.9% in 2008 and 39.4% in 2009.) The gap between average hourly part-time and full-time pay for male employees did not show a similar decrease, it was 25.7% in 2008 and 25.5% in 2009. (Median-based figures are 42% in 2008 and 40.6% in 2009).

⁹⁹ Smeaton, D. *et al.* 2010. Page 78.

¹⁰⁰ Smeaton, D. *et al.* 2010, drawing on LFS data. Page 78.

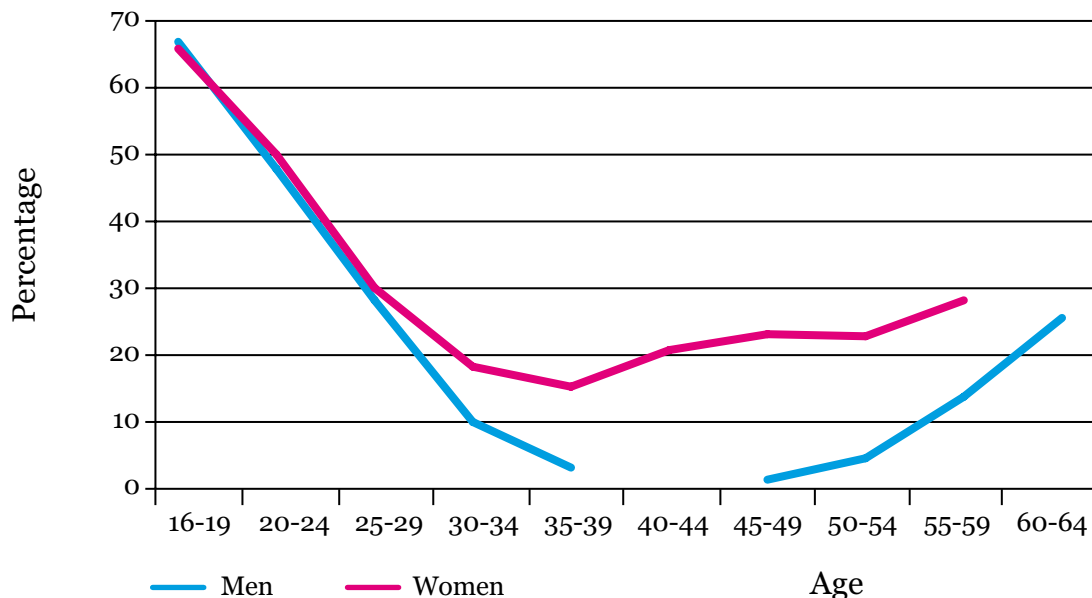
¹⁰¹ Smeaton, D. *et al.* 2010. Page 78.

¹⁰² Smeaton, D. *et al.* 2010, drawing on LFS data. Page 78.

¹⁰³ Hicks, S. and Thomas, J. 2009. *Presentation of the Gender Pay Gap*, ONS Position Paper. Available at: <http://www.statistics.gov.uk/articles/nojournal/PresentationoftheGenderPayGap.pdf> Accessed 23/09/2010.

Box 11.2.1 Continued

In 2009 the part-time gender pay gap was 32.3% in Scotland (median-based: 35.1%) and 30.8% in Wales (median-based: 37.1%).

Figure 11.2.1 Pay gaps by age in the UK, 2004/07¹⁰⁴

Source: Annual Survey of Hours and Earnings.

Note: Reference group men aged 40-49.

In 2009, the largest pay gaps for full-time, part-time and all employees were in the 40-49 age group at 18%, 24% and 30% respectively.¹⁰⁵ It is important, however, to be aware that older people have had very different life experiences, as well as different qualifications, occupations, and employment histories than younger people can expect to experience in the future. Thus, we should be wary of seeing these effects as necessarily age-related.¹⁰⁶

Recent analysis found that men and women with similar qualifications face substantial pay differences (see Box 11.2.1 below).¹⁰⁷ However, it is hard to separate out the effect of career breaks. Importantly, the influence of motherhood on the gender pay gap is apparent well before women become mothers. A study of graduates three years post graduation found that gender differences in career

¹⁰⁴ Smeaton, D. et al. 2010. Figure 2.1, page 79.

¹⁰⁵ Metcalf, H. 2009, drawing on ASHE data.

¹⁰⁶ Longhi, S. and Platt, L. 2008. Page 33.

¹⁰⁷ Machin, S. Murphy, R. and Soobedar, Z. 2009. *Differences in labour market gains from higher education participation*. Research commissioned by the National Equality Panel. Available at: <http://www.equalities.gov.uk/pdf/Variation%20in%20gains%20from%20university%20education.pdf> Accessed 23/09/2010.

expectations explained 12% of the gender pay gap, with women much more likely to expect to take a break for family reasons than men (and men expecting their partners to do this).¹⁰⁸ This highlights how childcare issues may impinge on pay even prior to motherhood, given the expected household division of caring responsibilities.

The level of earnings penalty that women face as a result of having children varies greatly between better and worse educated women. Those with degrees are estimated to face only a 4% loss in lifetime earnings as a result of motherhood, while mothers with mid-level qualifications face a 25% loss and those with no qualifications a 58% loss.¹⁰⁹ This relates to better educated mothers' greater ability to retain a strong position in the labour market, and points to the need to spread such opportunities to other working mothers.

A wide range of research has consistently identified a range of contributors to the gender pay gap. Occupational concentration is consistently found to be one of the most powerful factors in explaining the gender pay gap. Men's concentration in higher paying industries and women's in the public sector contributes strongly to the gender pay gap for graduates from early in their careers.¹¹⁰ Lower labour market returns to education also contribute. See Box 11.2.2 (for further discussion of this issue).

Disability

Pay gaps are a persistent feature of the experiences of disabled men and women. This has not significantly changed over time as Figure 11.2.2 illustrates.¹¹¹

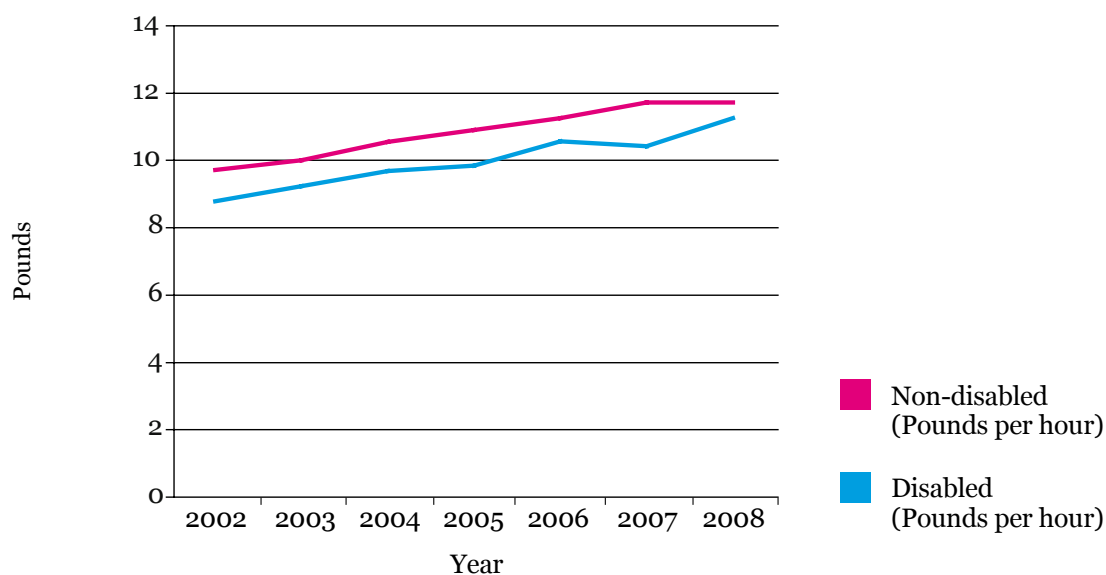
¹⁰⁸ Chevalier, A. 2007. 'Education, Occupation and Career Expectations: Determinants of the Gender Pay Gap for UK Graduates', *Oxford Bulletin of Economics and Statistics*, 69, 6: 819-842.

¹⁰⁹ Metcalf, H. 2009, page 15.

¹¹⁰ See Metcalf, H. 2009. Pages 20-21.

¹¹¹ Office for Disability Issues. *Disability equality indicators*. (Between 2005 and 2008, average hourly wage rates have increased from £9.78 to £11.19 amongst disabled people and increased from £10.84 to £11.96 amongst non-disabled people).

Figure 11.2.2 Changes in hourly pay over time by disability in Britain, 2002-08¹¹²



Source: Labour Force Survey, Q2.

In 2009, disabled men experienced a pay gap of 11% compared with non-disabled men, while the gap between disabled women and non-disabled men was double this figure at 22%. Taking into account their other characteristics, including qualification levels, the pay penalty experienced by disabled men falls a little, compared with their pay gap, to 8% while that of women increases to 31%.¹¹³ Small-scale research on people with learning disabilities in England collected information on gross weekly pay of people with learning disabilities in paid employment.¹¹⁴ It showed that those with severe learning disabilities are very likely to be in a low paid job with 87% of those surveyed earning less than £200 per week.¹¹⁵

¹¹² Office for Disability Issues *Disability equality indicators*.

¹¹³ Smeaton, D. *et al.* 2010. Page 78.

¹¹⁴ Emerson, E. and Hatton, C. 2008. *People with Learning Disabilities in England*. Lancaster: Centre for Disability Research, Lancaster University.

¹¹⁵ Emmerson, E. and Hatton, C. 2008.

Table 11.2.1 Hourly pay by gender and disability compared to non-disabled men in Britain, 2004/07¹¹⁶

	Average pay (£)		Pay penalty (%)
Men			
Non-disabled	12	Ref	Ref
Disabled	12	11	8
Women			
Non-disabled	11	16	26
Disabled	10	22	31

Source: Labour Force Survey.

Note: Ref = Reference group.

Ethnicity

A combination of gender, ethnic group and religion (using White British Christian men as the reference group) illustrates that some groups experience particular disadvantage in relation to pay. In 2004-07 White British women experienced a pay gap of 16%. This rose to 21% for Black African women and 26% for Pakistani women as shown in Table 11.2.2.¹¹⁷ All women, regardless of ethno-religious group, experienced large pay penalties with Chinese and Pakistani Muslim women experiencing the largest penalties.¹¹⁸

In the same time period, Muslim men whether Bangladeshi or Pakistani earned less than might be expected given their qualifications, age and occupation, by 13% and 21% respectively. Black African Christian and Chinese men also experienced pay penalties of 13% and 11%.

Recent research found that Black and Asian groups earn less than White British people with the same qualification level and in particular Black male graduates earn 24% less than White British male graduates.¹¹⁹ This could partly be attributable to differences in the type of university attended (see Chapter 10: Education), but is part of an overall picture of unequal outcomes.

¹¹⁶ Smeaton, D. *et al.* 2010. Table 2.16, page 78.

¹¹⁷ Longhi, S. and Platt, L. 2008 drawing on LFS data. Page 18.

¹¹⁸ Smeaton, D. *et al.* 2010, drawing on LFS data. Page 76.

¹¹⁹ Metcalf, H. 2009. Page 37.

Table 11.2.2 Hourly pay by gender, ethnicity and religion compared to White British Christian men in Britain, 2004/07¹²⁰

	Average pay (£)	Pay penalty (%)
Men		
White British, Christian	10	Ref
White British, Jewish	13	-24
Indian, Hindu	10	4
Indian, Sikh	10	NS
Pakistani, Muslim	8	13
Bangladeshi, Muslim	8	21
Black Caribbean, Christian	10	NS
Black African, Christian	9	13
Chinese, no religion	9	11
Women		
White British, Christian	8	26
White British, Jewish	9	14
Indian, Hindu	8	25
Indian, Sikh	8	26
Pakistani, Muslim	7	31
Bangladeshi, Muslim	8	22
Black Caribbean, Christian	8	22
Black African, Christian	7	26
Chinese, no religion	7	35

Source: Labour Force Survey.

Notes:

1. NS = the penalty is not statistically significant.
2. Other characteristics set to: born in the UK; non-disabled; married or cohabiting, without dependent children; aged 40-44; level 2 qualifications; in a skilled trade.

Box 11.2.2 Related issue: Labour market gains from qualifications

The National Equality Panel commissioned research into differences in the labour market gains from qualifications.¹²¹ Using data from the Labour Force Surveys post-2001, the report first compares the raw differences in highest qualifications, main activity and earnings for different genders, ethnic groups and disability groups, and then uses statistical analyses to examine if there are significant differences in the benefits of qualifications to different groups.

¹²⁰ Smeaton, D. *et al.* 2010. Table 2.15, page 77 (based on LFS data).

¹²¹ Machin, S. *et al.* 2009.

Box 11.2.2 Continued

The research finds that an individual's highest qualification is highly correlated with employment and earnings. However, the labour market outcomes in terms of employment rates and earnings of some groups are significantly worse than others, even when comparing individuals with the same highest qualification level. Key findings of the research included:

- Significant pay and employment gaps between men and women (although it is not clear if these gaps are caused by the loss of experience and career breaks commonly associated with child bearing or if they are generated from systematic disadvantage (including discrimination) based on the characteristics of females, or a combination of both).
- Black, Pakistani/Bangladeshi and Other Asian groups generally have significantly worse outcomes in terms of employment and earnings, compared to White British people. This difference is particularly stark at the degree level, where earnings of Black male graduates are 24% lower than those of White British male graduates, even when holding occupation and industry constant.

However, it is important to note that these large differences may be explained by factors that we cannot account for with these data, such as the type of university attended.

Religion or belief

Looking at pay gaps by religion across Britain, recent evidence indicates there are no significant differences between men of different religious groups, with the exception of Muslims. Muslim men experienced a pay gap of 17% compared to White British men in 2004-07, while Jewish men were the highest average earners experiencing a pay premium of 37%. Overall, all women consistently earn less than men (apart from Jewish women) with Muslim and Sikh women faring least well, with pay gaps of 22% in 2004-07.¹²²

¹²² Smeaton, D. *et al.* 2010. Page 75.

Table 11.2.3 Hourly pay by gender and religious affiliation compared to Christian men in Britain, 2004/07¹²³

	Average pay (£)	Pay (%)	
Men			
Christian	13	Ref	
Buddhist	12	7	ns
Hindu	13	2.5	ns
Jewish	18	-37	
Muslim	11	17	
Sikh	12	6	ns
No religion	13	1.2	ns
Women			
Christian	11	16	
Buddhist	12	9	ns
Hindu	11	12	
Jewish	14	-8	ns
Muslim	10	22	
Sikh	10	22	
No religion	11	14	

Source: Labour Force Survey.

Note: Ref: reference group, ns: not significant.

Sexual orientation

There appears to be no significant pay differences for men or women living in same-sex couples compared to men or women who are married or cohabiting, with or without children¹²⁴ (single lesbian women and gay men cannot be identified from the Labour Force Survey). According to these data, LGB groups do not appear to experience a pay gap. However, it should be noted that men and women in same-sex couples are often better qualified than cohabiting/married mixed-sex couples which should give them an earnings advantage – 46% of the former had a degree or higher qualification compared to just 25% of the latter in 2009.¹²⁵

¹²³ Smeaton, D. et al. 2010. Table 2.14, page 76.

¹²⁴ Hills, J. et al. 2010. Box 9.8, page 241 (based on LFS data).

¹²⁵ Smeaton, D. et al. 2010. Page 79 (based on LFS data).

Transgender

There is very limited information about the economic position of the transgender population in the labour market, although research suggests that it is not favourable. A small-scale Scottish study (with 71 respondents) found that 55% of transgendered people had an HND/degree or postgraduate degree, but only 30% had a gross annual income of over £20,000, and almost half had a gross annual income of under £10,000.¹²⁶

¹²⁶ Mitchell, M. and Howarth, C. 2009. *Trans research review*. Research Report. 27. Manchester: Equality and Human Rights Commission. Page 48.

11.3 What we know about occupational segregation

Measures:

Vertical segregation – proportion of each group employed in each of the nine main occupational groups

Horizontal segregation – proportions of group x and group y (for example men and women) in each occupation, summed across all occupations

How these measures work:

We are able to report on these measures for Britain using the Labour Force Survey 2006/08.

Data are available for age and gender, disability, ethnicity and religion or belief. Due to very small sample sizes for some groups, findings for religious groups are indicative rather than conclusive. Sexual orientation data are limited to same-sex couple data. Very limited related literature was available for these measures for transgender people, therefore this group is not covered in this section.

Vertical segregation

The Labour Force Survey identifies nine occupational categories which indicate the level at which people are working from managerial and professional posts through to elementary occupations. Vertical segregation is the extent to which different groups are employed at different levels in organisations, so highlights the extent to which promotional opportunities are unequally distributed.

Vertical segregation is highly resistant to change and contributes to the pay gaps discussed in Indicator 2. The findings for this measure are limited due to the occupational categories used in the analysis which do not take into account business size or value. For example, there are distinct differences between being a manager in a large blue chip company and a manager/owner of a local Chinese takeaway.¹²⁷ Cohort differences may also be apparent in the data, reflecting for example the contraction of manufacturing jobs and growth in service sector occupations.¹²⁸

Horizontal segregation

Horizontal segregation is the extent to which different groups cluster in a restricted range of occupational groups, being concentrated in some and excluded from others. To explore occupational clustering in greater detail 80

¹²⁷ Smeaton, D. *et al.* 2010. Page 36.

¹²⁸ Smeaton, D. *et al.* 2010. Page 45.

minor occupational groups were identified from the Labour Force Survey clustered and then analysed to see the distribution of men and women, according to ethnicity, disability and sexual orientation.¹²⁹ Further research is required to explain fully the significance of findings however due to the occupational categories used.¹³⁰ To avoid transition periods into and out of the labour markets at the beginning and end of peoples' working lives the analysis has focused on the 25-55 age group only.

Overview

Women and people from some ethnic minority groups are less likely than White men to reach higher level jobs. In 2009, only a third of managerial jobs were taken by women, although the proportions of managers, professionals and associate professionals who are women all increased by about 3 percentage points between 2002 and 2009. Indian and Chinese women made the greatest gains with increases of 11% and 13% respectively, while Other White women and Other Asian women saw declines of 9% and 7% in managerial and professional occupations.

Only 1 in 10 Black African men and Black Caribbean men are employed in managerial jobs; this is half the rate for all men. Men from Chinese and Indian background, on the other hand, are nearly twice as likely as White British men to be in professional jobs, and this advantage rose by 6% between 2003 and 2008. Other groups experienced a decline in this respect with Other White men and Other Asian men seeing a decline of 6% in both professional and associate professional jobs.

For disabled people who do work, there appears to be no systematic occupational bias. This is also true of those living in same-sex couples.

Some groups are particularly likely to be doing certain types of job. Traditional gender patterns persist, with for example 83% of people working in personal services but just 6% of engineers being female; 40% of working women are employed in the public sector, compared to just 15% of men. In some cases there are extreme concentrations within a particular occupation; for example, 1 in 4 Pakistani men are transport drivers (mainly taxi drivers) as their main job.

¹²⁹ To boost sample sizes, LFS datasets are merged to include 2007q1, 2008q2 and 2009q3.

¹³⁰ Smeaton, D. et al. 2010. Page 36.

11.3 What we know about occupational segregation

Recent survey-based research found that **gender appears to be a more important differential than social class in accounting for differences in career aspirations**. Boys are more likely than girls to expect to work in engineering, ICT, skilled trades, construction, architecture or as mechanics. Girls are more likely to expect to work in teaching, hairdressing, beauty therapy, childcare, nursing and midwifery. These career choices have major implications for employment trajectories and income levels.¹³¹

What we know about the situation for different groups

Gender and age

Vertical segregation

Vertical segregation by age is associated with labour market processes that reflect youth transitions into the labour market and the accumulation of experience over time. So for young workers setting out on their careers, lower proportions can be expected to be in managerial positions which tend to be associated with experience and so dominated by older workers.

This was the case for young men (aged 16-25) in 2007-09 who were over-represented in elementary unskilled occupations and sales jobs (as shown in Table 11.3.1 below). For many young people, low paid, low quality jobs may be combined with education, performed on a part-time basis and temporary in nature. By age 45-55 in 2007-09, the proportion of men in unskilled elementary jobs had fallen to around 1 in 10 (9%), while the proportion of men in sales jobs had fallen to just 2% in line with the average.¹³² Similarly, the proportion in managerial, professional and associate professional positions rose to 24%, 15% and 13% respectively, levels that remain broadly unchanged until state pension age.¹³³

Around one quarter of 45-55 year old men (24%) were in management positions, a figure which fell to 19% of men aged 56-64.¹³⁴ This may reflect downshifting trends in the lead up to retirement.

¹³¹ Li, Y. Devine, F. and Heath A. 2008. *Equality group inequalities in education, employment and earnings: A research review and analysis of trends over time*. Research Report 10. Manchester: Equality and Human Rights Commission.

¹³² Smeaton, D. *et al.* 2010. Page 45.

¹³³ Smeaton, D. *et al.* 2010. Page 45.

¹³⁴ Smeaton, D. *et al.* 2010. Page 45.

Table 11.3.1 Major occupational group of men (%) by age in Britain, 2007/09¹³⁵

	16-25	26-44	45-55	56-64	Total
Managerial	5	21	24	19	19
Professional	7	16	15	15	14
Associate professional	12	15	13	11	14
Admin/secretarial	7	4	4	5	5
Skilled trades	21	18	18	19	19
Personal services	3	2	2	3	2
Sales	15	3	2	2	5
Process plant and machinery	8	11	13	15	12
Elementary	22	9	9	11	11
Base	8,477	33,000	19,000	11,000	71,000

Source: Labour Force Survey.

Young women (aged 16-25) followed a similar pattern to young men. They were under-represented in managerial and professional jobs and over-represented in sales and unskilled occupations.

However, in contrast to men, women continue to be under-represented in better paying, higher status managerial and professional occupations. As shown in Table 11.3.2, vertical segregation continues to be apparent in relation to gender for the 25-55 year old age group. The proportion of women in associate professional jobs peaks between 26 and 44 years (at 19%), tailing off subsequently to reach 12% of those aged 56-59 years. In 2009, women held just over a third (34%) of managerial positions, just over two-fifths of professional jobs, (43%) and half of associate professional jobs (50%).

A slight increase in the proportions of women in unskilled jobs aged 56-59 is evident, rising from 10% of 45-55-year-olds to 13% of older women.

¹³⁵ Smeaton, D. *et al.* 2010. Table 2.6a, page 46.

Table 11.3.2 Major occupational group of women (%) by age group in Britain, 2007/09 ¹³⁶

	16-25	26-44	45-55	56-64	Total
Managerial	5	14	13	11	12
Professional	6	14	14	14	13
Associate professional	13	19	15	12	16
Admin/secretarial	18	18	21	24	19
Skilled trades	1	2	2	3	2
Personal services	17	15	15	13	15
Sales	22	8	8	9	10
Process plant & machinery	1	2	2	2	2
Elementary	16	8	10	13	10
Base	8,600	31,000	18,000	5,000	63,000

Source: Labour Force Survey.

Horizontal segregation

Horizontal segregation appears to be highly entrenched. Far more women than men work in the public sector with just under 40% of women's jobs nationally in the public sector compared to around 15% of positions held by men.¹³⁷ Overall women account for:

- 77% of administrative and secretarial posts
- 83% of personal services posts
- 65% of sales posts.¹³⁸

While there are signs of improvement in women's presence in the professions, this varies widely across professional groups; the proportion of women in engineering, ICT and working as architects, planners and surveyors remaining stubbornly low with women making up:

- 6% of engineering posts
- 13% of ICT posts
- 14% of architects, planners and surveyors.¹³⁹

¹³⁶ Smeaton, D. et al. 2010. Table 2.6b, page 47.

¹³⁷ Trade Union Congress 2010. Women and recession: one year on. Available at: <http://www.tuc.org.uk/extras/womenandrecessiononeyearon.pdf> using Annual Business Inquiry (2008) data. Accessed 19/08/2010.

¹³⁸ Smeaton, D. et al. 2010. Table 2.2b, page 34.

¹³⁹ Smeaton, D. et al. 2010. Table 2.3, page 35.

Disability

Vertical segregation

Disabled and non-disabled men and disabled and non-disabled women appear to have similar occupational profiles, despite the significantly lower probability of disabled people being in paid employment. The occupational profiles of disabled men and women show little change over time, although a comparison of disabled with non-disabled men between 2003 and 2008, suggests small gains among the former. While 1% more non-disabled men were employed in managerial or professional jobs during this time period, the equivalent figure for disabled men was 2%.¹⁴⁰

Table 11.3.3 Major occupational groups (%) by disability and gender in Britain, 2007/09¹⁴¹

	Non-disabled men	Disabled men	Non-disabled women	Disabled women
Managerial	19	18	12	11
Professional	14	12	13	11
Associate professional	14	12	17	15
Admin/secretarial	5	5	19	21
Skilled trades	19	19	2	2
Personal services	2	3	15	17
Sales	5	4	10	11
Process plant & machinery	11	15	2	2
Elementary	11	13	10	12
Base	63,579	8,211	56,299	7,967

Source: Labour Force Survey.

Note: Age 18–State Pension Age.

Horizontal segregation

Occupational cluster analysis shows little evidence of occupational segregation or sector-based segregation – in 2005, long-term disabled men and women made up around 13% of both public and private sector workforces.¹⁴² There is therefore a far more pressing need to improve employment participation rates among disabled people than improving their access to professional and managerial positions.¹⁴³

¹⁴⁰ Smeaton, D. *et al.* 2010. Table 2.4c, page 40.

¹⁴¹ Smeaton, D. *et al.* 2010. Table 2.4c, page 40.

¹⁴² Heap, D. 2005. 'Characteristics of people employed in the public sector', Labour Market Trends, December: 489-500. Available at: http://www.statistics.gov.uk/articles/labour_market_trends/characteristics_Dec05.pdf Accessed 19/08/2010

¹⁴³ Smeaton, D. *et al.* 2010. Page 54.

Ethnicity

Vertical segregation

Vertical segregation is apparent for men and women by ethnicity – people from some ethnic groups are more likely to be in higher skilled, professional occupations than others. For example, Chinese and Indian men are nearly twice as likely as White British men to be in professional jobs (27%, 25% and 14% respectively). Chinese, Indian and White British men are most likely to be employed in managerial jobs, at around 20%. This compares to 15% of Pakistani men, 14% of Bangladeshi men and only 11% of African and 10% of Caribbean men. However, these results should be treated with caution due to the limitations of the occupational categories used as set out at the beginning of the chapter.

At the other occupational extreme, significant differences prevail in the incidence of each group in elementary jobs. African and Bangladeshi men are most likely to be employed in unskilled jobs, with this being the case for almost a quarter of working African men (23%) and a quarter of Bangladeshi men (21%). This compares to 10% of White British men, 15% of Pakistani men, 15% of Other Asian men and 16% of Other White men.¹⁴⁴

These gender patterns broadly hold true for women in every ethnic group, although women are significantly less likely to be employed in managerial or professional jobs compared to their male counterparts. There are two exceptions – Bangladeshi and Pakistani women are more likely to be employed as professionals than Bangladeshi and Pakistani men.¹⁴⁵

Of all women, 13% are in professional occupations, rising to 16% of Bangladeshi women, 18% of Indian and 21% of Chinese women. At the other occupational extreme, 1 in 10 of all women are employed in unskilled elementary jobs, which includes 17% of 'Other' White women, 16% of 'Other' Asian women, 13% of Chinese women and 9% of Indian women.¹⁴⁶

¹⁴⁴ Smeaton, D. *et al.* 2010. Table 2.4a, page 37.

¹⁴⁵ Smeaton, D. *et al.* 2010. Table 2.4b, page 38.

¹⁴⁶ Smeaton, D. *et al.* 2010. Table 2.4b, page 38.

Horizontal segregation

Distinct occupational clustering is evident for men (aged 25-55) in some ethnic groups compared to the White British majority. Some cluster in well paid high status jobs while others cluster in low paid positions of lower status. The most extreme examples of clustering include the:

- 24% of Pakistani men who are transport drivers (mainly taxi drivers) in their main jobs
- 17% of Chinese men who are chefs
- 9% of Indian men who work in ICT professions
- 8% of Africans who work in elementary security occupations (often security guards).¹⁴⁷

A disproportionate number of Pakistani men are also self-employed (21%).¹⁴⁸

Overall, ethnic minority women, even more than White British women, are clustered in a narrow range of jobs. As with men, for some women it can be described as an advantage in that the occupations are associated with higher levels of pay and higher status, but for others, the occupations can be associated with less well paid positions. For example, for Black African and Caribbean women, their most notable occupational clustering is associated with healthcare and related personal services occupations. These include nursing auxiliaries and care assistant positions that tend to be less well paid than other healthcare-related jobs.¹⁴⁹

Pakistani women have a more mixed experience as they are over-represented as health professionals but are also clustered in lower status, lower paying sales assistant jobs. Larger sample sizes are required to describe with any confidence the situation facing Bangladeshi women in the labour market but they do appear to be clustered in lower status positions such as sales assistants and educational assistants.

Evidence indicates that overall, when data are broken down into generations, the 'second generation' of ethnic minority men and women (those born in Britain) have made substantial progress compared to the first generation. Second generation ethnic minority men and women in employment have similar chances (after allowing for age and qualification) of working in professional and managerial jobs as White British workers.¹⁵⁰

¹⁴⁷ Smeaton, D. *et al.* 2010. Page 58.

¹⁴⁸ Hills, J. *et al.* 2010. Page 112.

¹⁴⁹ Smeaton, D. *et al.* 2010. Page 59.

¹⁵⁰ Hills, J. *et al.* 2010. Page 225.

Religion or belief

Vertical segregation

Overall, occupational segregation appears to have a religious dimension; however caution is required in drawing conclusions due to the small sample sizes (particularly of Buddhists, Jews and Sikhs).

Jewish men appear to be the most advantaged in the labour market (with a full 80% in managerial, professional and associate professional jobs), followed by Hindu men, 62% of whom are in these better paying, higher status positions. Only 35% of Muslim men are found at this level, less than half that of Jewish men. Muslim men are found to a greater extent instead in plant and machinery factory work and in unskilled elementary jobs (36% combined) compared with around one quarter of Christians (23%) and Sikhs (25%), and 6% of Jewish men, who are the least likely to be in these lower paid, lower status positions.

Between 2003 and 2008 the clearest gains were made by Sikhs - their proportion of in managerial or professional jobs increased by 8 percentage points (with a 9 percentage point fall in factory or unskilled jobs). Muslim men stand out as being the most disadvantaged on this measure, and show the largest declines over time. They experienced a drop in the percentage employed in managerial or professional jobs of 7 percentage points.¹⁵¹

Table 11.3.4 Major occupational group of men (%) by religion in Britain, 2007/09¹⁵²

	Christian	Buddhist	Hindu	Jewish	Muslim	Sikh	Other	No religion
Managerial	20	22	20	30	16	18	18	18
Professional	13	18	32	30	10	13	15	16
Associate professional	13	18	10	20	9	11	14	15
Admin/secretarial	5	6	6	4	4	4	3	5
Skilled trades	19	11	6	4	11	16	20	19
Personal services	2	4	2	1	3	2	4	2
Sales	4	7	7	4	11	10	6	4
Process plant and machinery	12	5	7	4	19	15	8	10
Elementary	11	10	10	2	17	10	12	11
Base	5,100	224	949	298	2,133	423	591	16,000

Source: Labour Force Survey.

¹⁵¹ Smeaton, D. *et al.* 2010. Page 41.

¹⁵² Smeaton, D. *et al.* 2010. Table 2.5a, page 43.

As with men, there are differences in the occupational outcomes of different religious groups for women, but they are not large (see Table 11.3.5). Overall, Jewish women fare well in the labour market, with the highest proportions (57%) in better paid professional, associate professional and managerial jobs compared to 40% of the Christian majority. Muslim women are least advantaged on this measure but it should be noted that the proportions of Muslim women in managerial or professional jobs is only 3% lower than Christian women. At the other occupational extreme, Buddhist women are most likely to be in unskilled jobs, with nearly a fifth (18%) in elementary positions, compared to just 3% of Jewish women, 11% of Sikhs, 10% of Hindus, 10% of Christians and 10% of women of no religion. Once again, however, sample sizes are low. Further research is necessary to explore these indicative findings.¹⁵³

Table 11.3.5 Major occupational group of women (%) by religion in Britain, 2007/09.¹⁵⁴

	Christian	Buddhist	Hindu	Jewish	Muslim	Sikh	Other	No religion
Managerial	12	7	9	11	7	12	14	12
Professional	12	16	20	23	14	14	13	14
Associate professional	16	21	16	23	14	13	20	18
Admin/secretarial	20	13	20	24	19	16	18	18
Skilled trades	2	4	1	1	0	1	2	2
Personal services	16	12	8	8	15	11	14	14
Sales	10	6	12	5	17	17	10	11
Process plant and machinery	2	2	4	0	3	5	1	2
Elementary	10	18	10	3	10	11	8	10
Base	49000	262	688	222	895	384	613	12000

Source: Labour Force Survey.

Sexual orientation

Vertical segregation

Men living in same-sex couples are more likely than men living in mixed-sex couples to be employed in managerial and professional jobs in Britain. Among those married or cohabiting but without any dependent children, nearly a third (30%) of men living in same-sex couples are in a managerial job compared with around a fifth (22%) of men living in mixed-sex couples. 17% of men living in same-sex couples are in professional jobs and 18% in associate professional jobs,

¹⁵³ Smeaton, D. *et al.* 2010. Table 2.5b, page 44.

¹⁵⁴ Smeaton, D. *et al.* 2010. Table 2.5b, page 44.

compared with 15% and 14% respectively of those living in mixed-sex couples. Heterosexual men in couples are far more likely instead to be in the male dominated skilled trades, in factory work and in unskilled elementary jobs, compared to those living in same-sex couples.

A similar pattern is evident among women. Women living in same-sex couples are far more likely to be in better paid managerial, professional and associate professional jobs (18%, 22% and 27% respectively) than women living in mixed-sex couples (13%, 14% and 17% respectively).¹⁵⁵

The shift into professional occupations for men living in same-sex couples appears to be a positive trend. Between 2002-03 and 2008-09 the proportion of men in same-sex couples who were employed in managerial or professional jobs increased by 10 percentage points, compared to a 3 percentage point increase for mixed-sex couples.¹⁵⁶

However, the occupational advantage of same-sex couples disappears once education is controlled for. (The same-sex couple sample is nearly twice as likely to be educated to degree level and this is likely to explain their over-representation in better paying managerial and professional jobs). Further research is required to explore whether the circumstances of gay people who are not married or cohabiting are as favourable as those in known relationships. Currently no such data exist.¹⁵⁷

Horizontal segregation

The data show little indication of occupational clustering for men and women living in same sex couples. However, various small scale studies and literature reviews indicate there may be problems for gay men and women in terms of perceptions and experiences of homophobia in the police service and armed forces, teaching and manual trades.¹⁵⁸

¹⁵⁵ Smeaton, D. *et al.* 2010. Table 2.4c, page 40.

¹⁵⁶ Smeaton, D. *et al.* 2010, merging LFS data 2001q1 and 2003q2, 2008q2 and 2009q3 to boost sample sizes. Table 2.9a, page 55.

¹⁵⁷ Smeaton, D. *et al.* 2010. Page 39.

¹⁵⁸ Ellison, G. and Gunstone, B. 2009. *Sexual orientation explored: A study of identity, attraction, behaviour and attitudes in 2009*. Research Report 35. Manchester: Equality and Human Rights Commission. Page 10.

11.4 What we know about illness and injury at work

Measure:

Weighted average prevalence of work-related illness and injury per 100,000 employed based on occupation

How this measure works:

We are able to report on this measure for Britain using Health and Safety Executive estimates of rates of ill health and injuries derived from a specific module in the Labour Force Survey 2006/08.

Estimates of both workplace injury and work-related illness from the Labour Force Survey are referred to as 'self-reported' estimates. This is particularly important for work-related illness, where the estimates represent an individual's perception of the contribution that work made to the illness, rather than a medically verified estimate. Self-reports of work-related illness whilst not an exact measurement of the 'true' extent of work-related illness, do provide a reasonable indicator.¹⁵⁹ These data are valuable in their own right, but it should be recognised that it is from the perspective of an individual's perceptions.

We are able to report on this measure for gender, age, disability, socio-economic group, and to a limited extent, ethnicity. There is no evidence for groups defined by sexual orientation, transgender or religion or belief. Some small-scale survey evidence and other literature explore the experiences of migrant workers, however, results are indicative only of possible issues facing this group as sample sizes are generally low.

Overview

Occupational segregation explains differences in illness and injury rate. Most of the differences in the chance of being injured at work or having a work-related illness can be explained by the different occupations that different groups are engaged in. People in manual and routine occupations are most at risk.

Some groups are more likely to experience illness or injury than others. Men are more likely to be in jobs with higher risks of accidents, and suffer more

¹⁵⁹ For more information see Health and Safety Executive (HSE) *Self-reported work-related illness and workplace injuries in 2008/09: results from the Labour Force Survey*. Available at: <http://www.hse.gov.uk/statistics/lfs/o809.pdf> Accessed 24/09/2010.

work-related injuries. Women suffer more work-related ill health including stress, and also infectious diseases related to their predominance in healthcare jobs. South Asians have lower rates of workplace injury, because they are less likely to be employed in hazardous occupations than other ethnic minority groups.

What we know about the overall situation and trends

In 2008/09, 180 workers were killed at work; 131,895 other injuries to employees were reported under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR), and according to the Labour Force Survey, 246,000 reportable injuries occurred.¹⁶⁰

In 2007 the UK had the fifth lowest rate of serious accidents at work in Europe with 75 serious accidents per 100,000 inhabitants.¹⁶¹ The lowest rates were registered in Belgium (60), Germany (66) and Italy (69). The highest were in: Ireland (107), Finland (88) and Spain (85).

1.2 million people who worked in 2008/09 were suffering from an illness in the past year that they believed was caused or made worse by their current or past work. 551,000 of these were new cases. Overall, 29.3 million days were lost: 24.6 million due to work-related ill health and 4.7 million due to workplace injury.¹⁶²

Occupational injury rates are similar across England, Scotland and Wales.¹⁶³ Within England, the highest rate was in the North East and the lowest in London. However, there seems to be no evidence of a 'regional effect', rather the differing rates are explained by differences in the personal and job-related characteristics between regions, as regions with a larger manufacturing or industrial base tend to have higher injury rates.¹⁶⁴ For instance, the form of pneumoconiosis (which is associated with coal mining) is particularly prevalent in Wales.¹⁶⁵ Overall, the differences in illness and injury between groups broadly reflect their different occupational structure.

¹⁶⁰ Smeaton, D. *et al.* 2010. Page 114.

¹⁶¹ Eurostat. *Serious accidents at work by gender*. Available at: <http://epp.eurostat.ec.europa.eu/tgm/table.do?tab=table&init=1&plugin=1&language=en&pcode=tsiem090> Accessed 24/08/2010.

¹⁶² Smeaton, D. *et al.* 2010. Page 114.

¹⁶³ Smeaton, D. *et al.* 2010. Page 119.

¹⁶⁴ Smeaton, D. *et al.* 2010. Page 119.

¹⁶⁵ Smeaton, D. *et al.* 2010. Page 119.

What we know about the situation for different groups

Gender

Men are more likely than women to be injured at work, but women are more likely to report work-related stress. The average rate of reportable injury for men over the three-year period 2005/06-2007/08 was 1,300 per 100,000 workers, compared to 750 for women.¹⁶⁶

In the workplace men and women are exposed to different health risks. These patterns can be partially explained by the different types of work done by men and women. For instance, men suffer more from asbestos-related cancers because of their predominance in occupations which in the past involved exposure to asbestos.¹⁶⁷ Women suffer more from infectious diseases because of their predominance in healthcare, social care, and employment in school and nurseries.

Table 11.4.1 Estimated incidence and rates of reportable non-fatal injury to workers by gender in Britain, 2005/06-2007/08¹⁶⁸

Gender	Average estimated incidence (thousands)	Average rate per 100,000 workers
Males	193	1,300
Females	97	750

Source: Labour Force Survey.

Note: Comparison of average 3-year estimates over time involving estimates based on overlapping time periods will not provide a robust indication of change over time. Averaged 2005/06-2007/08.

¹⁶⁶ HSE 2008. 'Estimated incidence and rates of reportable non-fatal injury to workers, by age and gender, averaged 2005/06-2007/08'. Available at: http://www.hse.gov.uk/statistics/lfs/0708/injage1_3yr.htm Accessed 19/08/2010.

¹⁶⁷ Smeaton, D. *et al.* 2010. Page 121.

¹⁶⁸ HSE 2008.

RIDDOR statistics show that over 95% of employees killed at work are men. Men accounted for 170 of the 178 fatalities in 2007-08, and 125 of the 129 fatalities in 2008-09.¹⁶⁹ This compares with 8 fatal injuries for women in 2007-08 and 4 in 2008-09.¹⁷⁰

Table 11.4.2 Injuries to men and women employees by gender in Britain, 2007/08-2008/09¹⁷¹

Fatal injury	Numbers		Incidence Rate (per 100,000)	
	2007/08	2008/09	2007/08	2008/09
Males	170	125	1.4	1.0
Females	8	4	0.1	Less than 0.1

Source: Health and Safety Executive, injuries as reported to all enforcing authorities.

Note: Averaged 2007/08-2008/09.

Age

In 2006/07–2008/09 men aged 35-44 and women aged 45-54 were most likely to report a non-fatal injury in the workplace. Research shows that one important trigger for increased risk of an accident at work is being new to a job.¹⁷²

¹⁶⁹ HSE. 'Injuries to men and women employees by age of injured person and severity of injury, 2007/08-2008/09. As reported to all enforcing authorities'. Available at: <http://www.hse.gov.uk/statistics/tables/agegen1.htm> and <http://www.hse.gov.uk/statistics/tables/agegen2.htm> Accessed 09/08/2010. Data for 2008/09 are provisional.

¹⁷⁰ HSE 'Fatal injuries for men and women, 2007/08-2008/09 as reported to all enforcing authorities'. Available at: <http://www.hse.gov.uk/statistics/tables/agegen2.htm> and <http://www.hse.gov.uk/statistics/tables/agegen1.htm> Data for 2008/09 are provisional. Accessed 09/08/2010.

¹⁷¹ HSE. Injuries to men and women employees by age of injured person and severity of injury, 2007/08-2008/09. Data for 2008/09 are provisional only.

¹⁷² Davies, R. and Jones, P. 2005. *Trends and context to rates of workplace injury*. HSE Report 386. Available at: <http://www.hse.gov.uk/research/rrpdf/rr386.pdf> Page 53.

Table 11.4.3 Estimated incidence rates of reportable non-fatal injury to workers by age and gender in Britain, 2006/07-2008/09¹⁷³

Gender	Age group	Average estimated incidence (thousands)	Averaged rate per 100,000 workers
Males	16-24	30	1,520
	25-34	38	1,170
	35-44	48	1,260
	45-54	39	1,170
	55+	26	950
	Total	180	1,200
Females	16-24	12	660
	25-34	14	530
	35-44	21	630
	45-54	27	880
	55+	18	890
	Total	93	710

Source: Labour Force Survey 2006/07-2008/09.

Note: Averaged 2006/07-2008/09.

For both men and women, the rate of major injury increases in the older age groups (within working-age). There is a sharper increase for women. Rates of slip, trip and fall injury tend to increase with age, and older workers are more likely to experience more severe injuries if they fall.¹⁷⁴

Men are far more likely to experience fatal injury at work, and the risk increases with age as shown in Figure 11.4.1. Men over the age of 65 are disproportionately at risk.¹⁷⁵ This is a particular problem in the construction and agriculture sectors.¹⁷⁶

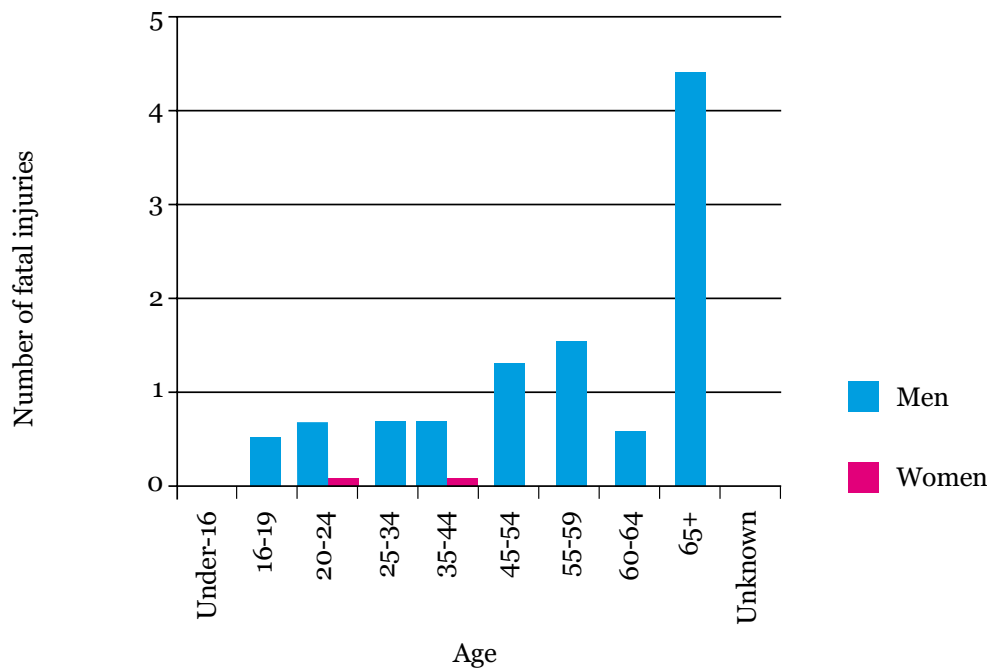
¹⁷³ HSE 2008.

¹⁷⁴ Data provided by the HSE database of RIDDOR reports for 2008/09 (provisional).

¹⁷⁵ Smeaton, D. et al. 2010. Page 128.

¹⁷⁶ Smeaton, D. et al. 2010. Page 128.

Figure 11.4.1 Number of fatal injuries to men and women employees by age (incidence rate per 100,000 workers) in Britain, 2008/09¹⁷⁷



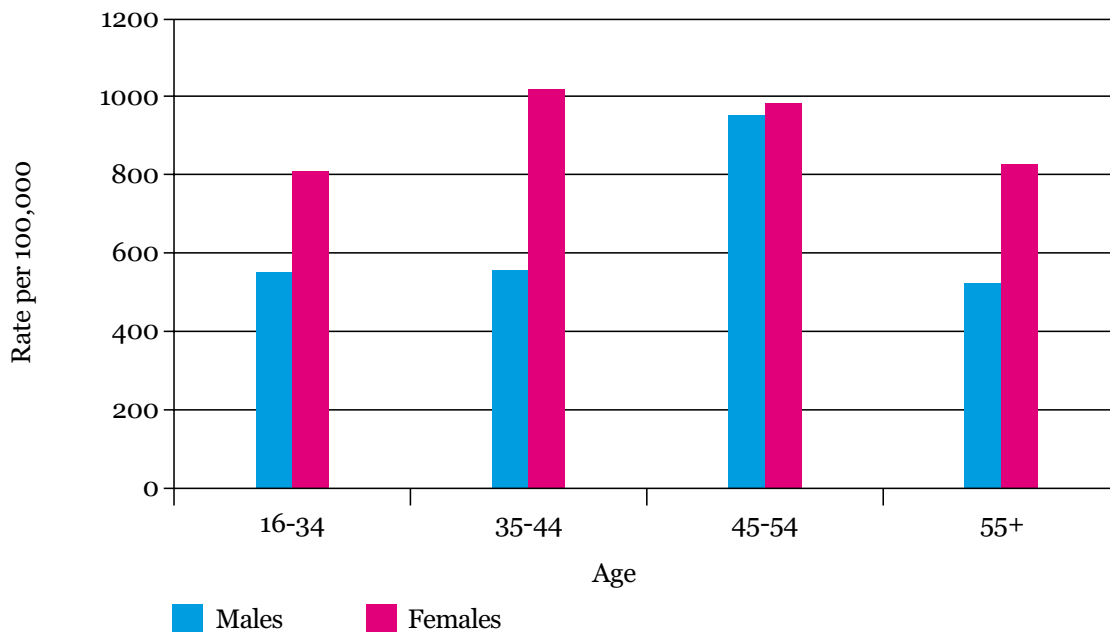
Source: Health and Safety Executive, injuries as reported to all enforcing authorities.

The prevalence of work-related ill health is also highest among older workers. For both stress and musculo-skeletal disorders (MSDs), prevalence rates increase to age 54 and then decrease in the oldest groups. According to research, older workers are more susceptible to work-related MSDs than younger workers because of decreased functional capacity. The propensity for injury is related more to the difference between the demands of work and the worker's physical work capacity (or work ability) than age.¹⁷⁸

¹⁷⁷ HSE. Injuries to men and women employees by age of injured person and severity of injury, 2007/08-2008/09. 2008/09 data are provisional.

¹⁷⁸ Okunribido, O. and Wynn, T. 2010. *Ageing and work-related musculoskeletal disorders: A review of the recent literature*. HSE Research Report 799. Available at: <http://www.hse.gov.uk/research/rrpdf/rr799.pdf> Accessed 24/08/2010.

Figure 11.4.2 Estimated rates of self-reported stress, depression or anxiety caused or made worse by work, by age and gender (per 100,000 employed in the last 12 months) in Britain, 2008/09¹⁷⁹



Source: Labour Force Survey 2008/09.

Note: ¥Rate per 100,000 employed in last 12 months.

Socio-economic groups

Those in manual and routine occupations are most likely to report experiencing workplace illness and injury. Manual occupations have higher rates of both injury and illness than office-based occupations. According to initial analysis conducted as part of the development for the Equality Measurement Framework, in 2007-08 there were 350 reported injuries per 100,000 among higher managerial and professional employees, compared with 2,037 among those working in routine, unskilled jobs.¹⁸⁰ Manual workers in the construction industry in particular run a high risk of being injured and report suffering of common complaints such as MSDs. Rarer conditions such as asbestos-related cancers are found in workers in other industries, such as ship-building, railway- engineering and insulation-manufacturing.¹⁸¹

¹⁷⁹ HSE. Estimated incidence and rates of self-reported stress, depression or anxiety caused or made worse by work, by age and gender, for people working in the last 12 months. 2008/09. Available at: <http://www.hse.gov.uk/statistics/lfs/0809/strage2w12.htm> Accessed 09/08/2010.

¹⁸⁰ Alkire, S. et al. 2009. The remit of the current project at the technical phase was to check sample sizes rather than to generate final data analysis tables. However, wherever possible, the authors have presented preliminary results for group means and the significance of the variations in group means, as well as a report on sample size. Significance tests are reported at the 95 per cent level. These results are preliminary and a series of cross-checks are required at the next stage of the development of the EMF before final data tables can be produced.

¹⁸¹ Smeaton, D. et al. 2010. Page 119.

Social-economic status and occupation also play a key role in terms of stress-related illness. Research has shown that the psychosocial work environment can have a powerful effect on workers' physical and mental health.¹⁸² Workers who have high job demands but little control over their work; those who have poor support from colleagues and supervisors; those whose efforts are not appropriately rewarded, or who have poor job security are at a greater risk of ill health. Initial analysis of the data for the development of the Equality Measurement Framework shows that these adverse work conditions are disproportionately experienced by people from lower socio-economic groups, as shown in Table 11.4.4.

Table 11.4.4 Average incidence of work-related illness and non-fatal work related injury (per 100,000 employed, based on occupation) in Britain, 2007/08¹⁸³

All	(i) Illness	(ii) Injury
Socio-economic group		
higher managerial and professional	3,276	350
lower managerial and professional	3,909	567
intermediate	3,137	762
small employers and own a/c	3,917	1,582
lower supervisory and technical	3,675	1,784
semi-routine	3,110	1,400
routine	3,277	2,037

Source: Labour Force Survey 2007-08.

Disability

There is no evidence that disabled people are more at risk of illness or injury in the work place than non-disabled people. However, although the evidence is inconclusive, the Health and Safety Executive expresses concern that employers sometimes use health and safety as an excuse for the non-recruitment or dismissal of disabled people.¹⁸⁴ The survey component of a study looking at the main health and safety concerns of employers, occupational health practitioners, health and safety practitioners, and trade union health and safety representatives found that:

- For manual work, health and safety concerns were most often expressed about people with MSDs, impaired mobility and dexterity, sight impairment and neurological conditions
- For all types of work, but especially for those in managerial, professional and administrative positions, health and safety concerns were most often expressed about people with mental illness or a learning disability¹⁸⁵

¹⁸² Smeaton, D. et al. 2010, notes that this research includes the well-known Whitehall II study. Page 132.

¹⁸³ Alkire, S. et al. 2009. See footnote 180.

¹⁸⁴ Smeaton, D. et al. 2010. Page 131.

¹⁸⁵ Office for Public Management (forthcoming).

Ethnicity

No ethnic minority group appears to be especially vulnerable to work-related injury or ill health. The differences that do exist are related to occupational segregation. For example, in 2004 South Asian people were under-represented in the most hazardous occupations compared to Black Caribbean people, Black African people or the White British population and thus reported the lowest workplace injury rates. Even after controlling for personal, job and workplace characteristics, Indian and Pakistani people remain less likely than White British, Black African or Black Caribbean people to report an injury. It is not clear whether this is a result of under-reporting among these groups.¹⁸⁶

Box 11.4.1 Related issues: Migrant workers and workplace risk

Since the Morecambe Bay disaster of 2004, health and safety concerns about ethnic minority workers have centered on recent migrants. Because of unreliable statistics, it is not known whether migrant workers in Britain are at greater risk than workers doing the same job, however, there is evidence that migrant workers are more likely to work in sectors or occupations where there are already health and safety problems.¹⁸⁷ Undocumented migrant workers, and migrant domestic workers (with or without documents) are especially vulnerable to exploitation and abuse by employers, including exposure to appalling working conditions.¹⁸⁸

Inquiry into recruitment and employment in the meat and poultry processing sector, England and Wales

In October 2008, the Equality and Human Rights Commission launched an Inquiry into recruitment and employment in the meat and poultry processing sector in England and Wales. The inquiry examined how people working in this industry are recruited, and how they are treated once they are at work. The report reveals evidence of the widespread mistreatment and exploitation of migrant and agency workers in the sector. Around 70% of workers supplied by work agencies to meat and poultry processing firms are migrant workers.¹⁸⁹ On many issues, good practice was identified both in processing firms and recruitment agencies: for example, processing firms taking practical proactive steps to promote positive interaction and cohesion in the workplace or agencies taking steps to ensure workers understood all relevant documentation including employment rights. Despite the good practice identified, one of the strongest themes that emerged from the evidence was the high level of vulnerability of many migrant workers in this sector. Issues of concern included:

¹⁸⁶ Smeaton, D. *et al.* 2010. Page 125.

¹⁸⁷ Smeaton, D. *et al.* 2010. Page 123.

¹⁸⁸ Smeaton, D. *et al.* 2010. Page 124.

¹⁸⁹ We have used the definition of 'migrant worker' adopted in the International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families as 'a person who is to be engaged, is engaged or has been engaged in a remunerated activity in a State of which he or she is not a national'.

Health and safety: In a typical year, the meat industry reports about 200 major injuries and 3,000 other reportable injuries to employees. These figures take no account of the under-reporting known to exist or of the many other injuries where time off work is less than three days.¹⁹⁰ In the Inquiry, 1 in 6 interviewees highlighted health and safety as an area where agency workers received worse treatment. The main issues raised by those with experience of working in the industry were:

- Not being given any appropriate personal protective equipment (PPE)
- Poor quality, ill-fitting and shared PPE
- Lack of training on health and safety issues, or not being able to understand it
- Having to work excessive hours

Treatment of pregnant women: The Inquiry revealed cases of pregnant workers being forced, under threat of losing their jobs, to continue in work that posed a risk to their health and safety. Heavy lifting and extended periods of standing were reported, as were instances where pregnant women were prevented from leaving the production line to go to the toilet. The Inquiry also heard about a lack of health and safety risk assessments and reports of miscarriages attributed to lack of adjustments at work.

Physical and verbal abuse: Evidence from this Inquiry revealed a large disparity between the treatment of agency workers and that of directly employed workers across the sector. The former group are refused permission for toilet breaks, and are subjected to physical abuse in the workplace as well as verbal abuse, shouting and swearing. A number of interviewees described the emotional impact of working in an environment where they were being shouted at and verbally abused on a regular basis. People told the Inquiry about increased levels of anxiety, feelings of humiliation and inability to sleep due to the stress it caused.

Sexual orientation and transgender

There appears to be no research on the relationship between workplace injury or illness and sexual orientation or transgender. It cannot be assumed that a relationship exists, but it is possible that homophobic and transphobic bullying in the workplace might contribute to stress-related problems.¹⁹¹

¹⁹⁰ British Meat Processors Association, *Health and Safety Guidance Notes for the Meat Industry*. Available at: http://www.bmpa.uk.com/_Attachments/Resources/971_S4.pdf Accessed 23/09/2010.

¹⁹¹ Smeaton, D. et al. 2010. Page 131.

11.5 What we know about discrimination in employment

Measure:

The percentage of workers who report experiencing unfair treatment, discrimination, bullying or harassment at work

How this measure works:

We are able to report on this measure for England, Scotland and Wales using the Fair Treatment at Work Survey 2008.

As this survey collects reports of personal experience it measures perceptions of unfair treatment, bullying, harassment and discrimination rather than actionable mistreatment.

The survey is not large enough to allow disaggregation by subgroups within Scotland and Wales (thus all equality group analysis below is for England only). Data are available for gender, age, ethnicity, religion or belief, disability and sexual orientation, although limited disaggregation is possible in relation to ethnicity and religion or belief. Although this survey does not cover the transgender population, a wide variety of literature and studies are drawn on to examine the possible issues faced by this group. However results are indicative only as sample sizes are generally low.

This indicator also draws on the 2010 Citizenship Survey question that focuses on whether people feel they have been discriminated against in applying for a job, or in receiving promotion. The Citizenship Survey is not carried out in Scotland, so the analysis from this source only relates to England and Wales. The Citizenship Survey collects information by gender, age, disability, ethnicity, religion or belief and sexual orientation.

Overview

Britain is not yet a place where every group can expect to be treated equally as some groups stand out as being more at risk of experiencing unfair treatment, bullying, harassment or discrimination in the workplace.

Disabled employees and gay, lesbian or bisexual employees are over twice as likely as other employees to report experiencing discrimination, bullying or harassment in the workplace, while disabled women are four times more likely to report being bullied than other employees.

Women and ethnic minority groups are more likely to report experiencing discrimination in relation to promotion than White men.

Qualitative research and small-scale studies indicate that **the workplace remains a stressful and difficult place for some groups**, specifically transgender people and irregular migrant workers.

What we know about the overall situation and trends

The Fair Treatment at Work Survey 2008 found that 13% of British employees had personally experienced unfair treatment in the workplace in the last 2 years, and 7% reported experiencing bullying, harassment or discrimination. Overall, respondents to the survey were far more likely to cite an individualistic reason for unfair treatment such as ‘the attitude or personality of others’ (41%), ‘people’s relationships at work’ (35%) ‘it’s just the way it is’ (23%) or ‘your position in the organisation’ (21%) than a reason directly associated with a protected equality characteristic.¹⁹²

By nation, English employees reported slightly more unfair treatment (14%) than those in Scotland (12%) or Wales (10%). In terms of discrimination, English employees were also more likely to report it (8%) than Scottish (3%) and Welsh (4%).¹⁹³ Across the three nations, England and Wales had a slightly higher rate of employees reporting bullying or harassment (7%) than in Scotland (5%).¹⁹⁴

According to the Citizenship Survey, in 2009/10 7% of people in England and Wales felt they had experienced discrimination in the labour market in the last 5 years by being turned down for a job.¹⁹⁵ Similarly, 6% of people who had worked as an employee in the last 5 years reported that they felt they had been discriminated against with regard to promotion or progression. This represents a slight decrease from 9% in 2007-08 and from 7% in 2008/09.¹⁹⁶

Gender

According to the Fair Treatment at Work Survey 2008, 5% of people who reported experiencing unfair treatment at work cited their gender as the reason.¹⁹⁷ More women than men reported experiencing unfair treatment (16% compared to 11%), bullying or harassment (9% compared to 6%) or discrimination (9% compared to 6%) at work.¹⁹⁸

¹⁹² Fevre, R. Nichols, T. Prior, G. and Rutherford, I. 2009. *Fair Treatment at Work Report 2009: Findings from the 2008 Survey*. Employment Relations Research Series 103. London: Department for Business, Innovation and Skills.

¹⁹³ Fevre, R. *et al.* 2009. Table B8.1, pages 210-211.

¹⁹⁴ Fevre, R. *et al.* 2009. Table B8.1, pages 210-211.

¹⁹⁵ Communities and Local Government (CLG) 2010. Citizenship Survey: 2009-10 (April 2009–March 2010), England. Cohesion Research Statistical Release 12. Available at: <http://www.communities.gov.uk/documents/statistics/pdf/164191.pdf> Accessed 21/09/2010.

¹⁹⁶ CLG 2009. Citizenship Survey: 2008-09 (April 2008–March 2009), England. Cohesion Research Statistical Release 8. Available at: <http://www.communities.gov.uk/documents/statistics/pdf/1284311.pdf> Accessed 21/09/2010.

¹⁹⁷ Fevre, R. *et al.* 2009. Page 66.

¹⁹⁸ Fevre, R. *et al.* 2009. Table B8.1, pages 210-211.

The 2009/10 Citizenship Survey shows no gender differences in terms of discrimination around recruitment. 1% of men and women felt that they had been discriminated against in this way. Similarly, 1% of people felt that they had experienced discrimination because of their gender when being turned down for a promotion. Slightly more women (2%) than men (1%) felt they had experienced discrimination due to their gender when seeking promotion.¹⁹⁹

Other evidence indicates that women are vulnerable to discrimination at particular points in their life, specifically when they are pregnant. An Equal Opportunities Commission (EOC) formal investigation into the employment experiences of pregnant women carried out in 2005 found that almost half of the 440,000 pregnant women in Britain experienced some form of disadvantage at work, simply for being pregnant or taking maternity leave. Around 30,000 women were sacked, made redundant or treated so badly that they felt they had to leave their jobs.²⁰⁰ A survey of 122 recruitment agencies by the Recruitment Employment Confederation in 2005 found that more than 70% of agencies had been asked by clients to avoid hiring pregnant women or those of childbearing age.²⁰¹

While all pregnant women are at risk of discrimination in the workplace, women from ethnic minority backgrounds face particular barriers. The EOC's formal investigation into ethnic minority groups, found that just under a sixth of White women in the sample had often/sometimes been asked about their plans for marriage/children at interview compared to between a fifth and a quarter of ethnic minority women.²⁰²

Age

Overall, 9% of people who reported experiencing unfair treatment at work believed it was because of their age.²⁰³ Younger workers were more likely to report unfair treatment and discrimination at work than their older colleagues, whilst older people were slightly more likely to report bullying or harassment. In 2008, 17% of employees aged 16-24 compared to 11% of those over 50 reported experiencing unfair treatment and 10% compared to 6% reported experiencing discrimination. With regards to bullying 8% of those aged 50+ reported experiencing it compared to 5% of employees between 16 and 24 years of age.²⁰⁴

¹⁹⁹ CLG 2010.

²⁰⁰ Equal Opportunities Commission (EOC) 2005. *Greater expectations. Summary final report EOC's investigation into pregnancy discrimination.* Available at: http://www.equalityhumanrights.com/uploaded_files/eoc_pregnancygfi_summary_report.pdf Accessed 09/08/2010.

²⁰¹ Smeaton, D. *et al.* 2010. Page 84.

²⁰² Smeaton, D. *et al.* 2010. Page 84.

²⁰³ Fevre, R. *et al.* 2009. Page 66.

²⁰⁴ Fevre, R. *et al.* 2009. Table B8.1, pages 210-211.

The 2009/10 Citizenship Survey also suggests that younger individuals are more likely to feel they have been discriminated against on the grounds of their age when turned down for a job than older individuals. 5% of those aged 16 to 24 and 4% of those aged 50 and over felt that they had experienced this form of discrimination, compared to 1% of those aged 25 to 34 and 2% of those aged 35 to 49. In contrast, people aged 50 years were more likely to feel they had experienced discrimination due to their age when seeking promotion than those aged 35 to 49 years (2% compared with 1%).²⁰⁵

Research has found discrimination against older Black, White and Asian women who reported facing fewer promotion opportunities, limited access to training and were allocated less rewarding and challenging work.²⁰⁶

Disability

There is ongoing evidence of disability discrimination in the workplace. According to the Fair Treatment at Work Survey 2008, 3% of people who reported experiencing unfair treatment at work cited a disability as the reason.²⁰⁷ Overall, people with a disability or long-term illness were more likely than those without to report experiencing unfair treatment (19% compared to 13%). The same survey found that people with a disability or long-term illness were almost twice as likely to report experiencing discrimination as those without a disability or long-term illness (12% compared to 7%) and were over twice as likely to report experiencing bullying or harassment in the workplace (14% compared to 6%).²⁰⁸ In the 2005/06 Fair Treatment at Work Survey disabled women were found to be four times more likely to be bullied than other employees.²⁰⁹ This is reflected in the fact that claims on the grounds of disability discrimination have risen every year for the last 3 years.²¹⁰

²⁰⁵ CLG 2010.

²⁰⁶ Smeaton, D. *et al.* 2009.

²⁰⁷ Fevre, R. *et al.* 2009. Page 66.

²⁰⁸ Fevre, R. *et al.* 2009. Table B8.1, pages 210-211.

²⁰⁹ Grainger, H. and Fitzner, G. 2008. *The First Fair Treatment at Work Survey: Executive summary – updated*. Employment Relations Research Series 63. London: Department for Trade and Industry. Due to changes in questions, this information was not available in the 2008/09 survey.

²¹⁰ Equality and Human Rights Commission. *Submission to the United Nations. ICESCR Shadow Report*. Available at <http://www.equalityhumanrights.com/human-rights/international-framework/international-covenant-on-economic-social-and-cultural-rights/> Accessed 24/09/2010.

Those with a long-term illness or disability are significantly more likely to report feeling that they have been discriminated against in relation to recruitment or promotion than the average. In the 2009/10 Citizenship Survey, 5% of people with a long-term limiting illness or disability felt they had experienced discrimination because of their disability in relation to recruitment, and 3% in terms of being turned down for a promotion.²¹¹

Other research indicates apparent discrimination against disabled applicants from all types of organisation, irrespective of size. A CV test experiment assessed the extent of discrimination for disabled people in the private sector in Scotland.²¹² The research found that those who disclosed a disability were more than half as likely to be called for interview than those with otherwise identical CVs (69% compared to 31%). There was also a noticeable difference by type of impairment. An applicant with cerebral palsy was called for interview in 80% of cases, whereas an applicant registered blind was called for interview in only 20% of cases.²¹³

Ethnicity

The Fair Treatment at Work Survey only distinguishes between White British and an 'other' ethnic minority group. The most significant difference in the data is in relation to discrimination with 7% of White British people reporting it compared to 12% of people from ethnic minorities. There are small differences between the two groups in terms of unfair treatment, with 13% of White workers reporting it, compared to 15% of those belonging to an ethnic minority group, and a similar picture for bullying and harassment with 7% of White British workers reporting it compared with 8% of people from ethnic minorities.²¹⁴

Data from the Citizenship Survey 2009/10 also suggest that individuals from ethnic minority groups are more likely to feel that they have experienced discrimination on the grounds of their race than White people. Compared to 1% of White people, 7% of ethnic minority people in 2009/10 felt they had experienced labour market discrimination by being turned down for a job because of their race. Black Caribbean people are most likely to report experiencing this form of discrimination (10%) compared to 4% of Indians and 4% of Chinese/Others.²¹⁵

²¹¹ CLG 2010.

²¹² MacRae, G. and Laverty, L. 2006. *Discrimination doesn't work: disabled people's experiences of applying for work in Scotland*. Edinburgh: Leonard Cheshire Disability Scotland.

²¹³ Hills, J. *et al.* 2010. Page 235.

²¹⁴ Fevre, R. *et al.* 2009. Table B8.1, pages 210-211.

²¹⁵ CLG 2010.

In terms of promotion, 1% of White people felt they had experienced discrimination due to their race when seeking promotion. A higher percentage of people from ethnic minority backgrounds overall felt that they had experienced this form of discrimination (5%). In particular Black African (9%), Black Caribbean (8%), Indian (5%), Chinese/Other (4%) and Pakistani (3%) people were more likely to feel they had experienced discrimination on the grounds of their race than White people (1%).²¹⁶

A wide range of smaller-scale research provides evidence of discrimination in employment on the basis of ethnicity, particularly in terms of recruitment. One recent field experiment found evidence of discrimination at the first stage of recruitment for formal vacancies finding net discrimination in favour of White names over equivalent applications from ethnic minority candidates of 29%.²¹⁷ The level of discrimination was found to be high across all ethnic minority groups.

There is some evidence that indicates that first generation ethnic minority candidates fare less well in interviews than second generation candidates. One study of 61 video-recorded interviews concluded that the interview process creates a 'linguistic penalty' for this group due to the demands on the candidate to communicate in a particular way.²¹⁸ The study focused on interviews for low-paid, mainly manual work where the complex communication demands of the job interview often exceeded the stated requirements of the job. It found that second generation ethnic minority candidates fared as well as White British candidates.²¹⁹

Evidence suggests that ethnic minority groups are more likely to encounter racial discrimination in the private sector (35%) than the public sector (4%).²²⁰ In order to protect themselves from discrimination, one research project reported that 1 in 6 ethnic minority individuals apply online for a job because they believe that this will decrease their chances of being discriminated against.²²¹

In terms of discrimination in progression, research suggests that Bangladeshi, Pakistani and Black Caribbean women face particular discriminatory barriers in the workplace. They struggle to get jobs (and progress within them), despite rising achievement in school and having a clear ambition to succeed.²²²

²¹⁶ CLG 2010.

²¹⁷ Smeaton, D. *et al.* 2010. Page 85.

²¹⁸ Hills, J. *et al.* 2010. Page 235.

²¹⁹ Hills, J. *et al.* 2010. Page 235.

²²⁰ Smeaton, D. *et al.* 2010. Page 85.

²²¹ Smeaton, D. *et al.* 2010. Page 86.

²²² Smeaton, D. *et al.* 2010. Page 85.

Religion or belief

As with ethnicity The Fair Treatment at Work Survey only distinguishes between two groups: Christians and Other or non-religious. The data from 2008 suggest that there is a small difference between the two groups, with Other/non-religious people more likely to report both unfair treatment (12% of Christians and 16% of Other/non-religious people) and discrimination (7% of Christians compared to 8% of Other/non-religious people). In relation to harassment or bullying at work 7% of both groups reported experiencing it.²²³

The 2009/10 Citizenship Survey shows that less than 0.5% of people overall felt they had experienced labour market discrimination by being turned down for a job because of their religion or beliefs; this is unchanged since 2008-09 (less than 0.5%). More detailed breakdown of these figures is not possible on this dataset because of small sample sizes.²²⁴ There is little related literature looking at discrimination specifically in relation to this measure,²²⁵ however a study carried out in 2001 found that a third of Muslim people and a quarter of Jewish and Hindu people felt that they had experienced unjust treatment in the workplace.²²⁶

Box 11.5.1 Related issue: Labour exploitation

Some groups are more at risk of experiencing poor working conditions than others. Groups at particular risk include irregular migrant workers, trafficked workers, domestic workers in private households and former asylum seekers. Vulnerability is increased by the interaction of a number of factors including: being an agency worker, having limited English skills, pregnancy, lack of employment status and unfair tax status (see Box 11.4.1).²²⁷

Irregular migrant workers and labour exploitation

While not all unauthorised work is exploitative or abusive, irregular migrant workers are considered to be among the groups most vulnerable to exploitation.²²⁸ Irregular migrants are much more likely to be workless, with around 50% of adults not working in a given week compared to about 25% of the whole migrant population. When in work, migrants from 'irregular origins' earn

²²³ Fevre, R. *et al.* 2009. Table B8.1, pages 210-211.

²²⁴ CLG 2010.

²²⁵ Smeaton, D. *et al.* 2010. Page 88.

²²⁶ Smeaton, D. *et al.* 2010. Page 88.

²²⁷ Equality and Human Rights Commission 2010. *Inquiry into recruitment and employment in the meat and poultry processing sector*. London: Equality and Human Rights Commission.

²²⁸ Smeaton, D. *et al.* 2010. Page 124.

Box 11.5.1 Continued

on average about 30% less than those from legal origins; when controlling for residential status, the employment gap reduces, but the estimated gap in earnings remains the same.²²⁹

There are few sources of factual and robust information concerning the size of the irregular migrant population. In many cases the evidence comes to light only when a crisis occurs and is therefore not representative. Estimates of the total number of irregular migrants fall in the range of 373,000 and 719,000 with a central estimate of 533,000; when children are included, this figure rises to 618,000.²³⁰

Trafficked workers and labour exploitation

There are currently no available robust estimates of the numbers of victims of trafficking in the UK for the purpose of labour exploitation.²³¹ This is not helped by the fact that the distinctions between trafficking, smuggling and forced labour in particular are overlapping and blurred. The latest data from the UK Human Trafficking Centre (UKHTC) provide information on referrals by nationality, area of origin, gender, age and type of exploitation. We know that victims of sexual exploitation and domestic servitude are predominantly female, while those of forced labour are more likely to be male. In 2010, children were identified as victims in all forms of exploitation, but predominantly in sexual exploitation and forced labour.²³¹

Child workers and labour exploitation

The Child Exploitation and Online Protection Centre estimated in 2009 that 360 potential child victims are trafficked per year.²³² However, this estimate relies on very limited quantitative data and should be treated as a low estimate. Foreign national children trafficked to the UK most often work in cannabis farms. Research conducted by UNICEF in 2009 suggests that children also work in restaurant kitchens, nail bars and food processing factories.²³⁴ The vast majority work without a permit (although studies show large regional variation), sometimes for extremely long hours or in dangerous conditions.²³⁵

²²⁹ Smeaton, D. *et al.* 2010. Page 143.

²³⁰ Smeaton, D. *et al.* 2010. Page 141.

²³¹ Smeaton, D. *et al.* 2010. Page 144.

²³² Smeaton, D. *et al.* 2010. Page 147.

²³³ Smeaton, D. *et al.* 2010. Page 149.

²³⁴ Smeaton, D. *et al.* 2010. Page 150.

²³⁵ Smeaton, D. *et al.* 2010. Page 150.

Domestic workers and labour exploitation

Domestic workers are considered to be among the most vulnerable groups to face exploitation. In the UK, migrant domestic workers have the legal status of workers (i.e. they are entitled to a minimum wage and time off etc). However many are not aware of their rights and as they tend to work alone in residential properties, their problems rarely come to attention. A small-scale study of 340 registered domestic workers sheds light on their experience. Of the registered workers, 80% were women; the majority were working for Middle Eastern employers. Half worked more than 16 hours per day and almost two-thirds had no day off. A huge percentage (72%) reported suffering from psychological abuse.²³⁶

Agency workers and labour exploitation

Foreign workers are more likely to be engaged in agency work in the UK rather than as direct employees. Agency workers are considered to be particularly vulnerable due to their lack of equal rights within current employment law.²³⁷ The vulnerability of agency workers is indicated by the fact that over 40% of the licenses issued by the Gangmasters Licensing Authority (GLA) were conditional due to poor employment practices, specifically failure to adhere to wage, health and safety legislation, and failure to protect workers from bullying, harassment and physical violence.²³⁸ Almost 1 in 5 (19%) of agency workers in the UK are from ethnic minority groups compared to 13% of temporary workers as a whole, and just 8% of all employees.²³⁹

Specific sectors have been identified as particularly problematic, including construction, hospitality and care. Some sectors have a higher proportion of agency workers than others. For example, it is estimated that foreign nationals represent 66% of the total number of workers supplied by agencies in agriculture and horticulture and migrant workers make up 70% of agency staff in meat and poultry processing firms.²⁴⁰ A recent inquiry into recruitment and employment in the meat and poultry processing sector found that more than 8 out of 10 of the 260 workers who submitted evidence said that agency workers were treated worse than directly employed workers. This included receiving poorer pay, being allocated the least desirable jobs, and being treated like 'second-class' citizens in the workplace. No one thought that agency workers were treated better than permanent staff.²⁴¹

²³⁶ Smeaton, D. *et al.* 2010. Page 151.

²³⁷ Smeaton, D. *et al.* 2010. Page 151.

²³⁸ Smeaton, D. *et al.* 2010. Page 152.

²³⁹ Smeaton, D. *et al.* 2010. Page 151.

²⁴⁰ Equality and Human Rights Commission 2010.

²⁴¹ Equality and Human Rights Commission 2010.

Sexual orientation

The Fair Treatment at Work Survey 2008 found that LGB adults were more than twice as likely to report bullying or harassment at work as other employees (18% compared to 7%); twice as likely to report discrimination (14% compared to 7%), and almost twice as likely to report experiencing unfair treatment (22% compared to 13%).²⁴² In the 2009/10 Citizenship Survey, 0.5% of people overall felt that they had experienced labour market discrimination when being turned down for a job or a promotion, because of their sexual orientation.²⁴³ Looking specifically at LGB people in the 2008/09 Citizenship Survey, the data show that they were far more likely than heterosexual people to report experiencing discrimination on the grounds of their sexual orientation in terms of recruitment (8% compared to less than 0.5% of all people).²⁴⁴

There are a number of other indications that LGB people experience discrimination, including that:

- LGB people are identified as one of the most stressed groups of individuals in society vulnerable to high levels of stress-related ill health
- There are reported fears about disclosing sexual orientation in the workplace for fear of discrimination²⁴⁵
- The 2008 Gay British Crime survey conducted by Stonewall found that 1 in 10 respondents was a victim of a hate crime incident committed by a work colleague.²⁴⁶

²⁴² Grainger, H. and Fitzner, G. 2008.

²⁴³ CLG 2010.

²⁴⁴ CLG 2009.

²⁴⁵ Smeaton, D. *et al.* 2010. Page 89.

²⁴⁶ Smeaton, D. *et al.* 2010. Page 89.

Transgender

Although little empirical work has been done in the area of employment for transgender people, it is reported in qualitative research and small-scale survey work that the employment sphere is the space in which transgender people face the most significant and pervasive levels of discrimination. Available studies provide evidence of harassment and other forms of discrimination in the workplace:

- 42% of people not living permanently in their preferred gender cited the workplace, and a fear that their employment status might be threatened, as a reason for not transitioning²⁴⁷
- 1 in 4 transgender people report making use of an inappropriate toilet in the workplace, or none at all, in the early stages of transition
- As a consequence of harassment and bullying 1 in 4 transgender people will feel obliged to change their jobs.²⁴⁸

In terms of trigger points for discrimination, transgender people highlight transitioning at work as the most difficult time.²⁴⁹

²⁴⁷ Whittle, S. *et al.* 2007. Page 15.

²⁴⁸ Whittle, S. *et al.* 2007. Page 39.

²⁴⁹ Whittle, S. *et al.* 2007. Figure 4.3, top 9 trigger points, page 26.

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Chapter 12:

Standard of living

Summary

In order to flourish in life, every person needs a basic level of financial security and decent housing. Yet some groups are far more likely than others to experience poverty, to lack access to financial products, or to live in substandard housing. The evidence shows stark disparities in relation to gender, disability, and ethnicity which in many cases result from the inequalities in education and employment outcomes described elsewhere in this Report.

Women are much more likely to be low paid than men throughout their working lives. This often translates into lower income in retirement as well. Women, particularly those who have been lone parents, are particularly susceptible to poverty in later life, as they are less likely to have been able to build up savings and pensions. Households headed by women are also more likely to live in overcrowded or substandard homes than those headed by men.

Disabled households tend to have less overall household income than those without, and working disabled people are more likely than average to be on low hourly pay. The fact that disabled people often spend periods of their working-age lives out of work increases their risk of poverty in later life. Disabled people are also less likely than average to have a bank account, and people who have learning disabilities are much less likely to have one. These worse outcomes are compounded by the extra costs associated with living with some impairments – the proportion of disabled pensioner households with low incomes is not significantly higher than that of non-disabled pensioner households, partly due to their receipt of disability benefits, but the standard threshold of low income makes no allowance for any extra costs of disability.

Meanwhile, some ethnic minority groups experience much worse outcomes than average – and even worse than might be expected, taking into account differences in age structures, educational attainments and other factors. People of Indian origin are more likely to have low household income than White people, despite the fact that a low proportion of Indians earn low hourly wages and they have higher than average educational attainments. More than half of Pakistani and Bangladeshi adults live in poverty and are also much less likely than average to have a current account or home contents insurance. Just over a quarter of Pakistani and Bangladeshi adults have formal savings, compared to two-thirds of White people. Asian and Black households are also several times more likely than White British households to live in overcrowded or substandard homes.

Finally this chapter highlights the gap between society's richest and poorest. The poorest 10% possess average wealth one hundredth the average wealth of the richest 10%. People in social housing are more likely to live in overcrowded conditions and are more likely to say that their local neighbourhood has problems with crime.

Introduction

Access to material resources can enable an individual to pursue their ambitions, to invest in their future, and to live in security and comfort. Consequently, for most of us, our standard of living is closely associated with our earnings and the quality of our home. A lack of material resources can make it harder to plan for the future, to exercise meaningful control over one's destiny, and to enjoy life. For those with the least material resources, a poor standard of living has a huge impact on life chances.

This chapter looks at different groups' access to some of those material resources and focuses on those with the least – low income, wealth inequality and overcrowded and substandard housing. In addition we look at local neighbourhood environment.

The political focus for much of the past decade has been, in broad terms, on alleviating the disadvantage among the poorest in society – in particular specific focus has been on the reduction of child poverty. Evidence suggests that the general public agree with the aim of greater equality of material resources: research shows that public opinion in Britain has consistently considered that the gap between rich and poor is too large.¹

However, in recent years the gap between the richest and the poorest has widened, and, despite some progress, significant numbers of people remain in poverty today. In many cases, the poor outcomes demonstrated in this chapter are influenced to a substantial degree by the different outcomes in education and employment discussed elsewhere in the report.

Indicators

- 1. Wealth**
- 2. Low pay and low income**
- 3. Housing and neighbourhood quality**
- 4. Financial exclusion**

¹ Orton, M. and Rowlingson, K. 2007. *Public Attitudes to Economic Inequality*. York: Joseph Rowntree Foundation. Page 6.

Under **wealth**, we use two detailed measures: median household wealth and the ratio of the 90th to the 10th percentile of wealth in each equality group.

Under **low pay and low income**, we give the percentage of employees who earn less than 60% of the median hourly wage, and the percentage of individuals in households with below 60% of median income after housing costs.

There are several measures examined under **Housing and neighbourhood quality**: overcrowded accommodation, substandard accommodation and the numbers of households reporting problems with pollution and crime.

For **financial exclusion**, we give the numbers of people without bank accounts and without home contents insurance, and the number of people using high-cost credit

As in the rest of Part II, this chapter explores what we know about these indicators and what the evidence tells us about the experiences of different groups.

12.1 What we know about wealth

Measure:

Wealth – Median (total net) household wealth for each equality group, its rank in the overall British distribution and the ratio of the 90th to the 10th percentile of household wealth within each equality group

How this measure works:

We use the National Equality Panel's analysis of the Wealth and Assets Survey (2009) of over 30,000 households in Britain from 2006-08. This allows us to report on age, ethnicity, disability, and religion or belief. We also give some separate figures for Scotland, England and Wales.

The wealth measure applies to the household representative person so gives no information about the within-household wealth levels, as it is not possible to distinguish between the assets of household members. Therefore in this section no gender breakdown has been provided. However, supplementary information about levels of savings does allow some gender comparisons.

There is very limited related literature for this measure for groups defined by sexual orientation and transgender, therefore they are not covered in this section.

Median wealth and rank

The median (total net) household wealth measure allows us to compare the 'typical' wealth of different equality groups, and where it is in the overall distribution for Britain. It reflects all wealth (a sum including cars and other possessions).

90:10 ratio

The 90:10 ratio provides a summary measure of inequality. It is the ratio between the values of an outcome for people in the top 10% and bottom 10% of a distribution. The greater this '90:10' ratio, the more unequal a distribution across most of its range.² This measure allows us to measure inequality in wealth 'within-group' i.e. the difference between the top 10% and bottom 10% of the same equality group.

² Hills, J. *et al.* 2010. *An Anatomy of Economic Inequality in the UK Report of the National Equality Panel*. London: Government Equalities Office. Glossary of terms. Page xi.

The within-group distributions must be treated with caution because of small sample sizes. For this reason, we cannot show wealth distribution within ethnic minority groups or for religion or belief. Results are marked with * in tables if they are not statistically significant. It should also be noted that wealth is accumulated (and used) throughout the lifecycle, and age differences need to be seen in this context. This will have important results for the wealth of groups with different age profiles, particularly the Pakistani and Bangladeshi groups whose age profiles are very young. Age-standardised differences are not possible due to small sample sizes.

Overview

Wealth is distributed even more unequally than income as people are able to accumulate different levels of wealth throughout their lives, leading to wider inequalities in wealth than in income levels alone.³ Well-known differences in house values make it unsurprising that wealth varies across Britain. **The total net household wealth of the top 10% of the population is at £853,000, almost 100 times higher than the wealth of the poorest 10%, which is £8,800 or below.**⁴

People in routine occupations typically have only a fifth the wealth of higher professionals, and White British households have median wealth 15 times that of Bangladeshi households, which can only partly be explained by the younger age profile of the latter group.⁵

What we know about the overall situation

Overall for Great Britain, data comparing the relative ranking of the median wealth of England, Scotland and Wales show that while England and Wales reflect the GB-wide average, Scotland is significantly worse off. The median wealth value in Scotland ranks only in the 42nd percentile in the GB-wide wealth distribution. The 90:10 ratio highlights that there are slightly higher wealth inequalities within England than Scotland and Wales.

³ Cabinet Office 2010. *State of the nation report: poverty, worklessness and welfare dependency in the UK*. London: Cabinet Office. Page 23.

⁴ Hills, J. *et al.* 2010. Page 58.

⁵ Hills, J. *et al.* 2010. Page 208.

Table 12.1.1 Total wealth inequality between and within countries in Britain, 2006/08⁶

Country/Region	Median wealth (£)	Rank in the overall distribution	90:10 ratio
GB Overall	204,500	50	97
England	210,600	50	96
Wales	205,500	50	90
Scotland	150,600	42	93

Source: Wealth and Assets Survey 2006/08.

What we know about the situation for different groups

Age

Table 12.1.2 shows a ‘hump-shaped’ pattern for the relationship between wealth and age, as people accumulate wealth during the working years and draw on it as they get older, as pensioners. The 90:10 ratio figure also shows that inequality within each age group is greater during working years (i.e. 25-55 years).

However, it should be noted that these results are influenced by ‘cohort’ factors, in other words the extent to which people born at particular times have been able to more easily build up pension wealth and or have gained from general rises in house prices.

⁶ Hills, J *et al* 2010 analysis of the Wealth and Assets Survey (2006-2008). Available at: http://www.equalities.gov.uk/national_equality_panel/publications/charts_and_statistical_annex/statistical_annex/wealth.aspx

Table 12.1.2 Total wealth inequality between and within age groups in Britain, 2006/08⁷

	Median wealth (£)	Rank in the overall distribution	90:10 ratio
GB Overall	204,500	50	97
Age of Household Representative Person			
16-24	12,900	12	46
25-34	65,900	28	80
35-44	174,900	45	77
45-54	287,800	60	68
55-64	416,100	72	48
65-74	306,000	62	37
75-84	225,200	52	46
85+	171,800	45	47

Source: Wealth and Assets Survey 2006/08.

Box 12.1.1 Related issue: Differences in wealth and savings**Gender**

The wealth analysis in this section does not allow for a detailed enough breakdown of wealth data between genders. A measure which does allow us to look at some gender differences in this area is the level of savings that men and women have each built up in their own right. We do the same for different ethnic minority groups and disabled people.

Analysis of the Family Resources Survey (FRS) in 2007/08 shows that there does not appear to be a significant difference in the levels of savings overall between the genders – 40% of men and 39% of women had no savings at all, and the median value of savings held by both men and women was £3,000.⁸

However, using longitudinal data from the British Household Panel Survey, one study compared men and women's savings over a 10 year time period and found that men who were married in 1995 had experienced a similar increase in the value of their savings and investments regardless of whether they divorced or stayed married. In contrast, women who divorced during this period saw a much smaller increase in the value of their savings compared to women who stayed married. The researchers found a similar pattern for women who became

⁷ Hills, J. *et al.* 2010. Table 8.1, page 214.

⁸ Lawton, K. and Platt, R. 2010. *Review of access to essential services: financial inclusion and utilities*. Institute for Public Policy Research. This paper is available on the Equality and Human Rights Commission's Triennial Review web pages. Page 17.

Box 12.1.1 Continued

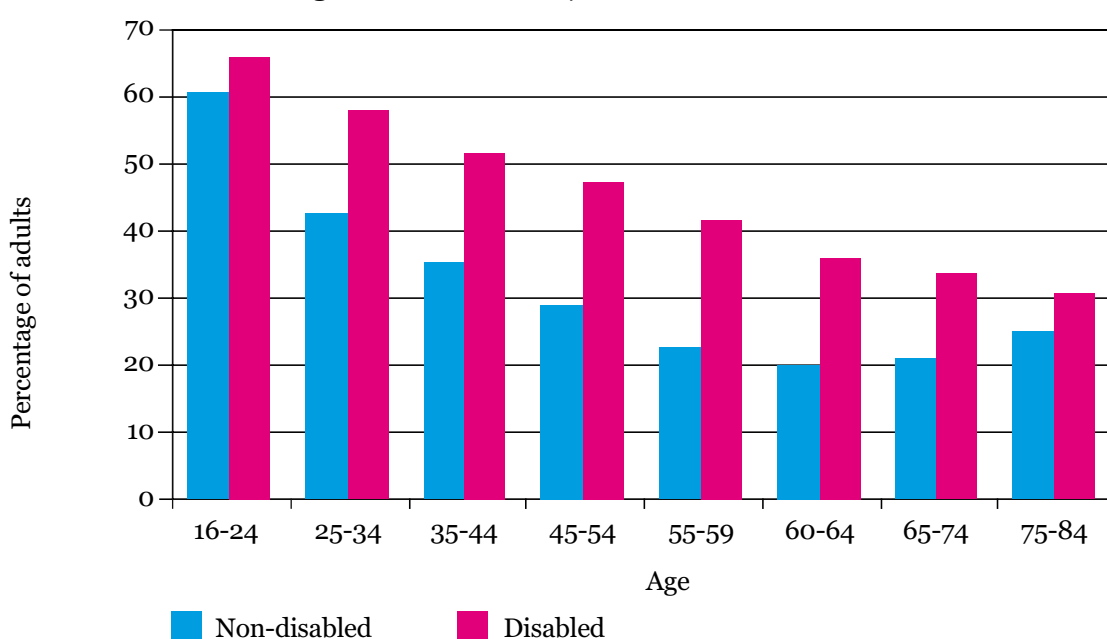
parents for the first time. They concluded that life transitions have a much more significant (and potentially negative) impact on women's savings than on men's.⁹

Disabled people

Overall, the median value of savings held by disabled people is greater than that of non-disabled people: £3,200 compared to £3,000. This is probably due to the volume of savings held by older disabled people, many of whom will not have been disabled during their working lives and will have been able to amass savings for retirement during their working lives.¹⁰

Examining access to savings, and broken down into age groups, Figure 12.1.1 shows that more disabled people than non-disabled people lack savings in each age group. The difference is small at extremes in the age spectrum but wide in the middle; in the 55-59 year age group, for example, the proportion of non-disabled people lacking savings is 23% while the figure for disabled people is 42%.

Figure 12.1.1 Proportion of disabled and non-disabled adults in each age group who lack formal savings in the UK, 2007/08¹¹



Source: Family Resources Survey 2007/08.

Note: Respondents reporting a disability defined by the Disability Discrimination Act.

⁹ Lawton, K. and Platt, R. 2010. Page 18.

¹⁰ Lawton, K. and Platt, R. 2010. Page 33.

¹¹ Lawton, K. and Platt, R. 2010. Page 33.

Box 12.1.1 Continued**Ethnicity**

The figure below shows no statistically significant difference between the genders in terms of the proportions who lack savings by ethnic minority groups. Disparities between the different ethnic groups are much larger. Overall, whilst 35% of White people do not have savings, this rises to 73% for the Pakistani/Bangladeshi group.

Figure 12.1.2 Proportion of adults who lack formal savings, by ethnic group in the UK, 2007/08¹²



Source: Family Resources Survey 2007/08.

Analysis of the FRS of the value of savings held by adults from different ethnic background shows that although people from an Indian background are less likely than White people to have savings, when they do have savings, their median value is almost identical to the value of savings held by White people, at £3,000. However, adults from other ethnic minority backgrounds tend to have lower value savings than White people. The median value of savings held by Black people is the lowest of all the five groups covered by the FRS, at £2,000 (note sample sizes are small i.e. Black people N=108).¹³

Socio-economic groups

Unsurprisingly, in line with patterns of income inequality, the relationship between occupational class and wealth distribution shows a disadvantaged position for those with lower levels of occupational status. As we move up the occupational ladder, the median wealth level and rank in the distribution increases, and notably the degree of within-group inequality actually decreases,

¹² Lawton, K. and Platt, R. 2010. Page 24.

¹³ Lawton, K. and Platt, R. 2010. Page 25.

shown in the 90:10 ratio. The 90:10 ratio for higher professionals is 25, compared to 92 for those in routine occupations and 117 for those who have never worked or are long-term unemployed, showing wide in-group difference for these categories. These patterns require further analysis in order to understand what is causing such differences within these socio-economic groups.

Table 12.1.3 Total wealth inequality between and within socio-economic groups in Britain, 2006/08¹⁴

	Median wealth (£)	Rank in the overall distribution	90:10 ratio
GB Overall	204,500	50	97
Socio-economic classification (NS-SEC) of Household Representative Person			
Large employers and higher managerial	532,500	79	16
Higher professional	450,500	74	25
Lower managerial and professional	325,000	64	31
Intermediate occupations	200,400	49	44
Small employers and own account workers	236,600	54	37
Lower supervisory and technical	161,100	43	60
Semi-routine occupations	86,700	32	88
Routine occupations	74,000	30	92
Never worked/long-term unemployed	15,000	13	117

Source: Wealth and Assets Survey 2006/08.

Disability

The data in Table 12.1.4 below show that households with a member with a long-standing illness or disability do not appear particularly disadvantaged in the wealth distribution compared to households where there is no disability (ranked as 49 compared to 50 for GB overall). However, the 90:10 ratios show great inequality within the profile of disabled households compared to households without disabled people. However, without impairment specific data it is not possible to establish the extent to which wealth is affected by different impairments and by the age profile, causing this wide inequality in wealth levels between disabled people.

¹⁴ Hills, J. *et al.* 2010. Table 8.3, page 215.

Table 12.1.4 Total wealth inequality between and within the disabled and non-disabled population in Britain, 2006/08¹⁵

	Median wealth (£)	Rank in the overall distribution	90:10 ratio
GB Overall	204,500	50	97
Disability within household			
Households where there is a disability/long-standing illness	198,200	49	104
Households where there is no disability/long-standing illness	209,900	50	84

Source: Wealth and Assets Survey 2006/08.

Ethnicity

For ethnicity, we can only report on the median ranking in the wealth distribution because sample sizes are generally too low to undertake reliable within-group analysis. The varying age profiles of ethnic groups must be borne in mind when analysing these statistics, as is the proportion of recent migrants. Such groups have had a shorter period in which to accumulate wealth in Britain, hence their poor performance on measures of wealth equality.

The data show that the Bangladeshi and Black African groups are positioned very low in the wealth distribution, as are the Pakistani, Black Caribbean and Chinese groups. When contrasted with their educational outcomes the Chinese population's wealth levels are strikingly low, because they actually perform extremely well in education compared with some other ethnic minority groups (for more information see Chapter 10: Education). The Indian and White British groups are ranked close to the middle of the wealth distribution indicating no significant disadvantage relative to the wider population.

¹⁵ Hills, J. *et al.* 2010. Table 8.2, page 215.

Table 12.1.5 Total wealth inequality between ethnic groups in Britain, 2006/08¹⁶

	Median wealth (£)	Rank in the overall distribution
GB Overall	204,500	50
Ethnicity of Household Representative Person		
White British	220,700	52
Indian	203,300	49
Other	111,300	36
Other White	99,300	34
Pakistani	96,900	33
Black Caribbean	75,500	30
Chinese	66,300	28
White and Black African	*	*
White and Asian	*	*
Other Mixed	*	*
Other Black	*	*
Other Asian	49,500	25
White and Black Caribbean	35,200	21
Black African	20,600	16
Bangladeshi	15,000	13

Source: Wealth and Assets Survey 2006/08.

Religion or belief

Due to sample sizes, we can only report on the median ranking of wealth, as with ethnicity above. In terms of religion or belief, while Muslim and Buddhist groups have the lowest levels of wealth of all groups, this must once again be viewed in the context of the age profile of those populations. These groups have a significantly younger age profile than the other religious groups, including Christian, Hindu, Jewish and Sikh. However, further analysis is required to explain the outcome for the secular and 'other' groups.

¹⁶ Hill, J. *et al* 2010 analysis of the Wealth and Assets Survey (2006-2008). http://www.equalities.gov.uk/national_equality_panel/publications/charts_and_statistical_annex/statistical_annex/wealth.aspx

Table 12.1.6 Total wealth inequality between and within religious groups in Britain, 2006/08¹⁷

	Median wealth (£)	Rank in the overall distribution
GB Overall	204,500	50
Religion of Household Representative Person		
Christian	222,900	52
Buddhist	74,800	30
Hindu	206,100	50
Jewish	422,100	72
Muslim	41,600	23
Sikh	228,700	53
Any other religion	161,100	43
No religion	138,500	40

Source: Wealth and Assets Survey 2006/08.

¹⁷ Hill, J. *et al* 2010 analysis of the Wealth and Assets Survey (2006-2008). http://www.equalities.gov.uk/national_equality_panel/publications/charts_and_statistical_annex/statistical_annex/wealth.aspx

12.2 What we know about low pay and low income

Measures:

Low pay – Percentage of employees who earn less than 60% of the median hourly wage

Low household income – Percentage of individuals in households with below 60% of median household income, after housing costs (for working-age and pensioner households)

How these measures work:

These measures allow for breakdowns by gender, ethnic group, religion or belief, disability status and age across Britain, as well as gender and disability figures for England, Scotland and Wales for low pay.

Disability data are not broken down into specific impairments.

Both the pay and the income measure are compared to a threshold of low earnings/income set at 60%, which is a commonly used threshold to denote poverty.

Low pay

The low hourly pay measure (taken from the Labour Force Survey 2009) does not measure an individual's overall level of income or living standard since this depends on how many hours someone works, who they live with and what the rest of the household may earn. However, it is an indicator of the *potential* that each individual has to contribute to their own standard of living through work, and is comparable between groups.

Low household income

The low household income measure is taken from the 'Households Below Average Income (HBAI)' figures for 2008/09, derived from the Family Resources Survey. This includes all the income coming into households, 'after housing costs' i.e. disposable income from all sources, once people have paid for their rent/mortgage and taxes.

We measure household income 'after housing costs', because housing costs represent a very significant part of household expenses, especially for those on low incomes.¹⁸

¹⁸ Alkire, S. *et al.* 2009. *Developing the Equality Measurement Framework: selecting the indicators. Research Report 31. Manchester: Equality and Human Rights Commission.* See discussion in chapter 9.

The disadvantage compared to measuring household income ‘before housing costs’ is that ‘after housing cost’ income is affected by wide variations in housing costs that are often beyond people’s control (e.g. geographic variations) or may be due to an individual’s choice to live in a more expensive house or neighbourhood.

Overview

Women are much more likely to be low paid and remain vulnerable to poverty both as lone parents and as single pensioners, as their incomes are affected by the extent to which they are able to build up savings and pensions in their own right.

Disabled people often spend periods of their working-age lives out of work, which increases their risk of poverty while they are of working age and in retired life.

Using a standard measure of low income (60%) for households with disabled people understates the extent to which these households experience reduced quality of life by not taking into account the extra costs associated with disability.

These measures show that poverty through low pay and low income is higher than average for ethnic minorities. Some particular groups, like those of Indian origin, have a greater than average risk of low household income compared to White people, even though they do better than average on dimensions like educational attainment. Some have very high poverty rates – notably, nearly two-thirds of Bangladeshi and Pakistani households have low household income.

What we know about the overall situation and trends

Low hourly pay

Across Britain, 14% of working-age people in work earn less than 60% of the median hourly earnings level. The figure is the same for England and Scotland. In Wales, rates are slightly higher, with 16% of people earning less than 60% of the median.¹⁹

Low household income

22% of individuals in the United Kingdom live in households with an income below 60% of the median after housing costs, which equates to 13.4 million people including children.²⁰ This is a slight decrease since 1996/97, when 25% of

¹⁹ Equality and Human Rights Commission analysis of Office for National Statistics (ONS) Annual Population Survey (October 2006–September 2009). Results averaged over three years’ data.

²⁰ Joyce, R., Muriel, A., Phillips, D. and Sibieta, L. 2010. *Poverty and Inequality in UK* – 2010. London: Institute for Fiscal Studies. Table 4.1, page 38.

the population or 14 million people were below the threshold. In 2002/03 there were 2.5 million (24% of the total) pensioners living below this poverty line; this decreased to 1.8 million (16%) in 2008/09.

What we know about the situation for different groups

Gender and age

Table 12.2.1 below shows that, across Britain, a higher proportion of women than men earn less than 60% of the median hourly wage. The proportion of men and women, but particularly women, earning less than 60% of the median is highest in Wales.

Table 12.2.1 Percentage of employees with gross earnings less than 60% of the hourly median, Britain, 2006/09²¹

	GB		England		Scotland		Wales	
	%	Total Base	%	Total Base	%	Total Base	%	Total Base
Men	10	120,469	10	86,524	10	20,473	13	13,393
Women	17	132,034	17	93,625	17	23,164	20	15,324
Age:								
16-34 yrs	20	79,274	20	58,049	22	12,331	25	8,702
35-54 yrs	9	130,080	9	91,848	8	23,541	11	14,809
55+	13	43,149	13	30,252	13	7,765	15	5,205
Total	14	252,503	14	180,148	14	43,637	16	28,717

Source: Annual Population Survey October 2006-September 2009.

Across the age ranges there is a bell-curve pattern in earnings that are at the maximum point around the prime working-age of 25-65 years, with more people likely to be earning less than 60% of the median at the younger and older ends of the spectrum.

More people have low earnings in the 16-34 age group in Scotland and Wales compared to Britain as a whole. In Wales, this disparity continues across all age groups, with rates only starting to equalise across Britain in the older age groups (55 plus), although rates remain higher in Wales.

Low household income

Working age

At the UK level, Table 12.2.2 below shows a greater proportion of women living in households which have a household income below the 60% median income level compared to men. This reflects the circumstances set out in preceding chapters in

²¹ Equality and Human Rights Commission analysis of ONS Annual Population Survey (October 2006-September 2009). Results averaged over three years' data.

relation to the experiences of women of employment outcomes, pay gaps, breaks in employment and prevalence of part-time and insecure employment. Women still earn less, and are more likely to work part-time or periodically, meaning there is a greater chance of women's poverty levels accumulating over the lifetime, a fact illustrated by the figures for pension age individuals in the next section.²²

Pension age

Table 12.2.2 also shows that more women pensioners live in households with a low income compared to male pensioners, 17% of women pensioners compared to 14% of men.

Table 12.2.2 Percentage of individuals living in households below 60% of median income, after housing costs in the UK, 2008/09²³

	Adults of working age %	Individuals in pensioner households %
Men	20	14
Women	22	17

Source: Households Below Average Income 2008/09.

In general, women are less likely to qualify for state pensions than men. For example, in 2008, 60% of women compared with 10% of men reaching State Pension Age were entitled to less than the full amount of the Basic State Pension (BSP).²⁴ This is generally because women tend to have more gaps in employment and spend more time in part-time work. Women are less likely to accrue their full entitlement to the Second State Pension (S2P) as the qualifying years for S2P have not been reduced and the crediting system has been less flexible than for BSP.

Women are also less likely to be saving into a private pension.²⁵ Family Resources Survey data for 2005/06 show that 43% of men were contributing to a private pension compared to 37% of women.²⁶ This gap had narrowed slightly over the

²² Bellamy, K. and Rake, K. 2005. *Money, money, money: Is it still a rich man's world?* London: Fawcett Society. Page 30.

²³ Department for Work and Pensions (DWP) 2010. *Households Below Average Income: An analysis of the income distribution 1994/95 - 2008/09*. London: DWP.

²⁴ Lawton, K. and Platt, R. 2010. Page 18. For further pay gap discussion see Chapter 11: Employment.

²⁵ Bellamy, K. and Rake, K. 2005. Page 44.

²⁶ Lawton, K. and Platt, R. 2010. Page 19. Pension estimates from the FRS have not been issued since 2005/06 due to data issues. ONS expects revised pensions data from the FRS to be available in the 2009/10 dataset.

preceding five years, with a 6 percentage point fall in the proportion of men who were contributing to a private pension between 1999/2000 and 2005/06 but almost no change for women.²⁷

One research study suggests that women's risk of poverty may be related to marriage history: women who married before age 21, or who had experienced divorce (especially after age 45) or who had been widowed (especially before age 45) were more likely to be poor in later life. Women who had a child before age 23 were more likely to experience late-life poverty.²⁸

Box 12.2.1 Related issue: Children in poverty

In 2008/09, there were 3.9 million (30%) children living in UK households below 60% of median household income after housing costs. Compared to 2007/08, this represents a fall of 0.1m, from 4.0 million (31%), although numbers have fluctuated between 3.6 and 4.0 million since 2002.²⁹

Household composition: Poverty experienced by parents will obviously impact on their children, but children of lone parents are more likely to live in poverty. Half of all lone parent families in the UK are on low incomes, more than twice the rate for couples with children. However, this figure is an improvement compared to a decade ago, when 60% of all people in lone parent families were in low income households. Overall, female lone-parents are much more likely to be in low income households than their male equivalents.³⁰

Disability: Table 12.2.3 below shows that children living in a household with disability are more likely to live below the 60% median income level, indicating an important link between child poverty and disability. It has been estimated that it costs on average, an additional £99.15 a week to bring up a disabled child and that benefits are not enough to cover the extra costs.³¹

²⁷ Lawton, K. and Platt, R. 2010. Page 19.

²⁸ Glaser, K. *et al.* 2009. *Life course influences on poverty and social isolation in later life*. London: Equality and Human Rights Commission and Age UK. Multivariate analyses were not used to test the significance of the timing of marital events, as these analyses focused on all women and not just those with the experience of specific events. Page 31.

²⁹ Joyce, R *et al.* 2010. Table 4.1. Page 38.

³⁰ The Poverty Site. Poverty indicators. 'Low income by family type'. Analysis of Households Below Average Income data 2005/6 -2007/8 Available at: <http://www.poverty.org.uk/05/index.shtml?2> and <http://www.poverty.org.uk/07/index.shtml?2> Accessed 11/08/2010.

³¹ Barnardo's 2007. *It Doesn't Happen Here: The reality of child poverty in the UK*. London: Barnardo's.

Box 12.2.1 Continued

Ethnicity: Data from 2003-06 show that 26% of White British children were living in households with below 60% of median household income after housing costs compared to 73% of Bangladeshi children, 57% of Pakistani children, and 57% of Black African children.³²

It is suggested that lone or couple parent status, or numbers of children in each household, does not completely 'explain' the risk of poverty experienced by different ethnic minority groups, due to the variations in rates experienced within the different groups. Patterns of deprivation, persistent poverty and worklessness are all key to understanding the specific experiences of ethnic minority families:

"If a short summary were possible it would read: Indian children are poor despite family characteristics which are associated with lower risk, black Caribbean and black African children are poor predominantly because of their family characteristics (and the risks that go with them); Pakistani and Bangladeshi children are poor partly because of their characteristics but also to a much greater degree than their family characteristics would suggest".³³

Disability**Low hourly pay**

For Britain as a whole and for England and Scotland specifically, 16% of disabled people are earning less than 60% median hourly income (compared to 13% non-disabled people GB-wide and in England and Scotland). However, in Wales 17% disabled people are in the low hourly earning category compared to 16% non-disabled people (difference between these figures not significant).³⁴

Low household income

Working age: Table 12.2.3 below shows that 19% of households where there are no disabled adults or children have low household income. In households where either an adult or child are disabled (but not both), the rate is higher at 29% and 28% respectively. Households with one or more disabled adult and one or more disabled child have a poverty rate of 38%. Whilst these figures show distinct disadvantage for disabled people, without impairment-specific data this overall association between disability and poverty is not very informative. Particularly it doesn't capture the extent to which the '60% threshold' is a fair assessment of low income for disabled households, as their living costs may vary considerably.³⁵

³² Platt, L. 2009. *Ethnicity and child poverty*. DWP Research Report 576. London: DWP, analysis of pooled Households Below Average Income data, 2003/04, 2004/05 and 2005/06 for GB. Page 27.

³³ Platt, L. 2009. Page 152.

³⁴ Equality and Human Rights Commission analysis of ONS Annual Population Survey (October 2006–September 2009). Results averaged over three years' data.

Pension age: The rates for disabled pensioners living in low income households is slightly lower than that of non-disabled households, suggesting that, according to this measure at least, disabled pensioners do not experience greater poverty than the rest of the pension age population. This may be because the level of state benefits for pensioners provides an effective income floor that prevents significant numbers from falling below the 60% poverty threshold. As for working-age people, it should be noted that the 60% benchmark of 'low income' does not take into account extra costs of living for some disabled people.

Disabled people are not a homogeneous group. As with wealth, some types of impairments can have a more acute impact on poverty levels incomes than others, due to the impact on employment levels, living costs etc. In general, disabled people of working age, as set out in Chapter 11: Employment, are less likely to be in work, are lower paid and retire earlier – all of which have an impact on working and pension age poverty, and this is therefore an area that warrants further research.³⁶

Table 12.2.3 Percentage of individuals living in households below 60% of median income, after housing costs in the UK, 2008/09³⁷

	Adults of working age %	Individuals in pensioner households* %
No disability in household	19	17
One or more disabled child, no disabled adult	28	
One or more disabled adult, no disabled child	29	15
One or more disabled adult and one or more disabled child	38	

Source: Households Below Average Income 2008/09.

* No breakdown in terms of children's disability available for pensioner data.

³⁵ Parekar, G. 2008. *Disability Poverty in the UK*. London: Leonard Cheshire Disability.

³⁶ Lawton, K. and Platt, R. 2010. Page 34.

³⁷ DWP 2010.

Ethnicity

Low hourly pay

We can only report on Britain-wide results due to sample sizes. There are disproportionately large numbers of Bangladeshi, Pakistani and 'Other Asian' employees with low earnings, reflecting in general their employment profile.

Table 12.2.4 Percentage of employees with gross earnings less than 60% of the hourly median, Britain, 2006/09³⁸

	Earnings less than 60% of median hourly earnings	Total Base
White British	13	221,686
Other White	15	14,419
Indian	12	4,210
Pakistani	25	1,517
Bangladeshi	26	511
Other Asian	20	1,473
Black Caribbean	12	1,697
Black African	14	2,040
Chinese	15	775

Source: Annual Population Survey October 2006-September 2009.

Note: Entries in **bold** signify estimates with lower precision.

Low household income

Working age: The ethnicity data in Table 12.2.5 show that 19% of individuals who live in a household in which the head of the household is White British live below the 60% median income poverty threshold. The Indian population performs slightly worse at 26%, while all other ethnic groups perform much worse – 37% of Black/Black British headed households and 34% of 'Mixed' and 'Other' ethnic minority headed households have an income below the 60% level. By far the worst performing group is the Bangladeshi/Pakistani population, with 56% of households living below the 60% level, a figure which is possibly partly affected by the larger average household size of Bangladeshi and Pakistani families and lower levels of employment, particularly for women.

³⁸ Equality and Human Rights Commission analysis of ONS Annual Population Survey (October 2006-September 2009). Results averaged over three years' data.

Table 12.2.5 Percentage of individuals living in households below 60% of median income, after housing costs in the UK, 2006/08³⁹

Characteristic of head of household*	Adults of working age%	Individuals in pensioner households%
White	19	17
Mixed	34	n/a
Indian	26	31
Pakistani/Bangladeshi	56	49
Black/Black British	37	31
Other	34	30

Source: Households Below Average Income 2008/09.

* Ethnicity data are based on three-year averages due to the small sample size of all of the ethnic minority groups. For this reason the data should be treated with caution.

The income division within a household between genders is not evident in this measure, so the specific experiences of individual household members are hard to pinpoint. In the UK, a 2005 Fawcett Society survey estimated that 40% of ethnic minority women live in poverty; One-fifth of White women and two-fifths of Black women live in poverty, while poverty extends to almost two-thirds of Pakistani and Bangladeshi women.⁴⁰

Pension age

Similar patterns are shown among the pension age population. Table 12.2.5 shows that at the higher end of the scale, 17% of White pensioners are living in poverty whilst at the bottom end, 49% of Bangladeshi/Pakistani pensioners live in poverty.

Within ethnic groups, poverty rates are slightly lower among the pension age population as compared to working-age adults, except among the Indian population for whom pensioner poverty is a full 5% higher. This may in part be due to the low take-up of pension credit for this group.⁴¹ The extent to which some ethnic minority households are multi-generational can reduce or increase pension poverty for the retired members of the household, depending on the earnings of the working household members.⁴²

³⁹ DWP 2010.

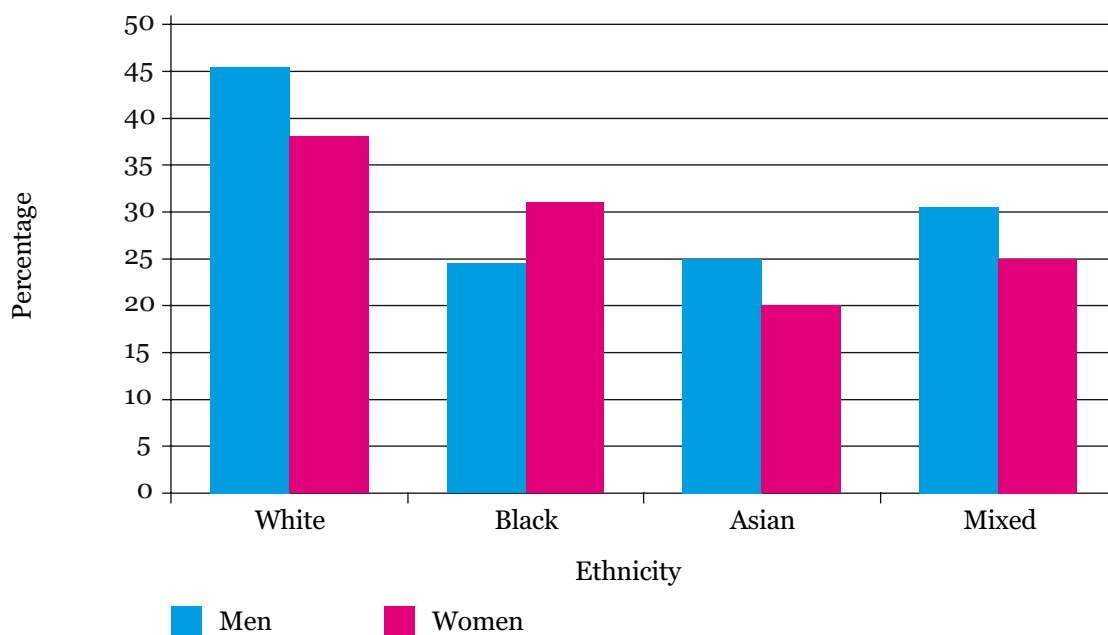
⁴⁰ Bellamy, K. and Rake, K. 2005. Page 50.

⁴¹ House of Commons. Work and Pensions Committee – *Fifth Report Tackling Pensioner Poverty. Session 2008-2009 Volume I*. Page 39. ‘The shortcomings in the data make it impossible to confirm whether higher BME poverty rates are due to low take-up of Pension Credit. However the extremely high levels of poverty suggest that this must be a factor.’⁴¹

⁴² Platt, L. 2007. *Poverty and Ethnicity in the UK*. Great Britain: The Policy Press. Page xi.

Chapter 11: Employment, shows that many ethnic minorities groups are more likely than others to have the characteristics associated with lower pension incomes – for example, lower employment and earning levels overall, and erratic or part-time employment patterns. They are therefore less likely to qualify for a state pension or accrue a private pension. Some groups such as Pakistani people are more likely to be self-employed and do not build up entitlement to a state second pension.⁴³

Figure 12.2.1 Percentage of working-age men and women with a private pension by ethnicity in the UK, 2004/05⁴⁴



Source: Calculations based on Family Resources Survey 2004/05.

Gypsies and Travellers have few qualifications and low employment and earnings profiles (see Chapter 11: Employment and Chapter 10: Education) resulting in higher risk of poverty. This is especially the case for older age groups. Those who live to pensionable age are poorly placed to receive pension income. Most are self-employed or casually employed; highly mobile; or have worked in relatively low-skilled manual trades. It is unlikely that they will have paid sufficient, if any, national insurance contributions that would give entitlement

⁴³ Steventon, A. and Sanchez, C. 2008. *The under-pensioned: disabled people and people from ethnic minorities*. Research Report 5. Manchester: Equality and Human Rights Commission.

⁴⁴ Lawton, K. and Platt, R. 2010. Page 26.

to a full pension. Women are particularly unlikely to have made contributions towards retirement, as a result of caring responsibilities and casual employment throughout their lifetimes. Individuals from Gypsy and Traveller communities without a birth certificate or adequate official documentation relating to period of residence in the UK and address are unable to access to anything other than basic state pension benefits.⁴⁵

Box 12.2.2 Related issue: Material deprivation

The Equality Measurement Framework proposes a measure of material deprivation (which is a score based on the extent to which people feel they can afford a range of identified necessities. A score of 25 or more is regarded as indicative of deprivation). This measure is then applied to those who live in households above 60% median income level.⁴⁶ Combining these two measures allows us to identify those who, although not in receipt of particularly low income, nonetheless find it difficult to afford things like keeping the house warm, or replacing furniture.

In other words, this measure covers those for whom the low income measure doesn't appear to capture the true cost of living. These groups may include disabled people or others who face excessive additional costs in daily living, people who experience relatively low income over sustained time or who face periods of no income and are consequently unable to accrue a safety net of savings.

This measure is in development and therefore not reported here, but the general approach is highlighted in a 2009 report by Lucinda Platt for the Department for Work and Pensions *Ethnicity and Child Poverty*. This publication examines the varying income and deprivation levels of different ethnic minority families. As this table (below) from the report shows:

- Unsurprisingly, average deprivation scores are higher for low income households compared to those with an income above 60% of the median.
- However, the fact that patterns vary in terms of average deprivation scores for households above and below the 60% median income level suggest that the measure of deprivation is showing something additional to the household income measure alone.
- In particular, it shows that those who live above the 60% level still may face high levels of hardship – average deprivation scores for Black African and Bangladeshi households above 60% level approach the average deprivation score for White households living below the 60% level.

⁴⁵ Cemlyn, S. *et al.* 2009. *Inequalities experienced by Gypsy and Traveller communities*. Research Report 12. Manchester: Equality and Human Rights Commission.

⁴⁶ Alkire, S. *et al.* 2009. Chapter 9. Page 252.

Box 12.2.2 Continued**Table 12.2.6** Average deprivation scores in poor and non-poor families with children in the UK, 2004/05, 2005/06⁴⁷

	All families with children	Poor families with children (below 60% median income level – BHC)	Non-poor families with children (above 60% median income level – BHC)
White	14	29	11
Mixed groups	22	36	18
Indian	14	29	10
Pakistani	27	36	20
Bangladeshi	32	38	25
Black Caribbean	22	33	18
Black African	30	47	23

Source: FRS 2004/05, 2005/06, pooled, weighted.

Note: Bold figures indicate a statistically significant difference in scores compared to White majority households. This published table uses an income poverty measure of below 60% of median equivalent income 'before housing costs' (BHC), which is different to indicator 2 of this report, which uses income 'after housing costs' (AHC).

Base = 14,773

The analysis goes on to use regression modelling to determine whether being from an ethnic minority group increases deprivation score, relative to White households, controlling for characteristics such as family size, work and disability status, location and housing tenure.

The analysis shows that even when such characteristics are controlled for, higher deprivation rates for ethnic minority households remain – one notable result is for Indian households who in the table above perform relatively well in the average scores, and also in our indicator measures (Tables 12.2.4 and 5). When family characteristics are controlled for, Indian families appear significantly more deprived than their White comparators in spite of relatively good performance in low pay and income.⁴⁸

Asylum seekers: A group particularly at risk of deprivation are asylum seekers. Here, we are limited to very small studies, as they are a marginalised group, in order to highlight some of the issues. Those seeking asylum in the UK are not allowed to work while waiting for their case to be decided.⁴⁹ If at risk of

⁴⁷ Platt, L. 2009. Page 83.

⁴⁸ Platt, L. 2009. Page 85.

⁴⁹ If the asylum case takes more than a year, the individual can apply for the right to work.

Box 12.2.2 Continued

becoming destitute in the meantime, they can apply for ‘section 95’ subsistence support which if they qualify, covers:

- Housing (based on a dispersal programme – see housing section below) and cash support at around 70% of benefit levels⁵⁰
- Partial cash support to those staying with friends or family

Once an application for asylum is rejected and the appeal process exhausted, the individual concerned is able to apply for ‘section 4’ support if they are unable to leave the UK. This includes accommodation and a living allowance of £35 per week using pre-paid cards rather than cash (replacing voucher schemes which have been used previously). In March 2010 there were approximately 8,660 individuals in receipt of section 4 support.⁵¹

This level of low income may cause a range of issues. The pre-payment cards only allow £5 to be carried over each week preventing individuals from saving for more expensive items, and cannot be used in all stores, such as charity shops.⁵² Delays and errors in assessment of eligibility for financial support may cause destitution in the interim – a large number of agencies argue that asylum seekers face significant poverty and even resort to begging and prostitution to survive whilst waiting for a decision on subsistence support.⁵³ A survey of 97 support organisations conducted by the Refugee Council in 2008 (at a time when vouchers rather than pre-paid cards were in use) found that nearly three-quarters reported their clients experiencing hunger, and 81% of respondents did not believe that clients were able to maintain good health.⁵⁴

- ⁵⁰ Some agencies have questioned the value of this proportion due to increases in line with the Consumer Price Index, arguing for more realistic values as 66% of benefit levels for families and 55% benefit levels for those without children. See Williams, R., and Kaye, M., 2010. *At the end of the line. Restoring the integrity of the UK’s asylum system*. Still Human, Still Here. Page 31. available at <http://stillhumanstillhere.files.wordpress.com/2009/01/at-the-end-of-the-line-2010.pdf> Accessed 23/09/10.
- ⁵¹ Home Office 2010. *Control of Immigration: Quarterly Statistical Summary UK. January to March 2010*. Statistical Bulletin. Available at: <http://rds.homeoffice.gov.uk/rds/pdfs10/immiq110.pdf> Accessed 02/09/2010.
- ⁵² Williams, R. and Kaye, M. 2010. Page 42.
- ⁵³ Aspinall, P. and Watters, C. 2010. *Refugees and asylum seekers: A review from an equality and human rights perspective*. Research Report 52. Manchester: Equality and Human Rights Commission. See also Williams, R. and Kaye, M. 2010. Page 36 and Refugee Survival Trust, 2005. *‘What’s going on?’ A study into destitution and poverty faced by asylum seekers and refugees in Scotland*. Scotland: Refugee Survival Trust. Page 15.
- ⁵⁴ Doyle, L. 2008. *More Token Gestures: A report into the use of vouchers for asylum seekers claiming Section 4 support*. Refugee Council Report. London: British Refugee Council.

Religion or belief

Low hourly pay

We can only report on Britain-wide results due to sample sizes. There is a fairly wide variation between groups based on religious affiliation as shown in Table 12.2.7, with Muslim groups performing particularly badly. This reflects in general their employment outcomes set out in Chapter 11: Employment.

Table 12.2.7 Percentage of employees with gross earnings less than 60% of the hourly median in the UK, by religious affiliation, 2006/09⁵⁵

	Earnings less than 60% of median hourly earnings	Total base:
Christian	14	190,582
Buddhist	16	796
Hindu	12	2453
Jewish	8	707
Muslim	23	3887
Sikh	15	1140
Any other religion	13	2223
No religion at all	13	50,559

Source: Annual Population Survey October 2006-September 2009.

Note: Entries in **bold** signify estimates with lower precision.

Low household income

It is not possible to look at household income by religion or belief.

Sexual orientation

While large-scale data may not be available, many surveys suggest that the lesbian, gay and bisexual (LGB) community has a generally favourable socio-economic position.⁵⁶ Qualitative data suggest that poverty is not a major factor (or concern) for LGB people, with LGB people not feeling particularly anxious about their economic future/security.⁵⁷

⁵⁵ Equality and Human Rights Commission analysis of ONS Annual Population Survey (October 2006-September 2009). Results averaged over three years' data.

⁵⁶ Mitchell, M., Howarth, C., Kotecha, M. and Creegan, C. 2009a *Sexual orientation research review 2008*. Research Report 34. Manchester: Equality and Human Rights Commission. Page 168.

⁵⁷ Quilgars, D., Jones, A., and Abbott, D. 2008. *Risky Rainy Days: Who plans for their financial future?* Social Contexts and Responses to Risk Working Paper 22, University of Kent. Available at: <http://www.kent.ac.uk/scarr/publications/QuilgarsJonesAbbottWP22.pdf>

Some data from the UK suggest that LGB people in same-sex relationships may have higher standards of living, employment rates, and incomes.⁵⁸

When LGB people enter older age, support from families may not be as readily available as for non-LGB people, suggesting that LGB people have to be more self-sufficient, increasing the risk of poverty.⁵⁹ Welfare support services are also generally perceived not to meet the needs of older LGB communities.⁶⁰

Transgender

According to Browne's questionnaire and focus-group based survey of 819 lesbian, gay, bisexual and transgender people in Brighton and Hove, the transgender people in the sample were over three times as likely as LGB people to have an income under £10,000, and 11 times less likely than LGB people to earn over £30,000 a year, although it should be noted that only 5% of the sample in question identified themselves as transgender.⁶¹

Research conducted for the Scottish Transgender Alliance suggests that transgender people's income is low. For example, a 2007 survey of 71 transgender people in Scotland found that 30% of respondents had an income of over £20,000, and 48% of respondents had an income under £10,001.⁶²

⁵⁸ Li, Y., Devine, F. and Heath, A. 2008. *Equality group inequalities in education, employment and earnings*. Research Report 10. Manchester: Equality and Human Rights Commission. Tables 3a page 76 and Table 4a, page 78.

⁵⁹ Mitchell, M. *et al.* 2009a. Page 262.

⁶⁰ Musingarimi, P. 2008. *Older Gay, Lesbian and Bisexual People in the UK*. London: International Longevity Centre - UK. Page 5.

⁶¹ Browne, K. & Lim, J. 2009. *Trans People; Additional Findings Report from Count Me In Too: LGBT Lives in Brighton & Hove*. Brighton: Spectrum, 2007. Page 9.

⁶² Scottish Transgender Alliance 2008. *Transgender Experiences in Scotland Research Summary*. Equality Network. Available at: <http://www.scottishtrans.org/Uploads/Resources/staexperiencessummary03082.pdf> Accessed 23/09/2010. Page 10.

12.3 What we know about housing and neighbourhood quality

Measures:

Overcrowded accommodation – percentage living in accommodation one or two bedrooms below the ‘bedroom standard’ level

Substandard accommodation – percentage reporting ‘leaking roof, damp walls, floors or foundations, or rotten floorboards or window frames (or ‘leaks, damp etc’)

Neighbourhood quality – percentage reporting ‘pollution, grime, or other environmental problems in the area caused by traffic or industry’ (‘pollution etc’), and percentage reporting ‘crime, violence or vandalism’ in the area (‘crime etc’).

How these measures work:

For these measures at Great Britain level, we use the General Household Survey; this allows disaggregation of gender, age, disability and ethnicity, combining data from 2004, 2005 and 2006 to allow a large enough sample to provide disaggregated analysis by ethnicity.⁶³

We then present data from Scotland and Wales-specific surveys (Scottish Household Survey (SHS), the Scottish House Condition Survey (SHCS), and the Living in Wales Survey (LIW)).⁶⁴ However, these surveys ask slightly different questions to the General Household Survey and different years are used. For example, residents in Scotland and Wales are asked to rate dwelling quality (each using slightly different menus of options) rather than to describe it, reducing the possibility for direct comparisons to those for Britain as a whole.⁶⁵

The survey responses are taken for the household representative person only, which does not tell us anything about the composition or views of the rest of the household.

⁶³ The General Household Survey sample for the years 2004 to 2006 was 31,223.

⁶⁴ The analyses from the Scottish Household Survey are based on the two years 2005 and 2006; while the analyses of stock condition from the Scottish House Condition Survey are based on data for the three years 2005/06 to 2007/08. The Living in Wales survey based analyses are based on data for the three years 2006 to 2008, except for the analyses of overcrowding relative to the bedroom standard, for which data was available only for 2007 and 2008. Wilcox, S. 2010. *Dimensions of Inequality: Housing and Neighbourhood Standards*. University of York. This paper is available on the Equality and Human Rights Commission’s Triennial Review web pages. Page 3.

⁶⁵ Wilcox, S. 2010 provides a full explanation of the surveys.

Data on disability are limited, as they are based on whether the household representative person has a long-term illness, disability or infirmity and is not impairment-specific – therefore interpretation of overcrowding is limited as different impairments will require different space requirements that are not completely reflected in the standard overcrowding measure.

There are no data on transgender or sexual orientation in terms of housing quality, but there is some limited alternative literature that refers to related housing issues, such as homelessness which is covered in Box 12.3.2. Overall, there is very limited related literature for this measure for religion and belief, therefore they are not covered in this section.

Overcrowded accommodation

Accommodation is defined as ‘overcrowded’ if it is one or two bedrooms below the ‘bedroom standard’ level. This is a convention that has been in use for several decades, based on pre-war environmental health standards. One bedroom is allocated to each co-habiting couple, each other person aged over 21, each pair aged 10-20 years of the same gender and each pair of children under 10 of either gender. Unpaired children, or individuals under 20, are allocated a separate bedroom (although they can be paired with another person aged under 20 of the same sex).⁶⁶

Substandard accommodation

This assessment of the quality of the accommodation is based on the views of the householder rather than that of a surveyor, therefore the views this measure represents are subjective.

Neighbourhood quality

These data are based on ‘local area’ which is defined as the area within a 15-20 minute walk, or a 5-10 minute drive from the home. As with the substandard accommodation, this measure captures a subjective evaluation of the local area.

Overview

Over and above low income, these measures allow us to look at the living conditions that people experience. Although the great majority of people in the mainstream of British society are now living in adequately sized accommodation, nonetheless **those that live in poor housing face multiple knock on effects to their health and wellbeing.**

⁶⁶ Wilcox, S. 2010. Page 6.

It is of particular concern that children live in poor conditions. **Female-headed households with children are more likely to reside in overcrowded or substandard housing, as are many ethnic minority groups and those living in the social rented sector.** In addition to these key groups, **marginalised groups such as Gypsies and Travellers, and asylum seekers face particularly stark living conditions.**

Neighbourhood quality is a complex aspect of standard of living to measure. The measures used in this section are relatively broad, but they do allow us to highlight those groups who are disproportionately concerned about the quality of the area they live in. **Levels of pollution and grime in the local neighbourhood are generally perceived as good – with just over 1 in 10 people reporting problems.** However, it is often the same groups who live in poor housing that report concerns with neighbourhood. **Female-headed households with children, ethnic minority and younger age groups all report greater levels of concern with their local area in terms of crime and vandalism.**

What we know about the overall situation

Overcrowded and substandard accommodation

Overall, 2.3% of British households live in overcrowded accommodation when measured against the bedroom standard. Of those, just 0.2% occupy dwellings that fall two or more bedrooms below the standard, with 2.1% occupying dwellings with one bedroom below the standard. 14% of British households report substandard housing (leaks, damp etc). Slightly more residences in Scotland (2.7%) and slightly fewer in Wales (2.0%) are overcrowded than in Britain overall.

Neighbourhood quality

In terms of neighbourhood quality, 13% of all British households indicated that pollution and grime were problems in their local area, and 29% of all households cited problems with crime, violence and vandalism.⁶⁷

What we know about the situation for different groups

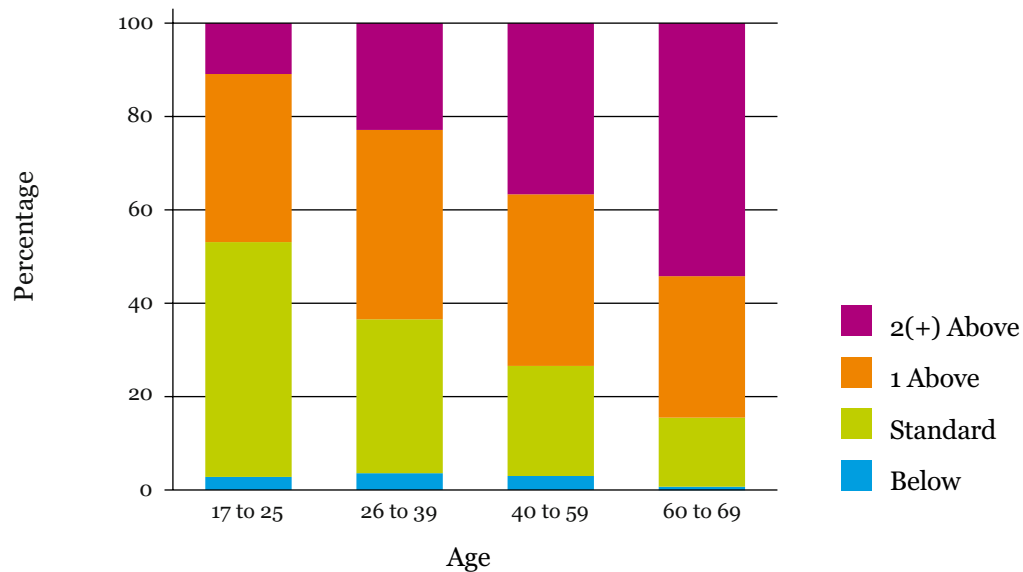
Gender and age

Overcrowded and substandard accommodation

Quality of housing is closely associated with household age, composition and gender. Overcrowding is highest for households with a head of household aged 26 to 39 and declines as households reach retirement age: 2.8% of the 17-25-year-old group live below bedroom standard, 3.6% for 26-39-year-olds, and 3% for 40-59-year-olds, compared to 0.7% and 0.3% for 60-69-year-olds, and 70+ respectively.

⁶⁷ Wilcox, S. 2010. Page 22.

Figure 12.3.1 Overcrowded accommodation by age in Britain, 2004/06⁶⁸



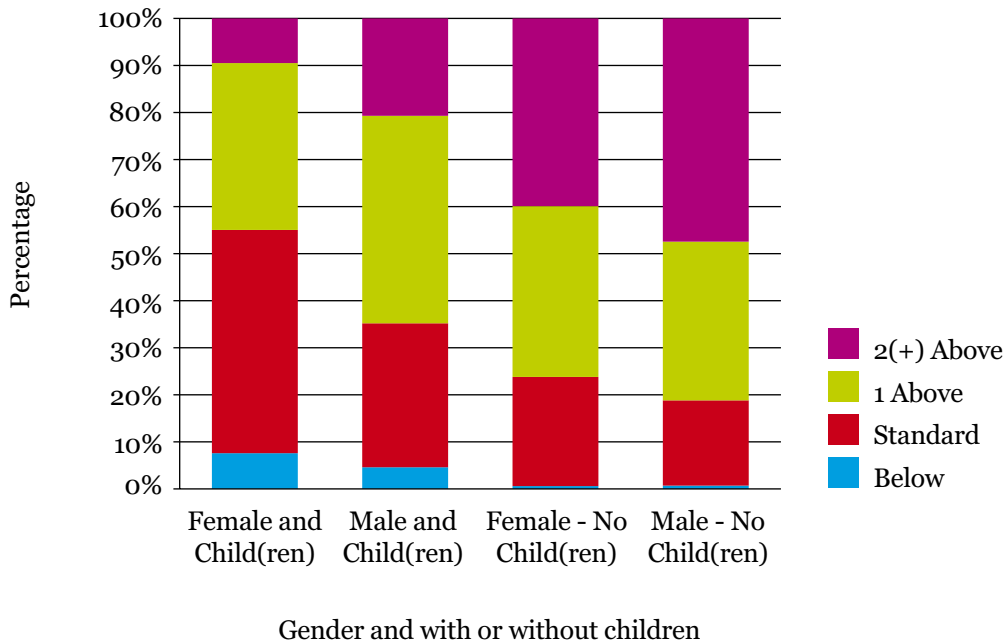
Source: General Household Survey.

Note: Age refers to household representative person.

Overcrowding is most pronounced among households with children, and especially so for female-headed households with children. Figure 12.3.2 below shows that 8% of female-headed households with children live below the bedroom standard, compared to 5% of male-headed households with children. Rates for men and women without children are much lower, and closer to each other: 0.7% of male and 0.6% of female-headed households without children live below the bedroom standard.

⁶⁸ Wilcox, S. 2010. Page 9.

Figure 12.3.2 Overcrowded accommodation by gender and whether children in the household in Britain, 2004/06⁶⁹

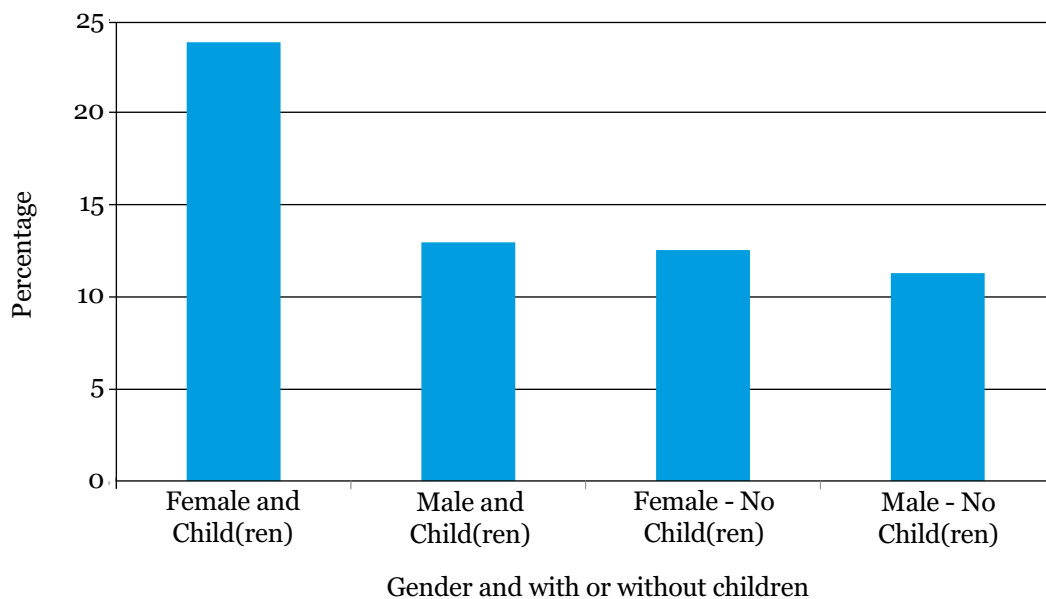


Source: General Household Survey.

Following very similar patterns, substandard accommodation ('leaks, dampness etc') is much more likely to be reported by female-headed households with children, with 24% of women with children reporting leaks and dampness compared to 13% of male-headed households with children. The same is true for younger age households (see Figures 12.3.3 and 12.3.4).

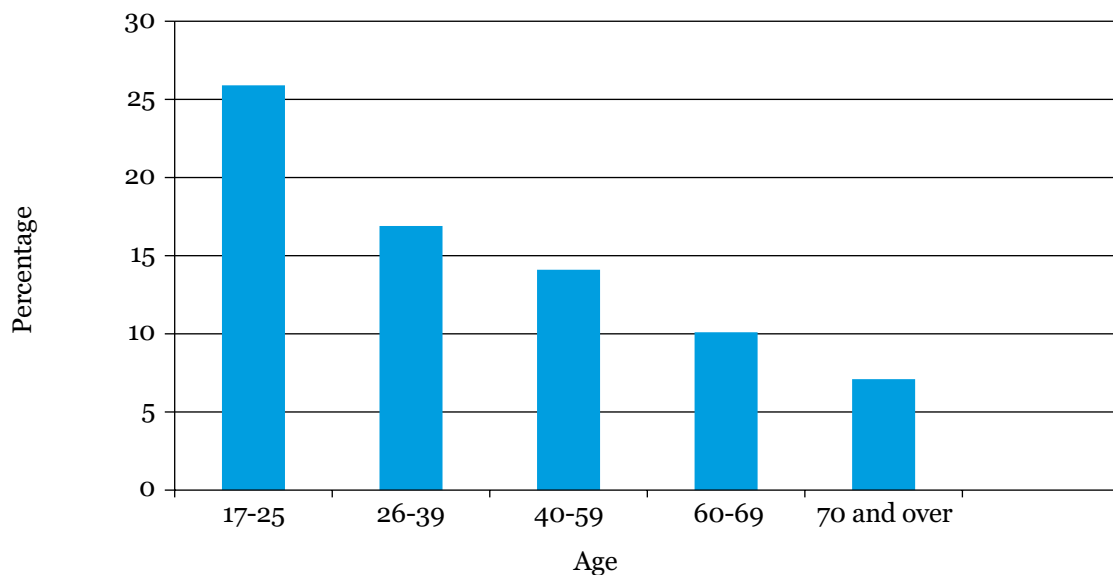
⁶⁹ Wilcox, S. 2010. Page 10.

Figure 12.3.3 Percentage of households reporting substandard accommodation ('Leaks, dampness etc') by gender and whether children in the household in Britain, 2004/06⁷⁰



Source: General Household Survey.

Figure 12.3.4 Percentage of households reporting substandard accommodation ('Leaks, dampness etc') by age in Britain, 2004/06⁷¹



Source: General Household Survey.

Note: Age refers to household representative person.

⁷⁰ Wilcox, S. 2010. Page 15.

⁷¹ Wilcox, S. 2010. Page 15.

The Wealth and Low pay/low income indicators in this chapter have shown that women make up a greater proportion of lower income households. They are also over-represented in the social rented sector, although female-headed households are actually more likely to report living in poor dwellings in all tenures, including as homeowners.⁷² The fact that they and their children experience higher levels of both overcrowding and substandard accommodation is cause for concern, as the potential impact on the lives of the children in these conditions is serious, particularly for their health.⁷³ The forthcoming Equality and Human Rights Commission's Children's Measurement Framework proposes measures specific to housing quality for children, including a measure of the number of children living in temporary accommodation to try and capture the extent of children living in accommodation such as bed and breakfast.

The lower earning capacity of the 17-25 age group might imply a greater propensity to be living in substandard accommodation. However this assumption should not mask the real issues facing young householders which can affect their life chances.⁷⁴ For young parents, the combined effect of their youth, and the addition of children to the family unit can seriously exacerbate these issues.

Conversely, almost a half (44%) of all retired households occupy dwellings with two or more bedrooms than is required to simply meet the bedroom standard, and there is a marked decline in the reporting of poor conditions for older households. 10% of households headed by an individual aged 60-69 and 7% of households headed by an individual aged 70 or over report leaks, dampness etc (see Figures 12.3.1 and 12.3.4).

The profiles of overcrowding in Scotland and Wales follow broadly the same patterns as for Britain as a whole⁷⁵ – the incidence of overcrowding initially goes up with age before declining to negligible levels among pensioner age households. Scottish and Welsh data show the same greater likelihood for women with children to be in overcrowded housing compared to men: 6% of female-headed households with children in Wales compared to 4% for male households with children reside in overcrowded housing; the figures for Scotland are 10% and 6% respectively.

In Scotland and Wales different questions about quality of accommodation in the country-specific surveys make comparisons impossible: However, Scottish data show the same lower rates of poor housing for male-headed households with children (3%) compared to female-headed households with children (12%) and a

⁷² Wilcox, S. 2010. Page 14.

⁷³ Harker, L. 2006. *Chance of a lifetime; the impact of bad housing on children's lives*. London: Shelter.

⁷⁴ Heath, S. 2008. *Housing choices and issues for young people in the UK*. Joseph Rowntree Foundation Findings. York: JRF.

⁷⁵ Wilcox, S. 2010. Chapters 3-5.

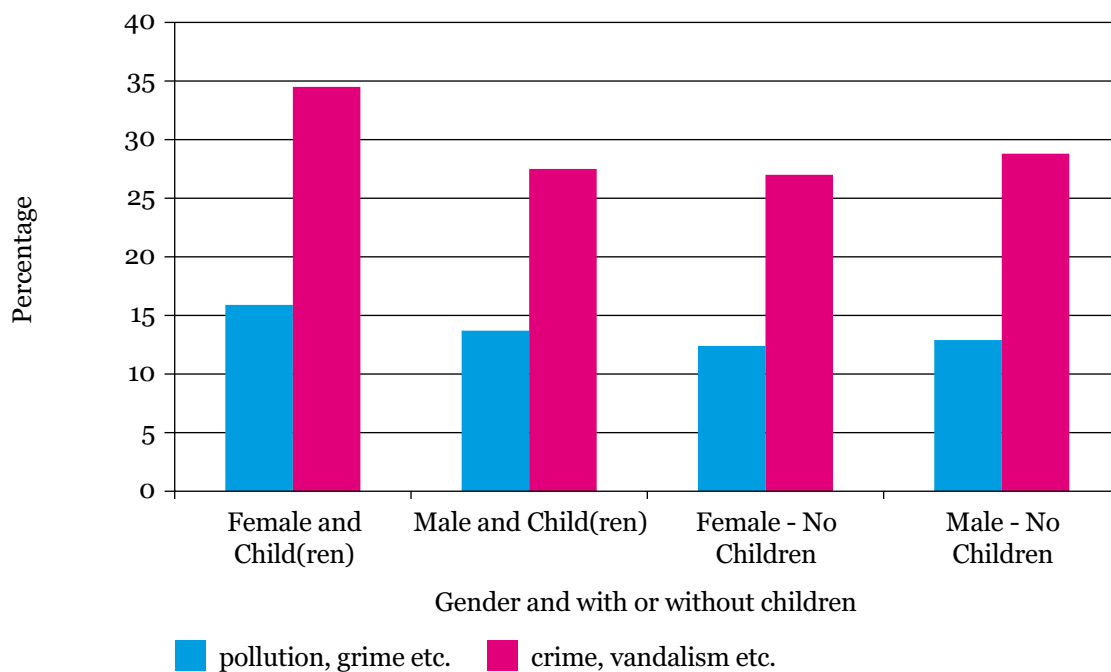
similar association between age and quality, with housing quality improving with increasing age. For Wales the same patterns occur, with 8% of women with children living in poor housing conditions compared to 5% of men with children.

Neighbourhood quality

The measures of poor neighbourhood quality are also most strongly associated with female-headed households with children and with younger age households, particularly reports of 'crime, violence and vandalism' for the 17-25 age group. Although these measures are a subjective and broad method of measuring a wide variety of issues within the local area, these results in part reflect the poorer socio-economic circumstances of female-headed and young households.

Figure 12.3.5 below shows that more female-headed households with children report both 'pollution and grime and other environmental problems' and 'crime, violence and vandalism' in the local areas than other types of household.

Figure 12.3.5 Percentage of households reporting 'pollution, grime etc' and 'crime, vandalism etc' by gender and whether children in the household, in Britain 2004/06⁷⁶

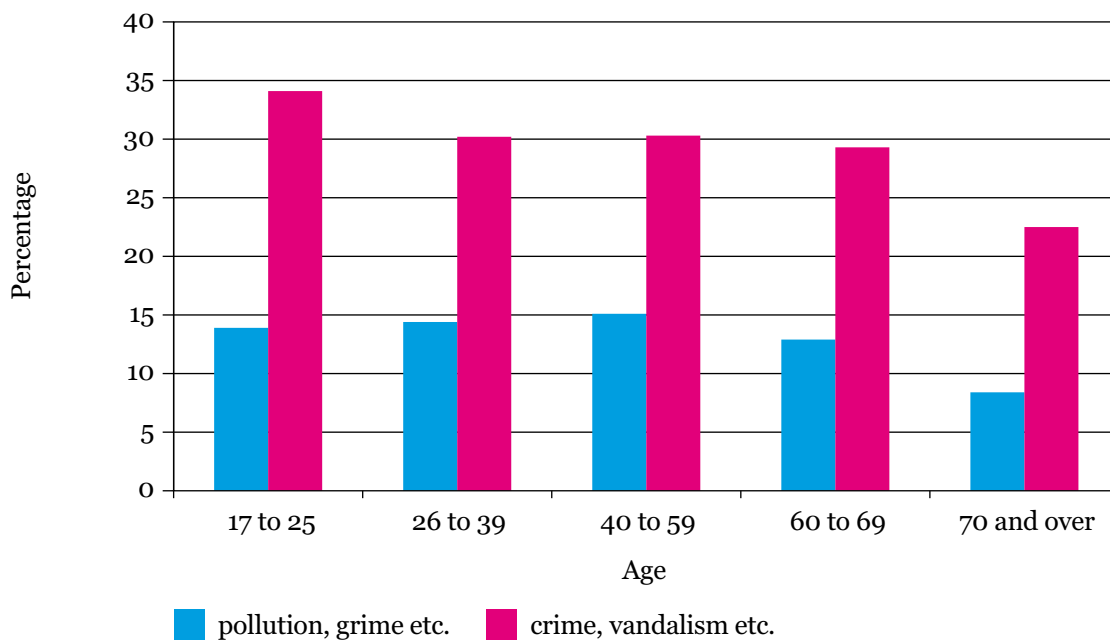


Source: General Household Survey 2004/06.

⁷⁶ Wilcox, S. 2010. Pages 20 and 25.

Patterns for age groups are slightly more varied. Reports of crime, violence and vandalism decline with age, starting from a high level (34%) for the youngest age group. However, in terms of reporting pollution and grime, there is little age difference up to 59 years – reports of pollution and grime are higher relative to the national average (13%) for groups up to 59 years, but thereafter, decline for older age groups.

Figure 12.3.6 Percentage of households reporting ‘pollution, grime etc’ and ‘crime, vandalism etc’ by age in Britain, 2004/06⁷⁷



Source: General Household Survey 2004/06.

Note: Age refers to household representative person.

In Scotland and Wales, surveys ask different questions making it impossible to compare results.⁷⁸ However, greater proportions of female-headed households with children than male-headed households with children in both Scotland and Wales rate the neighbourhood as poor and there is a similar relationship with age – with pensioner age households far less likely to regard the neighbourhoods in which they live as being problematic.

Socio-economic groups⁷⁹

Overcrowding and substandard accommodation

For Great Britain, reports of overcrowded and substandard properties (‘Leaks, damp etc’) are more common for economically inactive households below retirement age:

⁷⁷ Wilcox, S. 2010. Pages 20 and 24.

⁷⁸ Wilcox, S. 2010. Pages 64-67.

⁷⁹ Wilcox, S. 2010. Figures 2.1 and 2.3, pages 6-8.

- 2% of households headed by someone who is working are below the bedroom standard and 14% report substandard accommodation.
- 10% of households headed by individuals who describe themselves as 'keeping house' are below the bedroom standard, and 30% report substandard accommodation
- 4% of households headed by someone who is unemployed are below the bedroom standard, and 28% report substandard accommodation.

There is also a relatively high level of overcrowding and reports of substandard accommodation in the social rented sector:

- 5% of social rented homes are overcrowded compared to 3% of private rented and 1% of owner-occupied homes
- 22% of households living in the social rented sector report poor quality housing compared to 10% of owner-occupiers, although 23% in the private rented sector also report poor quality.

These figures flag up the issue of those living in both poor socio-economic circumstances and substandard accommodation, which is particularly of concern when children are living in low income or poor households and experiencing poor housing conditions.⁸⁰ The fact that nearly a quarter of social rented households report substandard accommodation, similar to that of private rented tenants, is of concern given the expectation that social housing should be of reliable quality. These results combined with the higher levels of overcrowding in the social rented sector indicate potentially serious problems for the existing social housing stock and its tenants.⁸¹

Patterns for Scotland and Wales are not dissimilar to the profile of Britain as a whole. For example, overcrowding is far more prevalent in both the private and social rented sectors than among owner-occupier households. There is a clear, but limited, relationship shown by all the surveys between stock condition and economic status and income levels. The highest incidence of poor conditions relates to economically inactive working-age households; while the lowest incidence relates to retired households.⁸²

Neighbourhood quality

Overall, there appears to be a greater association between reports of crime, violence and vandalism and poorer socio-economic status than there is with reports of pollution and grime in the local area.

⁸⁰ End Child Poverty, (ECP) 2006. *Child Poverty and Housing*. London: ECP/Shelter.

⁸¹ Hills, J. 2007. *Ends and Means: The future roles of social housing in England*. London: Centre for Analysis of Social Exclusion, London School of Economics.

⁸² Wilcox, S. 2010. Chapters 3 and 4.

In Britain as a whole, households headed by those permanently unable to work are the most likely to report pollution and grime in their local areas (18%), while households headed by the retired (10%) were least likely to cite them. There is virtually no difference between the reporting levels for pollution and grime for working and unemployed households, and very little association between reporting pollution and grime and either income or housing tenure.⁸³

The different measures in Scotland and Wales mean it is not possible to compare the results of the surveys, but some similar patterns are shown: The Scottish Household Survey includes an overall measure of how households rate the quality of the local area in which they live, and in general, unemployed and low income households rate the area as poorer than other households. Similarly, the 'Living in Wales' survey shows that unemployed and low income households are more likely to report the area to be 'not well maintained' than those in work or on higher incomes. Neither survey shows a strong association between these measures and different types of tenure.⁸⁴

However reports of 'crime, violence and vandalism' in the neighbourhood are related far more strongly, and predictably, to economic status and household income. In Britain, substantially fewer retired and working households cite problems with crime in their area (25% and 29% respectively), than the various categories of out of work households – 41% of households 'unable to work', 38% of unemployed households and 37% of households who describe themselves as 'keeping house' report problems with crime in the local area.

Similarly households in the social rented sector are far more likely to report problems with crime (37%) than households in either the owner-occupied or private rented sector (around 27% for both).

The likelihood of reporting problems with crime decreases as income increases, however, the overall difference is quite slight (27% of the top income quintile report problems with crime, compared to 30% of the bottom income quintile).⁸⁵ As with the results for gender and age, it is unsurprising that there is some association between socio-economic status and poorer neighbourhood quality, although as these measures are based on subjective responses to very broad questions, the detail of the type of neighbourhood issue faced by different groups should be the subject of more focused research.⁸⁶

⁸³ Wilcox, S. 2010. Page 17.

⁸⁴ Wilcox, S. 2010. Scotland results page 34, Welsh results page 56.

⁸⁵ Wilcox, S. 2010. Page 23.

⁸⁶ Lupton, R. and Power, A. 2004. *What we know about neighbourhood change; A literature review*. London: Centre for Analysis of Social Exclusion, London School of Economics.

Box 12.3.1 Related issue: Equality groups and deprived neighbourhoods

There is an association between some equality characteristics and the most deprived neighbourhoods in England:⁸⁷

- Ethnic minority groups are over-represented in deprived areas relative to the national average
- For people from ethnic minority groups, income poverty rates are much higher in London, the north and the midlands than elsewhere. 70% of those in income poverty in inner London are from ethnic minority groups, as are 50% in outer London.
- There are a significantly higher proportion of religious minority groups in the most deprived areas, and a significantly lower proportion of Christians.
- There are significantly higher levels of disability in deprived areas relative to the national average.
- There are also higher levels of mental health claims in the 10% most deprived areas, with 6% of the population making claims. This is significantly higher than even the next 10% most deprived areas (4%).

Disability***Overcrowding and substandard accommodation***

In the General Household Survey, there is no significant difference between overcrowding rates for households where the representative person has a limiting long-term illness, disability or infirmity (LLTI/disability) and those where the representative person has no such LLTI/disability. For households where the representative person has an LLTI/disability, 2.1% live in residences below the bedroom standard compared to 2.4% without.

However, the data do not take into account the real space needs of people with particular impairments (for example, to accommodate equipment) or whether a partner or dependent in the household also has a disability.

⁸⁷ All cited from Department of Communities and Local Government (CLG) 2008. *Transforming Places; Changing Lives: taking forward the regeneration framework Equality Impact Assessment*. London: Department for Communities and Local Government. N.B. the differences between individual areas are more significant than the similarities, e.g. within the 10% most deprived neighbourhoods, the proportion of residents aged 0-15 ranges from 4% to 43%, the proportion of working-age adults ranges from 44% to 91%, and the number of adults over retirement age ranges from 3% to 52%.

People with an LLTI/disability in general report slightly lower rates of substandard accommodation (leaks, damp etc) than those without (13% and 14% respectively). This pattern is borne out by the Office for Disability Issues' housing quality indicator for disability equality, where in 2007, 33% of households with a disabled person lived in non-decent accommodation, compared to 35% of households with no disabled person.⁸⁸

Issues of poor housing are possibly present for families where another household member (adult, child or both) has a disability, which this measure (which is based on the health status of the household representative person), does not cover. The 2007 Families and Children Study (which was Britain-wide) found that more than twice as many families with at least one disabled child and at least one disabled adult reported that their home was in a 'fairly poor' or 'very poor' state of repair (12%), compared to families with no disabled members (5%).⁸⁹

It should also be noted that there is evidence of greater levels of poor housing in households in which the representative person defines themselves as 'unable to work' for example because of illness. Of these, 3.5% live in accommodation below the bedroom standard, and 21% report substandard housing (around a third higher than the average on both counts).⁹⁰

Measures of overcrowding and quality do not give us an indication of the suitability of accommodation for disabled people. The Equality Measurement Framework proposes also measuring the proportion of people living in un-adapted accommodation, which is of key relevance to disabled people. Some evidence suggests that many disabled people do not live in accommodation that has been suitably adapted to their needs.⁹¹

⁸⁸ Office for Disability Issues. Roadmap 2025. Households living in non-decent accommodation' <http://www.officefordisability.gov.uk/roadmap2025/indicators.php>

⁸⁹ Philo, D., Maplethorpe, N., Conolly, A., and Toomse, M. 2007. *Families with children in Britain: findings from the 2007 Families and Children Study (FACS)*. DWP Research Report. 578. London: DWP. Page 231. Also see Beresford, B. and Rhodes, D. 2008. *Housing and disabled children*. Joseph Rowntree Foundation Round-up. Available at: <http://www.jrf.org.uk/sites/files/jrf/2208.pdf>. Accessed 23/09/2010.

⁹⁰ Wilcox, S. 2010. Pages 6 and 13.

⁹¹ Williams, B., Copestake, P., Eversley, J. and Stafford, B. 2008. *Experiences and Expectations of Disabled People*. London: Office for Disability Issues. Page 176.

Neighbourhood quality

In terms of both the ‘pollution and grime’ and ‘crime, violence and vandalism’ measures, those with no LLTI/disability are marginally more likely to report problems than those with an LLTI/disability. Results are similar in both Scotland and Wales, where there is no significant difference between neighbourhood ratings (as defined in the surveys) and households with or without disabilities.⁹²

This is not surprising given the broad LLTI/disability category, which covers many impairments, age breakdowns and income levels. It should be noted that householders who define themselves as ‘unable to work’ report the highest rates of ‘pollution and grime’ of all economic groups at 18%, and 41% report ‘crime, violence and vandalism’ in the local area, compared to 29% of working people.⁹³ Disabled people’s perception of crime in the local area is an issue that needs further investigation – the Equality and Human Rights Commission report, *Disabled People’s Experience of Targeted Hate Crime* suggests that incidents can be linked to the area close to home, including in supported and social housing and in residential care, and that much is unreported.⁹⁴

Ethnicity

Overcrowding

The most marked differences in levels of overcrowding are in terms of ethnicity. Figure 12.3.7 shows that in Britain, just over 9% of all Asian (including Asian British) households are overcrowded relative to the bedroom standard, while almost 15% of all Black (including Black British) households are overcrowded against the standard. In contrast, fewer than 2% of all White British households are overcrowded. There are also variations for some sub-groups within these broad ethnic groupings not shown in the graph. Just over 4% of Indian households are overcrowded, as are 15% of Pakistani households and 26% of all Bangladeshi households. Similarly 8% of Black Caribbean households and 21% of Black African households are overcrowded.⁹⁵

There are similar differences in the proportions of households occupying dwellings at levels **in excess** of the bedroom standard – over three-quarters of all White British households but less than half of all Black (including Black British) households occupy dwellings in excess of the bedroom standard.

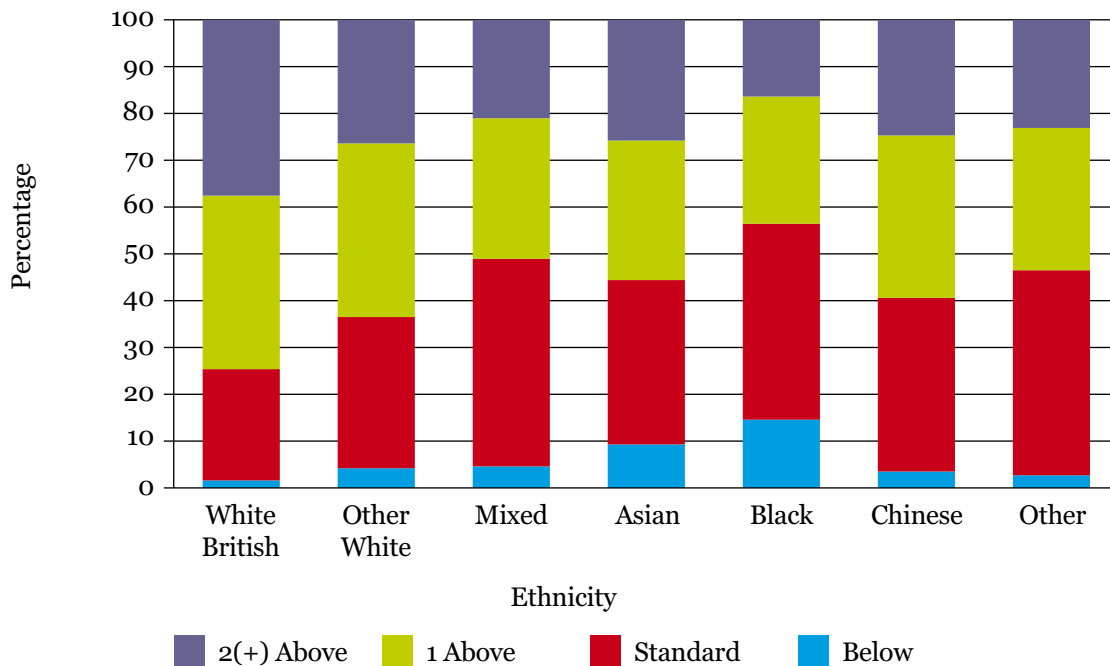
⁹² Wilcox, S. 2010. Page 67.

⁹³ Wilcox, S. 2010. Pages 11 and 22.

⁹⁴ Sin, C. *et al.* 2009. *Disabled people’s experiences of targeted violence and hostility*. Research Report 21. Manchester: Equality and Human Rights Commission. Page 27.

⁹⁵ Wilcox, S. 2010. Page 10.

Figure 12.3.7 Overcrowded accommodation by ethnicity in Britain, 2004/06⁹⁶



Source: General Household Survey 2004/06.

In terms of assessing these patterns of overcrowding by tenure, 4% of all White British households in the social rented sector are overcrowded, whereas 14% of all ethnic minority households are.⁹⁷ Similar patterns are shown in the proportions of homeowners who experience overcrowding: In England, 1% of White owner-occupiers live in overcrowded conditions, compared to 8% of all ethnic minority owner-occupiers.⁹⁸ For Britain as a whole, 1% White owner-occupiers compared to 5% of ethnic minority owner occupiers are overcrowded (proportions are highest for Asian and Black groups, which are 7% and 6% respectively).⁹⁹ Whilst household size undoubtedly influences the higher levels of overcrowding for ethnic minority groups, this is probably not the only factor – poverty levels and availability of and access to suitable accommodation will also contribute.¹⁰⁰

⁹⁶ Wilcox, S. 2010. Page 11.

⁹⁷ Wilcox S. 2010. Page 11.

⁹⁸ Wilson, W. 2009. *Housing: Overcrowding*. Parliamentary Briefing Paper SN/SP/1013. House of Commons Library. Available at <http://www.parliament.uk/briefingpapers/commons/lib/research/briefings/snsp-01013.pdf> Accessed 25/09/10.

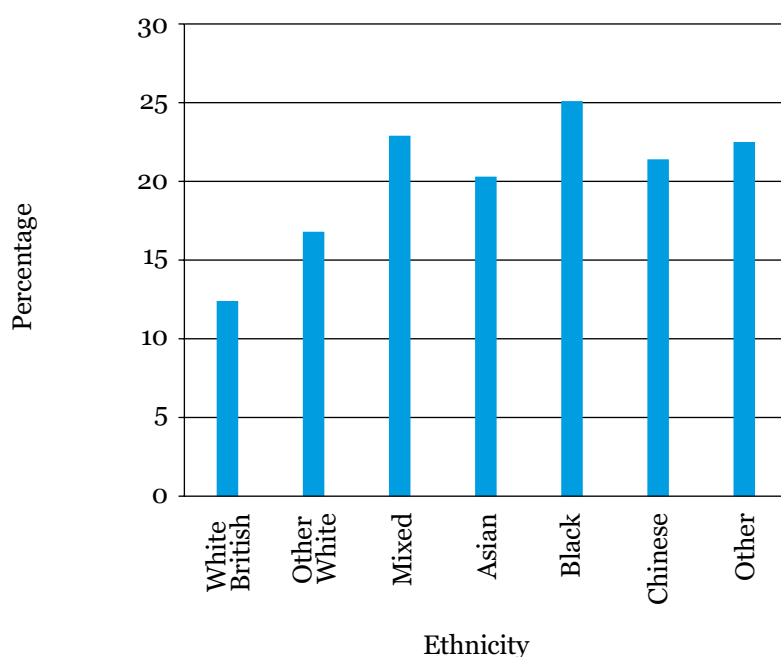
⁹⁹ Wilcox, S. 2010. Appendix 1.

¹⁰⁰ Jones, A. 2010. *Black and minority ethnic communities' experience of overcrowding*. London: Race Equality Foundation.

Substandard accommodation

There is also a strong association between ethnicity and substandard housing ('leaks, damp etc' see Figure 12.3.8 below), with Black and 'Mixed' households most likely to report problems. Overall, all non-White British ethnic groups are around twice as likely to report substandard housing compared to White British households.

Figure 12.3.8 Percentage of households reporting substandard accommodation ('Leaks, dampness etc') by ethnicity in Britain, 2004/06¹⁰¹



Source: General Household Survey 2004/06.

More specific group breakdowns show that the largest groups to report substandard housing are Bangladeshi (36%), and Black African households (31%), and those born outside the UK have a much higher likelihood of reporting substandard housing (31%), compared to all non-White ethnic minority groups born in the UK (21%). Looking at tenure, within the social rented sector, whilst 20% of White British households live in substandard housing, the average proportion is 32% among all other ethnic groups.¹⁰²

¹⁰¹ Wilcox, S. 2010. Page 16.

¹⁰² Wilcox, S. 2010. Page 16.

A key point to add to this section are the housing needs faced by older ethnic minority people. Although the Housing and Neighbourhood quality measures show better outcomes for older people overall, the experiences of overcrowded and substandard housing for ethnic minority groups evidenced here become particularly acute in older groups and create very specific challenges. Sample sizes mean that analysis of older ethnic minority people is difficult for the broad measures covered in this report and requires more detailed research to understand their needs and experiences in terms of accommodation.¹⁰³

In Scotland and Wales, sample sizes permit only a limited analysis in terms of ethnicity – 10% of all ethnic minority households in Wales and across Britain overall were overcrowded, with the proportion broadly similar for Scotland (11%).

In terms of quality of accommodation, the difference between all White and all ethnic minority groups was less marked in the Scottish and Welsh analyses. In Scotland, using the Scottish House Condition Survey measure, just under 4% of all White households occupied poor condition dwellings compared to 5% for all ethnic minority households. In Wales, using the Living in Wales measure, 9% of all White households occupied poor condition dwellings, compared to 12% of all ethnic minority households.¹⁰⁴

Neighbourhood quality

Following very similar patterns to the measures for overcrowding and substandard accommodation, White British households were less likely to cite problems with local pollution and grime (13%) compared to all other ethnic groups, with Mixed (26%) and Chinese (25%) ethnic groups twice as likely to cite such problems. There are less marked differences between White British and other ethnic groups reporting ‘crime violence and vandalism’ in the local area, but the White British households are still the least likely to report problems with crime compared to other groups.

As with other groups, the neighbourhood measures are broad and cover many potential neighbourhood issues, which in terms of ethnicity are affected by residency and migration patterns, poverty levels and perceptions of safety and security resulting in very complex issues.¹⁰⁵

¹⁰³ Patel, N and Traynor, P. 2006 *Developing Extra Care Housing for Black and Minority Ethnic Elders: an overview of the issues, examples and challenges*. London: Department of Health/PRIAE.

¹⁰⁴ Wilcox, S. 2010. Page 66.

¹⁰⁵ Perry, J. 2008. *The housing and neighbourhood impact of Britain’s changing ethnic mix*. York: Joseph Rowntree Foundation.

Figure 12.3.9 Percentage of households reporting 'pollution, grime etc' and 'crime, violence etc' by ethnicity in Britain, 2004/06¹⁰⁶



Source: General household survey 2004/06.

In Scotland and Wales, ethnic minority households are only slightly more likely to rate their neighbourhoods as poor, if at all. For example, in Scotland there is no difference between the reporting of vandalism or graffiti by White or ethnic minority households.¹⁰⁷

¹⁰⁶ Wilcox, S. 2010. Pages 21 and 26.

¹⁰⁷ Wilcox, S. 2010. Page 67.

Box 12.3.2 Related issue: Susceptibility to poor housing and homelessness

The major surveys do not collect data on transgender or sexual orientation, and research for these groups tends to focus on susceptibility to or risk of housing problems through harassment or other ‘crisis’ issues and the availability of advice and support. Evidence relating to some of the most ‘at risk’ groups in terms of accommodation, such as asylum seekers or Gypsies and Travellers is also very limited, in part due to the marginalised nature of these groups.

Transgender

For transgender people, housing problems or crises can be related to aggression from neighbours and/or others in the local area, or the breakup of families on discovering a member of the family is transgender. These experiences may trigger a housing crisis or lead to homelessness. This, and the extent to which housing and homelessness support services (for example hostel accommodation) is able to meet the specific needs of transgender people should be the focus of future research.¹⁰⁸

Sexual orientation

Research suggests that the housing issues facing LGB people can also include harassment – both from within the family, where an individual may find themselves homeless as a result of their identity, and within the local area, leading to a housing crisis. Evidence also highlights discrimination relating to gaining access to housing and appropriate housing support services; homelessness among LGB young people and appropriate residential care services for LGB older people.

The Equality and Human Rights Commission report, *Sexual orientation research review 2008* cites a range of research that highlights these issues, and flags harassment and abuse as particularly salient concerns for LGB people in terms of their housing and the areas local to where they live.¹⁰⁹ Stonewall’s *Gay British Crime Survey* also suggests that lesbians and gay men have experienced hate crime that is particularly directed at their homes or property, such as their cars.¹¹⁰

Migrants

There are two particularly key issues in relation to migration and housing– the provision for those in the asylum system awaiting a decision, which can have knock on effects even after some form of legitimate status is awarded, and the

¹⁰⁸ Mitchell, M. and Howarth, C. 2009b. *Trans research review*. Research Report 27. Manchester: Equality and Human Rights Commission. Page 41.

¹⁰⁹ Mitchell, M. *et al.* 2009a. Page 254.

¹¹⁰ Dick, S. 2008. *Homophobic hate crime: The Gay British Crime Survey 2008*. London: Stonewall 2008.

Box 12.3.2 Continued

experiences of migrants who have no recourse to public funds, including Central and Eastern European (CEE) migrants and failed asylum seekers. This is an area that is very challenging to evidence with robust data due to the ‘invisibility’ of migrants surviving as street homeless or staying with friends or families. Therefore it is impossible to state the extent of the issues facing these groups of people. We have cited some literature here, but all are based on very small samples or the views of service providers.

Asylum seekers: Whilst awaiting a decision on their asylum cases, individuals are allocated accommodation on a “no choice” basis. The areas in which dispersed asylum-seekers are housed are in many cases deprived areas with multiple social problems, and often accommodation is unsafe or overcrowded.¹¹¹ One piece of research found that some children and families had to live in dirty unsafe and overcrowded areas and one family of six living in a single room.¹¹²

Once refugee status is awarded, there may be knock-on impacts on housing security because as ‘move on cases’, individuals who are awarded refugee status generally have 28 days to vacate their temporary accommodation and can at this point experience vulnerability to longer-term homelessness.¹¹³

Migrants with no recourse to public funds: The largest group of ‘persons from abroad’ who are ineligible for housing or homelessness assistance in England are ‘White, other’, which may include a proportion of CEE migrants.¹¹⁴ This group is in general twice the size of ineligible households of other ethnic

¹¹¹ Mind 2009. *A Civilised Society Mental Health Provision for Refugees and Asylum-seekers in England and Wales*. London: Mind. Sommerville, W. 2007. *Immigration under New Labour*. Bristol: Policy Press. Pages 175-176.

¹¹² The Children’s Society 2008. *Living on the edge of despair: destitution among asylum seeking and refugee children*. London: The Children’s Society.

¹¹³ London Housing Foundation 2004. *Survey of homelessness sector services provided to asylum seeker and refugee clients*. London: London Housing Foundation. Page 6. Homeless Link 2010. *Homelessness among migrant groups: A Survey of Homelessness and Refugee Agencies across England*. Homeless Link. Available at http://homeless.org.uk/sites/default/files/Migrants%20and%20Homelessness%20report_March_prm.pdf Accessed 23/09/10.

¹¹⁴ The English eligibility regulations exclude all non-European Economic Area (EEA) nationals except those with refugee status and other forms of leave granted through the asylum system and those who have indefinite leave to remain. Welsh eligibility regulations are different, and specifically enable accession state migrants to apply for housing waiting lists and homelessness assistance irrespective of employment, registration or authorisation. Scottish regulations were similar, but amendments to bring them into line with the English ones were brought forward in July 2008.

Box 12.3.2 Continued

origin (14% of ineligible households are 'White, other'; the next largest group is 'Mixed White and Black African' (9%).¹¹⁵

Failed asylum seekers also fall into this group. They can seek assistance under 'section 4' pending their return to their home country if they face a temporary barrier to returning, but if they do not receive it, conventional homelessness agencies are unable to help them and there is potential for individuals to risk becoming street-homeless, and experiencing severe hardship as a result.¹¹⁶

Gypsies and Travellers

For Gypsies and Travellers who do not wish to reside in 'bricks and mortar' housing, there are limited sites of good quality. The location of sites can be poor (for instance, under motorways or next to sewage works), and present health hazards (such as contamination by vermin or decayed sewage) or poor services (a lack of water fittings, poor-quality utility rooms or lack of fire safety).¹¹⁷

When families accept the alternative of local authority housing, they are often housed on the most deprived estates, sharing the wider environmental disadvantages of their neighbours and being exposed to more immediate hostility towards their ethnicity. Local authority housing may also involve dislocation from their families, communities, culture and support systems, leading to further cycles of disadvantage.¹¹⁸

¹¹⁵ Fitzpatrick, S., Pleace, N. and Wallace, A. 2010. *Evidence Analysis for Equality and Human Rights Commission: Homelessness*. University of York. This paper is available on the Equality and Human Rights Commission's Triennial Review web pages.

¹¹⁶ British Red Cross 2010. *Not Gone, but Forgotten*. London: British Red Cross.

¹¹⁷ Cemlyn, S. et al. 2009.

¹¹⁸ Brown, P. and Niner, P. 2009. *Assessing Local Authorities' progress in meeting the accommodation needs of Gypsy and Traveller communities in England*. Research Report 13. Manchester: Equality and Human Rights Commission.

12.4 What we know about financial exclusion

Measures:

Access to a bank account – Percentage of people without bank accounts, or ‘unbanked’

Insurance – Percentage of people without home contents insurance

Credit – Percentage of people using high-cost credit

How these measures work:

Access to a bank account and insurance

We use data from the Family Resources Survey 2007/08 relating to individual use of a bank account. ‘Unbanked’ is defined as having no current, basic bank or savings account, but an ‘unbanked’ individual may have a Post Office account, or other savings such as investments.¹¹⁹ The Family Resources Survey is also used for the access to insurance measure. The survey allows breakdown by gender, age, disability and ethnicity.

Obviously access to bank accounts or savings is influenced to a degree by personal choice and therefore we cannot infer barriers to these services from the numbers who do/do not have a bank account etc.

There is very little information on religion or belief and we are reliant on small studies. Research is also limited regarding sexual orientation or transgender people and these are therefore not covered in this section.

The Equality Measurement Framework proposes a measure (still in development) of those who *‘report being treated unfairly by financial institutions, utility companies, housing officials or private landlords, social services, Jobcentre Plus or the Pension Service, or who have avoided contacting them for fear of being treated unfairly.’* In the absence of this measure we use these three measures of access to financial services, which will not capture aspects of fair treatment or respect, but will show gaps in the extent to which services may be accessible.

Credit

In terms of access to credit, there are no large-scale data sets for this measure, therefore we use a range of studies, which use a variety of definitions of ‘credit,’ and limits the extent to which we can generalise from them.

¹¹⁹ Lawton, K. and Platt, R. 2010 Page 9.

Overview

Having a bank account and access to financial products is increasingly part of having a normal standard of living in Britain. The great majority of households in Britain do now have at least one person with a bank account. **However, many young adults, particularly men are ‘unbanked’.**

Some ethnic minorities are particularly likely to lack access to standard financial products, **especially Pakistani and Bangladeshi women who are three times as likely as White men and women not to have a bank account.** The majority of Pakistani and Bangladeshi households do not have contents insurance. Some religious and ethnic groups may be excluded from credit by a lack of the availability of loans on terms that conform to their beliefs.

Disabled people are also sometimes denied full access to financial products, particularly where there are physical barriers, for example to accessing cash withdrawal machines.

What we know about the overall situation

In 2007/08, the Treasury’s Financial Inclusion Taskforce reported that 0.89 million adults (just 2% of all UK adults) lived in households that lacked a bank account of any kind, down from 2.0 million adults in 2005/06.¹²⁰

Approximately a fifth of all UK households have no home contents insurance, with just over half of all low-income households having no cover.¹²¹

¹²⁰ Financial Inclusion Taskforce 2009. *Fourth Annual Report on Progress Towards the Shared Goal for Banking* Available at http://www.hm-treasury.gov.uk/d/fourth_annual_banking_report.pdf

¹²¹ Lawton, K. and Platt, R. 2010. Page 11.

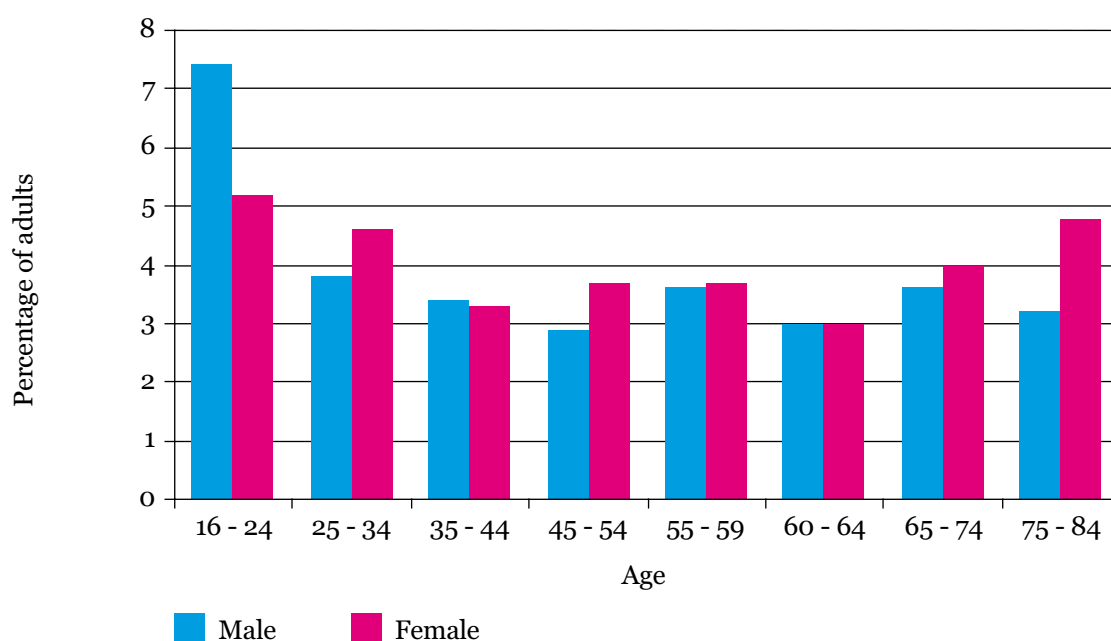
What we know about the situation for different groups

Gender and age

Access to a bank account

Using Family Resources Survey data, we can set out the proportions of ‘unbanked’ people on an individual basis, which shows, most notably, that more men (7%) than women (5%) in the 16-24 age category do not have bank accounts.

Figure 12.4.1 ‘Unbanked’ adults by age and gender in the UK, 2007/08¹²²



Source: Family Resources Survey 2007/08.

Note: ‘Unbanked’ refers to adults who do not have an account of any kind, although this will include some adults who only have a Post Office Card Account. Excludes respondents who did not know if they had an account or refused to answer the relevant question. Differences are only statistically significant for 16-24 years and 75+.

Insurance

The Family Resources Survey data show that men and women are equally likely to live in a household with no contents insurance.¹²³

¹²² Lawton, K. and Platt, R. 2010. Page 16.

¹²³ Lawton, K. and Platt, R. 2010. Page 20.

Credit

An analysis of the British Household Panel Survey (2005/06) suggest there may be few differences in the type of credit taken on by men and women – men appear more likely to have a personal loan and women more likely to access credit through mail order companies, which can have much higher annual percentage rate (APRs) than mainstream lenders. 10% of women used this form of credit in 2005/06 compared to just 2% of men.¹²⁴

In a 2006 survey of 2,805 low-income individuals in 18 areas of the UK conducted for the Financial Exclusion Taskforce, 24% of women were using 'high-cost' credit compared to 14% of men.¹²⁵

A 2004 Mori poll of 2,400 home credit users conducted on behalf of the then National Consumer Council estimated that women accounted for 65% of customers in the home (i.e. 'doorstep lender') credit market.¹²⁶

¹²⁴ Westaway, J. and McKay, S. 2007. *Women's Financial Assets and Debts*. London: Fawcett Society <http://www.fawcettsociety.org.uk/documents/Fawcett%20Assets%20Report.pdf> . See also Lawton, K. and Platt, R. 2010. Page 21.

¹²⁵ 'High cost credit' defined as mail order, home credit, non-bank credit cards, hire-purchase from retail shops, buy-back shops, pawnbrokers, payday loans and unlicensed lenders.

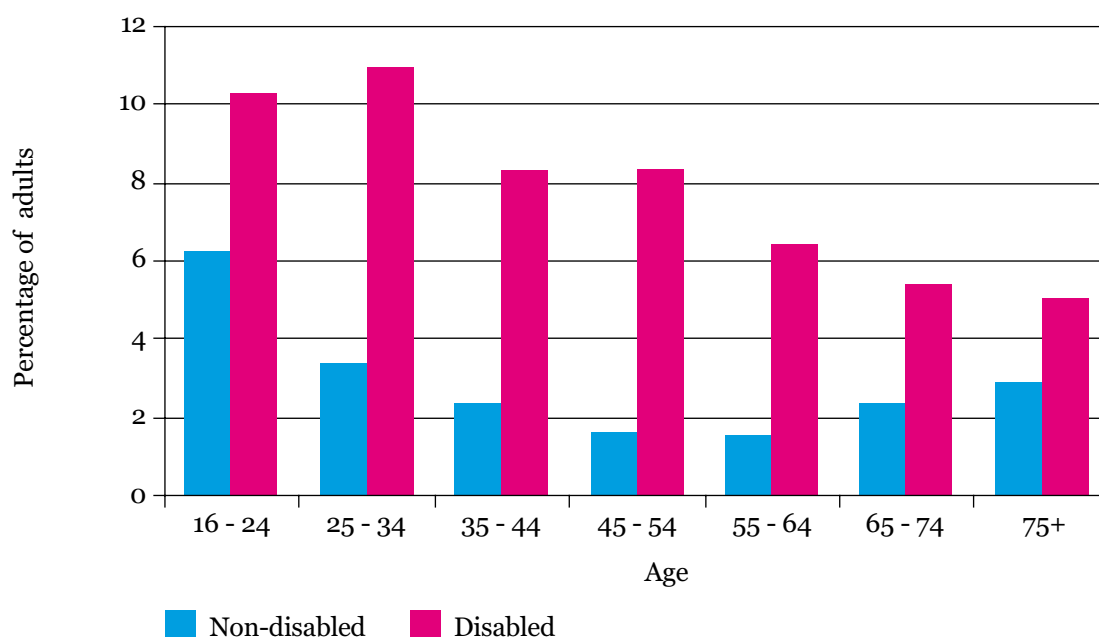
¹²⁶ Lawton, K. and Platt, R. 2010. Page 22.

Disability

Access to a bank account

Disabled people in all age categories are more likely than non-disabled people to have no bank account:

Figure 12.4.2 'Unbanked' adults by age group and disability status in the UK, 2007/08¹²⁷



Source: Family Resources Survey 2007/08.

Note: Respondents reporting a disability defined by the Disability Discrimination Act. All results are significant to the 5% level.

The Family Resources Survey also show that 11% of people with a learning disability report being 'unbanked' which is higher than any other impairment covered by the survey.¹²⁸

Several studies¹²⁹ have found that disabled people may also face difficulties using some of the facilities associated with bank accounts, which may reduce the benefits of account ownership:

- A study which asked physically disabled volunteers to survey the accessibility of 191 automated teller machines (ATMs) across the UK in 2006 found that 42% of volunteers needed assistance to use the cash machine, and of the ATMs surveyed, 59% were considered not to be fully accessible. A quarter of all cash machines surveyed were found to have no Braille on the key pads, and 28% were found not to be at a height that was accessible for a wheelchair user.

¹²⁷ Lawton, K. and Platt, R. 2010. Page 31.

¹²⁸ Lawton, K. and Platt, R. 2010. Page 31.

¹²⁹ Lawton, K. and Platt, R. 2010. Page 32.

- A survey of 1,000 adults found that over half of respondents (54%) with a physical disability had sometimes found Chip and PIN keypads difficult to use, compared to 38% of non-disabled respondents. An RNIB and Citizens Advice telephone survey of 163 blind and partially sighted people found that ATMs were used by less than half (44%) of respondents who had a bank account. More than half of those respondents who did use ATMs found them either 'very' or 'somewhat' difficult to use.

Insurance

Using Family Resources Survey data, 77% of adults who have a DDA-recognised disability appear to live in households which have home contents insurance, compared to 83% of non-disabled adults. Almost a third of people with a learning disability or difficulty live in a household with no contents insurance.¹³⁰

Credit

Literature is diverse in terms of disabled people's use of credit. A study involving 51 physically disabled people and a survey of 400 members of Leonard Cheshire supporter's network found that both groups reported being seen as a 'higher risk' by their bank or building society. Authors concluded that respondents felt they had to pay substantially higher rates of interest on loans than non-disabled people.

A survey comprising 8,580 respondents in Britain, found that 23% of respondents with a mental health disorder were in debt compared to 8% of respondents without a disorder.¹³¹

Ethnicity

Access to a bank account

Pakistani and Bangladeshi people are much more likely to be without bank accounts than other ethnic groups: 13% of women and 9% of men in these ethnic groups do not have a transactional account, compared to fewer than 4% of White men and women (see Table 12.4.1).

¹³⁰ Lawton, K. and Platt, R. 2010. Page 35

¹³¹ Lawton, K. and Platt, R. 2010. Page 36.

Table 12.4.1 'Unbanked' adults by ethnicity and gender in the UK, 2007/08¹³²

Ethnicity	% with no account	
	Men	Women
White*	3.8	3.7
Indian*	4.8	8.1
Pakistani/Bangladeshi	9.5	13.7
Black	6.1	5.4
Other*	5.3	9.1

Source: Family Resources Survey 2007/08.

Note: Gender differences between ethnic groups marked * are statistically significant at the 5% level.

Insurance

Households headed by Pakistani or Bangladeshi adults and by non-Caribbean Black adults are particularly unlikely to have home contents insurance, at 45% and 34% respectively, compared to 80% of White people.¹³³

Credit

An analysis of Ipsos Mori survey data on financial services commissioned by the Runnymede Trust found suggest that possibly, people from some major ethnic minority group are more likely than White British people to take on credit but this is an areas that would need further investigation to confirm robustly.¹³⁴

Religion or belief¹³⁵

There are very few sources of data on inequalities in access to financial services and products among people of different religious groups. Most studies have focused on the potential exclusion faced by followers of Islam, due to the specific teachings about interest. However, studies have also found that Sharia-compliant financial products (for example, bank accounts) are now fairly widely available in the UK. The Islamic Bank of Britain has branches in Manchester, London, Coventry, Birmingham and Leicester, and Sharia-compliant products are also available from high street banks HSBC and NatWest.

¹³² Lawton, K. and Platt, R. 2010. Page 23.

¹³³ Lawton, K. and Platt, R. 2010. Page 27

¹³⁴ Lawton, K. and Platt, R. 2010. Page 29. Respondents were asked to rate their agreement with the following statement on a scale of 1 to 5: *If I want something I will often buy it on credit and think about how I will repay the money later.* No sample size is provided in the published report.

¹³⁵ Lawton, K. and Platt, R. 2010. Page 40.

The Finance Act 2007 clarified the tax framework around Sukuk (an Islamic finance certificate, similar to an investment bond), making them more widely available. Islamic insurance products (Takaful insurance) are also available to UK consumers through HSBC, the Islamic Bank of Britain and others.

However, products provided by credit unions and many micro-lending organisations are not suitable for Muslims and so there is a risk that Muslims are excluded from some of the tools designed to tackle financial exclusion.

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Chapter 13:

Care and support

Summary

We all rely on care from others as we begin our lives. Some of us need care throughout our lives, because of disabilities, and some of us need care as we grow older and less capable of managing daily activities such as shopping, cleaning and feeding ourselves.

Many of us will also, at some point, provide unpaid care to others. Many people make a positive choice to take on caring responsibilities, and consider it rewarding and fulfilling. Some feel that their choice is constrained. In both cases the evidence suggests that unpaid care can have an impact on the job prospects, income and health of those who provide it; and different groups of people are more likely, at certain points in their life, to need, and to provide, certain types of care.

Throughout their lives, women are much more likely than men to take on unpaid care responsibilities both for children, and for older people. Men are more likely than women to lack the practical support that meets their needs as they get older.

Different ethnic groups draw on different forms of care to different extents. Black children are more likely to be in formal childcare than others; Bangladeshi and Pakistani children are much less likely. Meanwhile, Bangladeshi and Pakistani people are significantly more likely than average to provide informal paid care (more than twice as likely as White people). Some literature suggests that this may, in part, be because formal care services are not always appropriate to meet the particular needs of some ethnic minority groups.

As might be expected, we are more likely to need care as we grow older. We are also more likely to provide it later in life, as we have children and as our families and friends age with us. However, evidence suggests that there are also a significant number of younger carers – some 175,000 aged under 18 in 2001 – whose needs are less well recognised than adult carers'. A disproportionate number of these young carers are from certain ethnic minority backgrounds (including Bangladeshi, Black African and Black Caribbean and Pakistani).

Among disabled adults, those living alone and those on lower incomes are more likely than average to have unmet needs. Partners and spouses often play an important role in supporting disabled adults, as do disabled people themselves. In 2001, of the nearly 2 million people aged 16-74 who are permanently sick or disabled, over a quarter of a million provided some unpaid care for other people. The parents of disabled children, meanwhile, provide care well in excess of other parents, and this has an accordingly greater impact on their ability to take on paid work: 16% of mothers of disabled children are in paid employment, compared with 61% of all mothers. Parents with disabled children also tend to use less childcare. It is unclear whether this is through a positive choice, or because of a lack of appropriate and affordable places.

Finally, there is a strong socio-economic dimension to caring. People from lower socio-economic groups are more likely both to need care and to provide it, at any age. Better-off people are more likely to use formal childcare, and people on low incomes, non-working parents and single parents are less likely to use formal childcare.

There are few large-scale surveys that capture the different experiences of people of different religions, though some studies indicate that Muslim women may face particular difficulties in accessing childcare. Similarly, there are few large-scale surveys that collect data on the different care needs of lesbian, gay and bisexual (LGB) people, though some smaller studies suggest that some older LGB people find that care homes fail to provide them with a supportive environment. There are even less data about the care needs of transgender people.

Introduction

Care means providing assistance and support to people who are unable to manage all the daily tasks that are necessary to live independently. All young children, some disabled people and some older people require care. Care can be provided formally, by the state or private providers, or it can be provided informally, by family, friends or neighbours.

Unpaid carers, both of children and of adults, play a hugely important role in society. Politicians recognise both the contribution that carers make to society, and the impact of their responsibilities on their personal lives, and these issues have been at the forefront of political debate in recent years. Government has introduced various measures to support different types of carers. The right to request flexible working, for example, was first introduced in 2003 for the parents of very young children and disabled children. It has since been extended to other groups. The manifesto of each of the three main political parties for the 2010 election included some explicit commitment designed to support carers.

The government also recognises that finding long-term, sustainable and fair ways of meeting people's care needs is of paramount importance in an ageing society, where the overall need for care is likely to rise in the coming years. In July 2010, it invited a Commission to provide independent advice on the options for the future.¹

This chapter highlights three important aspects of how the care system delivers for different people.

¹ Department of Health 2010. *First step to sustainable care and support system*. Available at: http://www.dh.gov.uk/en/MediaCentre/Pressreleases/DH_117636. Accessed 21/08/2010.

Indicators

- 1. Access to care**
- 2. Access to childcare**
- 3. Unpaid care responsibilities**

Under **access to care**, we look at the percentage of older people who do not receive practical support that meets their needs.

Under **access to childcare**, we look at the percentage of parents who use formal or informal childcare.

For **unpaid care responsibilities**, we look at the percentage of those with unpaid caring responsibilities (for children or adults). Where appropriate we also draw on other relevant reports and research (on such issues as carers' attitudes towards work and their ability to combine paid work with other responsibilities).

As in the rest of Part II, this chapter explores what we know about these indicators and what the evidence tells us about the experiences of different groups.

13.1 What we know about access to care

Measure:

Percentage of older people who do not receive practical support that meets their needs.

How this measure works:

The English Longitudinal Study of Ageing 2004 provides data for England. The Scottish Household Survey (2005-06) and administrative data allow limited reporting against this measure for Scotland. There are no specific data for this measure for Wales, although administrative data allows some general reporting.

The Equality Measurement Framework includes a measure on the percentage of disabled people (including older people) who do not receive practical support that meets their needs. However, due to limitations in the data available, this section will only look at the percentage of older people who do not receive practical support that meets their needs. See Alkire *et al.* 2009 for a discussion of the limitations of the available data.²

The English Longitudinal Study of Ageing 2004 provides data for this measure for the 50-plus age group, in England only, and can be disaggregated by gender, age and to a limited extent by ethnicity.

The English Longitudinal Study of Ageing does not provide data by socio-economic group, disability, religion or belief, sexual orientation or transgender. Evidence of these groups has been sought from literature and small-scale surveys; results are indicative only of possible issues facing these groups as sample sizes are generally low. There is very limited related literature for this measure for religion or belief, therefore this group is not covered in this section.

The Census occupational categories are used as a means to report on socio-economic differences.

Overview

The number of older people receiving formal home care declined in the 1990s and stabilised in the mid-2000s. This was caused mainly by a shift by local authorities to providing a smaller number of relatively large care packages to the most needy older people, at the expense of lower-level help.

² See Alkire, S. *et al.* 2009. *Developing the Equality Measurement Framework: Selecting the Indicators*. Research Report 31. Manchester: Equality and Human Rights Commission. Page 258.

However, when considering these trends, it is important to note that the vast majority of people receiving care get it unpaid, from family or friends, rather than a professionalised service.

Men are more likely than women not to receive practical support that meets their needs. Men and women over the age of 75 are less likely to report having unmet care and support needs than those aged 50-74 years.

These data suggest that there is little difference between ethnic minority groups and others in accessing professional domiciliary care, but some literature suggests that there are cultural factors that mean services are not always appropriate. This could leave some individuals without appropriate help as well as potentially placing undue pressure on carers – Bangladeshi and Pakistani people are significantly more likely than other groups to provide informal care.

People from lower socio-economic groups have on average greater care needs at given ages. One underlying issue is the extent to which they are able to meet this extra need by drawing on family help when conditions are not great enough to trigger local authority support, and the consequences this reliance on family may have on economic and social prospects.

What we know about the overall situation and trends

In England, Scotland and Wales the number of older households receiving professional domiciliary help and support declined in the 1990s. In England, the proportion of households of those aged 75 and older receiving home care from social services halved between 1994 and 2008;³ in Scotland the number of people aged 65 and older receiving home care fell by a third between 1996 and 2002, from 81,000 to 54,000;⁴ and in Wales the number of people aged 65 and over receiving home care from their local authority halved between 1994 and 2001.⁵ Since then the number of people receiving professional domiciliary help and support has levelled out in all three nations.⁶

Qualitative research has found that increasingly, local authorities in England are only meeting the needs of those considered to require critical, urgent or

³ The Poverty Site 2009a. *Help from Social Services (United Kingdom)*. Graph 1. Available at: <http://www.poverty.org.uk/69/index.shtml>. Accessed 29/08/2010.

⁴ The Poverty Site 2009b. *Help from Social Services. (Scotland)*. Graph 1. Available at: <http://www.poverty.org.uk/s69/index.shtml>. Accessed 23/08/2010.

⁵ The Poverty Site 2009c. *Help from Social Services. (Wales)*. Graph 1. Available at: <http://www.poverty.org.uk/w69/index.shtml>. Accessed 23/08/2010.

⁶ The Poverty Site 2009a. Graph 1.

substantial support.⁷ Nine of 33 local authorities interviewed met moderate needs in 2008-09 and planned to continue to do so for all of 2009-10.⁸

What we know about the situation for different groups

Gender and age

Unsurprisingly, men and women are more likely to report needing help with Activities of Daily Living (ADL)⁹ and Instrumental Activities of Daily Living (IADL)¹⁰ and receiving more help as they get older.¹¹ In the English Longitudinal Study of Ageing (2004) respondents were most likely to report needing help with dressing or washing, and shopping or doing work around the house as shown in Figures 13.1.1 and 13.1.2.¹²

⁷ Passingham, A. 2010. *Care concern 2009: The key issues raised by older people, their families and carers with Counsel and Care's Advice Service in 2009*. Available at: <http://www.counselandcare.org.uk/category/policy/pdf/care-concerns-2009> Accessed on 23/09/2010. For 22 of 33 English local authorities interviewed as part of qualitative research, this was the case.

⁸ Passingham, A. 2010.

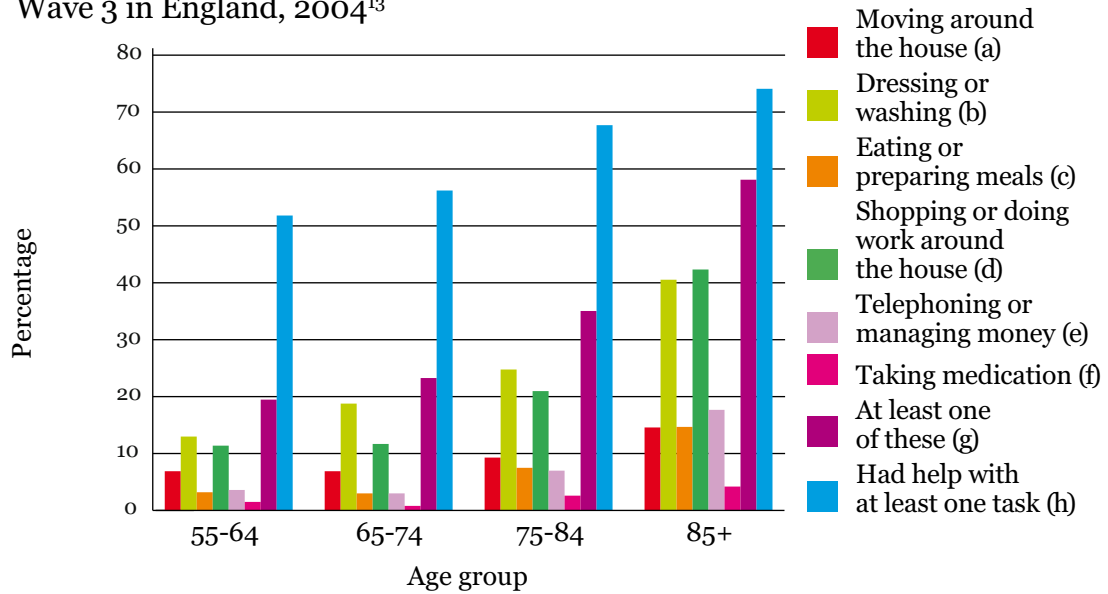
⁹ Activities of Daily Living (ADL) include self-care activities such as washing, dressing, eating, using the toilet, getting in and out of bed and walking across a room.

¹⁰ Instrumental Activities of Daily Living (IADL) include: activities necessary for independent living in a community such as making telephone calls, shopping for groceries, preparing a hot meal, taking medications, managing money and doing work around the house and garden.

¹¹ Breeze, E. and Lang, I.A. 2008. 'Physical functioning in a community context'. In Banks, J., Breeze, E., Lessof, C. and Nazroo, J. (eds.) *Living in the 21st Century: Older People in England, The 2006 English Longitudinal Study of Ageing (Wave 3)*. London: Institute for Fiscal Studies (IFS).

¹² Banks, J. *et al.* 2008.

Figure 13.1.1 Percentage of men that reported difficulty with the listed activities by age group at Wave 3 in England, 2004¹³

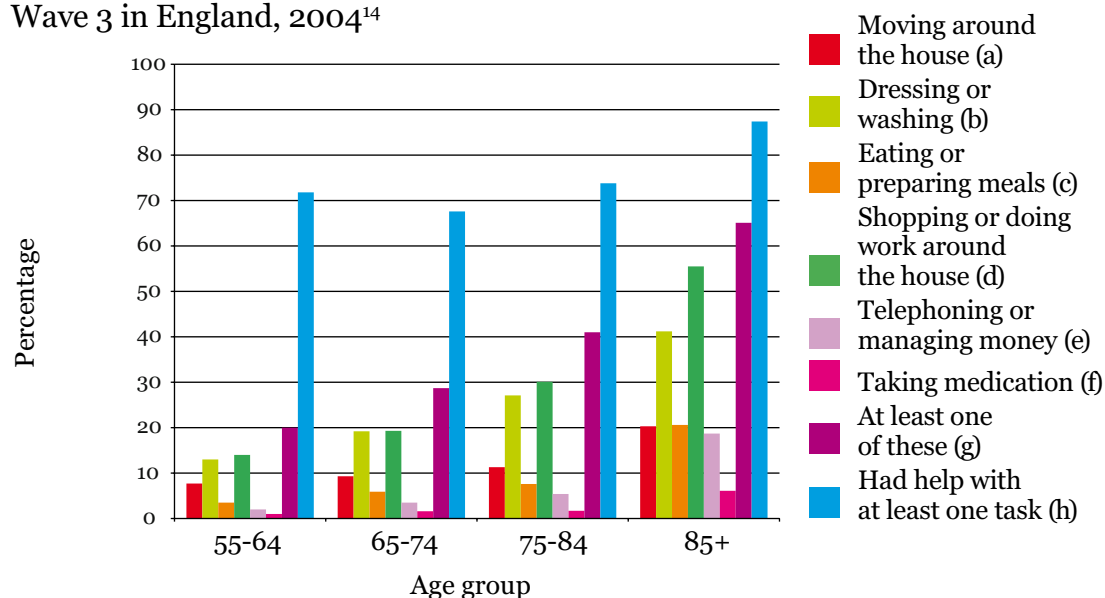


Source: The 2006 English Longitudinal Study of Ageing (Wave 3).

Notes: Weighted by wave 3 longitudinal weight. (a) Difficulty with walking across a room or with getting in and out of bed or with using the toilet, including getting up and down. (b) Difficulty with dressing, including putting on shoes and socks, or with bathing or showering. (c) Difficulty with eating, such as cutting up food or with preparing a hot meal. (d) Difficulty with shopping for groceries or with doing work around the house or garden. (e) Difficulty with making telephone calls or with managing money, such as paying bills and keeping track of expenses. (f) Difficulty with taking medications. (g) Base for % who had help with at least one task. (h) Had help with at least one task.

¹³ Breeze, E. and Lang, I.A. 2008. Table 3A.18, page 109.

Figure 13.1.2 Percentage of women that reported difficulty with the listed activities by age group at Wave 3 in England, 2004¹⁴



Source: The 2006 English Longitudinal Study of Ageing (Wave 3).

Notes: weighted by wave 3 longitudinal weight. (a) Difficulty with walking across a room or with getting in and out of bed or with using the toilet, including getting up and down. (b) Difficulty with dressing, including putting on shoes and socks, or with bathing or showering. (c) Difficulty with eating, such as cutting up food or with preparing a hot meal. (d) Difficulty with shopping for groceries or with doing work around the house or garden. (e) Difficulty with making telephone calls or with managing money, such as paying bills and keeping track of expenses. (f) Difficulty with taking medications. (g) Base for % who had help with at least one task. (h) Had help with at least one task.

Older people are more likely to report receiving help which meets their needs than younger people. Initial analysis of English Longitudinal Survey of Ageing 2004 conducted as part of the development of the Equality Measurement Framework, shows that 57% of those aged over 75 felt this was the case, compared with 40% of those aged 65-74 and 37% of those aged 50-64. As Table 13.1.1 shows, at every age a larger proportion of women than men report that the practical support they receive meets their needs. Overall 48% of women respondents said this, compared with 39% of men.¹⁵

¹⁴ Breeze, E. and Lang, I.A. 2008. Table 3A.18, page 109.

¹⁵ Alkire, S. *et al.* 2009. *Developing the Equality Measurement Framework: selecting the indicators*. Research Report 31. Manchester: Equality and Human Rights Commission.

Table 13.1.1 Percentage of people aged 50 and over who have difficulties with activities of daily living (ADL) or instrumental activities of daily living (IADL) who receive help which always or usually meets their needs¹⁶

	Women %	Number in sample	Men %	Number in sample
Overall	48	3,288	39	2,106
Aged 50-64 years	40	1,251	33	796
Aged 65-74 years	43	994	36	683
Aged 75 plus	62	1,043	49	627

Source: Alkire *et al.* 2009.¹⁷

Note: Gender differences statistically significant at $p < 0.05$.

Sources of help and support differ by gender and age. Except for women aged 75 years and over, a spouse or partner was the most common source of help. Married men also receive most of their support from their spouses regardless of their age. Many of those women aged 75 and over were widowed - for these women children were a prominent source of help, particularly for those aged 85 and over. For men aged over 85, many received help and support with shopping and working in the house and garden from friends and neighbours.¹⁸

Socio-economic groups

Although there are no data by socio-economic groups on this measure, there are data that shows the percentage of people by Census occupational categories who report having difficulty with one or more ADL. The data show that those in routine and manual occupations are far more likely to report having difficulty with one or more ADL or self-care than those in managerial and professional occupations. The higher reported rates of disability in routine and manual occupational classes, compared with managerial and professional occupational classes, are present in

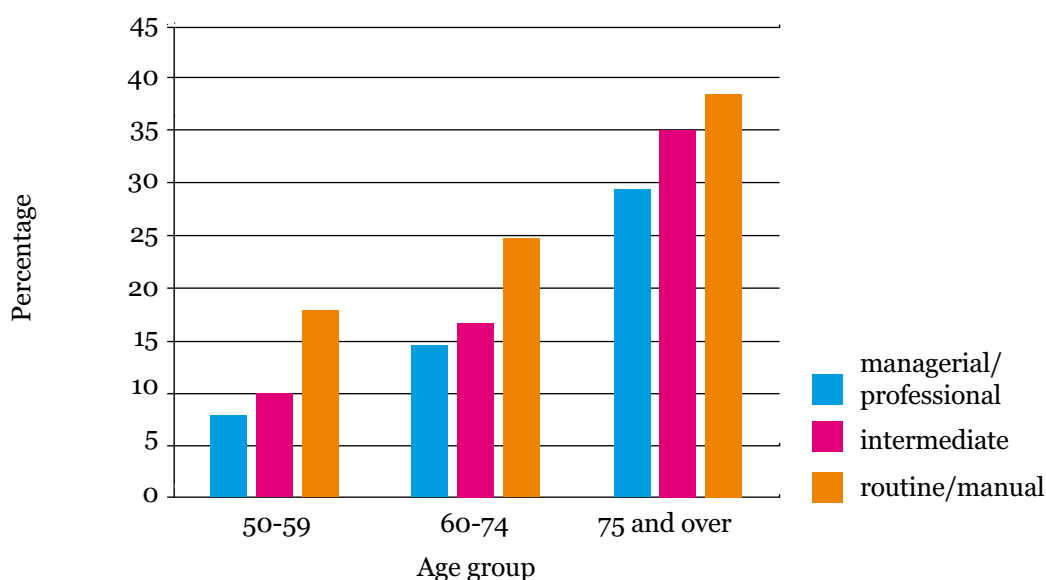
¹⁶ Alkire, S. *et al.* 2009. Table 9, page 259. In the development of the Equality Measurement Framework indicators, the technical phase was to check sample sizes rather than generate final data analysis tables, so these are preliminary results for group means and the significance of the variations in group means, as well as a report on sample size. Significance tests are reported at the 95% level. A series of cross-checks are required at the next stage of the development of the Equality Measurement Framework before final data tables can be produced.

¹⁷ Alkire, S. *et al.* 2009. See footnote 16 for information about the development of the Equality Measurement Framework indicators.

¹⁸ ELSA Wave 3. Equality and Human Rights Commission analysis of Tables 3A.19–21. Available at: <http://www.ifs.org.uk/elsa/report08/ch3.pdf> Accessed 23/08/2010.

all age groups.¹⁹ The evidence points towards a link between poverty and disability and between working in a manual occupation and difficulty with daily living. However, it does not indicate the direction of the causal relationship between them.

Figure 13.1.3 Difficulty with one or more activity of daily living (ADL) by age and occupational class in England, 2004²⁰



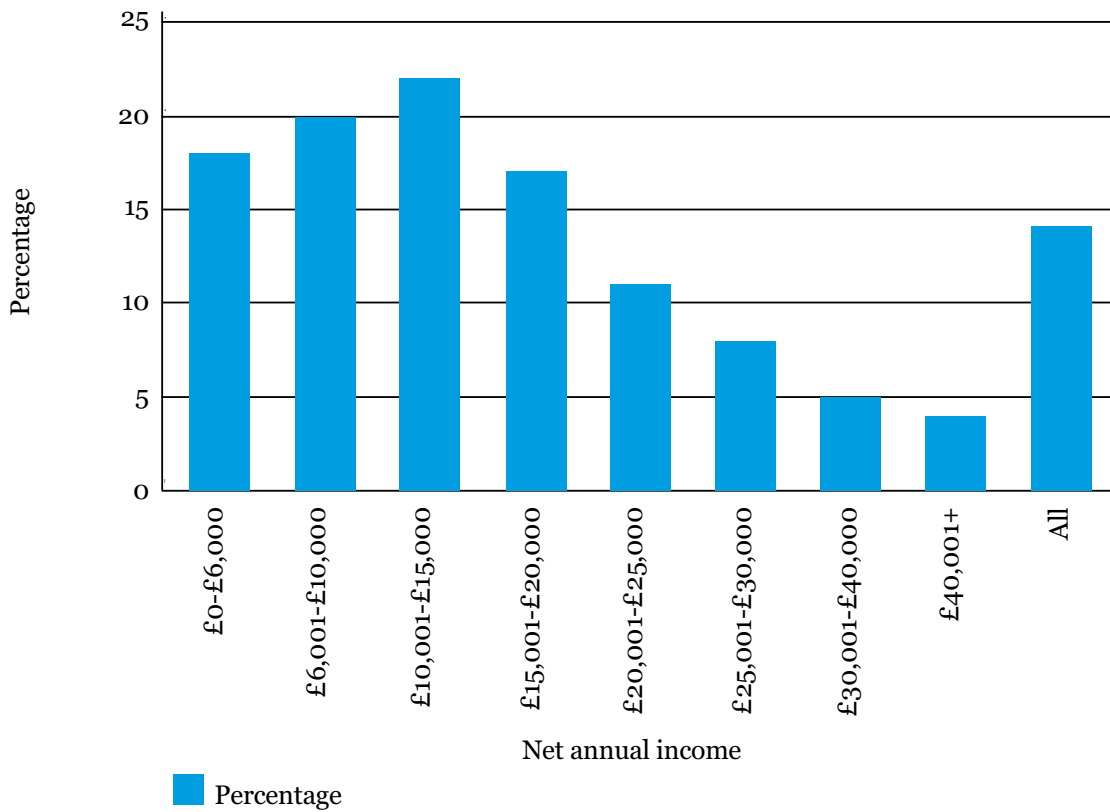
Source: The 2006 English longitudinal study of Ageing (Wave 3).

In Scotland there is a similar pattern between care needs and household income, with the highest income households being the least likely to contain someone in need of regular care or help as Figure 13.1.4 below shows. Just over 1 in 5 (22%) of Scottish households with a net annual income of £15,001-20,000 contain someone who requires regular help, compared with 1 in 12 (8%) of those with incomes between £25,001 and £30,000, and around only 1 in 20 (5%) of households with an annual income above £30,000.

¹⁹ Steel, N., Hulpert, F.A., McWilliams, B. and Melzer, D. 2004. 'Physical and cognitive function'. In Marmot, M. *et al.* (eds.) 2004 *Health, Wealth and Lifestyles of the Older Population in England: The English Longitudinal Study of Ageing (ELSA) (Wave 1)*. London: IFS. Page 259.

²⁰ Banks, J. *et al.*, 2008.

Figure 13.1.4 Whether anyone in the household needs regular help or care by net annual income in Scotland, 2007/08²¹



Source: Scottish Household Survey, 2007/08.

Note: Base = 26,267.

Disability

The English Longitudinal Study of Ageing does not collect data by disability status. However, a recent large scale GB-wide research study, *The Experiences and Expectations of Disabled People*, which has both qualitative and quantitative elements, reported on the care and support experiences of disabled people. As part of the research for the project, a survey of 7,000 disabled people was completed as well as qualitative work with 134 disabled individuals.

The majority of respondents to the survey (86%) said that they did not have any unmet needs for help and support for day to day activities or less regular tasks. However, 14% of respondents said they needed some kind of help that they were not currently receiving. This figure was higher among women (16%) than men (12%).

²¹ Scottish Government 2009. *Scotland's People: Annual Report from 2007/2008 Scottish Household Survey*. Available at: <http://www.scotland.gov.uk/Publications/2009/09/01114213/0> Accessed 23/08/2010. Figure 10.11, page 116.

The degree to which support needs were met appears to be influenced by a number of characteristics:

- Those in single person households were more likely to report having unmet support needs (20%) than those in other households.²²
- Respondents in households with higher incomes were less likely than those with lower household incomes to say that they had an unmet support need: 12% of those with annual household incomes above £10,400 said this, compared with 19% of those with household incomes below this level. More than half of disabled people who have financial difficulties agreed that their financial situation had stopped them from getting the help or support they need.²³

For disabled people responding to the survey, family members provided the greatest source of weekly help with more than 2 in 5 of those who received any help or support saying that their spouse or partner (46%) or child(ren) (43%) gave them help or support at least once a week.²⁴ Overall, 41% of respondents received regular (at least once a week) support for some activity.

Box 13.1.1 Related issue: Suitability of aids and adaptations

Disabled people do not always have the adaptations they need to help them with daily activities. A quarter of people interviewed or surveyed (26%) said that they would like to have aids that they did not have. To measure the gap between the aids people currently have in their homes and those that they would like to have, all respondents were asked which aids or adaptations they would like to have. The results are shown in Table 13.1.2. Among those who had any aids or adaptations, just under half (47%) said that they always had a choice of what to get, but 26% said they never had a choice. Respondents with mental health conditions (30%) were least likely to report being given a choice on this issue.²⁵

²² Williams, B., Copestake, P., Eversley, J. and Stafford, B. 2008. *Experiences and Expectations of Disabled People*, London: Office for Disability Issues. Available at: <http://www.officefordisability.gov.uk/docs/res/eedp/eedp-full-report.pdf>. Accessed 23/08/2010. Page 180.

²³ Williams, B. *et al.* 2008. Page 181.

²⁴ Williams, B. *et al.* 2008. Page 181.

²⁵ Williams, B. *et al.* 2008. Page 172.

Table 13.1.2 Aids and adaptations respondents needed or would like to have (responses given by 3% or more)²⁶

	All respondents %
Any aid or adaptation	28
Any aid to mobility or dexterity	26
Aids or adaptations to help with washing and bathing (for example bath board, changes to design of bath/shower room, graduated floor shower)	10
Stair lift	5
Relocated bathroom or toilet	4
Grab rail(s)	3
Aids or adaptations to help with cooking (for example changes to design of kitchen, tilting kettle, kitchen implements with better grip handles)	3
Base (long version only)	1,743

Source: Office for Disability Issues 2008.

The Scottish Household Survey (2005-06) reports on the percentage of people who have some illness or disability; who have difficulty with at least one activity, and have the adaptations/equipment they need and receive satisfactory help. Initial analysis of the responses, as part of the development of the Equality Measurement Framework, shows that more women than men reported that they had the adaptations/equipment that they needed and that they received satisfactory help (42% compared with 34%). People over the age of 75 were also more likely to report that they had the adaptations/equipment that they needed and that they received satisfactory help than any other age group.²⁷

Ethnicity

The English Longitudinal Study of Ageing only reports differences between White and non-White respondents with regard to this measure. Initial analysis conducted as part of the development of the Equality Measurement Framework

²⁶ Williams, B. *et al.* 2008. Table 57, page 172.

²⁷ Alkire, S. *et al.* 2009. Calculations using Scottish Household Survey 2005-06. Figures in text are statistically significantly different from the first sub-group listed in the group (men). However, the Scottish Household Survey has a complex sampling structure which has not yet been taken into account in the calculations of statistical significance. In the development of the Equality Measurement Framework indicators, the technical phase was to check sample sizes rather than generate final data analysis tables, so these are preliminary results for group means and the significance of the variations in group means, as well as a report on sample size. Significance tests are reported at the 95% level. A series of cross-checks are required at the next stage of the development of the Equality Measurement Framework before final data tables can be produced.

indicates that slightly more White than non-White people reported that they received help which always or usually meets their needs, (45% compared with 41%)²⁸ although this result was found to be not statistically significant.

Box 13.1.2 Related issue: Cultural sensitivity of support services

Small-scale qualitative evidence in England, indicates that not all formal support services respect, understand and accept different cultural expectations. This may be in relation to family life and obligations, use of space within the home or religious obligations including those relating to self-care and domestic tasks.

Qualitative research conducted by the Joseph Rowntree Foundation with 28 disabled people in the Asian community found that many of those interviewed experienced long delays in fitting adaptations or aids even after they had been assessed. In many cases it was perceived that delays were due to inflexible approaches to meeting individual needs and preferences.²⁹

There is little research evidence directly relating to social care services for older and disabled Gypsies and Travellers, although a small number of studies explore some of the cultural issues and barriers facing this group in relation to end of life care.³⁰ One report finds that Gypsies and Travellers with health problems may find that their cultural needs, such as for the involvement of multiple family members in their care, are not always met by formal support services.³¹

Gypsy and Traveller Accommodation Needs Assessment (GTAA) evidence indicates that in many cases older or disabled Gypsies and Travellers have had to wait considerable periods of time to obtain adaptations to their caravans on

²⁸ Alkire, S. *et al.* 2009. See footnote 27 for information on the development of the Equality Measurement Framework indicators.

²⁹ Vernon, A. 2002. *User-defined outcomes of community care for Asian disabled people*. Bristol: Policy Press and Joseph Rowntree Foundation. 28 Asian disabled people between 18 and 40 were involved (through individual interviews or focus groups) and interviews were also conducted with eight service providers.

³⁰ Jesper, E., Griffiths, F. and Smith, L. 2008. 'A qualitative study of the health experience of Gypsy Travellers in the UK with a focus on terminal illness'. *Primary Health Care Research and Development*, 9: 157-65.

³¹ Jesper, E. *et al.* 2008.

Box 13.1.2 Continued

public sites.³² Anecdotal evidence indicates that without relatives to lift them in and out of caravans, residents of authorised public sites have been confined to their homes as no ramps or other adaptations have been fitted by local authorities.³³ A number of GTAA interviewees have referred to the impact of accommodation policies which may preclude older people having a carer to live with them on site through lack of space, or regulations on numbers of caravans at a location, forcing them to live alone, in contrast to their social and cultural expectations.³⁴

Sexual orientation

The care and support needs of the LGB community are not reflected in large-scale datasets. However, research into the healthcare experiences of LGB people indicates that they may not always receive help and support which meets their needs. Older LGB people may be particularly vulnerable.³⁵ Survey research has found that many care staff assume that older and disabled LGB people are either asexual or heterosexual, or that the needs of LGB people are no different from those of heterosexuals.³⁶ Disabled or older LGB people may not challenge these misconceptions because of fears of discrimination.³⁷ One study comprised of a survey of 92 LGB people who had used social care services, feedback from a Commission for Social Care Inspectorate conference of LGB issues, a representative sample of 400 Annual Quality Assurance Assessment Forms from service providers, and discussions with service providers and users found that only 7% of older people's care homes had worked specifically on equality around sexual orientation.³⁸

³² Cemlyn, S. *et al.* 2009. *Inequalities experienced by Gypsy and Traveller communities: A review*. Research Report 12. Equality and Human Rights Commission. Page 29.

³³ Cemlyn, S. *et al.* 2009. Page 29.

³⁴ Cemlyn, S. *et al.* 2009. Page 29.

³⁵ See Department of Health 2007. *NHS Briefing 4: Older lesbian, gay and bisexual (LGB) people*. Available at: http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/documents/digitalasset/dh_078356.pdf. Accessed 23/08/2010. Also see Hunt, R. and Minsky, A. 2006. *Reducing health inequalities for lesbian, gay, bisexual and trans people: Evidence of health care needs*. London: Stonewall.

³⁶ Mitchell, M., Howart, C., Kotecha, M. and Creegan, C. 2008 *Sexual Orientation Research Review*. Research Report 34. Manchester: Equality and Human Rights Commission. Page 206.

³⁷ Mitchell, M. *et al.*, 2008. Page 206.

³⁸ Mitchell, M. *et al.* 2008. Page 212.

Transgender

The care and support needs and experiences of the transgender community are not reflected in large-scale datasets and there is almost a complete absence of research on social care services for transgender people. However, general research into health services indicates that there is a lack of health services targeted specifically at transgender people outside of gender reassignment provision.³⁹

Box 13.1.3 Related issue: Care needs of refugees and asylum seekers

Large-scale surveys do not currently collect data on the specific support needs of refugees and asylum seekers. However, one study run by the Joseph Rowntree Foundation identified 5,300 disabled refugees and asylum seekers who highlighted some particular issues. Many had unmet personal care needs and were struggling to cope in inappropriate and unsuitable housing.⁴⁰ Personal needs such as difficulties when washing, dressing and making meals were common among those interviewed, although assistance with such tasks was rarely provided by external agencies.⁴¹

³⁹ Mitchell, M. and Howarth, C. 2009. *Trans research review*. Research Report 27. Manchester: Equality and Human Rights Commission. Pages 55–62.

⁴⁰ Roberts, K. and Harris, J. 2002. *Disabled people in refugee and asylum-seeking communities in Britain*. Joseph Rowntree Foundation Findings. York: JRF. 44 refugee community groups and disability organisations identified over 5,300 disabled refugees and asylum seekers with whom they were in contact at the time of participating in this study; 38 refugee and asylum seekers took in-depth interviews.

⁴¹ Roberts, K. and Harris, J. 2002.

13.2 What we know about access to childcare

Measure:

Percentage of parents who use formal or informal childcare.

How this measure works:

We are able to report on the situation in England, Scotland and Wales for this measure.

In England the data are from the Childcare and Early Years Survey of Parents 2008 (Department for Education) which asks about childcare use, availability and preferences of parents with children aged between 0-14. The survey collects information from around 7,000 parents.

In Scotland the data for this measure are drawn from The Growing up in Scotland Survey (2007). The Growing up in Scotland Survey collects information about a cohort of 5,217 children aged 0-1 years old and a cohort of 2,859 children aged 2-3 years old. This is a longitudinal survey, and for some comparisons we have used sweep 1 as it contains the relevant information.

In Wales the *Childcare and Early Years Provision in Wales* survey collected parents' use, views and experiences of childcare in 2004-05. The study collected information from 561 parents.

The Equality Measurement Framework recommended a measure that looks at parents' satisfaction with childcare. However the data available for this measure are limited.⁴² Instead, this section explores childcare use and provision by looking at the percentage of parents in England, Scotland and Wales who use formal or informal childcare.

For England, data can be disaggregated by parental characteristics of age and socio-economic status, and child characteristics of disability and ethnicity. There is limited evidence by ethnicity in Scotland and Wales. We have used the Scottish Household Survey Analytical topical report 2006 which provides some evidence by ethnicity. There is some evidence on disability, religion or belief and on LGB parents in literature and small-scale studies; results shown here are indicative only of possible issues facing these groups as sample sizes are generally low. There is very limited evidence on religion or belief, or transgender parents across all three nations in relation to this measure and the latter group is not covered in this section.

⁴² See Alkire, S. *et al.* 2009 for a discussion of the limitations of available data. Page 262.

Where data are available, parental work status and area deprivation are used as means to report on socio-economic differences. In England Special Educational Needs (SEN) status of children and in Scotland Additional Support Needs (ASN) are used as way of reporting on disability.

Overview

A considerable body of evidence from across Britain shows that early years education and childcare impacts on childrens' learning and development.⁴³ It also improves their confidence and peer relationships, and can help to break intergenerational cycles of child poverty and inequality.⁴⁴ The impacts are dependent upon the quality of provision (high quality consistently yields better outcomes).⁴⁵

The great majority of families with children in Britain use some form of childcare. However, there are variations in the extent to which people use formal and informal providers.

The most significant divide is by social class with uptake of formal childcare higher among the better off. Lone parents, non-working parents and lower income parents use less childcare, and when childcare is used, are less likely to use formal childcare. Insofar as high quality formal settings help give children a good start in life by helping early development and education, this contributes to the social inequalities referred to in the early years section of Chapter 10: Education.

Ethnicity has a bearing on childcare use. Black and White children are more likely to have received formal childcare than those from other ethnic minority groups, but Bangladeshi and Pakistani parents make very little use of formal childcare at all. **Those with disabled children also use less childcare.** It is unclear from the information available whether it is

⁴³ Sylva, K. 2004. *The Effective Provision of Pre-school Education (EPPE) Project: Final Report*. Institute of Education for Department for Education and Skills. Available at: www.dfes.gov.uk/research/data/uploadfiles/SSU_FR_2004_01.pdf. See also reviews in Waldfogel, J. 2004. *Social Mobility, Life Chances, and the Early Years*. Centre for Analysis of Social Exclusion Paper 88 and Waldfogel, J. 2006. *What Children Need*. Cambridge: Harvard University Press. Bradshaw, P. and Wasoff, F. 2009. *Growing Up in Scotland: Multiple Childcare Provision and its Effect on Child Outcomes*. Edinburgh: Scottish Government.

⁴⁴ Hills, J. et al. 2010. *An Anatomy of Economic Inequality in the UK, Report of the National Equality Panel*. Government Equalities Office. Chapter 3.

⁴⁵ Campbell-Barr, V. and Garnham, A. (forthcoming) *Childcare: A Review of What Parents Want*. Equality and Human Rights Commission.

parental preferences that determine the lower levels of use, or whether it is driven by a lack of appropriate and affordable places.

What we know about the overall situation and trends

Most parents in England, Scotland and Wales use childcare in their children's early years. In England, 65% of families were using some form of childcare at the time of the interview, 60% in Scotland⁴⁶ and 66% in Wales.⁴⁷

In 2010 95% of eligible 3- and 4-year-olds in England were benefitting from some free early education.⁴⁸ Take-up of free, part-time places in Scotland in 2006 stood at 97% according to the Census and in Wales at 95% for children in their pre-school year in 2003/04.⁴⁹

Childcare providers tend to be divided into formal or informal providers. Across the main surveys used here 'formal' providers include, for example, nurseries, playgroups and childminders and 'informal' providers include, for example, the child's grandparents, other relatives and friends and neighbours. The use of formal versus informal childcare has implications in terms of the costs involved in childcare and the type of care given.

In England, parents' use of formal childcare rose between 1999 and 2004, reached a plateau between 2004 and 2007, and saw a further rise in 2008. The patterns of

⁴⁶ This figure refers to use of any child care at each sweep. See Bradshaw, P. and Wasoff, F. 2009. Page 6.

⁴⁷ Speight, S. *et al.* 2009. *Childcare and Early Years Survey of Parents 2008*. Department for Children, Schools and Families (DCSF) Research Report 136. London: DCSF. Scottish Government 2007. *Use of childcare by parents of young children*. Growing up in Scotland Research Findings 2. Available at: <http://www.scotland.gov.uk/Publications/2007/01/08145458/0>. Accessed 23/08/2010. Bryson, C., Kazimirski, A. and Southwood, H. 2006. *Childcare and early years provision in Wales. A study of parents' use, views and experiences*. Cardiff: Welsh Assembly Government. Available at: <http://wales.gov.uk/docrepos/40382/4038232/4038211/40382121/childcare-survey-report-30-1.pdf?lang=en>. Accessed 23/08/2010.

⁴⁸ Department for Education 2010. *Provision for children under five years of age in England: January 2010*. Statistical First Release 16/2010. Available at: <http://www.dcsf.gov.uk/rsgateway/DB/SFR/s000935/SFR16-2010.pdf>. Accessed 23/08/2010.

⁴⁹ Campbell-Barr, V. and Garnham, A. (forthcoming).

use inevitably reflect changes in the level of provision of childcare, for example the latest increase in formal childcare use is likely to reflect the expansion of extended schools.⁵⁰

In England, a higher proportion of families used formal provision (45%) than informal provision (40%).⁵¹ This is reversed in Scotland⁵² and Wales where informal childcare was found to be more common.⁵³ In Wales, 38% of families surveyed had used formal care in the past week compared with 47% who had used informal care.⁵⁴ In Scotland and Wales grandparents were found to be the single most common type of childcare provider.⁵⁵

In England, use and type of childcare used varies by region. Children in London are the least likely to receive any type of childcare (55%) compared with a national average of 64% as Table 13.2.1 below shows.⁵⁶ Use of informal care in London is particularly low, at 23% compared with a national average of 34%, and this is not off-set by a higher rate of formal childcare use.

⁵⁰ Speight, S. *et al.* 2009. It is important to note that differences in reporting rates around formal and informal care may be partly explained by different definitions in each of the surveys.

⁵¹ Speight, S. *et al.* 2009. Table 2.1.

⁵² In Scotland informal childcare refers specifically, at that provided by grandparents, other relatives, ex-spouse or partner, or a friend or neighbour. The use of informal provision only at least one sweep and mix of formal and informal provision at at least one sweep was the most prevalent. In the birth cohort (0-1) the use of informal provision at each sweep was more prevalent independently from the number of providers used. This was reversed in sweep 3 where the use of formal childcare was higher amongst parents using just one provider. See Bradshaw, P. and Wasoff, F. 2009. Tables 3.2 and 3.3, pages 21-22.

⁵³ See Hay, J. 2007. *Parents' Access to and Demand for Childcare Survey 2006: Final Report*. Report for Scottish Government Social Research. Available at: <http://www.scotland.gov.uk/Resource/Doc/206909/0054961.pdf>. Accessed 23/09/2010. Page 19. Bradshaw, P. and Wasoff, F. 2009.

⁵⁴ Bryson, C. *et al.* 2006. Page 63.

⁵⁵ Bradshaw, P. and Wasoff, F. 2009. Page 47; Bryson, C. *et al.* 2006. Page 3.

⁵⁶ Speight, S. *et al.* 2009. Page 26.

Table 13.2.1 Use of childcare by Government Office Region in England, 2008⁵⁷

Government Office Region	Any childcare %	Formal childcare %	Informal childcare %	Weighted base
All	64	44	34	7076
North West	68	43	42	342
North East	64	43	39	963
Yorkshire and the Humber	62	44	35	715
East Midlands	65	44	37	600
West Midlands	67	43	40	778
East	64	47	35	781
London	55	41	23	1,109
South East	67	47	32	1,129
South West	65	48	32	660

Source: Childcare and Early Years Survey of Parents 2008.

Note: Base= all children.

In the same survey, families with children aged under 14 were asked if they had accessed any childcare in the previous year. Only a small minority (13% of all families) had not accessed any childcare.⁵⁸ Those not accessing childcare were particularly likely to have school-age children only, and their reasons for not accessing childcare appear to be more closely related to personal preference and circumstances – not needing to access care or preferring to care for children themselves – than to problems with accessing quality childcare.⁵⁹ Importantly however, a small proportion of those not accessing any childcare (13%) said that they could not afford to.⁶⁰ Similarly the parents of younger children (aged 0-2) who had not accessed nursery education largely attributed their decision to personal choice and to the fact that the child was too young. Only 18% of this group mentioned affordability as a problem, although a quarter (25%) of working lone parents highlighted this as an issue.

In a recent survey in Scotland, just over one-quarter of parents (27%) reported some difficulty in coping with the costs of childcare, unsurprisingly, those with lower incomes found childcare costs hardest to meet.⁶¹

Of those using childcare in Scotland, just under 1 in 5 parents indicated that they would prefer to use a different main childcare provider to the one they

⁵⁷ Speight, S. *et al.* 2009. Page 26, Table 2.5.

⁵⁸ Speight, S. *et al.* 2009. Page 85.

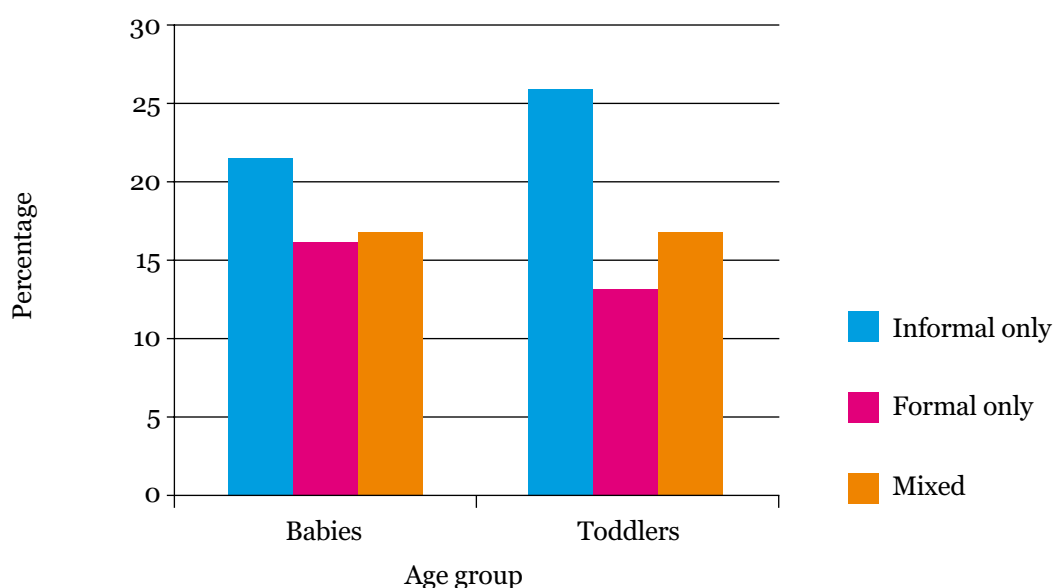
⁵⁹ Speight, S. *et al.* 2009. Page 85.

⁶⁰ Speight, S. *et al.* 2009. Page 85.

⁶¹ Daycare Trust 2010. *Childcare costs survey 2010*. London: Daycare Trust.

were currently using. One-quarter of those in the lowest income group indicated a desire to change providers compared with just over 1 in 10 of families using childcare in the highest income group.⁶² The type of provision currently in place for the child was also related to the responses to this question. Families in Scotland using only informal provision were significantly more likely than families using only formal care or a mixture of both to indicate that they would prefer to be using a different main childcare provider as shown in Figure 13.2.1⁶³

Figure 13.2.1 Proportion indicating preference for a different main childcare provider by type of current provision and child age in Scotland, 2005/06⁶⁴



Source: Growing up in Scotland Survey. Sweep 1.

⁶² Bradshaw, P. and Wasoff, F. 2009.

⁶³ Bradshaw, P. and Wasoff, F. 2009.

⁶⁴ Anderson, S. *et al.* 2007. *Growing Up in Scotland: A Study Following the Lives of Scotland's Children*. Edinburgh; Scottish Executive. Chapter 8. Figure 8- I.

Box 13.2.1 Related issue: Welsh-medium care and childcare available in the Welsh language

It is evident that in almost all areas of Wales there is unmet demand for some types of childcare delivered in the Welsh language. In traditionally Welsh speaking areas, parents would like more types of childcare to be available in their first language, and in non-Welsh speaking areas, some parents who do not speak Welsh themselves often prefer childcare in the Welsh language. This is particularly the case in areas where local Welsh language schools are perceived as providing a better education.⁶⁵

What we know about the situation for different groups

Gender and age

Younger mothers appear to be more likely to use informal childcare than parents overall. The *Youth Cohort Study 2009* (England) found that by age 17, 3% of respondents had children of their own. The majority of these respondents (88%) had their children living in the same household as them, and just over two-fifths (41%) had a partner living with them.

The survey found that these mothers were most likely to use informal care (as opposed to any other providers). The mother's parents were the most likely to provide care for this group with 37% of young mothers stating this as one of the types of childcare they used, followed by 18% using another relative and 10% using the ex-partner or the child's non-resident parent. Attending a playgroup or pre-school or using a childminder were the least commonly used options for childcare (4% each).⁶⁶

⁶⁵ Campbell-Barr, V. and Garnham, A. (forthcoming).

⁶⁶ DCSF 2009. *Youth Cohort Study and Longitudinal Study of Young People in England: The Activities and Experiences of 17 year olds: England 2008*. Statistical Bulletin B01/2009. Available at: http://www.dcsf.gov.uk/rsgateway/DB/SBU/b000850/Bullo1_2009textvfinal.pdf Accessed 19/08/2010.

Box 13.2.2 Related issue: Refugee women and childcare

In 2005, 147 refugee mothers with children under 5 were surveyed in 19 different boroughs across London. Fewer than 1 in 5 (18%) refugee women interviewed reported having access to any sort of childcare provision.⁶⁷ The fact that two-fifths (42%) of the respondents were living in temporary accommodation, was found to have a negative effect on their ability to access early years services. Personal relationships and networks were found to be a crucial source of information about childcare with only 7% of the mothers who responded saying they gained information about childcare service through structured efforts of the providers. Particular barriers to accessing childcare included:

- The high cost of childcare. Only 13% of respondents were in employment, and in most cases they worked long hours in low-paid jobs, making it difficult to cope with the costs of childcare.
- Lack of information in community languages and lack of interpreters.
- The concern that childcare providers in London were not sensitive to cultural and religious differences.

Socio-economic groups

Childcare use is closely tied to parental work status in England,⁶⁸ Scotland,⁶⁹ and Wales.⁷⁰ Unsurprisingly, working parents are most likely to use childcare. The data for England are shown in Table 13.2.2 below.

A survey of 4,500 parents with children aged under 16 across Britain found that those in full-time work were more likely than others to agree with the statement that their childcare arrangements were a result of necessity rather than choice. Within that sub-group, parents in households with an income below £50,000 per year were less likely to feel that their arrangements were by choice, particularly if they were lone parents.⁷¹

⁶⁷ Barnabas, J. 2005. *Accessing Early Years in London: refugee women's experiences*. London: Refugee Women's Association. The research surveyed 147 refugee mothers who have come to the UK as refugees from 27 different countries, and now live in 19 different boroughs across London. The research did not target any particular refugee communities; only refugee mothers with children under five were contacted.

⁶⁸ Speight, S. *et al.* 2009.

⁶⁹ Anderson, S. *et al.* 2007. Chapter 8.

⁷⁰ Bryson, C. *et al.* 2006.

⁷¹ Ellison G., Barker, A. and Kulasuriya, T. 2009. *Work and care: a study of modern parents*. Research Report 15. Manchester: Equality and Human Rights Commission. Figure 19. Arrangements are by necessity rather than choice (CHAID tree diagram) (Base 4,443 parents).

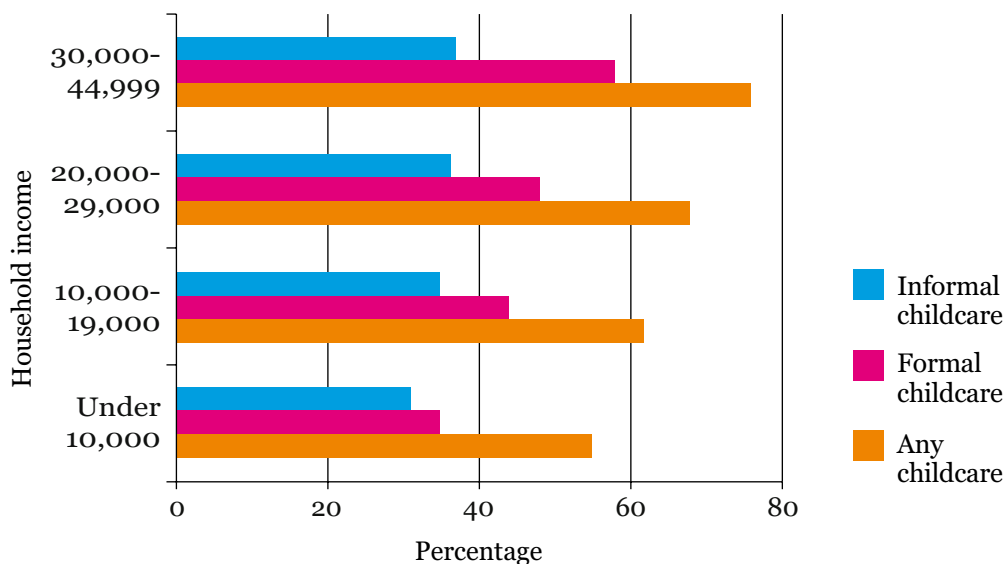
Table 13.2.2 Use of childcare by family type and work status in England, 2008⁷²

	Any childcare %	Formal childcare %	Informal childcare %	Weighted base
All	64	44	34	7,076
Couple	64	46	31	5,265
Lone Parent	63	41	42	1,811
Family Work Status				
Couple – both working	73	53	38	3,160
Couple – one working	53	38	22	1,731
Couple – neither working	37	23	14	375
Lone parent – working	76	49	55	860
Lone parent – not working	52	33	31	951

Source: DCSF Childcare and Early Years Survey of Parents 2008.

Note: Base = all children.

In England and Wales parents in lower income households were less likely to use any childcare, and when childcare was used were less likely to use formal care than were those in higher income households as shown in Figures 13.2.2 and 13.2.3.

Figure 13.2.2 Use of childcare by household income in England, 2008⁷³

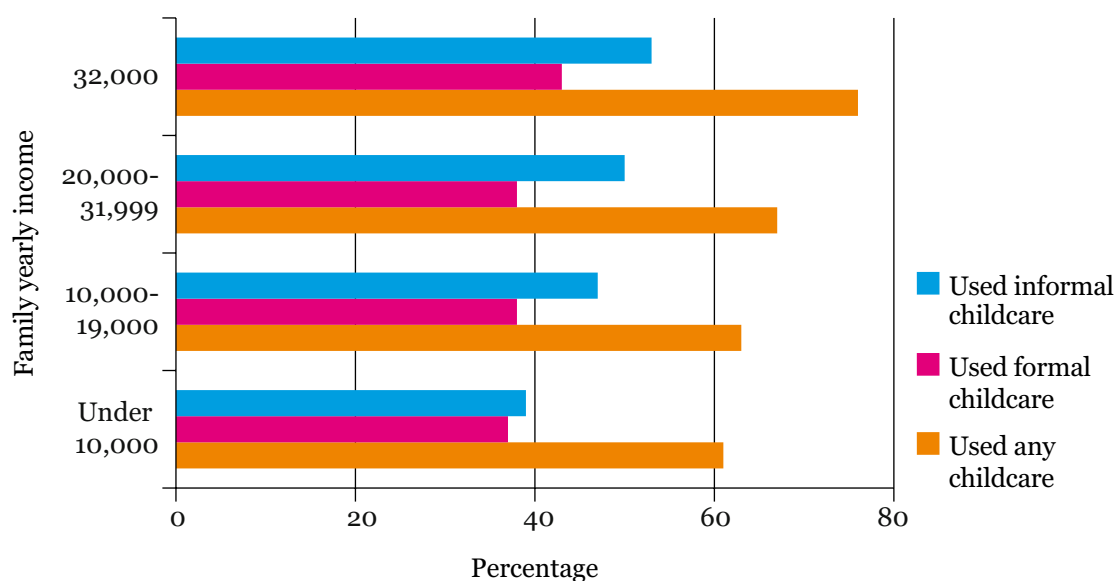
Source: Childcare and Early Years Survey of Parents 2008.

Note: Base = all children.

⁷² Speight, S. *et al.* 2009. Figure 2, page 25.

⁷³ Speight, S. *et al.* 2009. Table C2.1 in Appendix C, page 166.

Figure 13.2.3 Use of childcare in the last week by family yearly income in Wales, 2004/05⁷⁴



Source: Childcare and early years provision in Wales.

Note: Base = all families.

Household income also affects the likelihood of whether a family is using childcare in Scotland. Households in the highest income quartile were far more likely than households in the lowest income quartile to have childcare arrangements in place (including paid and unpaid childcare). A large majority of all of the families with children aged 2-3 years (91%) in the highest income group had a regular arrangement in place compared with around two-thirds (65%) of toddler families in the lowest income group. The pattern was similar for families with children aged 0-1 years.⁷⁵

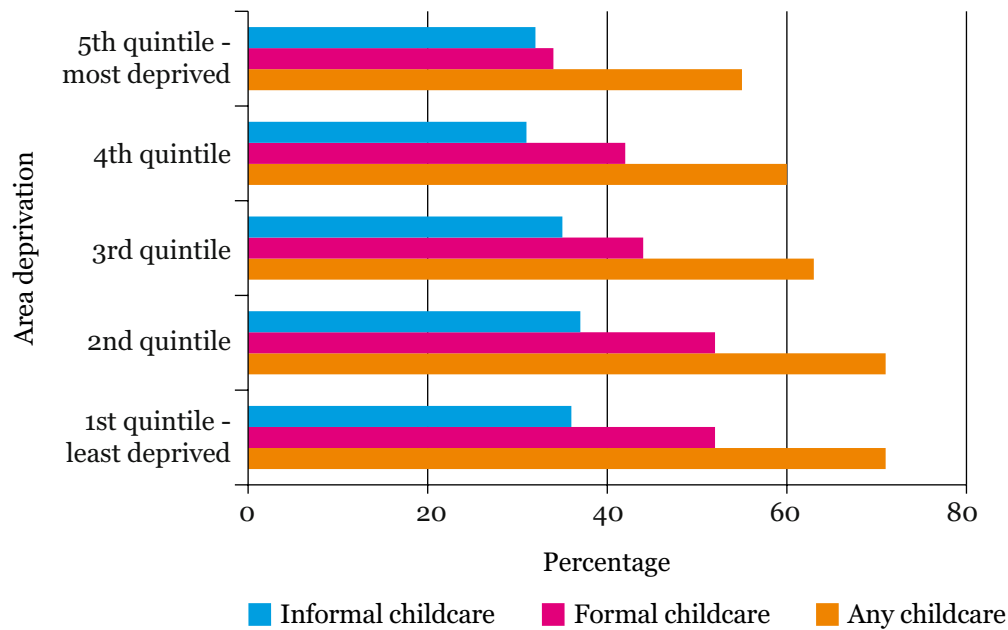
Families living in the most deprived areas in England were less likely to use any childcare than those living in more affluent areas as shown in Figure 13.2.4.⁷⁶ When childcare was used, they were less likely to use formal childcare than those living in lesser deprived areas.

⁷⁴ Bryson, C. *et al.* 2006. Table 2.6, page 24.

⁷⁵ Anderson, S. *et al.* 2007. Chapter 8. Sweep 1.

⁷⁶ Speight, S. *et al.* 2009. Figure 2.1, page 27.

Figure 13.2.4 Use of childcare in the last week by area deprivation in England, 2008⁷⁷



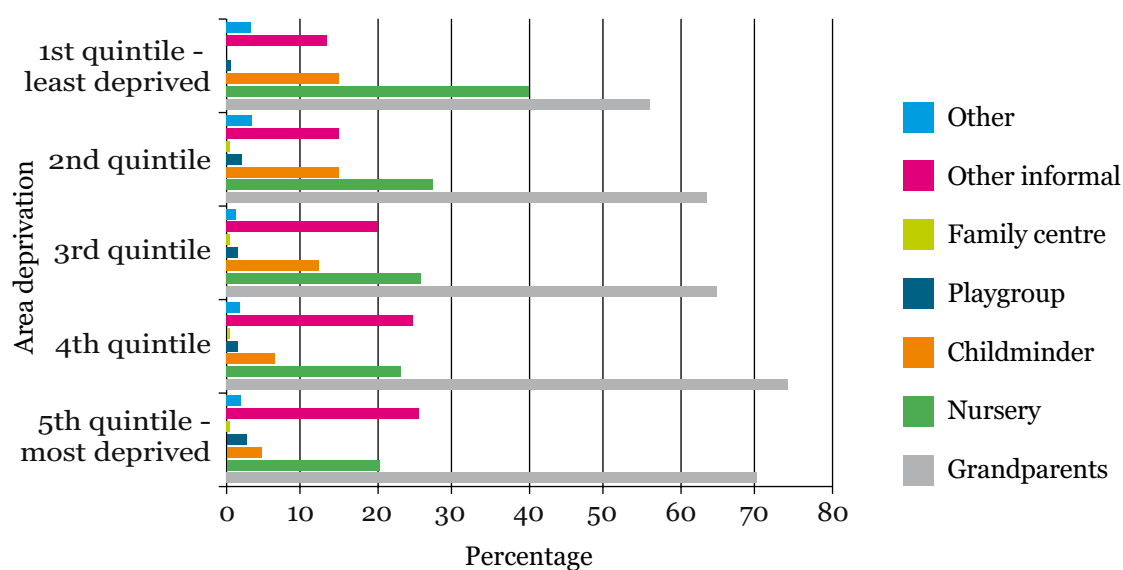
Source: Childcare and Early Years Survey of Parents 2008.

This pattern also holds true in Scotland (see Figure 13.2.5). In Wales the pattern of childcare and early years provision and use by area deprivation quintiles is not as clear as the pattern across family income quartiles. There is a higher use of formal care in less deprived areas, but this is not statistically significant, and is balanced out with lower use of informal care (although also not statistically significant), resulting in very similar levels of overall use.⁷⁸

⁷⁷ Speight, S. *et al.* 2009. Table C2.3.

⁷⁸ Bryson, C. *et al.* 2006. Table 2.10, page 27.

Figure 13.2.5 Use of childcare in the last week by area deprivation quintiles in Scotland, 2005/06⁷⁹



Source: Growing up in Scotland Survey.

Note: children aged 0-1 years.

Across all three nations, lone parents are more likely to use informal care and less likely to use formal care than are couple families.

- In England in 2008, only 31% of couple families who used childcare used an informal provider, compared with 42% of lone parent families. In terms of formal provision, 46% of couple families used this compared with 41% of lone parents.⁸⁰
- In Scotland in 2007, 82% of lone parents with children aged 0-1 years who used childcare were using at least one informal arrangement compared with 73% of couple families. In contrast, 43% of couple families in the baby cohort were using at least one formal provider compared with 26% of lone parents.⁸¹
- In Wales in 2004/05, the difference was much smaller with 47% of couple families using informal care compared with 48% of lone parents.⁸²

However, the higher usage of informal care among lone parents is partly accounted for by time spent with the parent's ex-partner. Qualitative research suggests that lone parents identify the lack of affordable childcare, particularly during school holidays, and the lack of flexibility and adaptability of the system as one of the major barriers in using formal childcare.⁸³

⁷⁹ Anderson, S. *et al.* 2007. Chapter 8. Table 8.4.

⁸⁰ Speight, S. *et al.* 2009.

⁸¹ Anderson, S *et al.*, 2007.

⁸² Bryson, C. *et al.* 2006.

⁸³ Daycare Trust 2007a. *Listening to lone parents about childcare*. London: Daycare Trust.

The use of formal childcare is associated with a number of family and area characteristics, which can overlap. The working status of the family and their material situation create a complex interplay of factors. However regression analysis has shown that both the work status and the income of the family are independently associated with use of formal childcare.⁸⁴ Affordability is a particular barrier to low-income and lone parent families, and to those living in deprived areas. These findings are supported by other research which suggests that the ability to pay is a determinant in access to appropriate childcare.⁸⁵

Disability

Childcare specifically for disabled children is both scarce and expensive, and care for children of disabled parents is an under-explored area of research.⁸⁶ We know from the Childcare and Early Years Survey of Parents that in 2008 children with special education needs (SEN) were less likely to receive any childcare and less likely to receive formal care than those without identified SEN.⁸⁷ In the same year, 56% of families with disabled children took up childcare.⁸⁸ The survey also shows that children with disabled parents/guardians are less likely to receive childcare than children with non-disabled parents/guardians (51% compared with 57%).⁸⁹

Table 13.2.3 Use of childcare by child SEN status, England, 2008⁹⁰

SEN	Any childcare %	Formal childcare %	Informal childcare %	Weighted base
Yes	58	37	31	535
No	64	45	34	6,523

Source: Childcare and Early Years Survey of Parents 2008.

Note: base = all children.

⁸⁴ Speight, S. *et al.* 2009. Table C2.4 in Appendix C.

⁸⁵ Campbell-Barr, V. and Garnham, A. (forthcoming).

⁸⁶ Campbell-Barr, V. and Garnham, A. (forthcoming).

⁸⁷ Speight, S. *et al.* 2009. Table 2.4, page 24.

⁸⁸ Office for Disability Issues, Disability equality indicators. 'Use of childcare.' Available at: <http://www.odi.gov.uk/roadmap2025/indicators.php> Accessed 26/08/10.

⁸⁹ Office for Disability Issues, Disability equality indicators 'Use of childcare.'

⁹⁰ Speight, S. *et al.* 2009. Table 2.4, page 24.

A range of small-scale studies point towards some specific challenges experienced by parents with disabled children: In 2007 the Daycare Trust conducted a small-scale study in England that found that childcare use for disabled children varies considerably depending on the child's disability, and that there was very little or no use of formal childcare. Some parents were critical that childcare providers were not appropriate for some disabled children, such as those with autism, and that staff were not appropriately trained to deal with disabled children. It also found that finding appropriate care can become increasingly difficult as children get older.⁹¹

A second small-scale study looking specifically at the experiences of ethnic minority families caring for a disabled child in the UK found that the main barriers to childcare use for disabled children were: the lack of places appropriate for disabled children, the lack of trained workers competent to care for disabled children, and the cost. The same research found that parents with English as a second language face even more barriers accessing appropriate services, as they may be less able to understand the system. Compared with the White population, families from ethnic minority groups were found to be less well informed about childhood conditions and disabilities and services available for parents and children.⁹²

The Parents' Access to and Demand for Childcare Survey 2006, in Scotland, which has both qualitative and quantitative elements, reported on the childcare experiences of parents whose children had additional support needs (ASN). A survey of 1,304 parents was completed, alongside qualitative work with 60 parents. Of those parents who said their children had ASN, nearly half of parents (46%) said that this had no effect on their childcare options or decisions. However, the most common difficulty (cited by around a quarter of respondents) was in accessing provision of a suitable nature.⁹³

⁹¹ Daycare Trust 2007b. *Listening to parents of disabled children about childcare*. London: Daycare Trust.

⁹² Chamba, R. et al. 2009. *On the edge. Minority ethnic families caring for a severely disabled child*. York: Joseph Rowntree Foundation.

⁹³ Hay, J. 2007.

Ethnicity

In England, parents of Black African, Black Caribbean, Mixed Race and White children are most likely to have used some childcare, as Table 13.2.4 shows. This may reflect the high levels of maternal work among these groups: Black mothers are most likely to work full-time and White mothers are most likely to work part-time.⁹⁴

Bangladeshi and Pakistani children are less likely to receive formal childcare than Black Caribbean, Mixed Race and White children, even after controlling for other socio-demographic characteristics.⁹⁵ Bangladeshi families stand out as least likely to use any childcare with only 26% of families doing so. As Table 13.2.4 shows, of Bangladeshi children, only 15% received formal and 11% received informal childcare at the time of the survey, compared with 46% and 36% respectively among White children.

Black children were most likely to be receiving only formal childcare. White families were most likely to use informal childcare and more than twice as likely as families from ethnic minority groups to use grandparents for childcare.⁹⁶ In all ethnic groups, use of informal care was linked with working at atypical times, having a low household income and using a large number of hours of childcare overall.⁹⁷

⁹⁴ Bell, A., Bryson, C., Barnes, M. and O'Shea, R. 2005. *Use of Childcare Among Families from Minority Ethnic Backgrounds*. Department for Education and Skills Research Report SSU/2005/FR/011. The report explored the ways in which experiences of and views about childcare differ between families of different ethnic origin in England. The bulk of the report is based on analysis of data from two very similar large-scale surveys carried out by NatCen for DfES: the *Baseline survey of parents' demand for childcare*, published in 2000, and the *Repeat study of parent's demand for childcare*, published in 2002. Together, more than 10,000 families were interviewed for these surveys.

⁹⁵ Speight, S. *et al.* 2009. Page 168.

⁹⁶ Bell, A. *et al.* 2005 page 3 notes that the relatively low proportion of Asian parents using informal care appears somewhat surprising and, while every effort was made in the questionnaires to encourage respondents to include friends and relatives as childcare providers, we can speculate that there was some under-reporting of informal care among Asian parents, perhaps especially when provided by adults who were resident in the respondent's and child's household.

⁹⁷ Bell, A. *et al.* 2005.

Table 13.2.4 Use of childcare by child ethnicity in England, 2008⁹⁸

Ethnicity	Any childcare %	Formal childcare %	Informal childcare %	Weighted base
All	64	44	34	7,057
White	66	46	36	5,816
Black Caribbean	60	38	26	93
Black African	55	38	19	190
Indian	57	43	28	126
Pakistani	44	27	20	213
Bangladeshi	26	15	11	63
Mixed Race	63	48	34	311
Other	42	31	13	237

Source: Childcare and Early Years Survey of Parents 2008.

Note: base = all children.

For Pakistani and Bangladeshi groups in particular, low use of childcare may reflect both circumstances (low maternal employment, low levels of lone parenthood, tendency to have other adults living in the household) and preference (parental childcare preferred for cultural or religious reasons).⁹⁹ For example, one qualitative research project found that Pakistani mothers felt they had to struggle to convince other members of their family about the use of childcare provision.¹⁰⁰

According to a survey of over 10,000 families in 2005 in England, Black parents experienced the greatest levels of unmet demand for childcare in the previous year, while Asian parents experienced the lowest levels. Parents from ethnic minority groups were more likely than White parents to say that they had experienced unmet demand for childcare on a frequent basis (i.e. once a month or more often) over the previous year. Ethnic minority parents were more likely than White parents to say they had experienced unmet demand because they could not afford the childcare they needed or wanted.¹⁰¹

The Scottish Household Survey found some differences in childcare use by ethnicity: 84% of children from ethnic minority backgrounds who received childcare received informal childcare only, supporting previous research which has indicated that parents from ethnic minority groups experience language and cultural difficulties when considering formal childcare options such as nurseries and playgroups. However, there was also a difference between White Scottish and White Other in that 59% of families who classified themselves as White Scottish.

⁹⁸ Speight, S. *et al.* 2009. Table 2.4, page 24.

⁹⁹ Bell, A. *et al.* 2005.

¹⁰⁰ Daycare Trust 2007c. *Listening to black and minority parents about childcare*. London: Daycare Trust.

¹⁰¹ Bell, A. *et al.* 2005.

used informal childcare only compared with 50% of those with a ‘White Other’ classification.¹⁰²

Religion or belief

Routine surveys do not currently collect information on the take-up of childcare by different religious groups. In 2009 a survey of over 4,500 parents in England collected childcare information by parents’ religious affiliation, but for the largest religious groups in the survey – Jewish and Christian – there were no observed differences in use of childcare compared with the average.¹⁰³

However some small-scale survey evidence suggests that access is particularly limited for Muslim women.¹⁰⁴ A telephone poll of 634 Muslim women with children in Britain found that the majority (57%) said they wanted to work, but needed more practical support from the Government in terms of access to childcare and language lessons to do so (64%), or more support from their family (24%). Small-scale qualitative research from Scotland mirrors the findings above.¹⁰⁵ Almost a third of the 150 unemployed women contacted stated that lack of affordable childcare prevented them from getting a job.

Sexual orientation

None of the routine surveys currently collect data on the sexual orientation status of parents. The use of childcare by such parents was collected by Ellison *et al.* 2009. Due to the small sample size, the findings are indicative and not representative. For lesbian, gay and bisexual parents, the figures suggest they are more likely to draw upon informal childcare like grandparents and other family members than heterosexual parents, though this could be accounted for by other

¹⁰² TNS System Three Social Research 2006. *Scottish Household Survey Analytical Topic Report 2006: Childcare Module*. Report for Scottish Executive Social Research. Chapter 3. Available at: <http://www.scotland.gov.uk/Publications/2006/06/14093747/5>. Accessed 28/08/2010.

¹⁰³ Ellison, G. *et al.* 2009.

¹⁰⁴ Hart Dyke, A. and James, L. 2009. *Religion; Immigrant, Muslim, Female: Triple Paralysis*. London: Quilliam Foundation.

¹⁰⁵ Compiled by: El-Nakla, N.; Macbeth, G. and Thomas, F. 2008. *Muslim Women’s Voices: Report presenting the findings of a Scotland wide listening exercise conducted with Muslims*. The Muslim Women’s Resource Centre. Note: small survey size of 150 Muslim women in Scotland.

factors, for example income, region, work status, that were not controlled for in the analysis.¹⁰⁶

¹⁰⁶ Ellison, G. *et al.* 2009. See also Williams, N. and Saunders, B. 2007. *Understanding the specificities of LGBT parenting and their implications for support services and addressing gender differences in lesbian and gay parenting studies*. Available at: <http://www.pacehealth.org.uk/OneStopCMS/Core/CrawlerResourceServer.aspx?resource=7F985464-65FB-4D13-9F00-28546ADFC254&mode=link&guid=ffaaaf3138534364bcb260eafd4fa43f> Accessed 23/09/2010.

13.3 What we know about unpaid care responsibilities

Measure:

Percentage of those with unpaid caring responsibilities for children or adults

How this measure works:

There are very limited data available on this indicator. There are no routine surveys that consider the distribution of unpaid caring roles at national or local levels. Therefore, the information presented against this measure is drawn from a number of different sources. Evidence from small-scale studies is indicative only of possible issues facing groups as sample sizes are generally low.

The latest figures for carers in England and Wales are in the 2001 Census. Scottish data come from Scottish Community Care Statistics 2002. Provisional results of a survey of carers in Households in England was released in 2010 and are also drawn on, although due to sample size they cannot be disaggregated beyond gender and age.

There are no major survey data and very little other evidence for religion or belief, sexual orientation or transgender communities, therefore these groups are not covered in this section.

Overview

One in 8 people in England provide unpaid care to adults. Society depends heavily on this unpaid workforce, but it is not clear whether or not they receive enough recognition and support in their roles. The evidence suggests that carers of non-disabled children are at present more satisfied with the way in which paid work and unpaid caring roles are balanced, and encounter more understanding from employers, than people looking after adults and disabled children. Many people who provide unpaid care would like to do paid work too, but do not always feel that the necessary support is available.

Caring for children and older relatives and friends remains a highly gendered activity. Women have primary responsibility for children in the majority of households, and are also more likely to care for elderly relatives. Some research suggests that women have a 50:50 chance of providing care by the time they are 59; compared with men who have the same chance by the time they are 75-years-old.¹⁰⁷

¹⁰⁷ George, M. 2001. *It could be you: a report on the chances of becoming a carer*. Report for Carers UK. Available at: <http://www.carersni.org/Policyandpractice/Research>. Accessed 23/09/2010.

There is a socio-economic dimension to caring. The first indicator in this chapter shows that people in lower socio-economic groups are more likely to receive care; the evidence presented here shows that they are also more likely to give care. This holds true across age groups and whether caring for adults or children.

There is a high prevalence of people caring for adults within some sections of the population. For example, about a quarter of women in their 50s are carers. One often neglected group is children who help care for other children and adults. There is also a difference across ethnic groups, with Bangladeshi and Pakistani men and women more than twice as likely to provide care for adults as their White British counterparts.

What we know about the overall situation

According to the 2001 Census, 5.2 million carers in England and Wales provide care for an adult family member or friend, including over a million who provide more than 50 hours a week.¹⁰⁸ Carers make up 12% of the adult population in England¹⁰⁹ and Scotland,¹¹⁰ and 11% in Wales.¹¹¹ Around 175,000 carers are young people under the age of 18.¹¹²

There appear to be regional differences in the number of people with caring responsibilities. Wales has 7 of the 10 local authorities with the highest percentage of adult carers. Parts of the North East and the Midlands have the highest percentage of carers in England. London and the South East have the lowest.¹¹³

¹⁰⁸ Office for National Statistics (ONS). 2003. *Carers*. Available at: <http://www.statistics.gov.uk/cci/nugget.asp?id=347> . Accessed 23/08/2010.

¹⁰⁹ NHS Information Centre for Health and Social Care 2010. *Survey of Carers in Households in England 2009/10. Provisional Results*. Available at: http://www.ic.nhs.uk/webfiles/publications/Social%20Care/carerssurvey0910/Survey_of_Carers_in_Households_2009_10_England_Provisional_Results_post_publication.pdf Accessed 23/09/2010.

¹¹⁰ Scottish Executive 2003. *Scottish Community Care Statistics 2002*. Edinburgh: Scottish Executive.

¹¹¹ Carers UK 2009. *Facts about carers*, citing 2001 Census. Carers UK Policy Briefing. Available at: <http://www.carersuk.org/Newsandcampaigns/Media/Factsaboutcaring> Accessed 23/09/2010.

¹¹² ONS 2003.

¹¹³ Office of National Statistics. Census 2001. Health, disability and provision of care. Available at: <http://www.statistics.gov.uk/census2001/profiles/commentaries/health.asp> 2003.

Many of the people providing care do paid work as well. Of the 15.2 million employees aged 16-74 in full-time work, 1.6 million provide at least some unpaid care, and 144,000 provide 50 or more hours a week.¹¹⁴

Box 13.3.1 Related issue: Satisfaction with caring role

There is limited research on the levels of satisfaction felt by those with caring responsibilities, whether caring for children or adults. What little there is focuses on the balance between paid and unpaid work.

- **Number of hours worked:** One survey of 80 working-age carers in the UK found that 78% of adults without caring responsibilities were satisfied with the number of hours they worked. This compared with 67% of those caring for children, and only 57% of those caring for an adult.¹¹⁵
- **Approaching managers:** The same piece of research found that 83% of those with no caring responsibilities felt confident approaching their manager with a problem. Those caring for children felt almost as confident (81%), but this dropped to 76% of carers of adults.¹¹⁶

Carers of adults and children both report a general lack of support from formal services to enable them to combine paid and unpaid work: only a quarter of carers felt they had adequate support from formal services to enable them to combine work and care, and they have problems accessing leisure services and other social activities due to the cost and a lack of accessibility.¹¹⁷ In a separate survey, that took place in England, Scotland and Wales, 41% of carers (209 out of 511 surveyed) who described themselves as looking after their home and family full-time said that the services available did not make having a job possible.¹¹⁸

What we know about the situation for different groups

Gender

Caring for older relatives and friends remains a highly gendered activity. According to the 2001 Census, 58% of carers are women and 42% are men¹¹⁹ rising

¹¹⁴ ONS 2003.

¹¹⁵ Smeaton, D., Vegeris, S. and Sahin-Dikmen, M. 2009. *Older workers, employment preferences, barriers and solutions*. Research Report 43. Manchester: Equality and Human Rights Commission. Page 100.

¹¹⁶ Smeaton, D *et al.* 2009. Page 101.

¹¹⁷ Carers UK 2009. *Facts about carers*, citing 2001 Census.

¹¹⁸ Yeandle, S. *et al.* 2007. *Managing Caring and Employment*. Employment and Services Report 2. Carers UK. Available at: http://www.carersuk.org/Professionals/ResearchLibrary/Employmentandcaring/1253636636/main_content/EWS4027Managingcaringandemploymentreport2.pdf Page 25.

¹¹⁹ ONS 2003.

to 62% of carers who are women in Scotland (compared with 38% who are men).¹²⁰ Some research suggests that women have a 50:50 chance of providing care by the time they are 59; compared with men who have the same chance by the time they are 75-years-old.¹²¹

Men and women who are in paid employment and care for adults are much less likely than non-carers to be in higher level jobs – almost 45% of men and 55% of women who are in paid work and caring for 20 or more hours a week are in elementary occupations (process plant and machine operative jobs) or in sales, customer services or personal services.¹²²

Male carers are more likely to combine caring work with paid work.¹²³ 37% of male carers are in full-time employment compared with only 26% of female carers and more men than women combine full-time work with 50 or more hours of care.¹²⁴ Female carers are more likely to work part-time: 25% of female carers are in part-time employment compared with only 15% of male carers. However as men and women retire at different times the difference in the data could show the impact of retirement ages on people's availability to care rather than or as well as the impact of caring responsibilities on women's ability to work.

Box 13.3.2 Related issue: How men and women use their free time¹²⁵

The Office for National Statistics' Time Use module provides information on how men and women spend their time. Analysis of the 2005 data show that men have on average 30 minutes more free time than women per day although this is to some extent compensated for by the extra 20 minutes women on average spend sleeping.

Men and women spend different amounts of time per day on paid employment and unpaid work (care and domestic work).

- Women spend on average more time on domestic work (228 minutes) than on paid work (146 minutes).
- In comparison, men spend more time on paid work (225 minutes) than on domestic work (129 minutes).
- Women in all economic categories spend longer on domestic work than men – for example, women who work full-time spend 151 minutes on domestic work

¹²⁰ Scottish Executive 2003.

¹²¹ George, M. 2001.

¹²² Carers UK 2009. Page 4.

¹²³ Carers UK 2009.

¹²⁴ Yeandle, S. *et al.* 2007.

¹²⁵ Equality and Human Rights Commission's analysis of Time Use Module 2005. ONS 2005.

Box 13.3.2 Continued

compared with 113 minutes spent by men who work full-time.

- If paid and domestic (unpaid) work are combined then women spend 20 minutes more on average per day working.
- Women also tend to spend longer than men caring for children and adults (46 minutes and 26 minutes respectively).

Childcare provision is also highly gendered. According to survey research with over 4,500 parents, only a quarter of parents in England think that childcare is the primary responsibility of the mother, but in reality, over three-quarters of mothers state that in day-to-day life they have the primary responsibility for childcare in the home. More women than men agreed that mothers have the primary responsibility for childcare than fathers (34% of women compared with 23% of men). In Scotland, fewer parents (22%) agreed with this statement than compared with those in the other nations.¹²⁶

Many non-working mothers of pre-school age children stated in the survey that 'preferring to look after their children' and 'the feeling that looking after their children is their responsibility' were key factors in deciding not to work. However, a third of women in this group stated that the lack of flexible working opportunities, particularly part-time roles, was an important factor in not working. This indicates a preference to work if suitable employment were available.¹²⁷

The majority of parents agree (46%) or are neutral (26%) that it is possible to meet both their work/career needs and the needs of their children. Almost a third (28%) do not think it is possible. Half of men think it is possible, a greater proportion than women (42%). Parents who work flexible hours were more likely to agree that it is possible to meet the needs of career and children (55%) than those who are employed but not currently working flexibly (49%).¹²⁸

Nevertheless, juggling work and childrearing is difficult; 23% of mothers and 44% of fathers think that they spend too little time with their children. Those with children under 1 year of age feel this lack of time particularly strongly. Over half (53%) of fathers with children under 1 year old state that they feel they spend too little time with their children, and 52% of their partners agree.¹²⁹

¹²⁶ Ellison, G *et al.* 2009.

¹²⁷ Ellison, G. *et al.* 2009.

¹²⁸ Ellison, G. *et al.* 2009.

¹²⁹ Ellison, G. *et al.* 2009. Page 28.

Box 13.3.3 Related issue: Measuring inequality – autonomy (choice, control and empowerment). Measurements of autonomy in a pilot study: Work/life balance¹³⁰

Initial exploration into the role of autonomy (or choice, control and empowerment) in the choices mothers and fathers make about the amount of time they spend on paid and unpaid work suggests that it is an area worthy of further research. The analysis below is based on a very small sample in a pilot study that was designed to test questions rather than collect data. While findings are illuminating, they are only indicative.

Fathers in a relationship are the most likely to feel that they spend too little time on childcare and other caring activities (31% of the fathers in the group of parents interviewed). Lone parents are the most likely to spend too little time sleeping (58% of this group).

Of those who state they spend too much time at their job or paid work, substantial differences were found between occupational groups. The most over-worked were the managerial and professional group, of whom 47% stated they spent too much time at work. This is compared with 19% in the semi-routine and routine occupation group.

Unsurprisingly, those who feel they spend too much time at work, also state they spend too little time in other areas of life. Of those who work too much 29% feel they spend too little time on childcare or other caring activities, compared with 8% of the rest of the sample. The proportion is higher (62%) for those who have a child living in the household under the age of 16, and rises again to 73% for those who have a child under the age of 4. This contrasts to only 15% of those with a child under the age of 4 who felt they spend too little time on childcare or other caring activities, but did not spend too much time at work.

The project further explored the degree of autonomy exercised by those who stated they worked too much, and found that structural constraints were the most frequent barriers to improving respondents' autonomy with respect to work/life balance. This is an important finding that highlights the importance of looking at the role of autonomy in work/life balance decisions. Of those who work too much, the majority are in managerial, professional or intermediate employment so would be likely to perform well in relation to outcome and process measures of inequality – they are in employment, and likely to be earning an adequate income. However, there are respondents within this group who feel coerced by their employers or restrained by structural problems in their lives. It is important that this group be identified as having limited choice and control and that this is explored further.

¹³⁰ Burchardt, T., Evans, M., Holder, H., (forthcoming) *Measuring Inequality: Autonomy the degree of empowerment in decisions about one's own life*. CASE/ University of Oxford.

Age and socio-economic groups

According to the 2001 Census, people in their fifties are more likely than people in any other age group to provide care. More than 1 in 5 people aged 50-59 are providing some unpaid care. About 1 in 4 (25%) women in this age group provides some care compared with just under 1 in 5 (18%) of men.¹³¹

Box 13.3.4 Related issue: Carers' health

According to the 2001 Census over 225,000 people providing 50 or more hours of unpaid care per week state they are in 'not good health' themselves. More than half of the people providing this much care are over the age of 55, and it is at this age that the 'not good health' rate is highest. However, there are nearly 80,000 people aged 54 and under providing more than 50 hours of unpaid care per week, who state that their health was 'not good'.¹³² Carers often report specific injuries relating to their responsibilities, and a high level of stress-related illness is associated with the role.¹³³

The provision of informal care in later life is associated with socio-economic status: people aged 55-69 from lower occupational groups are more likely to be caring for a spouse than those from higher ones. This is linked both to a higher incidence of disability among those in lower occupational groups, and to the inaccessibility of support for those without the resources to pay for it.¹³⁴

Many older people play an important role in caring for their grandchildren. In Scotland and Wales, grandparents are the most common source of childcare; in England, they are the most common source of informal childcare and make up 26% of all childcare used.¹³⁵ As with caring for adults, there appears to be a relationship between socio-economic status and caring for grandchildren. British Social Attitudes (BSA) data indicate that the group most likely to be providing childcare is working-age grandmothers on low incomes. They are also more likely to have given up work or reduced their paid hours to care for grandchildren.¹³⁶

¹³¹ ONS 2003.

¹³² ONS 2003.

¹³³ ONS 2003.

¹³⁴ Glaser, K. and Grundy, E. 2002. 'Class, caring and disability: Evidence from the British Retirement Survey', *Ageing & Society*, 22, 3: 325-342.

¹³⁵ Bradshaw, P. and Wasoff, F. 2009.

¹³⁶ Griggs, J. 2010 *The Poor Relation. Grandparental care: where older people's poverty and child poverty meet*. Interim report for Grandparents Plus and Equality and Human Rights Commission

Additionally, they are also the group most likely to report that they are finding it difficult to cope financially.¹³⁷ Grandparents provide high levels of childcare for lone parents.¹³⁸

Young carers

According to the *Youth Cohort Study* of 17-year-old respondents in England in 2009, 27% had some kind of caring responsibility (including taking care of children in their own house, outside their own home without being paid and regularly looking after ill, disabled or elderly relatives).¹³⁹ There were large differences across ethnic groups in the propensity of young people to have caring responsibilities at this age. Black African (45%), Black Caribbean (42%), Pakistani (46%) and Bangladeshi (43%) children were most likely to have caring responsibilities compared with 25% of White children.

Young people whose parents' occupational status was recorded as either routine or as other/not classified were most likely to have caring responsibilities. A fifth (20%) of those whose parents were in other/not classified occupations regularly cared for children aged under 14 within their own home compared with 12% of those whose parents were in higher professional occupations. Young people whose parents were in other/not classified occupations were four times as likely to regularly look after ill, disabled or elderly relatives compared with those with parents in higher professional occupations (12% compared with 3%).

Young people who reported having a disability of their own were almost twice as likely to be caring regularly for children under the age of 14 outside their own home (14%) or ill, disabled or elderly relatives/friends (10%) than young people who did not have a disability (11% and 6% respectively).¹⁴⁰

¹³⁷ Griggs, J. 2010.

¹³⁸ Griggs, J. 2010. Page 58. Grandparents are more likely to help with the day care of grandchildren at least once a week if the grandchild's parents are separated (29%) than if they are together (20%) See also Grey, A. 2005. 'The Changing Availability of Grandparents as Carers and its Implications for Childcare Policy in the UK', *Journal of Social Policy*, 34, 4: 557-577.

¹³⁹ DCSF 2009. Table 3.2.2.

¹⁴⁰ DCSF 2009. Table 3.2.2.

Disability

The majority of parents with disabled children provide care well in excess of that of other parents. A survey of families with children with profound and multiple disabilities found that 60% of parents spent more than 10 hours per day on basic physical care; a third of these were providing 24-hour care.¹⁴¹

Caring for a disabled child impacts on a parent's ability to undertake paid work. Analysis of the 2001 Census data found that only 38% of families with a sick or disabled child contain two working adults, compared with 55% of families generally; only 16% of mothers of disabled children were in paid employment compared with 61% of all mothers.¹⁴²

Parents of disabled children are less positive than those without disabled children about their ability to meet the needs of a career and their children. 37% of disabled parents think it is possible, compared with 48% of non-disabled parents.¹⁴³

As carers of adults, disabled people play a significant role. Of the nearly two million people aged 16-74 in England and Wales who were permanently sick or disabled according to the 2001 Census, over a quarter of a million (273,000) provided some unpaid care for other people and 105,000 provided 50 or more hours of care.¹⁴⁴

Ethnicity

Census data show that Bangladeshi men and women are more than twice as likely as other ethnic groups to provide care for adults (see Table 13.3.1 below). At the same time we know that employment rates for these groups are lower than for any other groups, and the likelihood of them being 'inactive, looking after family, home' (particularly for women) much higher¹⁴⁵ (see discussion in Chapter 11: Employment).

¹⁴¹ Sloper, P. 2002. *Meeting the needs of disabled children*. Quality Protects Research Briefing 6. London: Department of Health. Available at: <http://www.york.ac.uk/depts/spsw/mrc/documents/QPR/QPRNo6.pdf>. Accessed 23/08/2010.

¹⁴² Every Disabled Child Matters 2007. *Disabled children and child poverty*. Briefing paper by the Every Disabled Child Matters campaign. Available at: http://www.ncb.org.uk/edcm/disabled_children_and_child_poverty.pdf. Accessed 23/08/2010.

¹⁴³ Ellison, G. *et al.* 2009.

¹⁴⁴ ONS 2003.

¹⁴⁵ Hills, J. *et al.* 2010. Tables 4.2(a) and 4.2(b), page 113.

Table 13.3.1 Age and gender standardised ratio of proportion of the population aged 16 and over providing unpaid care for 20 or more hours per week, by ethnic group in each region of England, and Wales, 2001¹⁴⁶

Government Office Region	Ethnic group					Average for region*
	White	Indian	Bangladeshi & Pakistani	Black Caribbean	Black African	
North East	1.29	1.01	1.98	0.81	0.94	1.29
North West	1.16	1.62	2.17	0.85	1.17	1.19
Yorkshire and the Humber	1.07	1.39	2.3	0.8	1	1.12
East Midlands	0.99	1.54	2.13	0.83	1.07	1.02
West Midlands	1.07	1.47	2.21	0.91	0.89	1.13
East	0.83	1.06	1.89	0.68	0.74	0.84
London	0.82	1.3	2.06	0.73	0.97	0.95
South East	0.75	1.02	1.64	0.6	0.86	0.77
South West	0.89	1.06	1.73	0.84	1.25	0.89
Wales	1.4	1.2	1.97	1.09	1.32	1.4
Average for ethnic group**	1.02	1.36	2.11	0.77	0.98	1.05
Number of caregivers	1,513,103	36,914	39,323	13,565	10,073	1,612,978

Source: 2001 Census table M260, Census Programme, ONS.

Notes:

1. * Compared with the value for all groups combined for the whole of England and Wales.
2. ** Averages are weighted according to size of population in each ethnic group/region.

For some ethnic minority groups, dominant cultural norms mean that grandparents are often closely involved in their grandchildren's lives often due to the likelihood of co-residence.¹⁴⁷ For example over 30% of Indian grandparents live in a multi-generational household.¹⁴⁸

The generally young age at marriage, high birth rate and high rate of illness and disability among Gypsy and Traveller populations mean that many women will

¹⁴⁶ Young, H., Grundy, E. and Kalogirou, S. 2005. 'Who cares? Geographic variation in unpaid care giving in England and Wales: evidence from the 2001 Census', *Population Trends*, 120: Summer. Page 8.

¹⁴⁷ Griggs, J. 2010.

¹⁴⁸ Griggs, J. 2010, citing Data from the Millennium Cohort Study 2004.

be involved in caring responsibilities throughout their active life.¹⁴⁹ Gypsy and Traveller women have more children than other women (an average of between 3.5 and 5.9 children compared with 1.94 in the overall population)¹⁵⁰ and, according to qualitative research and anecdotal information, seem more likely than other groups to report caring responsibilities for older and disabled family members.¹⁵¹

¹⁴⁹ Cemlyn, S. *et al.* 2009. Page 228.

¹⁵⁰ ONS 2010. *Fertility*. Available at: <http://www.statistics.gov.uk/cci/nugget.asp?id=951> Accessed 23/08/2010.

¹⁵¹ Cemlyn, S. *et al.* 2009. Page 228.

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Chapter 14:

Power and voice

Summary

Democracy is predicated on the idea that every individual, no matter what their background or personal circumstances, should have an equal opportunity to have a say in decisions about the country's future.

In practice, some groups of people are less likely than others to exercise their democratic right to vote; less likely to attain elected office; less likely to feel able to influence decisions in their local area; and less likely to take part in other forms of political or civic activity.

Women are slightly more likely to vote than men, but despite some progress towards parity, the proportion of women in elected office in Westminster remains below 25%. The Scottish Parliament and Welsh Assembly are closer to gender parity, but in all three nations, local councillors are also predominantly male.

In the Westminster Parliament, despite some evidence of progress, most religious and ethnic minorities are still under-represented. However, lesbian, gay and bisexual (LGB) people, and some from ethnic and religious minorities, are more likely to take part in other forms of political or civic activity and more likely to feel able to influence local decisions.

People with a disability or a long-term limiting illness are generally less likely than those without to say that they can influence local decisions, and a majority of polling stations at the last election presented at least one significant access barrier.

Young people are less likely to vote than older people. They are also less likely to hold elected office. The average age of councillors, and of MPs, has increased slightly in recent years.

Finally, people's socio-economic background affects their sense of power and voice. Professionals are more likely to vote, more likely to hold elected office, and more likely to feel that they can influence local decisions than people from lower occupational groups.

Introduction

Many forms of democracy exist side-by-side in modern Britain. Representative democracy allows adults to vote for people who reflect their interests in local authorities and national Parliaments. In recent years an increasing number of authorities have offered opportunities for people to get more directly involved in setting local priorities. Many more people take part in other forms of political or civic action by signing petitions, attending protests, or writing to elected representatives on subjects they care about.

Different groups use the opportunities to influence decisions to different extents, and some feel more strongly than others that they have a meaningful chance to shape local politics on topics that are close to their heart.

All three main political parties share an ambition, in principle, that they want to be largely reflective of the demographics of the population as a whole, though they differ on the practical methods of how best to achieve this. This ambition chimes with public opinion. Surveys have suggested, for example, that the British public at large is relaxed about being represented in Westminster by an LGB MP, and it is more than 30 years since the country elected its first female Prime Minister.

Any differences in the levels to which people feel willing or able to engage in other forms of democratic activity may acquire new significance in the current political climate, with government proposals relating to the ‘Big Society’ potentially offering greater power and influence to local groups. In this chapter, we examine four indicators relating to power and voice.

Indicators

1. **Formal political participation**
2. **Perceptions of influence**
3. **Political activity**
4. **Taking part in decision-making and campaigning organisations**

Under **formal political participation**, we look at two detailed measures – the percentage voting in the UK general or national elections (electoral turnout), and the equality characteristics of elected representatives to national assemblies and Parliaments, and to local councils (political representation).

Under **perceptions of influence**, we look at the percentage who believe they have influence in their local area.

For **political activity** we describe the percentage of people contacting their councillor, an official or a national representative, attending public meetings, taking part in a demonstration or signing a petition in the last year.

For **taking part in decision-making and campaigning organisations**, we look at the percentage of people involved in decision-making bodies, local campaigning organisations or solidarity groups.

As in the rest of Part II, this chapter explores what we know about these indicators and what the evidence tells us about the experiences of different groups.

14.1 What we know about formal political participation

Measures:

Electoral turnout – Percentage voted in the UK general or national election.

Political representation – Equality characteristics of elected representatives to national assemblies and Parliaments; and to local councils.

How these measures work:

Electoral turnout

The British Election Study provides coverage of voting across England, Scotland and Wales. Conducted after every General Election, the British Election Study survey looks at voting patterns for the UK. It is funded on an ad hoc basis and may soon be replaced by a question on the UK Household Longitudinal Study.¹ Its data can be disaggregated by gender and age, but the ethnicity, religion or belief and disability disaggregation is by broad categories only. There is very limited related literature for this measure for groups defined by sexual orientation, or according to socio-economic and transgender status. Therefore they are not covered in this section.

We draw on supplementary information to describe barriers faced by disabled voters.

Figures compiled by the Scottish Parliament are also used to provide an overview of voting to the Scottish Parliament, but are not disaggregated by group.

¹ The UK Household Longitudinal Study (UKHLS), the successor to the British Household Panel Survey, is expected to include questions on voting and will have a comparatively large sample in each country of the UK (100,000 overall, including at least 1,000 of each of the five largest ethnic minority groups). This might be used instead of the British Election Study (BES), once it is established at the University of Essex, although the frequency with which questions about voting will be asked is not known. Other surveys that periodically ask about voting include the British and Scottish Social Attitudes Surveys, the Scottish Household Survey and the Welsh Assembly Election Study (WAES) and the Wales Life and Times survey series programme.

Political representation

This measure draws on House of Commons Library Papers; National Census of Local Authority Councillors in England (2008) / Wales (2004); Scotland's Councillors Research Report (2007).

It looks at the demographic breakdown of those who are elected to office, rather than focusing on those who run for office.² While information about the gender, age, socio-economic status, ethnicity, and broad religious affiliation of representatives is generally available for the UK, such information is not always available in Scotland- or Wales-only datasets. Other equality characteristics such as disability, sexual orientation and transgender status are not always recorded since elected representatives and candidates often do not wish to disclose such information.³

Where possible, we have drawn on a range of sources to describe barriers faced by women, disabled people, ethnic and religious minorities, and lesbian, gay or bisexual people. There is very limited related literature for this measure in relation to transgender people, therefore they are not covered in this section.

Overview

In the past three general elections, turnout in the UK has been lower than ever before. Although it rose slightly in the context of a closely fought general election – set alive by the first ever televised leaders' debates – in 2010, young people in particular voted in much smaller numbers than in the past. This raises the possibility that today's under-25-year-olds will continue to find themselves outside the political process as they grow older which, in turn, raises the possibility of alienation within future generations.

This age divide is reflected in political representation – particularly at the local level, where only 1 in 7 councillors is under 45. In some other respects, under-represented groups have an increased presence in central and local government, although their share of seats still falls well short of parity.

² The background of candidates for political office is discussed in Durose, C., Gains, F., Richardson, L., Combs, R., Broome, K. and Eason, C. (forthcoming). *Pathways to Politics*. Manchester: Equality and Human Rights Commission.

³ In its evidence to the Speaker's Conference on Parliamentary Representation, the Equality and Human Rights Commission recommended that such data are collected from prospective candidates with anonymity guarantees, so that the information can be collated privately.

Women's representation in Parliament doubled in the 1997 election but the rise has since stalled at only 1 in 5 MPs: this is similar to the proportion of women councillors in Scotland and Wales, although in England it is closer to 1 in 3. The Scottish Parliament and National Assembly for Wales, meanwhile, have achieved closer-to-equal representation of women and men.

The representation of all minorities is improving, but some groups remain under-represented in local and national government, and continue to face barriers that prevent them from participating in politics at all levels.

What we know about the overall situation and trends

Electoral turnout

Electoral participation in the UK general election reached its peak in 1950, when 84% of registered voters took part. Between 1992 and 2001, turnout fell sharply (from 78% to 59%), rising to 65% in 2010.⁴

Figures published by the Scottish Parliament suggest that 58% of voters turned out to the 1999 Scottish Parliament election, falling to 49% in 2003 before rising slightly to 52% in 2007.⁵ Meanwhile, British Election Studies data suggest that there has been a decrease in self-reported turnout to devolved elections following the establishment of the National Assembly for Wales in 1999.⁶

Current levels of electoral turnout in the three nations are lower than the average for European Union countries with Parliamentary systems (74%) and lower than the individual country averages which range from 90% in Belgium and Luxembourg (where voting is compulsory) and 87% in Denmark (where it is not) to 67% in Ireland.⁷

⁴ UK Political Information 2010. *General election turnout 1945 - 2010*.

Available at: <http://www.ukpolitical.info/Turnout45.htm>

⁵ See: <http://www.scottish.parliament.uk/msp/elections/2007/documents/Table13.pdf>

⁶ Fieldhouse, Prof. E., Widdop, P., Ling, R., Li, Prof. Y., Cutts, D. and Morales, L. 2010. *Civic Life. Evidence base for the Triennial Review. Equality and Human Rights Commission*. Institute For Social Change, University of Manchester. This paper is available from the Equality and Human Rights Commission Triennial Review web pages.

⁷ International Institute for Democracy and Electoral Assistance. Available at: http://www.idea.int/vt/country_view.cfm?id=-1 Accessed 25/08/2010.

Box 14.1.1 Related issue: Patterns of inclusion and exclusion

Research suggests that socio-economic factors are important in determining levels of political engagement, but not necessarily in a direct way. Participation is also closely linked to educational attainment, trust in politicians and the presence of social networks.⁸ Certain people are more likely to be excluded than others.

Homeless people are not intentionally excluded from elections, and can register as voters with no fixed abode.⁹ However, the proportion that does so is not known.

Most prisoners are currently excluded from voting, despite human rights directives suggesting that they be given the right to take part in elections.

Research suggests that **first generation naturalised migrants** vote in similar proportions to the majority population, with levels of electoral participation dropping in subsequent generations.¹⁰

Gypsies and Travellers often have problems accessing their voting cards due to problems with postal delivery to sites, and to enforced mobility. However, this affects only those Gypsies and Travellers who register to vote; registration is low among Gypsy and Traveller communities.¹¹

Political representation

Under-represented groups are slowly increasing their presence in the Westminster and Scottish Parliaments, and the National Assembly for Wales. Where the gender balance has changed, this is in part due to strategies such as the All Women Shortlist. However, the percentage of women MPs is higher in many other European countries (above 37% in Spain, Denmark, Belgium and Finland and above 40% in the Netherlands and Sweden) than it is in the Westminster Parliament.¹² Meanwhile, other groups remain under-represented at a national level in Britain, and representation is generally less diverse at a local level.

⁸ Fieldhouse, E. *et al.* 2010. Page 19.

⁹ Fieldhouse, E. *et al.* 2010. Pages 17-18.

¹⁰ Fieldhouse, E. *et al.* 2010. Section 2.2.7, page 37.

¹¹ Fieldhouse, E. *et al.* 2010. Page 38.

¹² See European Commission (2010), *Employment, Social Affairs and Equal Opportunities: Gender balance in Decision-Making*. Available at: <http://ec.europa.eu/social/main.jsp?catId=774&langId=en>

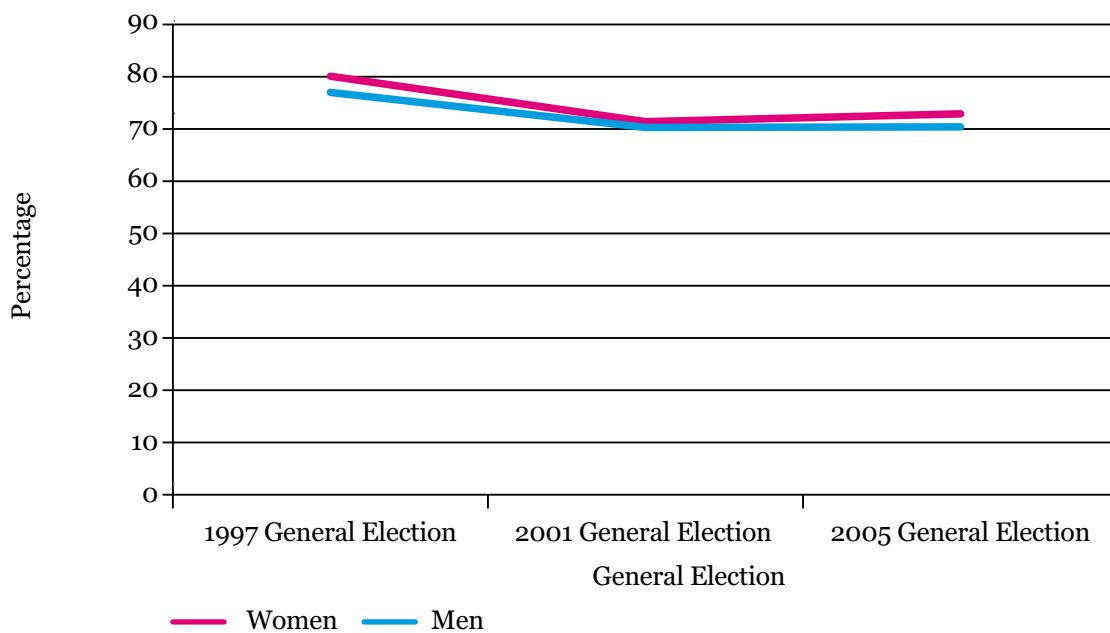
What we know about the situation for different groups

Gender

Electoral turnout

British Election Studies survey data suggests that until 1979, a higher proportion of men than women voted in general elections; the pattern has since reversed, with self-reported turnout among women slightly exceeding that of men (see Figure 14.1.1, below).

Figure 14.1.1 Self-reported turnout (percentage) in general elections by gender in Britain, 1997-2005¹³



Source: British Election Studies survey data 2005.

Elections to the Scottish Parliament, meanwhile, have seen levels of participation falling faster for men than for women: in 1999, self-reported turnout was roughly equal between the sexes (at 73% and 72% for men and women respectively), falling to 59% of men and 63% of women in 2007.¹⁴

Elections to the National Assembly for Wales have seen self-reported turnout falling faster for women than for men: in 1999, 57% of women said they voted (compared to 51% of men), falling by 2007 to 49% (compared to 50% men).¹⁵

¹³ Fieldhouse, E. *et al.* 2010. Figure 2.5, page 27.

¹⁴ Fieldhouse, E. *et al.* 2010. Figures 2.6 and 2.7, pages 27-28.

¹⁵ Fieldhouse, E. *et al.* 2010. Figures 2.6 and 2.7, pages 27-28.

Political representation

The number of women MPs has risen since 1992, when the British Parliament had the lowest representation of women in Europe (at 9%, or 60 MPs).¹⁶ In 1997, the proportion of women MPs doubled to 18% (120 MPs) following the use of the All Women Shortlist by the Labour Party between 1993 and 1996.¹⁷ Since then, the proportion of women MPs has risen less quickly, although Labour reintroduced the All Women Shortlist prior to the 2005 general election (see Figure 14.1.2, below).

By 2005, the proportion of women MPs had reached almost 20% (or 128 MPs).¹⁸ There are currently more women MPs (143) than ever before, with women making up 22% of the House of Commons since the 2010 general election. Men remain vastly over-represented, accounting for nearly 4 out of 5 MPs.¹⁹

The most recent increase is largely due to the number of incumbents standing down: there was only a small rise in the proportion of women candidates between 2005 and 2010 (from 20% to 21%).²⁰

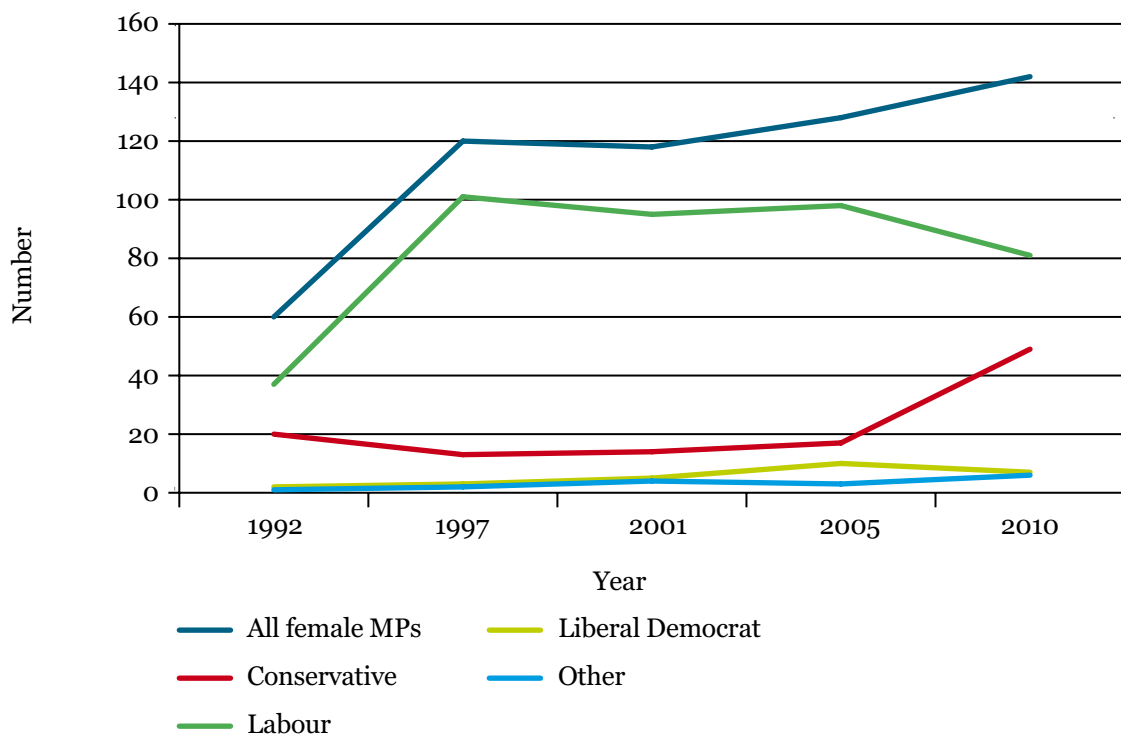
¹⁶ Lovenduski, J. 1996. 'Sex, Gender and British Politics'. *Parliamentary Affairs*, 49, 1: 1-16.

¹⁷ Fieldhouse, E. *et al.* 2010. See also: Cracknell, R. 2005. *Social background of MPs*. House of Commons Library Standard Note 1528. Available at: <http://www.parliament.uk/documents/commons/lib/research/briefings/snsg-01528.pdf> Accessed 23/09/2010.

¹⁸ House of Commons Information Office 2010. *Women in the House of Commons*. Factsheet M4: Members Series. Page 7. Available at: <http://www.parliament.uk/documents/commons-information-office/m04.pdf> Accessed 25/08/2010.

¹⁹ Cracknell, R. 2010. *General Election 2010: detailed analysis*. House of Commons Briefing Paper 10/36. Section 7, page 45. Available at: <http://www.parliament.uk/briefingpapers/commons/lib/research/rp2010/RP10-036.pdf> Accessed 24/09/2010.

²⁰ Cracknell, R. 2010. Section 6, page 42.

Figure 14.1.2 Number of women MPs in the UK Parliament, 1992-2010²¹

Source: House of Commons Factsheet M4 (women in the house of commons) 2010.

Notes:

1. The proportion of women Labour MPs has gone up, but the actual number has fallen.
2. The 2010 figures have been altered to reflect the results of the post-general election by-election.²²

Women are better represented in the Scottish Parliament and the National Assembly for Wales, making up 35% and 48% of the membership of each institution, respectively. This has been due – in part – to the combination of the use of the All Women Shortlist in some constituencies and a drive to place women high on the list of party candidates in others.²³

²¹ House of Commons Information Office 2010. Page 7.

²² Cracknell, R. 2010. Section 7, page 45.

²³ Russell, M., Mackay, F. and McAllister, L. 2002. 'Women's Representation in the Scottish Parliament and the National Assembly for Wales: Party Dynamics for Achieving Critical Mass,' *Journal of Legislative Studies*, 8, 2: 49-76.

There are large differences between the proportions of men and women councillors in all three nations. In England, the proportion of women councillors was just short of 31% in 2008 – up from 29% in 2006 (and 28% in 1997);²⁴ men constituted almost 70% of councillors.²⁵

In Scotland and Wales men made up almost 80% of councillors in 2004 and 2007, respectively; women constituted just over 20%.²⁶

Box 14.1.2 Related issue: Women in politics

Research by the Welsh Local Government Association suggests that while the number of women councillors is improving – in part due to the initiatives to increase representation – women are more likely to be vice-chairs, rather than chairs, of scrutiny committees; and they are more likely to take up extra duties, such as being a school governor.²⁷

Research suggests that the business hours of local councils act as barriers to women.²⁸ This is also true at a national level: such institutional practices, as well as candidate-selection processes, have been found to create often insurmountable obstacles – particularly for ethnic minority women.²⁹

²⁴ National Foundation for Educational Research (NFER) 2009. *National Census of local authority councillors in England 2008*. Slough: NFER.

²⁵ NFER 2009.

²⁶ Maloney, W. 2008. *Scotland's Councillors 2007*. COSLA Research Report 2008. Edinburgh: Convention of Scottish Local Authorities. Welsh Local Government Association (WLGA) 2005. *National Census of Local Authority Councillors, 2004*. Cardiff: WLGA.

²⁷ WLGA 2005.

²⁸ Giddy, P. 2000. *A woman's place is in the chamber: first thoughts on attracting women into local politics*. LGA First Thoughts Series London: Local Government Association.

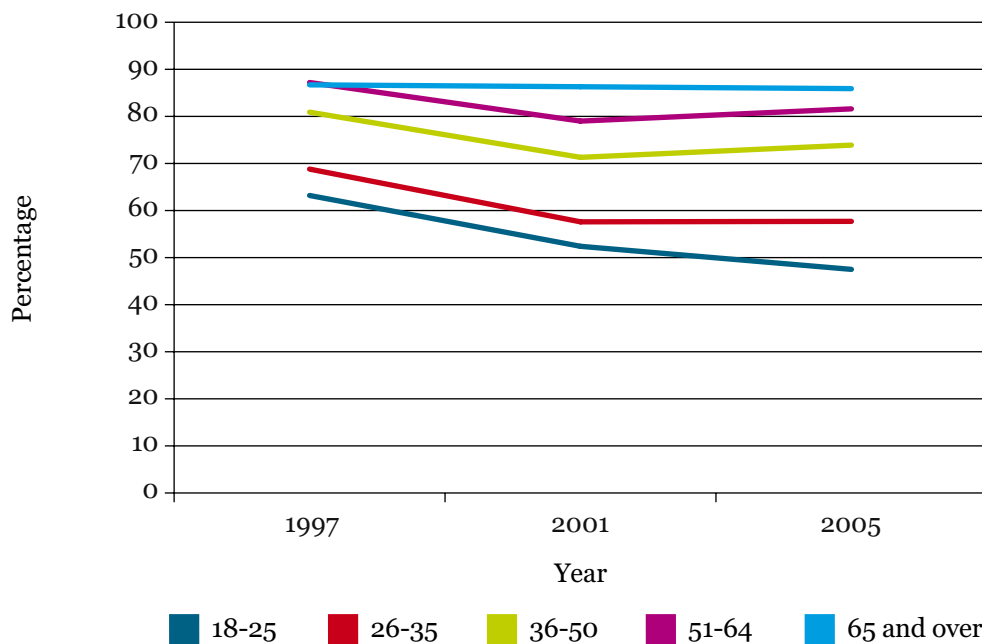
²⁹ Shepherd-Robinson, L. and Lovenduski, J. 2003. *Women and Candidate Selection in British Political Parties*. London: Fawcett Society. See also Gervais, M-C. and Z. Moosa (eds) 2008. *Ethnic Minority Women: Routes to Power*, London: Government Equalities Office; Moosa, Z. 2009, *Lifts and Ladders: Resolving Ethnic Minority Women's Exclusion from Power*. London: Fawcett Society.

Age

Electoral turnout

National survey data suggest that there are strong generational differences in voting, reflecting broader social and cultural changes.³⁰ As a result, the gap between self-reported turnout of younger and older people at general elections has widened since 1997. Voting levels among 18-24 year-olds fell below 50% for the first time in 2005 (see Figure 14.1.3, below).³¹

Figure 14.1.3 Self-reported turnout (percentage) in general elections classified by age in Britain, 1997-2005³²



Source: British Election Studies survey data 2005.

Similarly, the age gap has widened over time in the Scottish and Welsh devolved elections.³³

³⁰ Fieldhouse, E. *et al.* 2010.

³¹ Sanders, D. Clarke, H. Stewart, M. and Whiteley, P. 2006. *The 2005 General Election in Great Britain: Report for the Electoral Commission*. Available at: <http://www.essex.ac.uk/bes/Papers/ec%20report%20final.pdf>

³² Fieldhouse, E. *et al.* 2010, Figure 2.8, page 30.

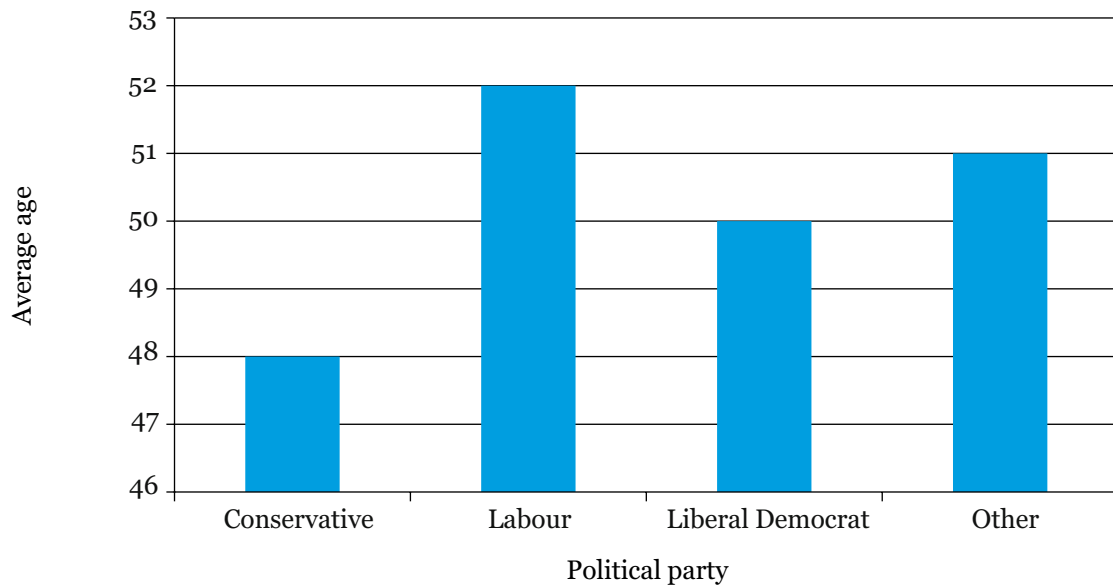
³³ Fieldhouse, E. *et al.* 2010. Figures 2.9 and 2.10, page 31.

Political representation

The proportion of MPs over the age of 50 rose from 46% in 1997 to 56% in 2005.³⁴

In the current Westminster Parliament, the average age of MPs is 50 (see Figure 14.1.4, below). The youngest is 25 – the oldest, 80.³⁵

Figure 14.1.4 Average age of MPs by party in the UK Parliament, 2010³⁶



Source: House of Commons Briefing Paper 2010.

The average age of councillors in England rose from 55 in 1997 to almost 59 in 2008,³⁷ with 87% of councillors in 2008 aged over 45 (while the percentage of the 18+ population for this group is 52%).³⁸ Similar age patterns are evident in Scottish and Welsh councils (see Figure 14.1.5, below).

³⁴ Cracknell, R. 2005. Page 2.

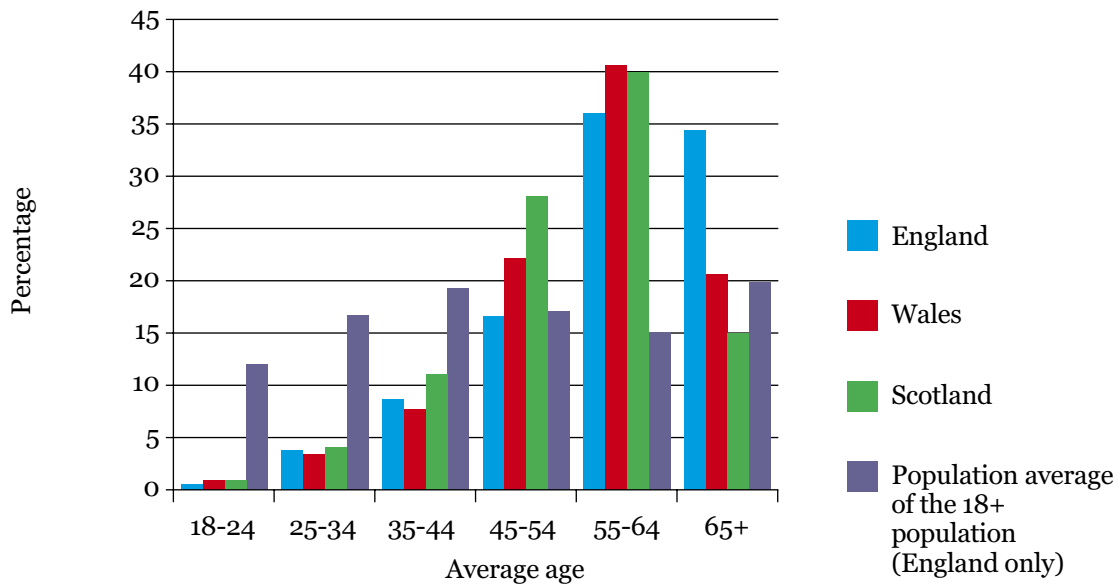
³⁵ See UK Parliament, 2010. *Frequently Asked Questions: MPs*. Available at: <http://www.parliament.uk/about/faqs/house-of-commons/faqs/members-faq-page2/>

³⁶ Cracknell, R. 2010. Section 7, page 45.

³⁷ NFER 2009.

³⁸ NFER 2009.

Figure 14.1.5 Average age (percentage) of councillors in England (2009), Scotland (2007) and Wales (2004)³⁹



Sources: National Census of Local Authority Councillors in England 2009; National Census of Local Authority Councillors in Wales 2004; National Survey of Local Candidates in Scotland, 2007; Labour Force Survey (England) 2008.

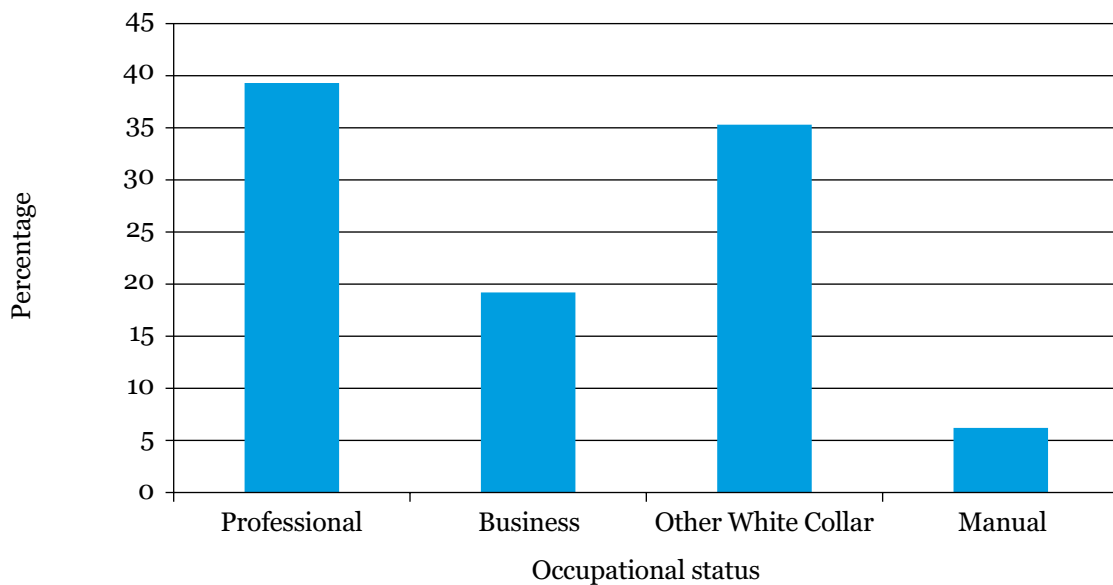
Socio-economic groups

Political representation

MPs are disproportionately from higher socio-economic groups (see Figure 14.1.6, below). An analysis of MPs from the three main political parties shows that while the proportion from 'the professions' (e.g. law, medicine and teaching) decreased slightly from 42% in 1987 to 39% in 2005, the proportion from white collar backgrounds, including political organisers, rose radically (from 21% to 35% over the same period).⁴⁰

³⁹ NFER 2009; Maloney, W. 2008; WLGA 2005.

⁴⁰ Cracknell, R. 2005. Page 2.

Figure 14.1.6 Occupational Status of MPs in the UK Parliament, 2005⁴¹

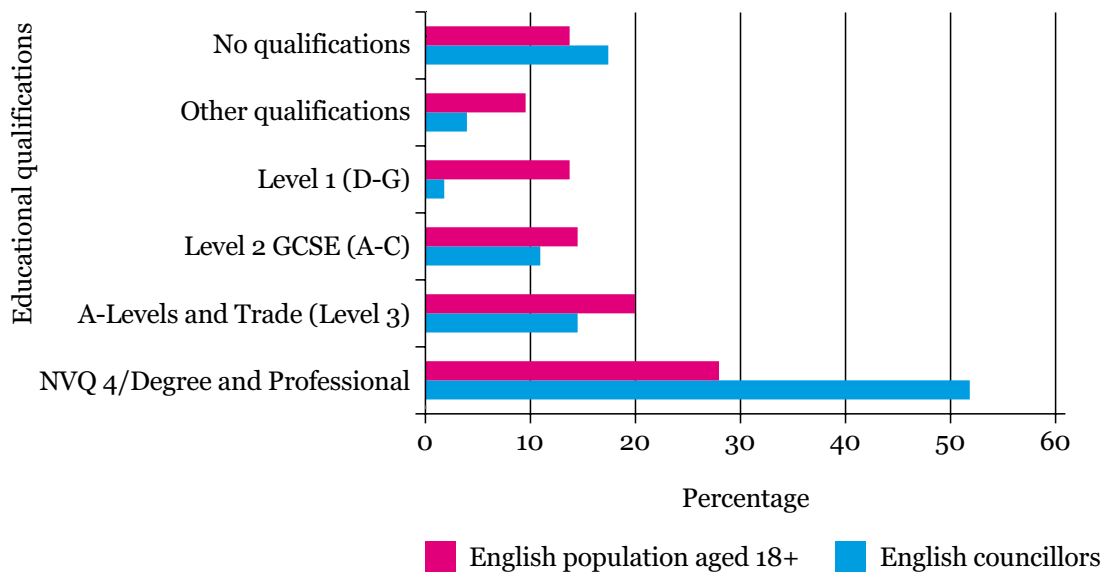
Source: House of Commons Briefing Paper 2005.

The Sutton Trust has analysed the educational background of MPs elected in the 2010 general election. Of those whose education background is known, over a third went to fee-paying schools, 9 out of 10 went to university, and over a quarter went to Oxbridge.⁴²

Similar patterns are evident at a local council level. In 2008, 51% of English councillors were educated to degree or NVQ4 level, or had a professional training, compared to 29% of the working-age population (see Figure 14.1.7, below).

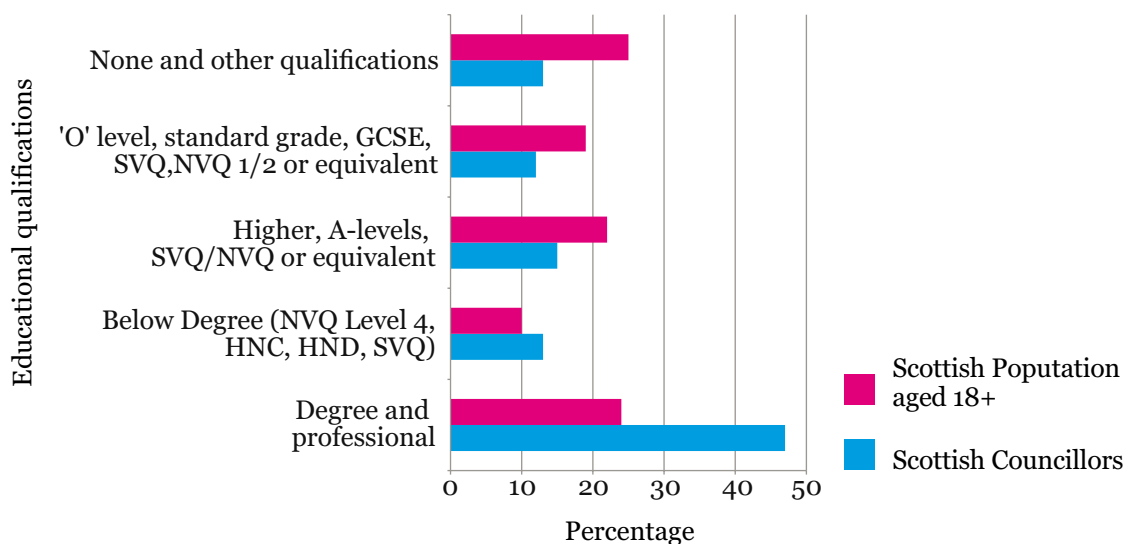
⁴¹ Cracknell, R. 2005. Page 2.

⁴² The Sutton Trust 2010. *The Educational Backgrounds of Members of Parliament in 2010*. London: The Sutton Trust.

Figure 14.1.7 Educational qualifications of councillors in England, 2008⁴³

Sources: National Census of Local Authority Councillors in England 2009; and Labour Force Survey 2008.

Similar patterns are evident in Scotland (see Figure 14.1.8, below).

Figure 14.1.8 Educational qualifications of councillors in Scotland, 2007⁴⁴

Source: National Survey of Local Candidates in Scotland 2007; Scottish Labour Force Survey 2008.

⁴³ NFER, 2009.

⁴⁴ Maloney, W. 2008.

In Wales, just over 40% Councillors were educated to degree or NVQ4 level, or had a professional training in 2004 (compared to 24% of working age adults).⁴⁵

Disability

Electoral turnout

A significant proportion of polling stations, two-thirds at the general election in 2010, had at least one significant access barrier – potentially restricting access to older people, the long-term sick and those with physical disabilities.⁴⁶

However, the Electoral Commission estimates that a larger proportion of disabled people in England and Wales turned out in the 2005 general election than did non-disabled people (with 69% voting, against 66% in the non-disabled population) due to the advent of postal voting.⁴⁷

In the devolved elections to the Scottish Parliament and National Assembly for Wales, the turnout of disabled and non-disabled people is very similar.⁴⁸

Box 14.1.3 Related issue: People with learning disabilities

Research suggests that voting is particularly reduced amongst those with learning disabilities. In England, it is estimated that 4% of those with profound and multiple impairments voted in the 2001 election, while 27% of those with severe learning disabilities voted: the proportion of people with mild/moderate learning disabilities who voted was significantly higher at 42%.⁴⁹

⁴⁵ WLGA 2005.

⁴⁶ SCOPE 2010. *Polls Apart 2010: opening elections to disabled people*, SCOPE highlighted the low level of provision made in many polling stations for disabled people (see: <http://www.pollsapart.org.uk/pages/2010report.php>). This was an issue even in newer, devolved contexts.

⁴⁷ Sanders *et al.* 2006. This figure is lower when looking at disability as a separate category to long-term sickness: BES data suggest that the proportion of disabled people voting in 2005 was 59.7% – see Fieldhouse, E. *et al.* 2010. Table 2.1, Page 36.

⁴⁸ Fieldhouse, E. *et al.* 2010. See Tables 2.2 and 2.3, pages 36-37.

⁴⁹ Emerson, E. and Hatton, C. 2008. *People With Learning Disabilities in England*. Lancaster: Centre for Disability Research.

Political representation

Box 14.1.4 Related issue: Hidden disability in the UK Parliament

There is evidence that disabled people face significant barriers to selection as Parliamentary candidates; that some politicians may choose not to disclose their disability; and that an MP could lose their seat if detained under (Section 141 of) the Mental Health Act for a period of six months or more, although the provision has never been used.

The recent Speaker's Conference into Parliamentary representation has called for a review of this legislation and recommended that the government develop a ring-fenced scheme, as part of the Democracy Diversity Fund, to support disabled parliamentary candidates.⁵⁰

In 2008, the All-Party Parliamentary Group on Mental Health conducted a survey of members of both houses: almost a fifth of MPs and Lords who responded "had either been concerned about their own mental health or had actively sought help for a mental health problem". Recent estimates of the incidence of mental health problems in Britain have been in the range of 17% to 25%.⁵¹

In 2008, 13% of councillors in England had a long-term illness, health problem or disability – up from 11% in 2006.⁵²

In 2007, 18% of Scottish councillors reported having a long-term illness, health problem or disability, compared with a national average of 42% who had long-standing health issues. In 2004, 17% of Welsh councillors had a long-term limiting illness or were disabled (against a population average of 23%).⁵³

⁵⁰ House of Commons 2010. *Speaker's Conference (on Parliamentary Representation): Final Report*. HC 239-I. London: The Stationery Office. Pages 10 and 99.

⁵¹ Fieldhouse, E. *et al.* 2010. Page 48.

⁵² Fieldhouse, E. *et al.* 2010. Page 48.

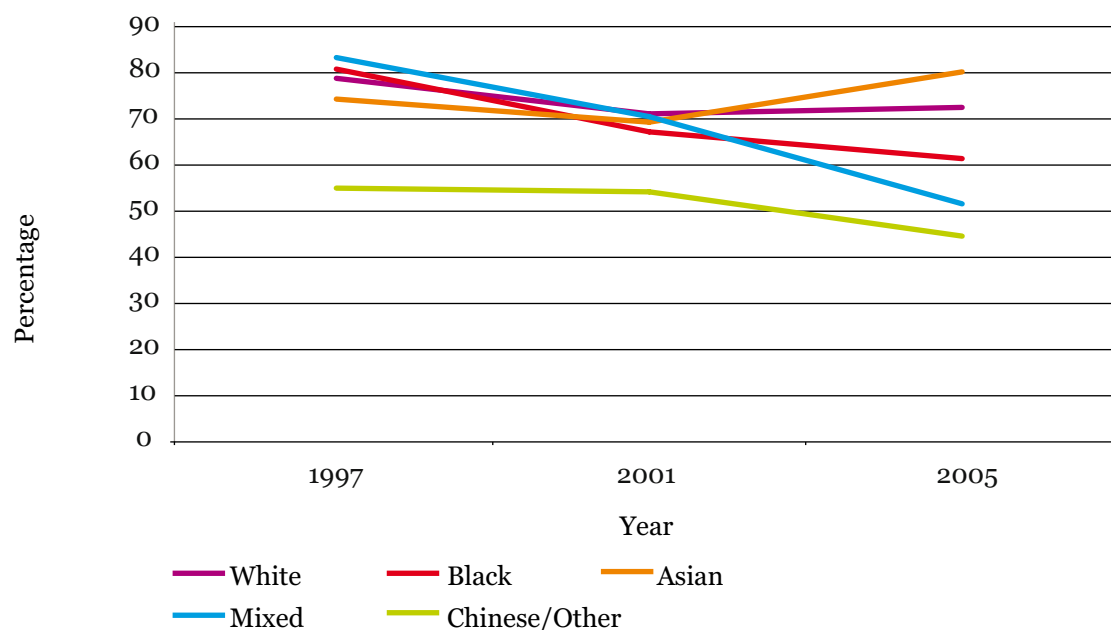
⁵³ Fieldhouse, E. *et al.* 2010. Table 2.5, page 49.

Ethnicity

Electoral turnout

Levels of self-reported turnout fell unevenly across ethnic groups between the 1997 and 2005 general elections (see Figure 14.1.9, below). The largest decline was in the Mixed Race group: meanwhile, there was a rise in self-reported turnout of Asian people.

Figure 14.1.9 Self-reported turnout (percentage) in general elections by ethnicity in Britain, 1997-2005⁵⁴



Source: British Election Studies data 2005.

Political representation

Ethnic minorities are under-represented in the UK Parliament. There were four ethnic minority MPs in 1987: since then, the number has grown slowly, reaching 15 in 2005 (2.3% of all MPs).⁵⁵ The number almost doubled in 2010, when 27 MPs from ethnic minorities were elected (or 4% of MPs):⁵⁶ 11 ethnic minority MPs are in the Conservative Party and 16 are in the Labour Party.⁵⁷

⁵⁴ Fieldhouse, E. *et al.* 2010. Figure 2.3, page 24.

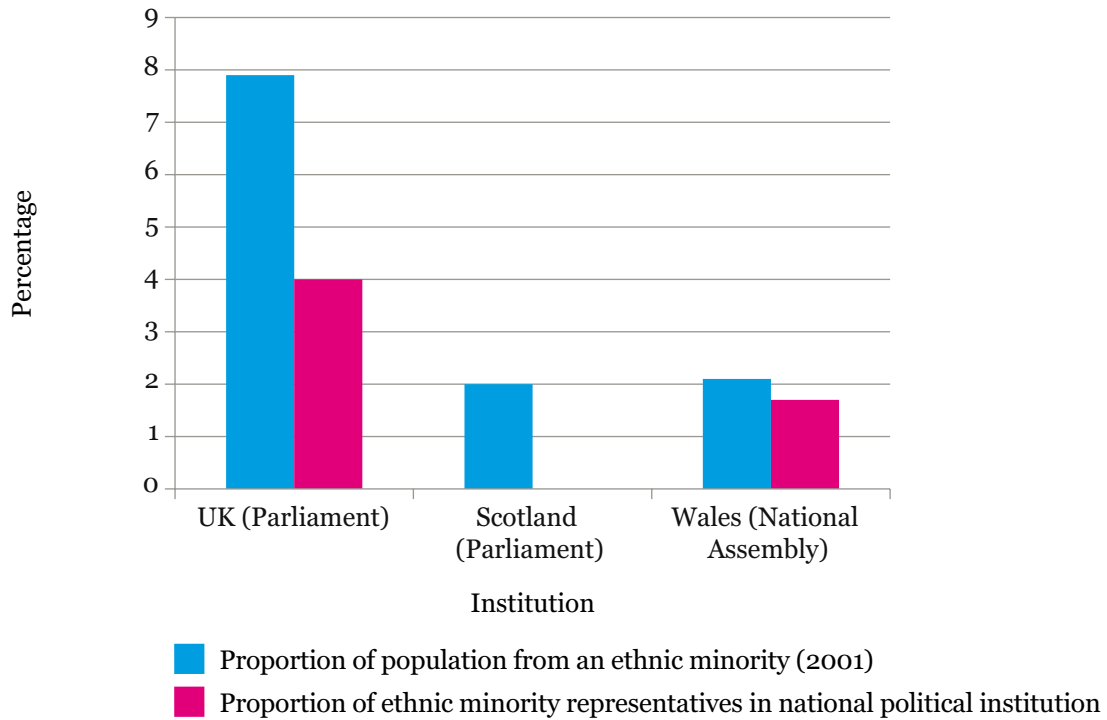
⁵⁵ Equalities Review 2007. *Fairness and freedom: the final report of the Equalities Review*. London: Equalities Review. Page 41.

⁵⁶ UK Parliament, 2010.

⁵⁷ Cracknell, R. 2010, page 45.

There is one ethnic minority Assembly Member in Wales but no ethnic minority MSPs in Scotland (see Figure 14.1.10, below).

Figure 14.1.10 Proportion of British people from ethnic minorities: comparisons with representation in elected bodies, 2010⁵⁸



Source: Equality and Human Rights Commission, *Pathways to Politics*, forthcoming.

⁵⁸ Brand Democracy (forthcoming). 'Pathways to politics stage 1'. Annex in Durose, C. *et al.* (forthcoming). Note the addition of the most recent UK figures for the Westminster Parliament.

Box 14.1.5 Related issue: Under-representation of ethnic minorities in the UK Parliament

Research highlights the barriers to entry for ethnic minority politicians, from candidate-selection,⁵⁹ through to placement in constituencies with large ethnic minority populations.⁶⁰

There has only ever been one MP (in the 1970s) from either the Traveller or Roma communities. There are very few district councillors (exact number not known).⁶¹

The proportion of ethnic minority councillors in England has changed little in recent years, fluctuating between 3 and 4% between 2001 and 2008.⁶² A large proportion of ethnic minority councillors are concentrated in and around London.⁶³ Less than 1% of all councillors in England were ethnic minority women in 2006 and 2008, yet it is estimated that ethnic minority women make up almost 6% of the total population.⁶⁴

⁵⁹ Commission on the Future of Multi-Ethnic Britain 2000. *The future of multi-ethnic Britain: the Parekh report*. Profile Books: London. See also, House of Commons 2010. Page 49.

⁶⁰ Saggar, S. and Geddes A. 2000. 'Negative and positive racialisation: re-examining ethnic minority political representation in the UK'. *Journal of Ethnic and Migration Studies* 26, 1: 25-44. See also House of Commons 2010, page 49.

⁶¹ Greenfields, M., Home, R., Cemlyn, S., Bloxson, J. and Lishman, R. 2007. *Gypsy Traveller Accommodation (and Other Needs) Assessment 2006-2006*. High Wycombe: Buckinghamshire Chilterns University College. Niner, P. 2006. *Accommodation Needs of Gypsy-Travellers in Wales*. Report to the National Assembly for Wales Government. Birmingham: Centre for Urban and Regional Studies.

⁶² NFER 2009. Table 1, page 6.

⁶³ NFER 2009. Page 19.

⁶⁴ Fieldhouse, E. *et al.* 2010. Table 2.4, page 42.

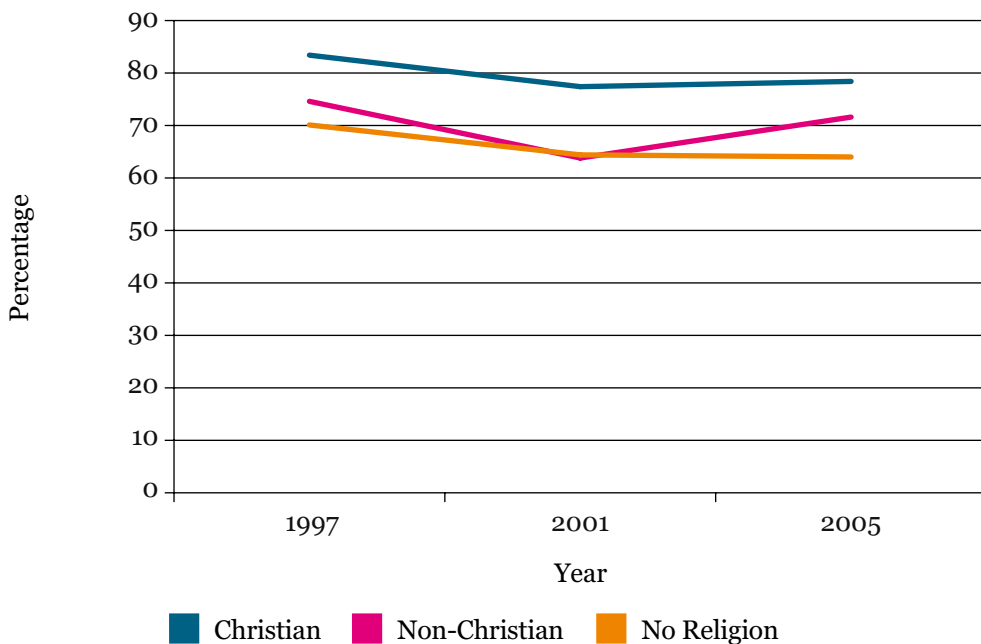
Meanwhile, preliminary analysis undertaken for the Equality Measurement Framework suggest that less than 1% of Councillors in Wales are from ethnic minority backgrounds.⁶⁵ Although under 2% of Councillors in Scotland are from ethnic minority backgrounds, this is roughly in line with the demographics in Scotland (see Figure 14.1.10, above).⁶⁶

Religion or belief

Electoral turnout

The self-reported turnout of people with a religious identity is generally higher than that of those without in general elections (see Figure 14.1.11, below).

Figure 14.1.11 Self-reported turnout (percentage) at general elections classified by religious affiliation in Britain, 1997-2005⁶⁷



Source: British Election Studies data 2005.

⁶⁵ Alkire, S., Bastagli, F., Burchardt, T., Clark, D., Holder, H., Ibrahim, S., Munoz, M., Terrazas, P., Tsang, T. and Vizard, P. 2009. Developing the Equality Measurement Framework: selecting the indicators. Research Report 31. Manchester: Equality and Human Rights Commission. In the development of the Equality Measurement Framework indicators, the technical phase was to check sample sizes rather than generate final data analysis tables, so these are preliminary results for group means and the significance of the variations in group means, as well as a report on sample sizes. Significance tests are reported at the 95 per cent level. A series of cross-checks are required at the next stage of the development of the Equality Measurement Framework before final data tables can be produced.

⁶⁶ Maloney, W. 2008. Table 8, page 15.

⁶⁷ Fieldhouse, E. *et al.* 2010. Figure 2.11, page 33.

This is also true in the devolved elections.⁶⁸

Political representation

The first Muslim member of the House of Commons, Mohammad Sarwar, took his seat in 1997. The number of Muslim MPs doubled from 2 in 2001 to 4 in 2005, and again to 8 in 2010: the past election saw the first three Muslim women becoming MPs (all for the Labour Party), and the first two Muslim MPs on the Conservative benches.⁶⁹

There has been a longer tradition of Jewish membership of the House of Commons. At the 2005 General Election, 26 Jewish MPs were elected: 11 Labour, 12 Conservative and 3 Liberal Democrat.⁷⁰

Published data about councillors in Scotland suggest that the majority (66%) come from one of the Christian denominations (44% are affiliated with the Church of Scotland, 14% with the Roman Catholic Church, and 8% with another church). A significant proportion (31%) report having no religious affiliation, with small proportions (0.3% each) saying that they are Muslim, Jewish or Sikh; 2% report having a different religious background: these figures are in line with the general Scottish population.⁷¹

Sexual orientation

Political representation

In 2009, only 13 MPs (or 2%) were openly LGB: all but one of these were men.⁷² In 2010, the number of openly LGB MPs rose to 17.⁷³ Stonewall estimates that if Parliament were to be representative, there would need to be 39 LGB MPs.⁷⁴

Some LGB people who participate in formal politics may not reveal their sexual orientation publicly. Evidence presented at the Speaker's Conference pointed to barely veiled prejudice during selection processes, including LGB candidates being asked repeatedly why they are not married. One of the Equality and Human Rights Commission's recommendations to the Speaker's Conference was to professionalise selection processes to reduce such discrimination.⁷⁵

⁶⁸ Fieldhouse, E. *et al.* 2010. Figures 2.12 and 2.13, pages 33-34.

⁶⁹ Cracknell, R. 2010. Page 52.

⁷⁰ Brand Democracy (forthcoming).

⁷¹ Maloney, W. 2008. Page 15.

⁷² House of Commons, 2010: Written Evidence Submission by Stonewall (SC-68).

⁷³ Fieldhouse, E. *et al.* 2010. Page 47.

⁷⁴ See Durose, C. *et al.* (forthcoming) for projected numbers of MPs.

⁷⁵ House of Commons 2010. Page 49. See also Annex in Durose *et al.* (forthcoming).

14.2 What we know about perceptions of influence

Measure:

Percentage who believe they have influence in their local area

How this measure works:

This measure draws on two surveys – the Citizenship Survey (for England only) and the Scottish Household Survey.

Within England data are collected on gender, age, socio-economic status, disability (measured as limiting long-term illness (LLTI)), ethnicity, religion, and sexual orientation. There is very limited related literature for this measure on transgender people, and therefore they are not covered in this section.

Within Scotland, data are provided on gender, age and socio-economic group (using household income as a proxy). The survey is annual, and was first undertaken in 1999.

Overview

There has been a decline in people's sense of influence in their local area since 2001, although feelings of influence have stayed relatively stable since then, and are currently felt by 37% of the population.

Some of the more traditionally marginalised groups are more likely than average to believe they have influence. However, there are very low levels of influence felt by White and Christian groups.

It is possible that this difference has been driven partly by the strong sense of local community and distinctiveness, particularly among some geographically concentrated religious and ethnic groups:⁷⁶ **there is a relationship between feelings of influence and levels of engagement in decision-making bodies** (discussed in Indicator 4).

⁷⁶ See discussion in Fieldhouse, E. *et al.* 2010.

What we know about the overall situation and trends

Measured by the Citizenship Survey, levels of perceived influence in decisions affecting their local area have fallen from 44% in 2001 to between 37% and 39% ever since. This follows a similar pattern to feelings of influence on national decisions (which are experienced by a smaller proportion of citizens).

The means by which most respondents say they would try to influence local decisions is by: contacting the local council (48%); contacting their councillor (46%); or signing a petition (45%).⁷⁷ However, as we shall see under Indicator 3, more people sign petitions than contact their representative.

What we know about the situation for different groups

Gender

Men and women in England are equally likely to feel that they can influence decisions affecting their local area.⁷⁸

Box 14.2.1 Related issue: Women and influence in public life

Women from particular equality strands may lack the autonomy required to exert influence in public life: evidence from the House of Commons Speaker's Conference, for example, noted that Muslim women in traditional marriages or communities face a double bind because of pressures within their own communities and prejudice within wider society.⁷⁹

Carers also risk detachment from community life which has a particular impact on their sense of influence (see Chapter 13: Care and support).⁸⁰

Age

Feelings of influence over decisions affecting their local area are highest for those aged between 25 and 34 (40%) in England – feelings of influence diminish thereafter and are significantly lower among those aged over 75 (at 15% – see Figure 14.2.1).

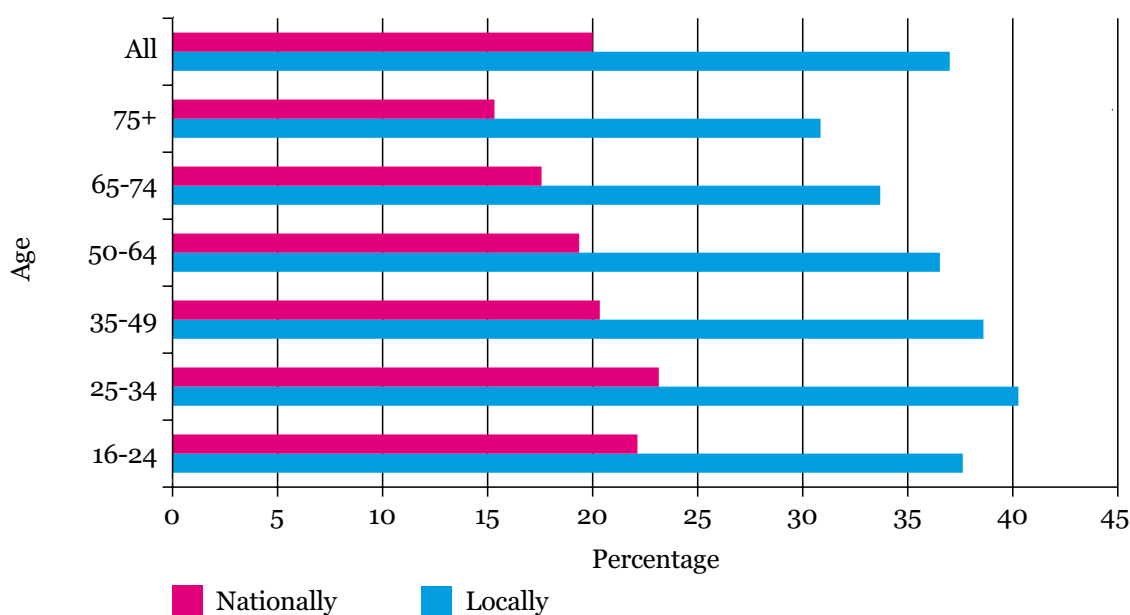
⁷⁷ Agur, M. and Low, N. 2009. 2007/08 *Citizenship Survey. Empowered Communities Topic Report*. London: Communities and Local Government (CLG). Page 5.

⁷⁸ Taylor, E. and Low, N. 2010. 2008-09 *Citizenship Survey: Empowered Communities Topic Report*. London: CLG.

⁷⁹ House of Commons 2010. Page 46.

⁸⁰ See, for example, Banks, J. Breeze, E. Lessof, C. and Nazroo, J. (eds). *Living in the 21st Century: Older People in England, The 2006 English Longitudinal Study of Ageing (Wave 3)*. London: Institute for Fiscal Studies (IFS).

Figure 14.2.1 Percentage who feel able to influence decisions locally or nationally by age in England, 2009/10⁸¹



Source: Citizenship Survey 2009/10.

In Scotland, those aged between 35 and 59 are slightly more likely than any other age group to feel that they can influence decisions affecting their local area.⁸²

Socio-economic groups

People in managerial and professional occupations are more likely to feel that they can influence decisions affecting their local area than people from most other occupational groups. In England, 44% of those in professional or managerial occupations believe that they can influence local decisions, compared with 30% of those in routine occupations (see Figure 14.2.2, below).⁸³

Similarly, people in managerial and professional occupations are more likely than other occupational groups to feel that being able to influence local decisions is important (85%); between 67% and 78% of those from other socio-economic groups feel that it was important to exert influence.⁸⁴

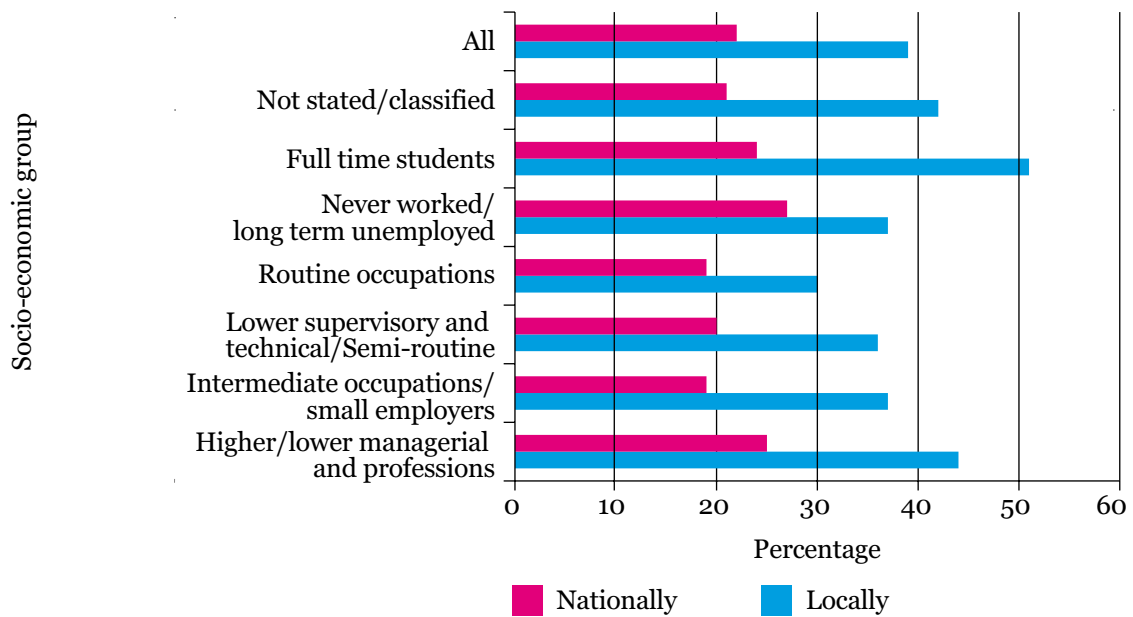
⁸¹ CLG 2010. *Citizenship Survey: 2009-10 (April 2009–March 2010), England*. Cohesion Research Statistical Release 12. Table 2.

⁸² Scottish Government 2009. *Scotland's People: Annual Report from 2007/2008 Scottish Household Survey*. Available at: <http://www.scotland.gov.uk/Publications/2009/09/01114213/0> Accessed 23/08/2010. Table 11.3, page 125.

⁸³ Taylor, E. and Low, N. 2010. Table 42.

⁸⁴ Taylor, E. and Low, N. 2010. Table 45.

Figure 14.2.2 Percentage who feel able to influence decisions locally and nationally by socio-economic group in England 2008/09⁸⁵

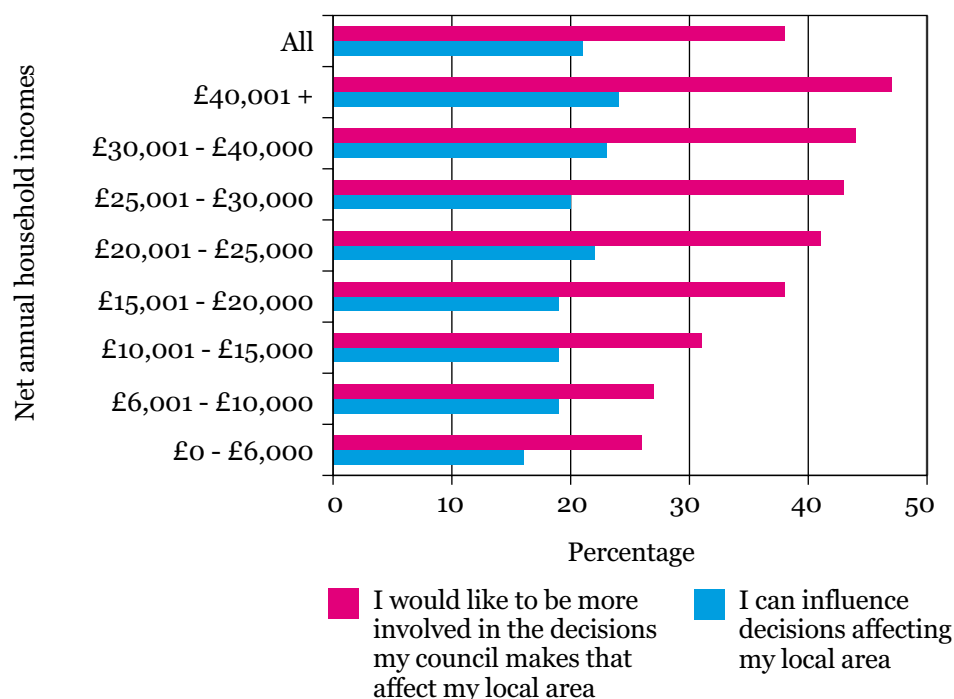


Source: Citizenship Survey 2008/09.

In Scotland households with a higher net annual income are more likely to agree that they can influence decisions affecting their local area (see Figure 14.2.3).

⁸⁵ Taylor, E. and Low, N. 2010. Table 42.

Figure 14.2.3 Percentage agreeing with statements about local decision-making by net annual household income in Scotland, 2007/08⁸⁶



Source: Scottish Household Survey 2007/08.

Note:

1. Household income in the Scottish Household Survey is that of the highest income householder and their partner only.

Disability

Disabled people are generally less likely than non-disabled people to say that they can influence local decisions: in England, 34% of those with a limiting long-term illness (LLTI) or disability said that they believed they could influence decisions in 2009/10, compared to 41% of those without.⁸⁷

Ethnicity

People from ethnic minority backgrounds have expressed, on average, higher levels of personal influence than people from White backgrounds over the past 10 years, but the extent to which they have done so varies.⁸⁸

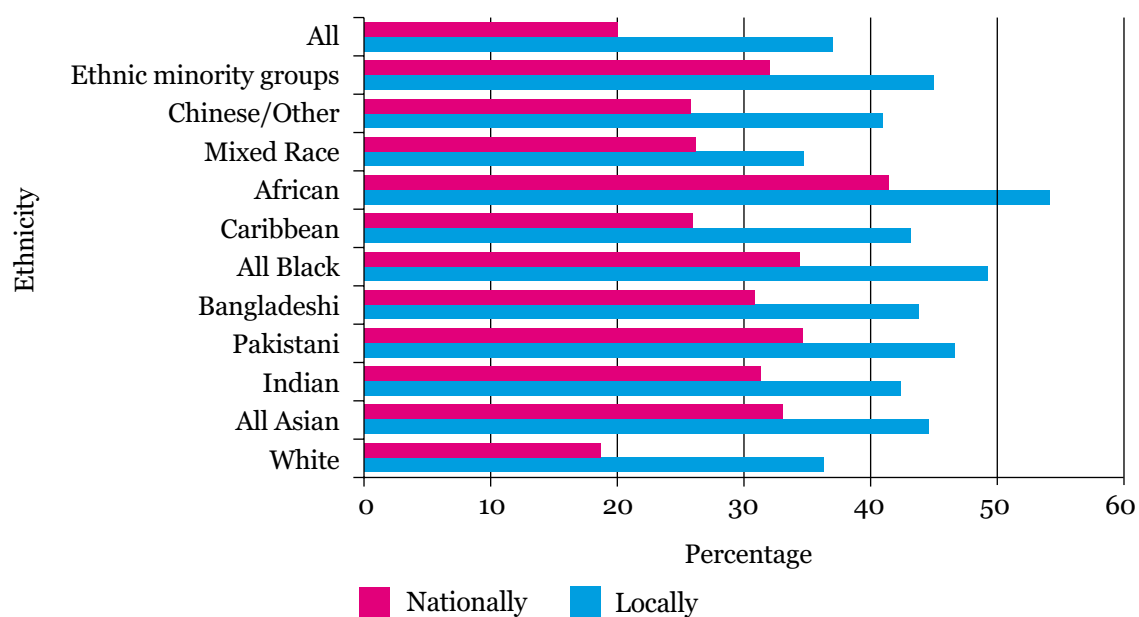
⁸⁶ Scottish Government 2009. Table 11.4.

⁸⁷ Taylor, E. and Low, N. 2010. Table 38.

⁸⁸ Fieldhouse, E. *et al.* 2010. Figure 4.1, page 87.

For example, in 2009/10, 49% of Black and 45% of Asian people felt able to influence decisions in their local area compared with 36% of White people. However, within these broader groups, levels of perceived influence varied (see Figure 14.2.4, below).

Figure 14.2.4 Percentage who feel able to influence decisions locally and nationally by ethnicity in England, 2009/10⁸⁹



Source: Citizenship Survey 2009/10.

Box 14.2.2 Related issue: Migrants' perceptions of influence in the local area

In a study of about 400 Eastern European immigrants and 400 long-term residents in two London boroughs, just over a quarter of the immigrants agreed that they could influence local area government decisions, compared to 42% of long-term residents.⁹⁰

Religion or belief

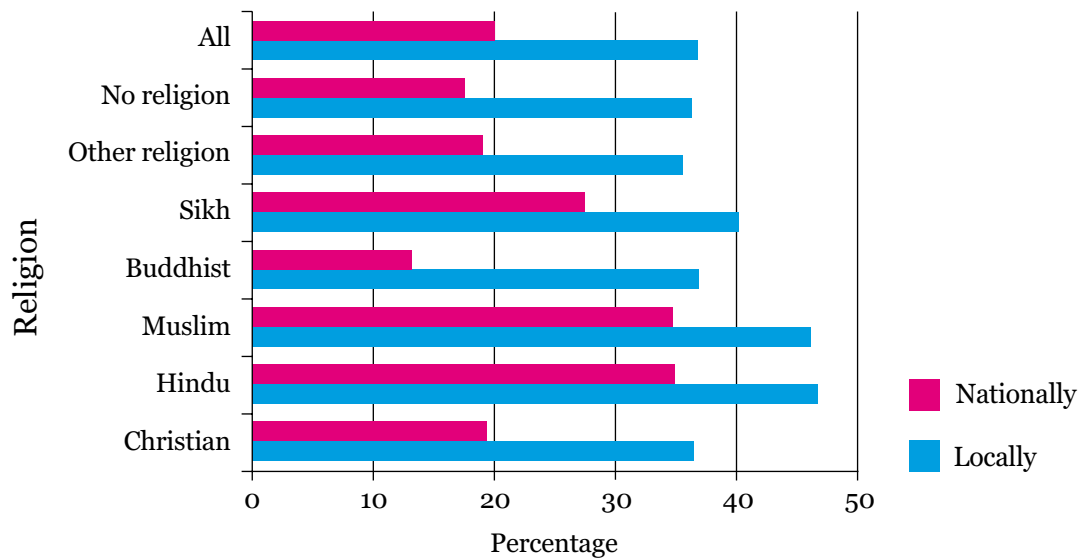
Sikhs, Hindus and Muslims are slightly more likely than are Christians and those without religious affiliation to feel that they can influence decisions at a local level, although the differences are not statistically significant (see Figure 14.2.5, below). Levels of confidence of religious minorities have tended to fluctuate over time while those of Christian and no-religion respondents have stayed fairly constant (declining slowly since 2001). The biggest increase has been amongst Sikhs.⁹¹

⁸⁹ CLG 2010. Table 2.

⁹⁰ Markova, E. and Black, R. 2007. *East European immigration and community cohesion*. York: Joseph Rowntree Foundation.

⁹¹ Fieldhouse, E. *et al.* 2010. Figure 4.4, page 90.

Figure 14.2.5 Percentage who feel able to influence decisions locally and nationally by religious affiliation in England, 2009/10⁹²



Source: Citizenship Survey 2009/10.

Note:

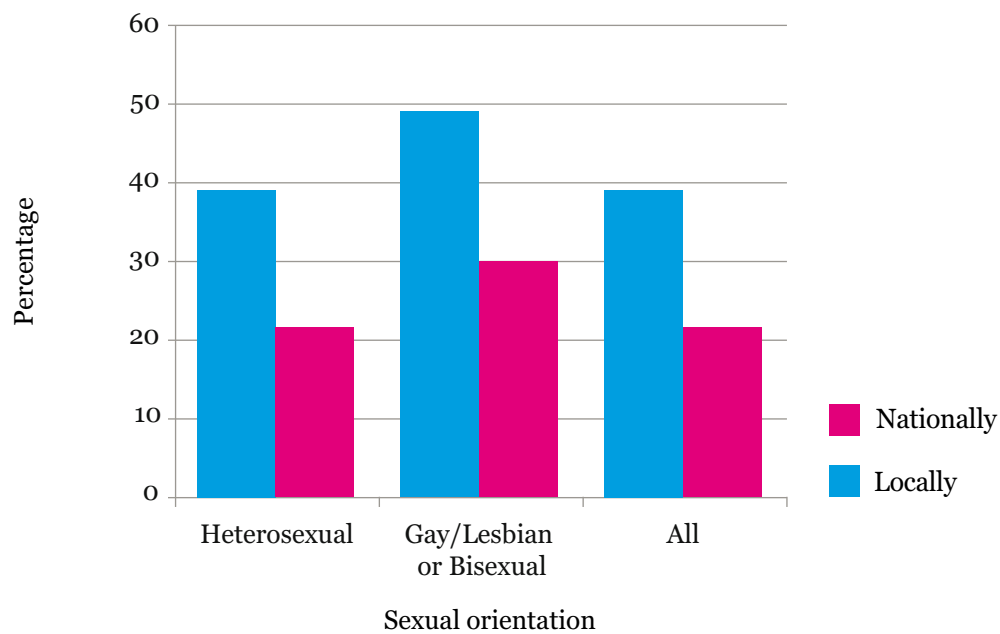
1. Ethnicity and religious affiliation figures based on the combined sample, other figures based on the core sample.

Sexual orientation

Gay/lesbian or bisexual people are slightly more likely to feel they are able to influence decisions affecting their local community than are heterosexuals (see Figure 14.2.6, below). There are no trend data, as questions relating to sexual orientation were asked for the first time in 2008/09.

⁹² CLG, 2010. Table 2.

Figure 14.2.6 Percentage who feel able to influence decisions locally and nationally by sexual orientation in England, 2008/09⁹³



Source: Citizenship Survey 2008/09.

⁹³ Taylor, E. and Low, N. 2010. Table 39.

14.3 What we know about political activity

Measure:

Percentage contacting councillor/official/national representative, attending public meetings, taking part in a demonstration or signing a petition in the last year.

How this measure works:

The data for this measure are drawn from the Citizenship Survey (published data exist for England only, although there is unpublished data for Wales). We draw on the question asking about levels of civic participation (defined as in the measure, above).

There is no equivalent survey question in the Scottish Social Attitudes Survey or the Scottish Household Survey; nor is such information available from the Living in Wales survey.

The data are disaggregated by gender and age, socio-economic background, disability (measured as limiting long-term illness (LLTI)) ethnicity, religion, and sexual orientation. There is very limited related literature for this measure in relation to transgender people, and therefore they are not covered in this section.

Overview

Levels of political activity have fluctuated over the past 8 years. Formal forms (such as contacting an MP) remain the preserve of those from higher socio-economic backgrounds, older people, and those from ethnic and religious majorities. Meanwhile, informal forms (such as taking part in a protest) are generally associated with the young and with political and cultural minorities.

What we know about the overall situation and trends

Political activity is defined in England and Wales as civic participation and involves: contacting local, regional or national representatives; attending public meetings or rallies; taking part in public demonstrations or protests; or signing petitions. More people undertake political activity of these kinds than get involved in decision-making bodies (discussed in Indicator 4). Those who are involved in the types of political activity covered by this measure are more likely to sign petitions than contact an MP directly or attend a public meeting.⁹⁴

Data collected by the Citizenship Survey since 2001 suggest that levels of engagement in these kinds of activity were relatively stable, but have fallen recently from 38% in 2008/09 to 34% in 2009/10.⁹⁵

The most common forms of activity engaged in by people who were politically active in 2008/09 were: signing a petition (60%), contacting an official working for the local council (31%), contacting a local councillor (29%), contacting their MP (18%), attending a public meeting or rally (17%), contacting a government official (5%), and attending a demonstration (4%).⁹⁶

What we know about the situation for different groups

Gender

Trends over time suggest that levels of political activity have been roughly similar between men and women since 2001 and continue to be so (at 37% and 38%, respectively in 2008/09).⁹⁷

Age

Political activity is lowest in the youngest and oldest age groups, with the highest levels found amongst 65 to 74-year-olds (at 42% – see Figure 14.3.1, below). Trends since 2001 suggest that levels of political activity have increased overall for those aged 50 and over, and decreased overall for those aged under 50.⁹⁸

⁹⁴ Agur, M. and Low, N. 2009.

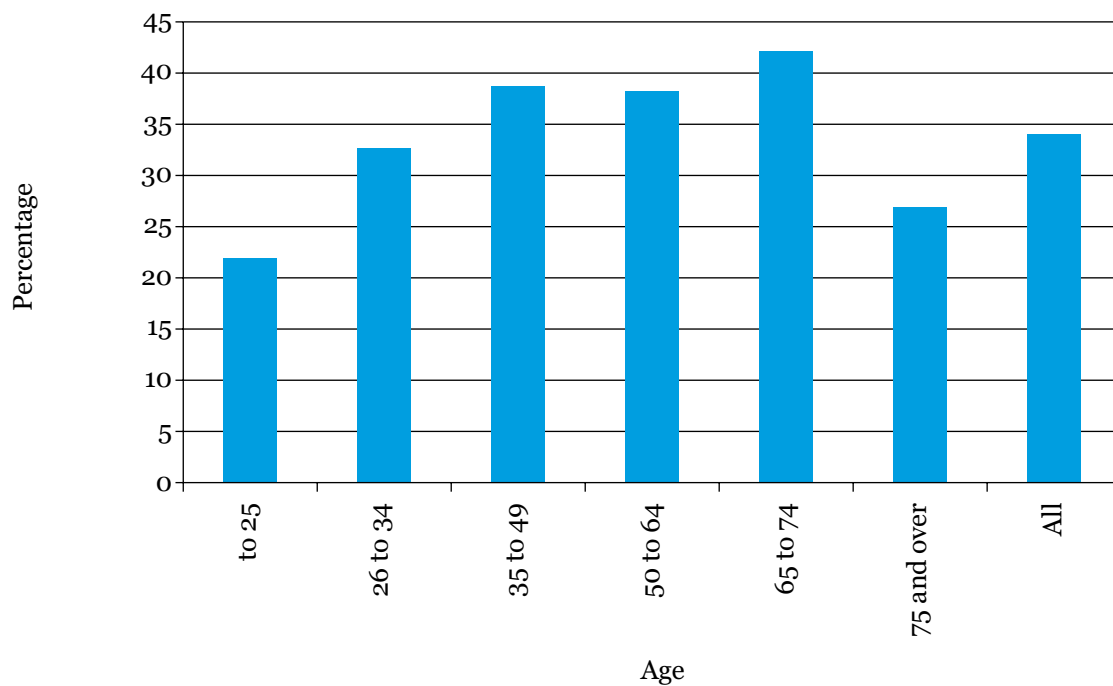
⁹⁵ CLG 2010. Page 2.

⁹⁶ Taylor, E. and Low, N. 2010. Figure 2.4.

⁹⁷ Fieldhouse, E. *et al.* 2010. Figure 3.2, page 56.

⁹⁸ Fieldhouse, E. *et al.* 2010. Figure 3.3, page 57.

Figure 14.3.1 Percentage involved in political activity at least once in the last 12 months by age in England, 2009/10⁹⁹



Source: Citizenship Survey 2009/10.

Box 14.3.1 Related issue: New forms of political engagement by the young

Research highlights the role of new technology in mobilising the young.¹⁰⁰ However, there is no indication that this has led to them engaging with other forms of political activity.

Socio-economic groups

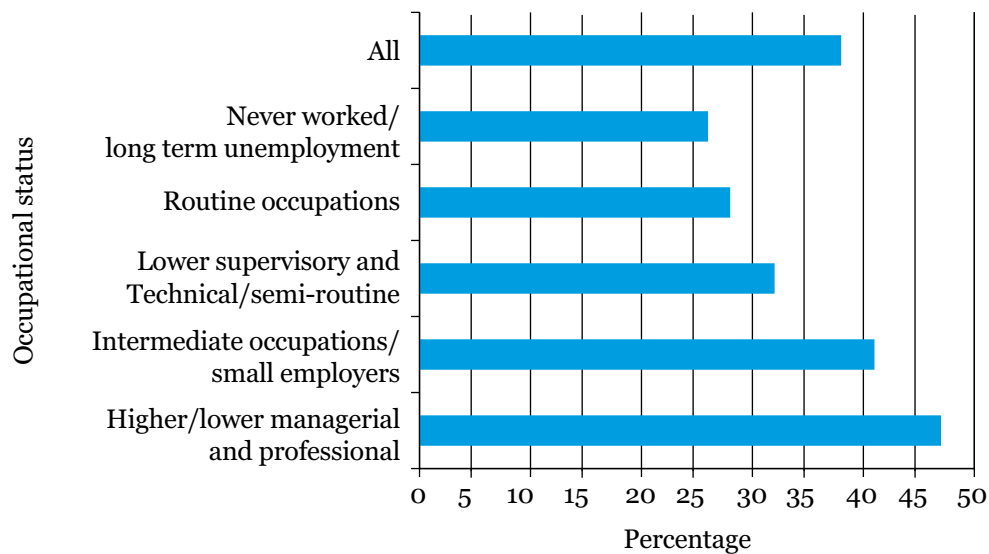
There is a clear social gradient in relation to political activity: those in managerial or professional occupations are almost twice as likely to engage in such activity as those who are long-term unemployed (see Figure 14.3.2, below).¹⁰¹

⁹⁹ CLG 2010. Table 3.

¹⁰⁰ Gibson, R. Lusoli, W. and Ward, S. 2002. *UK political participation online – the public response – a survey of citizens' political activity via the Internet*. European Studies Research Institute and University of Salford: Economic and Social Research Council.

¹⁰¹ See also Skidmore, P. 2009. *Polls Apart: Democracy in an Age of Inequality*. Compass: Thinkpieces.

Figure 14.3.2 Percentage involved in political activity at least once in the last 12 months by occupational status in England, 2008/09¹⁰²



Source: Citizenship Survey 2008/09.

Disability

Mapping trends over time, it appears that while those with limiting long-term illness (LLTI) or disabilities were less politically active than those without in 2001, they became more so from around 2003.¹⁰³

People with LLTI/disabilities and those without reported similar levels of political activity in 2009/10 (35% – down from 42% the year before – and 34% – down from 37% the year before – respectively).¹⁰⁴

Ethnicity

Political activity is higher among White people than among those from ethnic minorities (see Figure 14.3.3, below). Political activity has remained fairly constant among White people over time, but levels have fallen overall or fluctuated for ethnic minority groups.¹⁰⁵

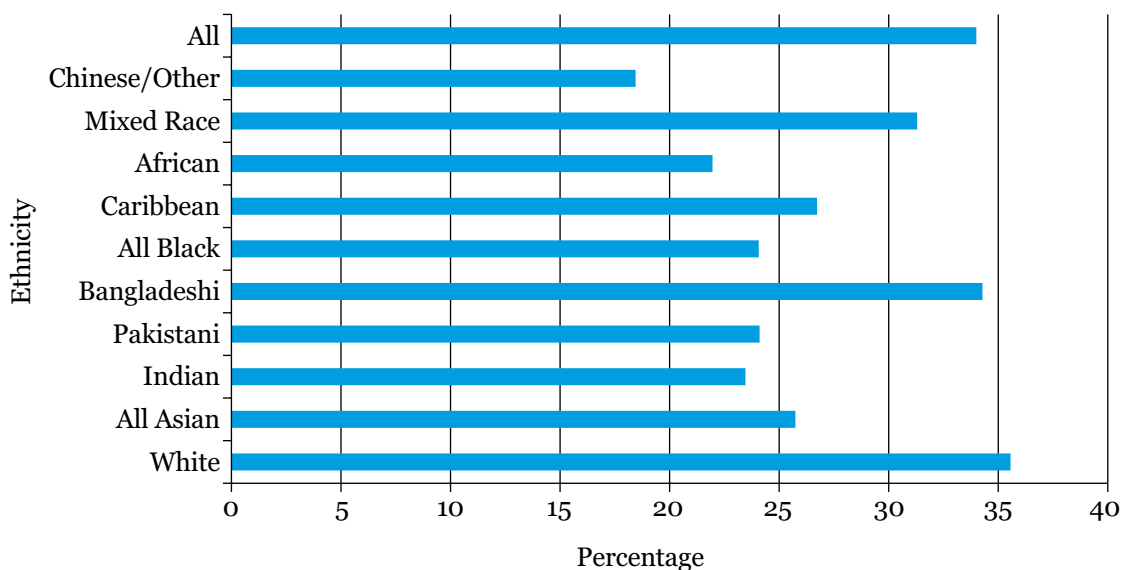
¹⁰² Taylor, E. and Low, N. 2010. Table 27.

¹⁰³ Fieldhouse, E. *et al.* 2010. Figure 3.6, page 60.

¹⁰⁴ CLG 2010. Table 3.

¹⁰⁵ Fieldhouse, E. *et al.* 2010. Figure 3.1, page 55.

Figure 14.3.3 Percentage involved in political activity at least once in the last 12 months by ethnicity in England, 2009/10¹⁰⁶



Source: Citizenship Survey 2009/10.

Note:

1. Ethnicity and religious affiliation figures based on the combined sample, other figures based on the core sample.

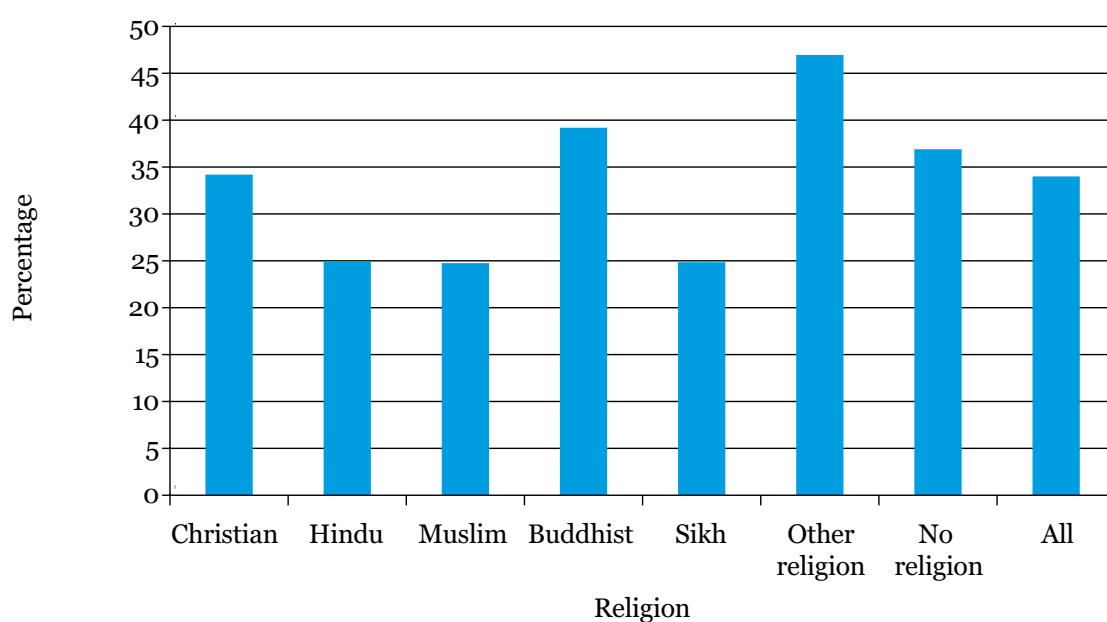
Religion or belief

Levels of political activity have stayed fairly constant among those identifying as Christian since 2001 but have fluctuated somewhat for those from other religions.¹⁰⁷ In 2009/10, Hindus, Sikhs and Muslims had a similar level of civic participation (25% were involved in some kind of political activity in the last year), which was considerably lower than that of other religious groups, including Christians (34% were involved in some kind of political activity in the last year), or those with no religion (37% – see Figure 14.3.4, below).

¹⁰⁶ CLG, 2010. Table 3.

¹⁰⁷ Fieldhouse, E. *et al.* 2010. Figure 3.4, page 58.

Figure 14.3.4 Percentage involved in political activity over the last 12 months by religion in England, 2009/10¹⁰⁸



Source: Citizenship Survey 2009/10.

Notes:

1. Ethnicity and religious affiliation figures based on the combined sample, other figures based on the core sample.
2. There were only 125 Buddhists in the sample.
3. Jewish people are included in 'other religion' due to small numbers.

Sexual orientation

LGB people are slightly more likely than heterosexual people to engage in political activity (46% compared to 38% for all in 2008/09), although this difference is not statistically significant.¹⁰⁹

However, it should be noted that people who are involved in gay activism often feel disinclined from engaging in mainstream politics because it seems unrepresentative and remote.¹¹⁰

¹⁰⁸ CLG 2010. Table 3.

¹⁰⁹ Taylor, E. and Low, N. 2010. Table 24, page 78.

¹¹⁰ Stonewall 2007. *The Equalities Review: Sexual Orientation Research Review*. London: Cabinet Office. Available at: <http://archive.cabinetoffice.gov.uk/equalitiesreview/upload/assets/www.theequalitiesreview.org.uk/sexor.pdf> accessed on 24th September 2010.

14.4 What we know about taking part in decision-making and campaigning organisations

Measure:

Percentage involved in decision-making bodies/local campaigning organisations or solidarity groups

How this measure works:

The main sources for this measure are the Citizenship Survey (for England only), the Scottish Household Survey and the Living in Wales Survey.

The Citizenship Survey data are based on a question about Civic Activism (defined as in the measure above, and described in more detail below).

We also draw on Citizenship Survey data about volunteering, which – we suggest – highlight some trends in involvement with decision-making bodies.

The Scottish and Welsh data relate to volunteering for particular kinds of local organisation or campaigning body (described in more detail below).

All three surveys collect information about gender, age, socio-economic background, disability, ethnicity and religion although such disaggregation is not always available given small sample sizes. The English data also provide information in relation to sexual orientation. There is very limited related literature for this measure in relation to transgender people, and therefore they are not covered in this section.

The measure focuses on those activities undertaken with a view to shaping decisions, and on active participation rather than ‘armchair’ membership.

Overview

Patterns of engagement in decision-making and campaigning vary. Even though this may partly be to do with preference, there is also the risk that some bodies become exclusive, leaving those who are (or who feel) different feeling that they do not fit in.

What we know about the overall situation and trends

People are less likely to be involved in decision-making and campaigning bodies than they are to engage in other forms of political activity.

In England, the Citizenship Survey question on civic activism asks people if they have been a governor, councillor, magistrate or special constable in the last year. It also asks if people have been a member of a group making decisions in the last 12 months, in relation to:

- local services for young people
- area regeneration
- tenants' group
- local crime response group
- local health group
- local education group.¹¹¹

In Scotland, respondents are asked in the Scottish Household Survey if they have been involved in the last 12 months on a voluntary basis in organisations that include:

- school board or parents-teachers association
- community council
- social inclusion partnership or community planning partnership
- tenants' group, housing association or residents association
- trade union.¹¹²

¹¹¹ Taylor, E. and Low, N. 2010. Table 18.

¹¹² Alkire, S. *et al.* 2009. Chapter 13. In the development of the Equality Measurement Framework indicators, the technical phase was to check sample sizes rather than generate final data analysis tables, so these are preliminary results for group means and the significance of the variations in group means, as well as a report on sample sizes. Significance tests are reported at the 95 per cent level. A series of cross-checks are required at the next stage of the development of the Equality Measurement Framework before final data tables can be produced.

In Wales, respondents are again asked about being involved in a voluntary basis in a range of campaigning organisations in the last 3 years and include:

- political
- animals/environment
- justice/human rights
- community/neighbourhood
- citizens groups
- trade union.¹¹³

What we know about the situation for different groups

Gender

In England, around 1 in 10 people join decision-making bodies, with membership equally comprised of men and women.¹¹⁴ However, men are consistently more likely than women to serve on committees.¹¹⁵

An analysis of the Citizenship Survey data on volunteering highlight a gender difference in relation to formal volunteering, which may reflect the kinds of decision-making body that people join. For example, women who volunteer formally are more likely to be involved in organisations relating to children's education and schools (42% compared with 23% of men); health, disability or social welfare (32% compared with 21% of men); or helping the elderly (18% compared with 13% of men). By contrast, men who volunteer are more likely to be involved in sports (58% compared with 47% of women) and politics (9% compared with 5% of women).¹¹⁶

The patterns are similar in Wales.¹¹⁷

¹¹³ Alkire, S. *et al.* 2009. Chapter 13. In the development of the Equality Measurement Framework indicators, the technical phase was to check sample sizes rather than generate final data analysis tables, so these are preliminary results for group means and the significance of the variations in group means, as well as a report on sample sizes. Significance tests are reported at the 95 per cent level. A series of cross-checks are required at the next stage of the development of the Equality Measurement Framework before final data tables can be produced.

¹¹⁴ CLG 2010. Table 3.

¹¹⁵ Fieldhouse, E. *et al.* 2010. Figure 3.8, page 63.

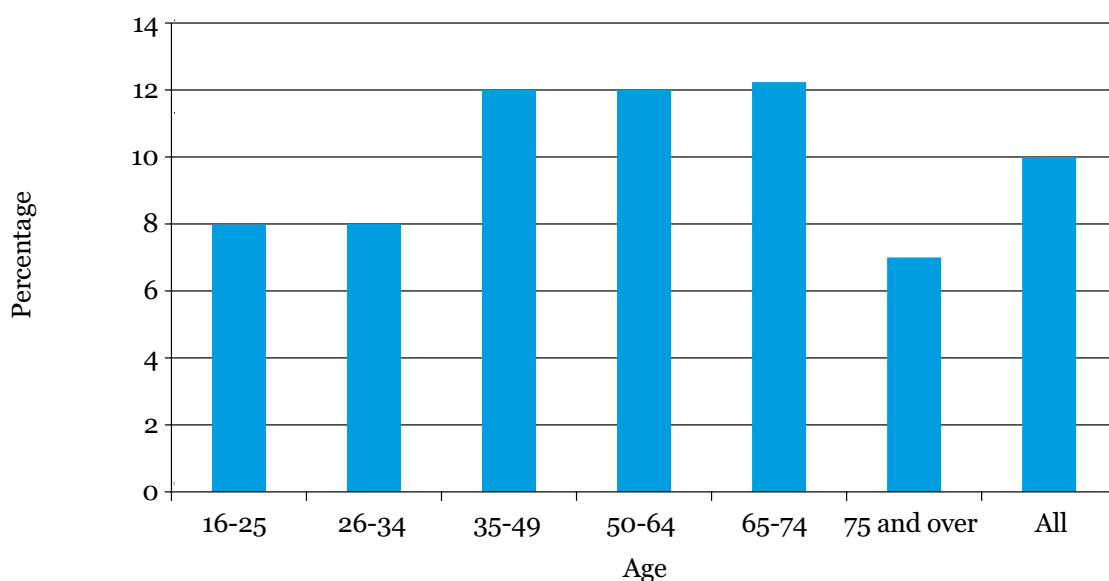
¹¹⁶ Drever, E. 2010. *Citizenship Survey 2008/09: Volunteering and charitable giving topic report*. London: CLG. Page 27.

¹¹⁷ Living in Wales Survey 2008 data. Table 4.3. Available at: <http://wales.gov.uk/docs/statistics/2009/090430liw08volunteeringen.xls> accessed 25/08/10.

Age

People aged 35 to 74 are more likely to be involved in decision-making bodies than those in other age groups. In 2009/10, 12% of people aged between 35 and 74 said that they had been involved in such bodies, compared to 8% of those aged between 16 to 34 (see Figure 14.4.1, below).

Figure 14.4.1 Percentage involved in decision-making body in the last 12 months by age in England, 2009/10¹¹⁸



Source: Citizenship Survey 2009/10.

In Wales, participation in campaigning activity follows a similar age distribution to that seen in England.¹¹⁹

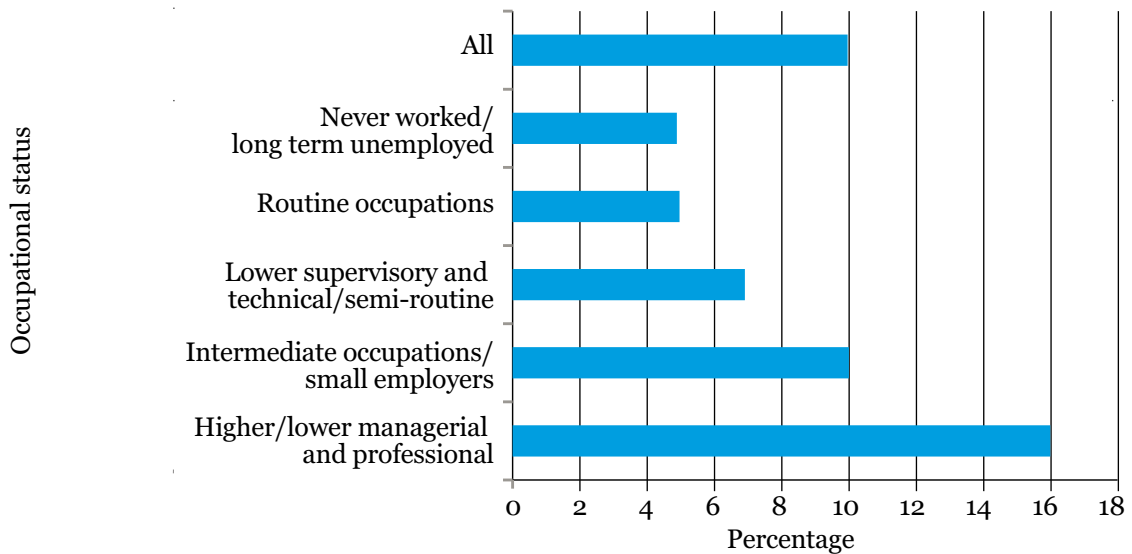
Socio-economic groups

People in managerial and professional occupations are around three times more likely than those in routine occupations to be involved in decision-making bodies, with 16% of those in managerial/professional occupational groups saying that they had been involved in such bodies in 2009/10, compared to 5% of those in routine occupations (see Figure 14.4.2, below).

¹¹⁸ CLG 2010. Table 3.

¹¹⁹ Living in Wales Survey 2006 data, supplied in private correspondence by the Welsh Assembly Government.

Figure 14.4.2 Percentage involved in decision-making bodies in the last 12 months by occupation in England, 2008/09¹²⁰



Source: Citizenship Survey 2008/09.

Similar patterns are found in preliminary analysis for the Equality Measurement Framework of data for Scotland.¹²¹ In Wales, data spanning three years suggest that people working in the professions or in higher management are over four times more likely to be involved in local or national campaigning activity than those in semi-routine occupations.¹²²

¹²⁰ Taylor, E. and Low, N. 2010. Table 27.

¹²¹ Alkire, S. *et al.* 2009. Chapter 13. In the development of the Equality Measurement Framework indicators, the technical phase was to check sample sizes rather than generate final data analysis tables, so these are preliminary results for group means and the significance of the variations in group means, as well as a report on sample sizes. Significance tests are reported at the 95 per cent level. A series of cross-checks are required at the next stage of the development of the Equality Measurement Framework before final data tables can be produced.

¹²² Living in Wales Survey 2006 data, supplied in private correspondence by the Welsh Assembly Government.

Disability

Disabled and limiting long-term illness (LLTI) people are equally as likely to be involved in decision-making bodies in England – it is estimated that 10% of those from each group were involved in such bodies in 2009/10.¹²³

Preliminary analysis for the Equality Measurement Framework of Scottish data for 2006 suggest that those without disabilities were twice as likely as those with a disability or limiting long-term illnesses to be involved (4%, compared to 2%).¹²⁴

In Wales, a similar proportion of disabled and non-disabled people were involved in local or national campaigning (6% of those with a disability or limiting long-term illness and 7% of those without).¹²⁵

Ethnicity

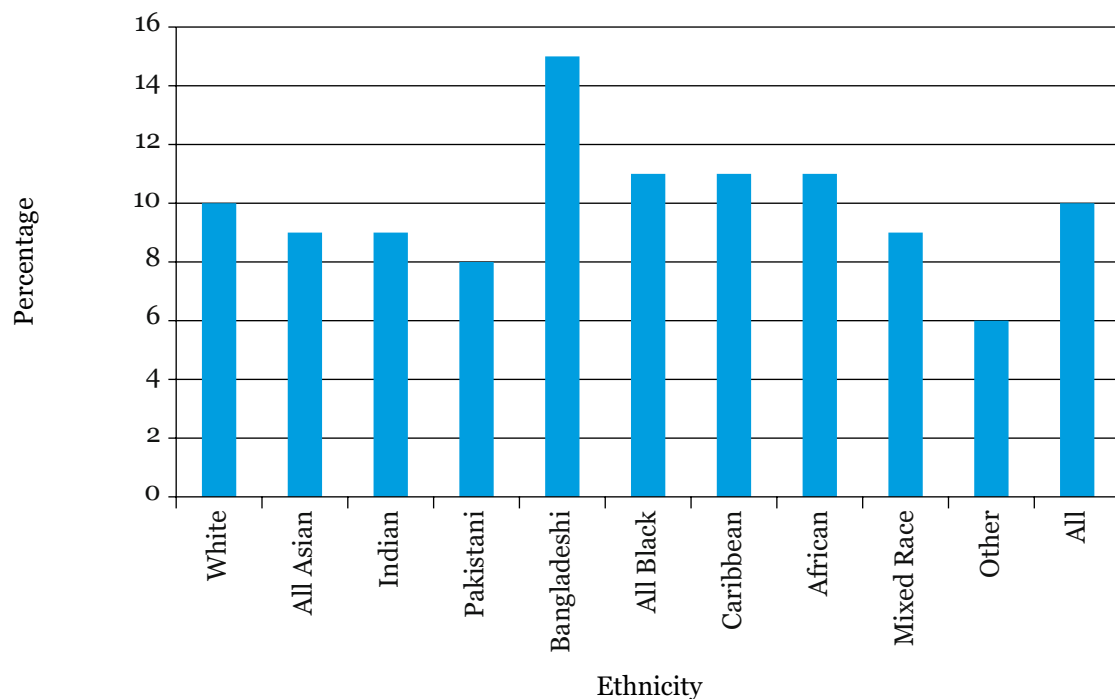
While a large proportion of those from ethnic minority groups in England say that they have been involved in decision-making bodies in the last year (see Figure 14.4.3), these differences are not statistically significant. However, large differences exist between White people – 10% of whom took part in such bodies in 2009/10 – and those identifying as Chinese/other (6%).

¹²³ CLG 2010. Table 3.

¹²⁴ Alkire, S. *et al.* 2009. Chapter 13. In the development of the Equality Measurement Framework indicators, the technical phase was to check sample sizes rather than generate final data analysis tables, so these are preliminary results for group means and the significance of the variations in group means, as well as a report on sample sizes. Significance tests are reported at the 95 per cent level. A series of cross-checks are required at the next stage of the development of the Equality Measurement Framework before final data tables can be produced.

¹²⁵ Living in Wales Survey 2006 data, supplied in private correspondence by the Welsh Assembly Government.

Figure 14.4.3 Percentage involved in local decision-making bodies by ethnicity in England, 2009/10¹²⁶



Source: Citizenship Survey, 2009/10.

Note:

1. Ethnicity figures based on the combined sample, other figures based on the core sample.

Similar proportions of Bangladeshi and White respondents took committee roles in decision-making bodies in England in 2008/09. However, while the proportion of White people in such positions has remained fairly constant since 2003, the proportion of Bangladeshi people taking leading roles has grown over this period, and the proportion of Black African people in such positions has fallen.¹²⁷

¹²⁶ CLG 2010. Table 3.

¹²⁷ Fieldhouse, E. *et al.* 2010. Figure 3.7, page 62.

An analysis of the Citizenship Survey data highlight patterns in formal volunteering which may reflect the kinds of decision-making body that people join. For example, White people who formally volunteer are more likely than those from ethnic minority groups to be involved in organisations relating to sports and exercise (53% compared with 37%), local community and neighbourhood groups (23% compared with 18%), and trades unions (7% compared with 4%). Meanwhile, people from ethnic minority groups who formally volunteer are more likely than their White counterparts to take part in organisations relating to religion (56% compared with 31%), children's education and schools (39% compared with 33%), justice and human rights (13% compared with 6%) and politics (10% compared with 6%).¹²⁸

Preliminary analysis undertaken for the development of the Equality Measurement Framework suggests that in Scotland and Wales, White people are more involved in local organisations and campaigning bodies than ethnic minorities, but small sample sizes mean that it is not known whether the differences are statistically significant.¹²⁹

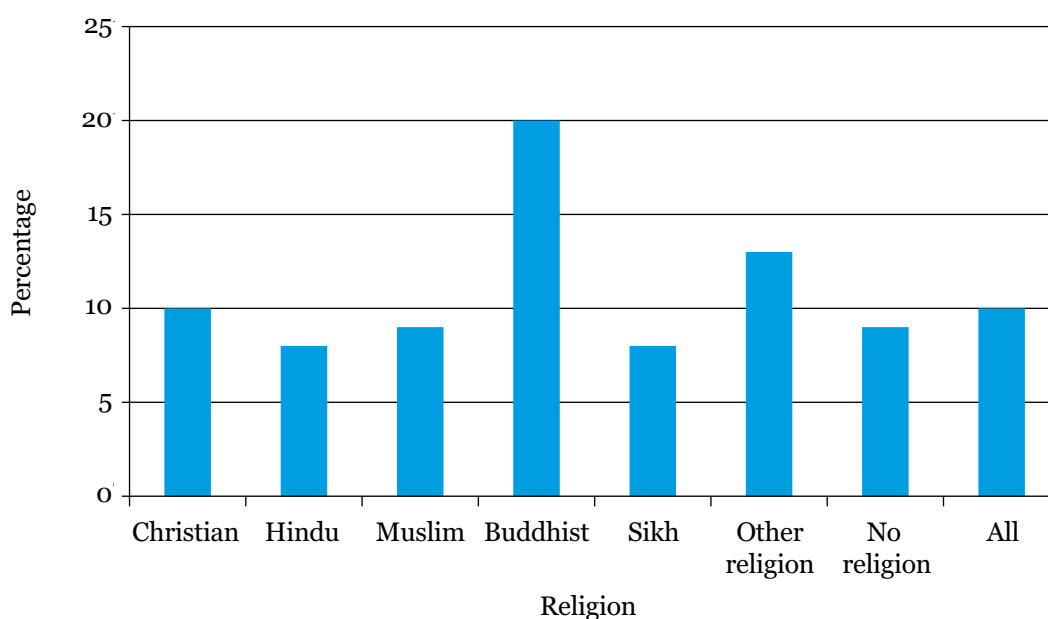
Religion or belief

Data from England and Wales suggest there are very slight differences in the levels of engagement with decision-making bodies by people from different religious groups, although these are not statistically significant (see Figure 14.4.4, below).

¹²⁸ Drever, E. 2010. Page 27.

¹²⁹ Alkire, S. *et al.* 2009. Chapter 13. In the development of the Equality Measurement Framework indicators, the technical phase was to check sample size rather than generate final data analysis tables, so these are preliminary results for group means and the significance of the variations in group means, as well as a report on sample size. Significance tests are reported at the 95 per cent level. A series of cross-checks are required at the next stage of the development of the Equality Measurement Framework before final data tables can be produced.

Figure 14.4.4 Percentage involved in decision-making bodies classified by religion in England, 2009/10¹³⁰



Source: Citizenship Survey, 2009/10.

Notes:

1. Ethnicity and religious affiliation figures based on the combined sample, other figures based on the core sample.
2. There were only 125 Buddhists in the sample.
3. Jewish people are included in 'other religion' due to small numbers.

Preliminary analysis for the Equality Measurement Framework suggests that in Scotland, Christians and people with no religion are more involved in local organisations than those from religious minorities, but small sample sizes mean that the differences are not necessarily statistically significant.¹³¹

¹³⁰ CLG 2010. Table 3.

¹³¹ Alkire, S. *et al.* 2009. Chapter 13. In the development of the Equality Measurement Framework indicators, the technical phase was to check sample sizes rather than generate final data analysis tables, so these are preliminary results for group means and the significance of the variations in group means, as well as a report on sample sizes. Significance tests are reported at the 95 per cent level. A series of cross-checks are required at the next stage of the development of the Equality Measurement Framework before final data tables can be produced.

In Wales, people from religious minorities are slightly more likely to be involved in campaigning activities than those with no religion or from Christian backgrounds, although the difference is not statistically significant.¹³²

Sexual orientation

Gay, lesbian and bisexual people (15%) were slightly more likely than straight people (10%) to be involved in decision-making bodies in 2008/09, although this difference was not statistically significant.¹³³

¹³² Living in Wales Survey 2006 data, supplied in private correspondence by the Welsh Assembly Government.

¹³³ Taylor, E. and Low, N. 2010. Table 24.

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Part III: Findings and challenges

Chapter 15

Improving the evidence base

The indicators in this Review, selected on the basis of extensive consultation, highlight areas of life where poor outcomes affect people's ability to flourish and play a full role in society. Better understanding of patterns of inequality affecting particular groups allows government bodies and public authorities to target resources efficiently and proportionately in a time of economic and public spending constraint and allows us to chart progress over time.

There have already been some helpful changes in the way that data are collected. The Office for National Statistics (ONS) harmonisation programme is establishing standards for greater consistency in the way data are collected. The introduction of a sexual identity question onto the Integrated Household Survey and surveys in Scotland and Wales will create a step change in our understanding of the issues facing lesbians, gay men and bisexual (LGB) people.

Nevertheless, as is repeatedly noted in this Review, there are areas where data provision is not yet sufficient. Appendix 4 provides an overview of the kinds of data that have been used in this Review for England, Scotland and Wales in relation to the indicators.

We first set out some strategies that would allow us to get more from the data we already collect: these would allow an enormous improvement in available evidence from a relatively small amount of expenditure. Many existing gaps would be filled by implementing these strategies, enabling us to track progress in the areas covered in this Review. We then set out some priority areas for data development that would greatly improve the evidence necessary for tracking equality and developing well-targeted policy.

Getting more out of the data we already collect

Britain has much to be proud of in terms of its record on collecting and presenting equality data. This reflects Britain's long-standing aspiration to be a tolerant society in which diverse groups can flourish. Recently we have improved our understandings of the broad range of factors that impact on life chances beyond socio-economic ones. There has also been an improved understanding of how equality characteristics and socio-economic circumstances combine to create very particular poor outcomes. However, as they currently stand, national data sources often do not allow us to determine the severity and scale of such forms of detriment for particular groups, or to estimate the cost of not tackling them. A number of strategies could effectively improve this.

Regular systematic pooling of data across years

Progress against these indicators needs to be measured over time if gradual change is to be understood. A moving average of the last 3 years would often be sufficient to allow us to monitor the country's progress towards the sorts of society envisaged in the 2006 and 2010 Equality Acts.

The regular pooling of data over 3 years, annually up-dated and published would allow reasonably recent data to be available for groups where the annual sample size is otherwise low, and would save on the cost of increasing the overall size of the survey or providing boosters. This process would be especially helpful in improving the coverage of equality data in Scotland and Wales where the overall size of populations is much smaller.

Such pooling is presently carried out on an ad hoc basis, if at all, meaning that some of the available equality data is often very old. Moreover, the costs of such one-off exercises are liable to be higher than they would be if this was done systematically with data published regularly for the equality grounds protected in the Equality Acts. In terms of the areas covered by this Review, some of the improvements that this could generate include:

- better ethnicity and religion data for Scotland and Wales
- better 'intersectional data' – for example, combining socio-economic status and ethnicity.

Improving equality group coverage

The continued development of harmonised questions that define the equality groups¹ and then their inclusion on all relevant surveys would greatly improve data availability. If there was a requirement to do the pooling described above, the decision to include a question on any particular survey would then relate to whether or not over 3 years sufficient sample size would be generated, rather than whether it would generate useable data in a single running of the survey.

¹ The protected grounds in the 2010 Equality Act are age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, sexual orientation.

In addition, three specific improvements are needed:

- ***Disability data disaggregated by type of impairment:*** Some useful categories are used to record the nature of special needs in the education system. A similar level of category are proposed for the Scottish Census (though unfortunately not for the England and Wales one) and are used within the health sector and by the Department for Work and Pensions (DWP). The Office for Disability Issues (ODI) and ONS are currently developing a suite of questions, since drawing conclusions from the general ‘disabled’ data currently available on most of the indicators in this Review is particularly problematic.
- ***Older people and younger people:*** Data for people over 65 or above working age needs improving to increase our understanding of this growing part of the population compared to younger adults. This is also true for young people under the age of 16.
- ***Transgender and transsexual people:*** There are no reliable population data on transgender people, or the group within this of transsexual people and very little quantitative data at all. The numbers transitioning at any point in time are very small, so much of the data on transgender or transsexual people will need to be derived through administrative and/or non-population surveys (see below). There is, however, a case for inclusion in the largest surveys of some questions to define whether a person is transitioning or has transitioned in the past, or considers themselves transgender in any way. At the very least, this would give a better estimate of the diversity within transgender and transsexual populations than current sources allow, particularly if there is more data pooling as described above. This will require harmonised questions for defining transgender and transsexual people to be developed. It will also require the question to be administered in the same way as the sexual identity question, safeguarding the confidentiality of the response in a household situation. Although such data will never be the main source of data on transgender or transsexual peoples’ experience, it would be a very valuable part of the evidence.

Although including harmonised questions on groups where they did not previously exist is in a sense new data collection, the objective would be to make better use of the other data collected in the survey for equality purposes.

Finally in some cases there is simply a lack of presentation of data by equality group rather than a problem of the data not existing or sample sizes being too small. For example in many instances ethnicity data are given only for ‘white’ and ‘non-white’ even though some (though not all) individual ethnic groups have large enough samples to make the data valid. The range of groups for which data can be provided will obviously increase if the pooling is done as suggested above. It is important that as much data is published as is statistically robust in order to make the most of data collected.

Continuous systematic collection of small-scale and qualitative data

Given the small size of certain groups and the complexity of some issues, large-scale survey data will never produce all the insights required. Therefore there is a need to collate systematically, with appropriate quality control, qualitative and small-scale survey data on the topics covered by the indicators. Many such studies exist. It is particularly important for groups that are relatively small in the population or have been less visible within data than other groups. Although the collection of new data are required for some of these groups (see below) and the pooling of data as discussed above can assist, at the moment key areas in which making effective use of small scale and qualitative data is particularly important include:

- Non-household or mobile groups that are marginalised in multiple ways and are shown in this Review to experience multiple poor outcomes. Examples are those in institutional care or Gypsies and Travellers
- Religious groups, LGB people, transgender and transsexual people who are poorly represented at the moment.
- Groups that are difficult to capture quantitatively at the moment in particular geographies such as ethnic minorities or LGB people in Scotland and Wales
- Groups that experience multiple forms of detriment, for example where low educational attainment combines with disability leading to particularly low employment rates.

Better collection, capture and presentation of other data

Because the above sources can never create all the knowledge required for better targeting of public policy and resources, systematic capture of other intelligence is needed. Regular work is required to ensure appropriate conclusions can be drawn from such evidence and where possible improvements made to address issues such as representativeness of samples or groups, comparability, consistency of data collected and frequency and completeness of data collection. Key areas for further development include:

- **Administrative data:** There are many administrative data that could help with providing intelligence on poor outcomes for different groups. Very often data are collected from help-lines, tribunals, legal cases etc but are not organised for the purpose of establishing where outcomes vary for different groups of people. A central resource, in partnership with a variety of organisations, that draws insights from this data in relation to the equality indicators would be helpful. An opportunity to move towards this way of working is the Memorandums of Agreement that the Equality and Human Rights Commission is developing with other regulators.

In general, the administrative data that could provide insights into the equality indicators are often limited because equality monitoring information (whether an individual is in one or more of the equality groups protected in the Equalities Act) is not included. In some instances more could be done to aggregate data

from service providers. This is particularly important in relation to areas or groups where survey data are inevitably lacking. For example, the employment status of transgender people may be collected by one or more of the major clinics, but is not done so in a consistent way and is not aggregated to a total picture.

ONS are currently considering using administrative data as a source for future Censuses after 2011. This offers the opportunity for further collection of administrative data to serve equality purposes.

- ***Better consistency and aggregation of local data:*** A wealth of both survey and administrative data is collected at a local level. Some progress has been made by the Local Government Improvement and Development Agency in examining what data are collected. This needs to be built on with strategies to improve data to be consistent in definitional terms across different areas. It can then be aggregated more easily to create national and benchmarking data.
- ***Better use of private sector survey data:*** Survey companies in the private sector collect a wealth of data for clients or as part of regular services that could provide further insights in the areas covered in this Review. In particular information is available about people's experience of goods and services and public opinion about equality and diversity issues. Much of these data are not used currently but, where private organisations would be willing to share it, it could be extracted in a form that would not be commercially sensitive.

Next steps

Strategies are needed which encompass these recommendations so that we can make better use of the data already being collected across the country. Resources are also needed: for example agreements between data providers and commissioners will be needed to ensure regular pooling and publication of data and analysis – possibly online.

This would not be without cost, but would be cost-effective in engaging a wide range of data providers and commissioners to get better value from the country's data resources. It would help with the collective responsibility to monitor progress on equality so that evidence based 'in-flight corrections' can be made to the country's policy development and targeting of resources. The Equality and Human Rights Commission is committed to developing further the Measurement Frameworks that underlie this Review and which will be the foundation for the future ones on human rights and good relations.

Priorities for new data

There are also a number of broad priorities in terms of data collection or use. The critical areas are:

Non-household groups

Some improvements have been made in recent years, but often only in the context of one-off surveys or survey modules. Regular monitoring of outcomes for people in institutional settings or who are mobile, such as Gypsies and Travellers or immigrants is relatively poor compared to the household population. The small-scale studies that do cover these groups suggest that they are often particularly vulnerable to violence or exclusion from education. Improving data collection for these groups will be particularly important from a human rights perspective as well as an equality one.

Transgender and transsexual data

Large-scale national surveys are unlikely ever to yield adequate evidence on these groups in relation to the indicators covered in this Review. It is suggested that consideration be given to developing a 3-yearly bespoke survey of transgender, including transsexual groups: this would not be a population survey but could reach a sufficient number of transgender people to provide evidence on respondents' experiences in relation to the areas covered by the indicators.²

Data on the 'individual, family and social life' and the 'identity, expression and self respect' domains

The information included in this Review which reflects these groups of indicators is very limited. In the consultation work completed for the Equality Measurement Framework, there was a consensus that these are important areas of equality in enabling people to flourish in modern Britain. Those aspects with limited data include:

- 'Being able to participate in key social and cultural occasions that matter to you'
- 'Being able to be yourself'
- 'Being able to form and pursue the relationships you want'
- 'Freedom to practice your religion or belief'
- 'Cultural identity and expression'
- 'Ability to communicate in the language of your choice'
- 'Self respect'
- 'Freedom from stigma'

² A fuller discussion of this is provided in Alkire, S. Bastagli, F. Burchardt, T. Clark, D. Holder, H. Ibrahim, S. Munoz, M. Terrazas, P. Tsang, T. and Vizard, P. 2009. *Developing the Equality Measurement Framework: selecting the indicators*. Research Report 31. Manchester: Equality and Human Rights Commission. Available at: <http://www.equalityhumanrights.com/key-projects/equality-measurement-framework>

In the report on the Measurement Framework published by the Commission last year,³ questions to assess these areas were identified in many cases, but they do not yet appear on national surveys or with sufficient detail to distinguish the different experiences of equality groups.

Children

A shortlist of indicators and possible measures for children has been developed, covering the same domains as the Equality Measurement Framework for adults – and as with this there has been considerable consultation with stakeholders. The Equality and Human Rights Commission will be publishing the indicator framework for children shortly.⁴ Overall, there are fewer available measures for children than for adults and given the evidence on the importance of early experiences to future life chances, this is a critical area for future data development.

Autonomy

In the consultations around the Equality Measurement Framework, autonomy was seen as a critical element in enabling people to flourish. It is defined as ‘the amount of choice, control and empowerment an individual has over their life.’ The Equality and Human Rights Commission has worked with the Government Equalities Office (GEO) in commissioning work on measuring autonomy, carried out by the London School of Economics and Oxford University which has recently been published.⁵

Three aspects of autonomy were identified as being important and measurable. These are self reflection, active decision-making, and having a wide range of high quality options. Barriers to these are, respectively, conditioned expectations, passivity or coercion, and structural constraints or lack of information, advice and support. In the health and independent living fields there are well-developed measures of autonomy. Questions have been developed by the project in the areas of household expenses, work/life balance and relationships. These have been piloted among over 1,000 respondents in the ONS Opinions Survey and cognitively tested. As a result a template suite of questions has been developed to measure all aspects of autonomy. These now need to be included in surveys and are particularly relevant in relation to future Reviews.

³ Alkire, S. *et al.* 2009.

⁴ Tsang, T. and Vizard, P. (forthcoming). *Developing the Equality Measurement Framework: Selecting the Indicators for Children and Young People*. CASE.

⁵ Burchardt, T. Evans M. and Holder H. (forthcoming). *Measuring inequality: Autonomy: the degree of empowerment in decisions about one’s own life*. CASE/University of Oxford.

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Chapter 16

Summary of findings

In part I of this Review we charted the evolution of British attitudes to identify differences and showed that, despite the undoubted presence of many kinds of residual prejudice and bigotry, we are becoming a largely more tolerant and open-minded people. Most of us are far more at ease with human difference than were our parents. Alongside this change, the fortunes of some groups have improved markedly with social, economic and technological change.

In Part II, however, the evidence shows clearly that whatever progress has been made for some groups in some places, the outcomes for many people are not shifting as far or as fast as they should. To make matters worse, the current economic and social crises threaten to widen some equality gaps that might have closed in better times. And finally, without corrective action longer term trends, such as technological and demographic changes are likely to entrench new forms of inequality without some corrective action.

In this chapter we set out what we regard as some of the most significant findings for Part II of this Review, with each finding illustrated by a selection of the key data. These data points are intended to focus attention where energy and resources are needed to achieve progress.

The selection of data points listed reflects a process of filtering which is more fully explained at the start of Chapter 17; but in essence we have tried to consider a series of factors such as: human rights implications; prevalence - ie how many people does an equality gap affect; and its impact on life chances. A disadvantage may be rare but its impact so severe that it needs to be tackled, if only for a small number of people.

We also concentrate here on highlighting firm data from the evidence in Part II of the Review. This inevitably means that some groups are not as visible as we would wish. We address the issue of data gaps in Chapter 15.

Some of the findings that follow will be familiar, documented over many years of academic and research study, but are no less important for that; an old injustice is still an injustice. For example, the pay gap between men and women remains significant, and progress to eliminating it may have stalled. Other findings will surprise. All should provoke action.

16.1 Life

Significant findings

Men still have lower life expectancy than women, though this is changing, and those in higher socio-economic groups can expect to live longer. Because of the gender gap in life expectancy a group of older people which is predominantly female is emerging. Partially as a result, women are expected to experience more years of ill health.

Headline data

Data: Men and women in the highest socio-economic group can expect to live up to 7 years longer than those in the lower socio-economic groups (based on life expectancy at birth).

Data: Women live around 4 years longer than men but the gap has been shrinking and is expected to shrink further over time.

Data: Black African women who are asylum seekers are estimated to have a mortality rate 7 times higher than for White women, partly due to problems in accessing maternal healthcare.

Significant findings

Infant mortality rates are higher among some ethnic groups than others.

Headline data

Data: Black Caribbean and Pakistani babies are twice as likely to die in their first year than Bangladeshi or White British babies.

Significant findings

Some groups are more likely to be victims of homicide than others, particularly black people and infants aged under 1.

While a large proportion of homicide victims are men, women are more likely than men to be killed by partners, ex-partners, or family members.

A large number of homicides can be attributed to identity-based hate.

Headline data

Data: Ethnic minorities were the victims of around a quarter of homicides recorded in England and Wales between 2006/07 and 2008/09: just over half of these ethnic minority victims were Black.

Data: Infants under the age of 1 are more likely to be a victim of homicide than any other age group: one child aged under 16 died as a result of cruelty or violence each week in England and Wales in 2008/09 – two-thirds of them aged under five.

Data: in 2008/09, partner violence (including by ex-partners) accounted for 53% of female and 7% of male homicides in England and Wales. In the same year, partner violence (including by ex-partners) accounted for 46% of female and 7% of male homicides in Scotland.

Data: Over 70 homicides that occurred in England and Wales between 2007/08 and 2009/10 were charged as resulting from racially or religiously aggravated, transphobic or homophobic, or disability related hate crimes.

Significant findings

Suicide overall has fallen, but is concentrated among certain groups. Suicide rates remain high among young men. Small-scale studies suggest that among some groups, including those who are carers, lesbian, gay, bisexual and transgender people, self-harm and suicide may be relatively very high.

The background of abuse, drug-addiction and mental illness of many entering institutions such as prisons has led to an increased risk of self-harm and self-inflicted deaths in such contexts.

Headline data

Data: Three times as many men as women commit suicide, and rates are particularly high for younger men aged 25-44.

Data: Evidence suggests that both LGB and transgender people may have an increased risk of attempted suicide.

Data: Self-inflicted deaths (which include unintentional death for example through drug use) are more common among pre-sentence prisoners than across the rest of the prison population.

Significant findings

Rates of accidents appear to be declining over time, but some groups are much more likely to be involved in accidents than others.

Headline data

Data: Almost all people killed at work are men: only four fatalities (out of 129) at work in 2008/09 were women.

Data: Children from ethnic minorities are up to twice as likely to be involved in road traffic accidents whilst walking or playing; Children with hearing difficulties are 10 times as likely.

Significant findings

Geography plays an important role in life expectancy and the likelihood of committing suicide. In particular, Scotland has very poor outcomes.

Headline data

Data: In England and Wales, men and women living in the most deprived areas are twice as likely to commit suicide as those in the least deprived.

Data: Life expectancy in Scotland ranges from nearly 3 years lower than England at the widest point (life expectancy for men at birth), although the gap closes over the age range.

Data: Two and a half times more young men (25-34) commit suicide in Scotland as in England.

16.2 Legal and physical security

Significant findings

Trends measured in crime surveys suggest that levels of violent crime are falling overall in England and Wales: this is not reflected in the number of incidents targeting particular groups such as hate crime and 'intimate violence' (including rape, domestic and partner abuse).

Headline data

Data: Recognition in law of hate crimes based on disability, sexual orientation or transgender status is relatively new: there is now more reliable data about the incidence of racially and religiously motivated crime, which shows that it remains a persistent issue.

Data: Although levels of 'less serious sexual assault' have fallen dramatically in England and Wales since 2005/06, levels of rape have remained stable over this period.

Data: Levels of domestic and partner abuse recorded in crime surveys have fallen only slightly. The number of cases being reported to the police or referred for prosecution is rising.

Significant findings

The prison population in England and Wales is growing. Ethnic minorities are substantially over-represented in the custodial system in England and Wales. Evidence suggests that many of those who face sentences have mental health issues, learning disabilities, have been in care or experienced abuse.

Headline data

Data: The number of women prisoners has nearly doubled since 1995 in England and Wales, and since 2000 in Scotland: currently around 5% of prisoners are women. There is evidence that a higher proportion of women in prison have experienced domestic violence than have women in the population as a whole.

Data: On average, five times more Black people than White people are imprisoned in England and Wales, where 1 in 4 people in prison is from an ethnic minority background.

Data: Muslim people currently make up 12% of the prison population in England and Wales.

Data: There is now greater disproportionality in the number of Black people in prisons in Britain than in the USA.

Significant findings

Women are disproportionately affected by sexual assault and domestic abuse. People with mental health conditions report higher than average levels of abuse – as do LGB people. There has been a large rise in the number of rapes of children aged under 16 reported to the police.

Domestic violence has a higher rate of repeat-victimisation than any other violent or acquisitive crime. It is under-reported in general, particularly amongst women from ethnic and religious minority communities. It is also under-reported by disabled women abused by but dependent on their carers. Evidence suggests new immigrants and asylum seekers may not know what support is available.

The number of rape cases being prosecuted and convicted has not kept pace with the increase in the number of rape cases reported to the police since 2002: the attrition rate is significant and overall the reporting and conviction rate is stubbornly low.

Headline data

Data: Women experience over three-quarters of domestic violence and sexual assault, and encounter more extreme forms than do men.

Data: 1 in 4 women have experienced some form of domestic abuse in England and Wales since reaching the age of 16; and 1 in 7 women in Scotland have experienced a physical form of partner abuse since reaching the age of 16.

Data: Over a quarter of all rapes reported to the police in 2009/10 in England and Wales were committed against children aged under-16: over half of all male rapes reported to the police that year were of children aged under-16.

Data: Three-quarters of domestic violence offences in England and Wales are repeat offences: the rate of repeat-offending is higher for domestic violence than for most other crimes.

Data: Despite some improvements in levels of reporting, the rate of conviction for rape is lower than for similar crimes.

Significant findings

Incidents targeting people because of who they are (e.g., hate crimes) are under-reported, meaning many victims are unable to access the support they need, or to secure justice. Nevertheless, for those cases that are prosecuted, conviction rates are rising apart from disability hate crime where the conviction rate fell by 1% between 2007/08 and 2008/09.

Headline data

Data: In England and Wales, the number of cases of racially and religiously motivated crime being reported to the police has fallen slightly since 2006/07. However, the conviction rate for racially and religiously motivated and for homophobic and transphobic crimes has risen.

Data: The number of racially motivated crimes reported to the police has risen in Scotland – as have the numbers of cases resulting in court proceedings: the number of cases of religiously motivated crime resulting in court proceedings, meanwhile, has fluctuated.

Data: The majority of incidents recorded by the police involve harassment, but the majority of cases that are prosecuted are crimes against the person. Incidents targeting different groups take a variety of forms: for example, religiously motivated crime affects community institutions as well as individuals; hate crime targeting LGB people can involve sexual assault; and disability related hate crime often targets people's property.

Significant findings

Experience of the criminal justice system – either as victims or as suspects – can be markedly different depending on social group with a consequent impact on confidence in the system.

Headline data

Data: Rates of stop and search for Black and Asian people suggest that there may be disproportionality; and Black people are much less likely than White people to believe that their complaints about the police will be taken seriously, and are more likely to worry about police harassment.

Data: Young people with LLTI/disabilities are significantly less likely than those without to believe that the criminal justice system is fair, or that it meets the needs of victims.

Data: Survey data suggests that LGB people are more likely to worry about and to experience discrimination by the police, whether they were reporting a crime or suspected of committing one.

Data: A small-scale study of the attitudes of transgender people suggest that while the majority expect fair treatment, around 1 in 5 have experienced problems when reporting crimes.

16.3 Health

Significant findings

Geography matters, as does socio-economic circumstance - incidence of ill health is closely associated with area deprivation, especially among those under 65.

The available evidence points to poorer health outcomes for many equality groups, partially but not completely explained by generally worse socio-economic circumstances. This also includes higher mortality rates from specific medical conditions.

Headline data

Data: In Scotland deaths from coronary heart disease have been the highest in Western Europe since the 1980s.

Data: In Scotland, the overall death rate from cancer is higher for both men and women compared to men and women in England and Wales.

Data: Two-thirds of Welsh women over 75 report having a limiting long-term illness or disability compared to only half of women in England or Scotland.

Significant findings

Some ethnic minority groups appear to have worse general self-reported health than the White British majority, particularly Bangladeshi and Pakistani people. These health disparities persist even taking socio-economic circumstances into account.

Headline data

Data: In England and Wales, at the last census a quarter of Bangladeshi and Pakistani women reported a limiting-long term illness or disability. In older age groups (65years and over), this rose to nearly two thirds of Pakistani women.

Data: Chinese people report the best health, Gypsy and Traveller people the worst, though small sample sizes suggest such a finding should be treated with caution.

Significant findings

Groups vulnerable to pressures such as poverty and victimisation show high rates of mental illness. The risk of having poor mental health scores is higher for certain ethnic groups with high poverty rates.

Headline data

Data: Around 1 in 10 people in England, Scotland and Wales report potential mental health problems, Women are more likely to report potential problems, but under-reporting may mean that levels of mental health problems for men are higher than they appear.

Data: The risk of mental health problems is nearly twice as likely for Bangladeshi men than for White men.

Data: Mental health is an issue of concern for both the lesbian, gay and bisexual population and transgender population.

Significant findings

The number of people of normal or healthy weight is declining and obesity is on the rise. Only around 30-40% of men and women in Britain are of a normal or healthy weight.

Headline data

Data: Men more likely to be overweight than women however, among Pakistani, Bangladeshi and Black African populations, women are less likely to be of normal/healthy weight than men (data available for England only).

16.4 Education

Significant findings

Educational outcomes differ markedly by gender, socio-economic group, ethnicity and disability. Boys, pupils from some ethnic minority groups, and those eligible for Free School Meals (FSM) are performing less well as early as age 5.

For students from lower socio-economic groups, the gap widens during the school years. The gap in students' GCSE results according to their family backgrounds remains wider than most other educational inequalities, although tentative evidence indicates that it has started to narrow since 2006.

This gap is accentuated when combined with other factors associated with educational underperformance, such as gender and disability.

Headline data

Data: Girls outperform boys routinely at aged 5, at age 16 and at degree level throughout Britain.

Data: Free School Meals (FSM) are available in England and Wales to children who come from households with relatively low income. Students eligible for FSM are less than half as likely to achieve 5 good GCSEs including English and Maths.

Data: Ethnic differences at GCSE are narrowing except for the top where the two highest performing groups are Chinese and Indian students.

Data: In England, the best performing group are Chinese girls; even those on FSM outperform all other ethnic groups whether on FSM or not. The worst performing group is Gypsy and Traveller children. Their performance is declining. Less than 1 in 6 obtain at least five good GCSEs.

Data: The performance of Chinese children at GCSE is scarcely affected by whether or not they are eligible for free school meals (FSM), whilst by contrast that of Indian children is strongly diminished if they are eligible for FSM.

Data: In England, 17% of children with Special Educational Needs (SEN) get five good GCSEs including English and Maths, compared to 61% of children without identified SEN. This does not just apply to people with learning disabilities: only 33% of children whose primary need related to visual impairment attained this level

Data: When SEN is combined with those eligible for FSM, outcomes drop even further. Of children with SEN and who are eligible for FSM, only 10% of girls and 8% of boys in England obtain 5 good GCSEs including English and Maths.

Data: Across Britain, disabled adults are three times as likely as others to have no qualifications.

Significant findings

The experience of school life can be traumatic for some. The new phenomenon of cyberbullying is joining homophobic bullying as a serious issue. It appears that those who are bullied are more likely to be outside of education, employment or training at 16 years of age.

Headline data

Data: Cyberbullying is now estimated to affect around a third of secondary age young people.

Data: Two-thirds of lesbian, gay and bisexual students in Britain and four-fifths of disabled young people in England report being bullied. Almost one quarter (23%) of young people questioned who practiced any religion in England reported being bullied because of their faith.

Data: Homophobic bullying is widespread in British secondary schools. Nearly half of all secondary schoolteachers in England acknowledge that such bullying is common, and just 1 in 6 believe that their school is very active in promoting respect for lesbian, gay and bisexual students.

Data: Figures indicate that children in England who reported being bullied did 15% worse at GCSE and were twice as likely to be NEET at aged 16.

Data: In England, Asian children are excluded at a rate of 5 per 10,000 students compared to Black Caribbean children at 30 per 10,000 and Gypsies and Traveller children at 38 per 10,000.

Data: Almost three-quarters (71%) of permanent exclusions in England involved pupils with some form of SEN in 2008/09. This is equivalent to a rate of 30 out of every 10,000 pupils.

Significant findings

For those who go on to university, there is a mixed picture. Girls continue their advantage but there is strong subject segregation. More ethnic minority students are now going to university, but they are less likely to attend Russell Group Universities.

Headline data

Data: Women make up 59% of the undergraduate population; the proportion has been stable since 2003.

Data: Ethnic minority students are up as a proportion of university students to 23% in 2009 (in line with their proportion in that age group).

Data: There is a higher proportion of men at Russell Group universities.

Data: Less than 10% of Black students are at Russell Group universities, compared to a quarter of White students.

Data: Black students are less than two-thirds as likely to get a good degree as White students.

Data: Around a third of Black students get a first or upper-second class degree, compared to two-thirds of White students.

Significant findings

There is a geographic component to skills and qualifications. In Wales, more adults are disadvantaged by low skills and qualifications than in most other parts of Britain. In some ethnic and religious groups there are large numbers of people without any qualifications.

Headline data

Data: 1 in 4 Welsh adults lack basic literacy skills, more than in any English region and in contrast to 1 in 6 in England overall. 1 in 2 people in England and Wales lack functional numeracy.

Data: 33% of working age Muslim women have no qualifications, and only 9% have a degree.

Data: The relationship between ethnicity, literacy and numeracy is very strong and specific cases extremely negative; for example, being Black and male appears to have a greater impact on levels of numeracy than being learning disabled.

16.5 Employment

Significant findings

The recent recession has hit some groups harder than others. As in most countries, men have been more adversely affected than women and young people more than older people. People over 50 have fared better than expected during the recession, perhaps due to their propensity to be flexible in the workplace.

The impact of multiple disadvantages in a more competitive labour market, which is less forgiving of low qualifications than a generation ago, cannot be underestimated. Trends are moving in different directions however: disabled men are substantially less likely to work than in the past, while the gender gap in employment has almost halved since the mid-1990s, from 10 to 6 percentage points.

Headline data

Data: For low qualified British men with disabilities the chances of working halved, from 77% to 38% from the 1970s to the 2000s.

Data: Employment rates vary by impairment. For example, only 23% of people with depression are in employment, compared to 62% of people with skin conditions.

Data: Figures suggest that 45% of disabled people in their early 20s are NEET.

Data: Female employment has risen by 3 percentage points since 1995. Black Caribbean women are more likely to be in full-time work than any other group of women.

Data: Only 1 in 4 Bangladeshi and Pakistani women works and almost half of Bangladeshi (49%) and Pakistani (44%) women are looking after the family or home, compared to 20% or fewer of other groups, despite high levels of education.

Data: Muslim people have the lowest rate of employment of any religious group. Only 47% of Muslim men and 24% of Muslim women are employed, and figures suggest that 42% of young Muslim people are NEET.

Significant findings

There is persistent gender and ethnic segregation in the labour market, where some sectors are gendered or dominated by a particular group.

Headline data

Data: Figures indicate that 1 in 4 Pakistani men in Britain are taxi drivers or similar.

Data: In Britain, women occupy 77% of administration and secretarial posts but only 6% of engineering and 14% of architects, planners and surveyors. 83% of people employed in personal services are women.

Data: In Britain, 40% of female jobs are in the public sector compared to 15% of male jobs.

Significant Findings

The occupational structure of the labour market also reveals positive changes in status for some groups.

Headline data

Data: Women hold 1 in 3 managerial jobs in Britain.

Data: Bangladeshi and Pakistani women in Britain are more likely to be employed as professionals than Bangladeshi and Pakistani men.

Data: Indian and Chinese people in Britain are twice as likely to be employed as professionals as White British people and the trend is upwards.

Data: Muslim men are as likely to be in managerial or professional jobs as elementary ones; Jewish men are 13 times more likely to be in managerial or professional jobs than elementary ones.

Significant findings

Women now do better than men in every aspect of educational qualification but the pay gap between men and women remains. After falling continuously for the past 30 years, progress seems to have halted.

The gender pay gap is lowest for the under 30s, rising more than five-fold by the time workers reach 40. It is influenced by a number of factors: lower pay in sectors where women are more likely to choose careers, the effect of career breaks and limited opportunities in part-time work. The level of earnings penalty is strongly mediated by levels of education but is not eliminated, even for the best-qualified women.

There remains a similarly pernicious earnings penalty on some ethnic minority groups and disabled people.

Headline data

Data: Women with degrees are estimated to face only a 4% loss in lifetime earnings as a result of motherhood, while mothers with mid-level qualifications face a 25% loss and those with no qualifications a 58% loss.

Data: Women aged 40 earn on average 27% less than men of the same age.

Data: Disabled men experience a pay gap of 11% compared with non-disabled men, while the gap between disabled women and non-disabled men is double this at 22%.

Data: Some research suggests that Black graduates face a 24% pay penalty.

Data: Disabled women experience a 31% pay penalty compared to non-disabled men.

Significant findings

Evidence suggests that the workplace remains a stressful and difficult place for some groups, specifically transgender people and irregular migrant workers.

Headline data

Data: People with a disability or long-term illness are over twice as likely to report bullying or harassment in the workplace as non-disabled people.

Data: Lesbian, gay and bisexual people are twice as likely to be report discrimination and nearly twice as likely to report unfair treatment as heterosexuals.

Data: Transgender people highlight transitioning at work as one of the most significant triggers for discrimination.

16.6 Standard of living

Significant findings

The analysis of material deprivation and living standards in Britain today has revealed a mixed picture. Income poverty remains persistent for some groups such as women with children, ethnic minority groups and families with disabled members.

However, in contrast there has been growing material wealth and growing home ownership alongside a persistent gap between richest and poorest.

Headline data

Data: The total net household wealth of the top 10% is £853,000, almost 100 times higher than the net wealth of the poorest 10%, which is £8,800 or below.

Data: 1 person in 5 lives in households with less than 60% median income (after housing costs) this rises to nearly 1 in 3 for Bangladeshi-headed households.

Data: Data suggests that as many as two thirds of Bangladeshi and Pakistani people and half of pensioners live in Bangladeshi or Pakistani headed households below the poverty line (compared to around a sixth of the general population).

Data: Nearly three-quarters of Bangladeshi children, and half of Black African children in Britain grow up in poverty.

Data: Over 1 in 4 of families with disabled people live below 60% median income: 29% of those with a disabled adult, 28% of those with a disabled child and 38% of those with both.

Data: 60% of women reaching state pension age in 2008 were entitled to less than the full basic state pension, compared to 10% of men.

Significant findings

The experience of poverty is closely related to poorer outcomes in terms of living conditions, overcrowding, crime in the neighbourhood and destitution – leading to poor health and low life expectancy.

Headline data

Data: Only 1 in 40 households today are defined as overcrowded – however female-headed households are three times as likely as average to be overcrowded. A quarter of Bangladeshi households are overcrowded.

Data: 1 in 10 people report living in polluted and grimy neighbourhoods but reports of crime, violence and vandalism are higher for many groups, including women householders with children and many ethnic minority groups.

Data: Ethnic minority and disabled people, and religious minority groups are overrepresented in the most deprived neighbourhoods in England.

Data: Asylum seekers are much more likely to experience destitution (lacking access to shelter, warmth and food) than other groups, including children and in dispersal areas such as Yorkshire and Humberside

16.7 Care and support**Significant findings**

Britain's demographic trajectory – in particular it's greying population – is creating new kinds of chronic disadvantage. Over the next decade there will be a steep increase in the demand for personal care for older people. At the same time, more people who might have cared for their parents will have dependent children. This often means a concentration of informal care provision falling on a relatively small group – the dutiful middle aged. Most carers are women although a significant number are also children.

Headline data

Data: 1 in 4 women and nearly 1 in 5 men in their fifties are carers.

Data: Some research suggests that women have a 50:50 chance of providing care by the time they are 59.

Data: 175,000 people under 18 have caring responsibilities. Bangladeshi, Black African, Black Caribbean and Pakistani children are more likely to have caring responsibilities compared to White British children.

Significant findings

Some carers are people with health needs themselves. Critically, most carers are in paid work. A small minority of those in paid work have an intense caring burden.

Headline data

Data: 225,000 people provide 50 hours of care a week despite suffering ill health.

Data: 273,000 people aged 16-74 who reported being permanently sick or disabled in the last Census, provide unpaid care.

Data: Young disabled people are twice as likely as their non-disabled peers to be caring regularly for other children or adults.

Data: Of the 15.2 million employees in full-time paid work, 1.6 million provide at least some unpaid care; 144,000 people in full-time paid work also provide 50 or more hours a week of care.

Significant findings

The majority of families with children in Britain combine their own caring responsibilities with childcare provided by others. Early year's childcare can influence children's learning and development, with high quality formal settings having the greatest positive impact.

Ethnicity and lone parenthood are the two factors most strongly associated with the use of childcare. People from lower socio-economic groups and those with disabled children are less likely to use formal childcare than others. For those with disabled children, it is unclear whether the lower use of childcare is parental preferences or whether it is driven by a lack of appropriate and affordable places.

Headline data

Data: Bangladeshi and Pakistani children are less likely to receive formal childcare than others.

Data: Lone parents, non-working parents and lower income parents use less childcare, and when childcare is used, are less likely to use formal childcare. Parents with disabled children also use less childcare.

16.8 Power and voice

Significant findings

Despite recent improvements, women and ethnic minorities remain under-represented in Parliament and other political institutions. Young people display declining levels of political activity and engagement in decision-making bodies.

Headline data

Data: A minority of adults aged under 25 now vote at general and devolved elections, and the proportions are falling, with under 50% of 18 to 24 year olds voting in the 2005 general election.

Significant findings

Overall, confidence in being able to influence local decision-making fell in 2001, and has fluctuated ever since.

Levels of engagement and perceptions of influence vary by ethnic group and social class.

Headline data

Data: Members of ethnic minorities are more likely than White people to say that they are involved in local decision-making, campaigning or community organisations, such as those providing services to young people. They are also more likely to say that they have influence over local decisions.

Data: People in professional or managerial jobs are more likely to feel that they can influence local decisions than people from routine occupations.

Significant findings

Parliamentary representation of different groups remains varied. However, there is greater gender diversity in the Scottish Parliament and Welsh Assembly than in the UK Parliament.

Headline data

Data: The proportion of MPs aged over 50 has risen since 1997.

Data: Religious and ethnic minorities are still underrepresented in Parliament although the number of ethnic minority MPs doubled in the 2010 election. The number of Muslim MPs doubled in 2010, with the first three female Muslim MPs taking their seats.

Data: The number of openly LGB MPs in Westminster rose from 13 in 2009 to 17 in 2010.

Data: Women's representation in Westminster rose remarkably in 1997 and has continued to rise since but remains below 25%.

Data: Both Holyrood and Cardiff have achieved higher levels of female representation than Westminster has ever managed ((35% of Scottish Parliament and 48% of Welsh Assembly Members are currently women).

Significant findings

At a local level, there has been greater success in achieving diverse political representation than in Westminster. Local authority politicians better resemble the British population, although far from fully.

Headline data

Data: 3 in 10 councillors in England are women; 2 in 10 councillors in Scotland and Wales are women.

Significant findings

Some of the groups who are under-represented in formal politics are more involved in campaigning and decision-making bodies.

Headline data

Data: Lesbian, gay and bisexual people are more likely to be involved in informal civic or political actions.

Chapter 17

An agenda for fairness

Overview

The earlier parts of this report have presented a more comprehensive picture of fairness in Britain – or the lack of it – than has been compiled before. The preceding chapter has set out what we regard as the most significant findings. In this chapter we explain more fully the process adopted to identify those findings; and we narrow down still further the issues which we consider the most pressing and urgent at this time.

Emphatically, this does not mean that no action should be taken on any other issues. Nor does this describe the Commission's own strategic priorities. Some issues may be extremely susceptible to our regulatory action; but others will only be affected by action from other regulators, employers, service providers or government. Everyone will have part to play in addressing the problems; but we regard it as part of the Commission's role to offer some indication as to where society's combined resources and energy should be targeted.

This chapter therefore sets out what could be described as an agenda for fairness. Crucially, at a moment of significant economic, social and institutional reform, these benchmarks for decision-makers are vital if they are to judge whether their choices will open or close significant equality gaps. The availability and range of the data provided should help to close the gap between our expectations and the reality far too many still experience every day. If our society truly wants to continue to change for the better, then a good, hard look in the mirror must be the start of our further transformation.

Risk assessment and public interest

The Triennial Review 2010 provides a baseline of evidence against which we can judge progress towards the realisation of the vision for equality laid out in the Equality Act 2006 and the Equality Act 2010.

Notwithstanding the many data caveats and gaps in our knowledge – detailed in Chapter 15, alongside proposals to address them – the Triennial Review identified a very substantial number of issues that require work and progress.

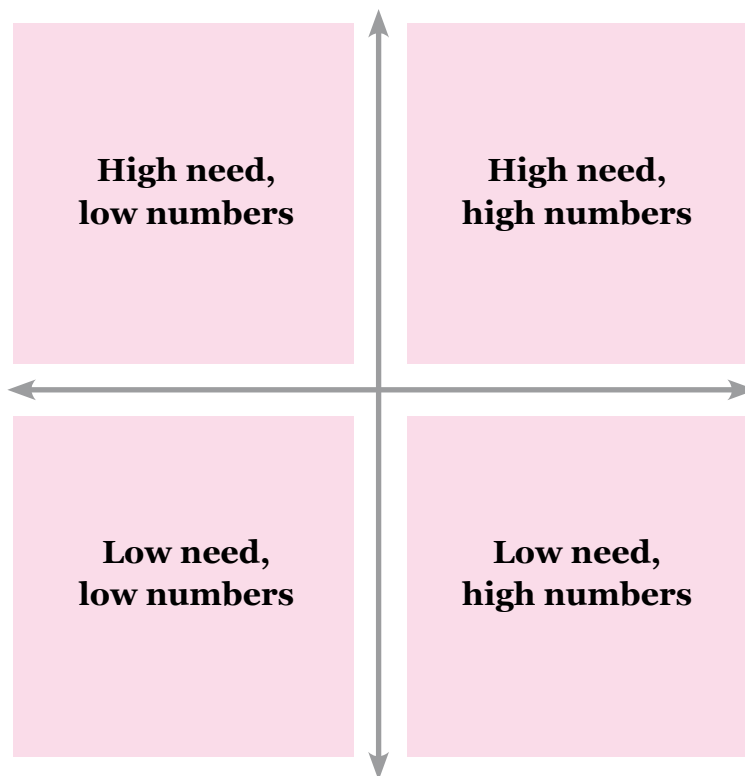
However, we believe that the Commission can best fulfil its role if it bases its work and interventions on a further analysis of where the most significant challenges to equality in modern society lie.

The Commission is a modern regulator and subject to the Regulatory Code of Practice. The principles and practices of regulation provide the Commission with the tools to identify and think about the major equality challenges in the years ahead.¹

We have been guided in our decision-making by the principles of risk assessment and public interest.

Two key factors in deciding on risks are scale and need. These can be expressed along a vertical axis (need, with extreme need at the top) and a horizontal axis (scale, with impacts on large numbers on the right).

Figure 1: Depiction of scale and need for equality issues



¹ The Commission's regulatory process and structures were assessed and reviewed independently by the Better Regulation Executive (BRE) in 2009.

For most regulators, the top right quadrant would offer the most likely quadrant of risk and where priority issues would be likely to emerge. However, the Equality and Human Rights Commission is a body required by law to protect and promote the interests of some groups of people who represent (in some cases) relatively small proportions of the population as a whole (for example, less than a quarter of the population is disabled, and the proportion of people who are transgender is probably well under 1%).

Therefore, when considering the ‘numbers’ of people affected by a problem we consider not only the proportions of the population as a whole who are affected by an instance of disadvantage but also, where appropriate, the proportions of a protected group who are affected. For example, the gender pay gap directly affects millions of women’s lives and so can be considered ‘high numbers’. By contrast, the number of people charged with disability hate crime in 2008/9 in England and Wales was slightly under 300; yet we know that such crimes can have an impact on a much wider group of disabled people, and who may represent a significant proportion of disabled people as a whole: and therefore can also be considered ‘high numbers’ for the purposes of this exercise.

The decision on what constitutes extreme or high need crucially depends on the long-term trend and on whether the detriment or need is cumulative.

Where the long-term trend is negative (for example it is affecting increasing numbers of people over time) and where need or detriment is cumulative (for example, it affects more than one group), the issue is assigned a much higher risk.

All regulators recognise the term public interest, though they may define it differently depending on whether they are economic, information or public service regulators.² There has also been work done to develop a specific conception of public interest and equality.³

The majority of regulators understand the concept as protecting the interest of the public, either by aggregating individual autonomy and agency, by taking precautionary positions on issues affecting groups, or by making judgements ‘above the fray’ of sectional interests.

The public interest case for equality is a balance of different group interests but also a judgement on what issues can be resolved and need to be resolved for public confidence and which are crucial to the realisation of the equality vision set out in statute.

² Croley, S. P. 2008. *Regulation and Public Interests; The Possibility of Good Regulatory Government*. Princeton University Press; Feintuck, M. 2004. *The Public Interest in Regulation*. Oxford: Oxford University Press; Saggar, S. 2009.

³ Saggar, S. 2009. *Regulation, Equality, and the Public Interest*.

Decisions on these issues are made by the board of the Equality and Human Rights Commission. The key questions we have asked in assessing what was in the public interest were:

- Does this equality gap present a risk to basic human rights?
- Is it caused by social, cultural or economic factors rather than by intrinsic human difference?
- Does it affect many people – and does it impair people’s life chances?
- Is the problem persistent or getting worse, and does it require public intervention to arrest its decline?
- Is it in the public interest to reduce the equality penalty – (is the issue trivial; might it be essentially insoluble? and is action now necessary to forestall further social or economic costs later)?

If the answers to these questions are broadly affirmative, then the penalty in question is clearly significant.

Fairness is everyone’s business

Using the approach set out above, we have identified what we believe are 15 of the most pressing and most significant equality challenges in modern society.

Why should this matter? Many people consider the issues of fairness to be the province of anti-discrimination law, of advocacy groups, or of government, to be addressed by discrete, often marginal programmes of activity directed at particular groups. But the greatest impacts on the opportunities open to individuals are made by everyday decisions in every part of society, most of which apply equally to everyone. A decision to invest in a new business or to change a public service is likely to affect different groups in different ways - sometimes for better, sometimes for worse. It is the essence of fair decision-making that those who make the decisions, and those affected should know clearly what the consequences of any particular decisions will be. That is why the availability of data is so important.

Against this background, therefore, we could also consider the list issues below as conditions for fair decision-making; that is to say, these issues could be the test against which policies are assessed in order to establish whether their impact is fair or not. We anticipate that these challenges should be the focus of attention from government and wider civil society in the months and years to come.

Some issues are peculiar to an area of life – education, employment, power and voice for example. Some are specific to groups – for example the gender pay gap and employment rates for people who are disabled. Some of the challenges are expressed in terms of socio-economic background. Finally, some of the penalties we identify here are persistent, and have been concerns for many years. Some are emerging issues arising from demographic, social or economic change. We mark these emergent issues with a star (*) in the list below.

Our significant challenges are grouped under five major objectives.

Each of the five groups of challenges contributes to what we believe is a fundamental value in our society: that every individual should have an equal chance to make the most of their talents, capabilities and endeavour. No-one should have poorer life chances because of their circumstances at birth.. Thus the five groupings of challenges are set out as below.

In practical terms our society's overall aim should be twofold. First, to do all we can to close the significant and costly equality gaps outlined below; and second, to ensure that nothing that we do, even unintentionally, appreciably widens them

An agenda for fairness

Aim 1: To reduce the effect of socio-economic background on health and life expectancy

- close the differences in health and life expectancy between the highest and the lowest socio-economic groups
- close the infant mortality gap between ethnic groups

Aim 2: To ensure that every individual has the chance to learn and to realise their talents to the full

- close the performance gap in education between boys and girls
- reduce the level of ethnic and gender segregation in education
- close the qualifications gap for disabled people
- reduce the disparities in educational performance by socio-economic background

Aim 3: To give every person the opportunity to play a part in strengthening Britain's economy

- close the gender pay gap faster and further
- close the ethnic and religious employment and pay gaps faster and further
- close the employment gap for people with disabilities

Aim 4: To put an end to identity-based violence and harassment

- reduce incidence of hate crimes on all protected grounds and increase conviction rate*(emergent challenge)⁴
- to reduce incidence of homophobic, transphobic, disability-related and religiously motivated bullying in schools and workplaces
- raise the rate of rape convictions further
- reduce the rate of repeat domestic violence offences

Aim 5: To give more people greater personal autonomy and civic power

- to reduce the rise of the need for and cost of informal care and to increase autonomy, choice and control both for carers and those who receive care* (emergent challenge)
- close the ‘power gap’ in public bodies on all protected grounds

We accept that our choices are made on the basis of the best available evidence, not on perfect evidence. As we acknowledge in the previous chapter, it is important to further strengthen the evidence base for future reviews.

While we would encourage other public bodies (including local authorities and government departments) to take our analysis into account, we would also encourage them to carry out their own assessment of the most significant inequalities pertaining to their field, and to which they should have due regard in meeting their duties under equality law. In essence, having decided on their own list of significant inequalities, we would expect public authorities, private enterprises and other institutions to ask themselves two questions. First, what are we doing to close the equality gaps we’ve identified; and second, are we doing anything, even unintentionally that would make those gaps larger?

Over the following pages, we attempt to demonstrate the reasoning behind our selections, and explain how each of the inequalities we have selected imposes a cost on individuals, and on society as a whole, and how they have the potential to impose continuing or growing costs in the years to come.

⁴ Though hate crime is not a new phenomenon, this is an emergent challenge in as much as legislative changes have only recently provided the means to take effective action to address certain forms of hate crime, and the true extent of such crime may only now be becoming clear as people grow increasingly confident to report it.

Aim 1: To eliminate the effect of socio-economic background on health and life expectancy

Challenge: Close the differences in health and life expectancy between the highest and the lowest socio-economic groups

Scale and nature of the challenge

The evidence shows a clear correlation between socio-economic background and poor health and short life expectancy. Women and men in the highest socio-economic group can expect to live up to 7 years longer than those in the lower socio-economic groups (based on life expectancy at birth). When socio-economic factors are combined with the disadvantages faced by many equality groups, outcomes are worse.

This overall disparity is associated with a lifetime's experience of other disadvantages and inequalities. In England and Wales, those who have never worked or are long-term unemployed have the highest rates of self-reported 'poor' health; people in routine occupations are more than twice as likely to say their health is 'poor' than people in higher managerial and professional occupations; and people from lower socio-economic groups are more likely to have a poor diet and less likely to take regular exercise. In Scotland (where people are more likely to die before 65 than in any other Western European country) and Wales, 'poor' health and disability are closely associated with deprivation and unemployment. Evidence also suggests that people from lower socio-economic groups may be more susceptible to smoking-related cancers.

Costs

It is self-evident that poorer health and a shorter life expectancy are a disadvantage to individuals. The Marmot Review⁵ suggested that health inequalities between the most and least advantaged represent an economic cost to society as well. It reported estimates that inequality in illness accounts for productivity losses of £31-33 billion per year, lost taxes and higher welfare payments in the range of £20-32 billion per year, and additional NHS healthcare costs in excess of £5.5 billion per year. The Marmot Review also suggested that the cost of inaction to close health inequalities may increase over time, with the cost of treating the various illnesses that result from obesity projected to rise from £2 billion per year to nearly £5 billion per year in 2025. Tackling the life expectancy gap, and the various factors that contribute to it, is therefore a significant challenge today.

⁵ Marmot, M. Atkinson, T. Bell, J. Black, C. Broadfoot, P. Cumberlege, J. Diamond, I. Gilmore, I. Ham, C. Meacher, M. Mulgan, G. 2010. *Fair Society, Healthy Lives: The Marmot Review*. London: The Marmot Review.

Challenge: To close the infant mortality gap between ethnic groups

Scale and nature of the challenge

Infant mortality is a rare phenomenon, affecting a fraction of a per cent of children born each year. The sad fact is, though, although numbers are very small and tiny changes will affect trends, it appears it may affect people from some backgrounds more frequently than others: Pakistani and Black Caribbean babies are twice as likely to die in their first year compared to White British or Bangladeshi babies.

Costs

It is incontrovertible that the death of a young child imposes an immense cost on parents and families. As far as we know, no attempt has been made to quantify that loss or calculate its impact on wider society in economic terms. We think such an estimate would, in this case, be superfluous.

Rather, the case for action is a moral one. We question whether a society committed to the principles of equality and human rights could be indifferent to such widely differing infant mortality rates among different groups, and we consider it a significant challenge to understand the causes of this disparity and to close it.

Aim 2: To ensure that every individual has the chance to learn and realise their talents to the full

Challenge: To close the performance gap in education between boys and girls at all levels

Scale and nature of the challenge

In many measures of educational attainment, women and girls now outperform men and boys, reversing the situation seen for most of the post-war period. Girls achieve better results at age 5 in England, and at age 16 in England, Scotland and Wales, and in every ethnic group. Women are more likely to go into higher education. In 2009 they represented 59% of all undergraduate students, outnumbering men by a ratio of roughly 4:3. Women are also more likely than men to get a first-class or upper second-class degree.

As well as performing consistently worse on academic measures, boys are more likely to get into serious trouble at school. They account for the majority of permanent exclusions.

Costs

The cost to an individual who misses out on educational opportunities is significant and lasting. Evidence from a range of sources suggests that education plays an important role in giving an individual the ability and confidence to make the most of opportunities in employment, to acquire wealth, and to take part in different forms of democratic and civic action. A generation of boys and young men who are disadvantaged in education may face many subsequent disadvantages throughout their life.

There is a wider cost to society, in as much as men and boys who underachieve in education may lack the skills and qualifications to make a significant economic contribution later in life. A number of policy and evidence reports⁶ suggest that the UK's success in a global economy will rely more and more on the exploitation of knowledge, with the implication that a low level of skills could increasingly act as a brake on economic growth. In this sense, the true cost of male underachievement in school today may not be evident for a generation.

Although some differences in academic achievement appear to have reached a roughly stable level (women have been over-represented in entries to higher education by roughly the same proportion since 2003), there is little evidence of boys catching up by any significant margin on any of the indicators measured here. In other words, though the gap between female and male academic achievements may not be growing, it isn't shrinking either. There are therefore grounds to think that some form of intervention is necessary to challenge a pattern of underachievement that has the potential to impose significant costs on individuals and on society for years to come.

⁶ Including The Leitch Review of Skills, 2006. *Prosperity for all in the global economy – world class skills: Final Report*; Department for Business, Innovation and Skills. 2009, *New Industry New Jobs*; UK Commission for Employment and Skills, 2010. *Ambition 2020: World Class Skills and Jobs for the UK (2010 edition)*.

Challenge: To reduce the level of ethnic and gender segregation in education at all levels

Scale and nature of the challenge

The evidence suggests that various parts of the British education system are characterised by segregation on the grounds of race and gender.

Boys and girls and men and women tend to choose different subjects in school and at university. Girls and women tend to be concentrated in some courses of study which tend to lead to relatively poorly-rewarded jobs. Women represent 9 out of 10 apprentices in childcare and hairdressing, for example. They are under-represented in other areas of study which may offer greater potential financial rewards. They are under-represented in maths, engineering and physical science courses at university, and make up a tiny proportion of apprentices in construction.

The forms of segregation by race in education are less to do with subject of study, and more to do with place of study. The proportion of students who are from an ethnic minority background has risen from 13% in 1994/95 to 23% in 2008/09, and the latter figure is roughly equivalent to their proportion of their age group as a whole. However, some ethnic minority students are under-represented in older universities and over-represented in newer universities. 44% of Black, Indian and Pakistani students are at 'new' universities compared to 35% of others, and 8% of Black students are at Russell Group institutions, compared to 24% of White students.

Costs

Following a course of study which tends to lead to relatively low-paid jobs has a clear economic cost for women. It may affect their ability to provide for themselves and their family and to build up savings. Reports⁷ suggest that 'occupational segregation' may be a factor behind the gender pay gap.

Educational segregation by race may impose its own individual cost: some evidence suggests that students attending a Russell Group university have better job prospects on graduation than students of other institutions.⁸ In other words, the fact that ethnic minorities are accessing Russell Group institutions in lower numbers may have a bearing on their chances of doing well in the labour market.

⁷ See, for example, The Women and Work Commission, 2006. *Shaping a Fairer Future*. Government Equalities Office.

⁸ See, for example, Chevalier, A. and Conlon, G. 2003. *Does it pay to attend a prestigious university?* Centre for the Economics of Education; Machin, S., Murphy, R. Soobedar, Z. 2009. *Differences in labour market gains from higher education participation*. National Equality Panel.

Both forms of segregation may also incur costs to the wider economy. First, women are under-represented in some sectors and professions – notably science, engineering and technology – which may be important to the UK's long-term prosperity, and where there are significant skills gaps. Second, both the British workplace and education system will be best served if people develop and use their talents to the full. If the factors that cause forms of educational segregation are at heart to do with arbitrary stereotypes; if young girls with scientific talent are turning away from physics because it's a 'boy's subject', and if bright ethnic minority students are choosing not to apply to Russell Group universities because they fear that their face wouldn't fit, then this is a constraint on talent, and a wasted opportunity.

Some forms of segregation in education have altered radically over recent years. Historically, women were barred from the professional practice of medicine. Today, the majority of medical students are women. This suggests that educational segregation is (at the very least in part) a function of cultural expectations, and not the expression of intrinsic difference between different groups. By implication, there is no inherent reason why today's instances of educational segregation should persist: but the fact that they have remained, while others have diminished rapidly, or disappeared altogether, suggests that they may be unlikely to change today without some form of intervention.

Challenge: To close the qualifications gap for disabled people

Scale and nature of the challenge

The evidence suggests that children with disabilities and special educational needs face various barriers to obtaining an education. They are more likely to be bullied (particularly learning disabled children), and more likely to be excluded. 17% of children with special educational needs get five good GCSEs including English and Maths, compared to 61% of children without identified special needs. This does not just apply to people with learning disabilities: only 33% of children whose primary need related to visual impairment attained this level.

In higher education, the proportion of students declaring a disability rose between 2003 and 2008 from 5.5% to 7.3%. This is attributed to the number of students declaring a specific learning difficulty such as dyslexia.

Historical difficulties in accessing education have resulted in low skills levels among the adult disabled population. Among adults of working age, those with a disability are roughly half as likely to have a degree level qualifications as those without. They are also roughly half as likely to take part in adult learning.

Costs

Education is a good in and of itself. Disabled people should no more be denied its opportunities for personal and intellectual development than anyone else. Lower qualifications levels also impinge directly on employment prospects. The evidence suggests that the employment rates for disabled people without qualifications is particularly low, and getting worse over time. Between 1974-76 and 2001-03, the employment rate for men with limiting long standing illness and with no qualifications halved. Being out of work can limit an individual's income, but it can also have wider effects. Research⁹ suggests that being in work can improve people's health and well-being, and, conversely, being out of work can make both worse.

Disabled people's low qualifications levels imply costs to society as well as to individuals. Disabled people who are unable to access paid employment may rely more on benefits more than those who work. They may also have a greater call on other forms of publicly-funded support to deal with the consequences of being out of work.

The importance of skills to the UK's economy is likely to increase for the foreseeable future (as discussed under 'closing the performance gap between boys and girls in education'.) The cost of any failure, therefore, to equip more disabled people with skills and qualifications to succeed in the modern economy will only grow in the years to come.

Challenge: To reduce the disparities in educational performance by socio-economic background

Scale and nature of the challenge

The evidence suggests that coming from a lower socio-economic background is associated with poorer performance in almost every stage of education. Children who come from households with relatively low income are eligible for free school meals, and this is the best measure available for estimating socio-economic background. At age 5, 35% of pupils known to be eligible for free school meals achieved a good level of development, compared to 55% of pupils not eligible for free school meals. Pupils in England eligible for free school meals are more likely to be bullied, twice as likely to be permanently excluded, and half as likely to get good GCSE results. Apart from Gypsy and Traveller children, the performance of White British boys on free school meals at GCSE is the lowest of any group defined by gender, free school meals status and ethnic group. The available evidence also suggests that while people from lower socio-economic background are going to university in growing numbers, they remain under-represented in higher education.

⁹ See, for example, Royal College of Psychiatrists. 2008. *Mental Health and Work*. Page 16.

In sum, people from lower socio-economic backgrounds start off in the education system at a disadvantage and never catch up. The gap continues to grow even after the school years: people in routine occupations or who have never worked are half as likely to participate in adult learning as people from higher socio-economic groups.

Costs

There are evident costs to the individual who misses out on the chance to fulfil their talents to the full. These include the possibility of foregone higher income and the frustration of seeing others succeed in fields where, but for the accident of upbringing, that individual might have succeeded themselves. In as much as education has a powerful bearing on an individual's future income and opportunities, this is a penalty that lasts for life. There are wider costs to the economy too. As discussed above, it is likely that success of the British economy on a global stage will increasingly rely on professional and highly-skilled jobs. A failure to make the best possible use of available skills by allocating opportunities according to (in the words of a recent report on access to the professions)¹⁰ 'birth, not worth' will inevitably hamper economic performance.

Finally, there is a cost to wider society in that the uneven distribution of opportunities across different groups may be a cause of resentment and disharmony. We consider, therefore, that reducing the disparities in educational performance by socio-economic background is a significant challenge.

Aim 3: To give every person the opportunity to play a part in strengthening Britain's economy

Challenge: To close the gender pay gap faster and further

Scale and nature of the challenge

Thirty-five years after the Equal Pay Act 1970 came into force, British women still earn significantly less than British men. The gap between men's and women's average earnings – the 'gender pay gap' – has shrunk continuously over the past three decades, but despite this progress, the difference in average hourly wage for women working full-time and men working full-time in Britain is still greater than 10%; and progress today appears to be grinding to a halt.

¹⁰ Cabinet Office. 2009. *Unleashing Aspiration: The Final Report of the Panel on Fair Access to the Professions*.

Research¹¹ suggests that the pay gap has many causes including occupational segregation (the fact that women tend to be concentrated in certain sectors and certain types of role: only a third of managers are women, and only 12% of major corporate board posts are occupied by women),¹² a part-time pay penalty, a historically lower level of qualifications than men, caring responsibilities and discrimination.

Costs

The gender pay gap imposes evident costs on individual women. While it is difficult to be categorical, when the gap changes over time, and is a different size among different age groups, the cost over a woman's lifetime is likely to be in the order of hundreds of thousands of pounds. This constrains their ability to provide for themselves and for their family and to build up savings: this Review shows, for example, that women experience higher levels of poverty, and are more likely to live in overcrowded and poor housing.

It is similarly difficult to be precise about the overall cost to society as a whole of the gender pay gap. The corollaries and causes of the gap (including the under-use of women's skills and the loss of those skills from the labour market altogether) are likely to impose costs on the economy. Conversely, addressing those factors could bring economic benefits. In 2006 the Women and Work Commission estimated that increasing women's participation in the labour market and reducing occupational segregation had the potential to benefit the economy by somewhere in the region of £15-23bn each year.

Looking to the future, there may be some reasons to be optimistic about the pay gap. First, progress to date, though slow, has been steady. Second, today's younger women (aged 40 and under) are more qualified than their male counterparts, and their higher skills may give them more opportunities to earn high salaries than women in previous generations had. On the other hand, however, the progress of the past 35 years has only occurred in a period which has seen specific legislation to outlaw discrimination, the implementation of specific policies designed to tackle aspects of the pay gap,¹³ and the introduction of other labour market policies (such as the National Minimum Wage) which have disproportionately benefited women. Similarly, despite the fact that women under 30 are better qualified than men of the same age, a gender pay gap of 5% is already discernible among those aged under 30 today. Therefore, closing the pay gap further and faster remains a significant challenge.

¹¹ See, for example, The Women and Work Commission, 2006

¹² Sealy, R. Singh, V. and Vinnicombe, S. 2009. *Female FTSE 100 Report*. Cranfield University.

¹³ Such as the 'Quality Part Time Work Fund' outlined in Communities and Local Government, 2007. *Towards a Fairer Future: Implementing the Women and Work Commission Recommendations*.

Challenge: To close the ethnic and religious employment and pay gaps faster and further***Scale and nature of the challenge***

Though the differences in employment rates between different ethnic groups have narrowed over recent years, people of some backgrounds are still significantly more likely to be out of work than others. Some ethnic minority and religious groups further defined by gender and age, show particularly large differences from the average. By the age of 22-24, 44% of Black people are not in education, employment or training, compared to fewer than 25% of White people. 1 in 4 Bangladeshi and Pakistani women work, compared with nearly 3 in 4 White British women, and only 47% of Muslim men and 24% of Muslim women are employed.

When in work, people from most ethnic minority backgrounds earn less than might be expected, given their qualifications, age and occupation. Pakistani and Bangladeshi men's earnings fall 13% and 21% below what might be expected, and Black African Christian and Chinese men experience pay penalties of 13% and 11%. The most significant variation in pay rates among different religious groups is for Muslim men and women. Muslim men experience a pay gap of 17% compared to White British men, rising to 22% for Muslim women.

Costs

Being out of work can have effects not only on an individual's income, but on their health and wellbeing, on their ability to provide for their family and to plan for future. Three-quarters of Bangladeshi children and half of Black African children in Britain grow up in poverty, and long-term low employment and low pay levels can result in ongoing deprivation and poor housing for ethnic minority families.

There are costs for the wider economy, including lost output and the expense of paying benefits. While it is hard to be categorical about the scale of these direct costs, estimates from the National Audit Office in 2008 suggested that they are in the region of £8.6bn each year.¹⁴ Differential rates of unemployment can also impose wider social costs, such as deterioration in relations between people of different backgrounds.

¹⁴ National Audit Office. 2008. *Increasing Employment Rates for Ethnic Minorities*.

While employment rates for ethnic minority groups have increased over time, evidence suggests that some forms of discrimination persist in the modern workplace. According to the 2009 citizenship survey, people from ethnic minority backgrounds are roughly four times as likely as white people to feel that they have experienced discrimination by being refused a job. Small-scale, separate research conducted on behalf of the Department for Work and Pensions suggests that from a list of job applicants with identical qualifications, those with names which do not ‘sound white’ may be less likely to be invited to interview.¹⁵ As Britain continues to become increasingly racially diverse, such discrimination based on stereotypes rather than skill, talent and ambition can only hamper economic growth, and impose further costs.

Challenge: To close the employment gap for disabled people

Scale and nature of the challenge

Disabled people aged 16-24 are more likely than any group of young people to be not in employment, education and training. This employment gap starts early and persists throughout life. 50% of disabled adults are in work, compared to 79% of non-disabled adults. Disability has a bigger bearing on an individual’s job prospects than gender or the fact of being a lone parent.

Among disabled people, some groups are more likely than others to be out of work. Men with limiting long-standing illness and with no qualifications have particularly poor prospects, and their chances of being in work have declined over a generation. The evidence also suggests that some mental health conditions may have a bigger impact on employment prospects than some forms of poor physical health, with the employment rates for people with ‘depression or bad nerves’ (at around a quarter) worse than for most other impairments.

For disabled men and women in work, the division among different types of role (such as professional, managerial, administrative and routine to less) is roughly the same as for non-disabled people. However, disabled people earn less on average both in absolute terms when taking into account other characteristics, including qualification levels. Taking into account other characteristics, disabled women earn 31% less than non-disabled men.

¹⁵ Hales, J. Hayllar, O. Purdon, S. Sejersen, T. and Wood, M. 2009. *A test for racial discrimination in recruitment practice in British cities*. Department for Work and Pensions.

Costs

Work is more than an opportunity to earn a living; it provides a means of meeting and interacting with others, and it can increase an individual's sense of health and wellbeing. Low employment rates therefore impose direct costs on disabled people as a group. There are also likely to be costs on wider society. Disabled people who are unable to access paid employment may rely more on benefits than those who work. They may also have a greater call on other forms of publicly-funded support to deal with the consequences of being out of work.

Evidence suggests that barriers to improving disabled people's participation and success in the workplace persist. The most obvious is direct discrimination: people with a disability or long-term illness are more than twice as likely to report experiencing discrimination than those without a disability or long-term illness. Meanwhile, disabled women were four times more likely to be bullied than other employees. While these, and other, barriers exist it is very unlikely that disabled people will be able to participate in the workplace on the same basis as anyone else, and contribute to the full extent of their talents.

Aim 4: To put an end to identity-based violence and harassment

Challenge: Reduce incidence of hate crimes on all protected grounds and increase conviction rate.

The scale and nature of the challenge

Crimes motivated by hostility or prejudice – hate crimes – are an ugly feature of British life.

It is only relatively recently that the law has recognised hate crime as a specific offence: in relation to race since 1986; religion since 2002 in England and Wales (2003 in Scotland), and disability, sexual orientation and transgender status since 2006 (2009 in Scotland).

The evidence in this Review shows that the reported levels of some forms of hate crime, including religiously and racially aggravated crimes, has fallen slightly in recent years, and the conviction rate increasing. By contrast, the number of reported disability hate crimes referred for prosecution, and the number resulting from homophobia and transphobia has been rising. Yet these statistics may mask under-reporting of crime. We know that in England and Wales racially motivated crimes are under-reported, and that the gap between British Crime Survey estimates and reports to the police is large. Estimates suggest that 3 in 4 people who experience homophobic hate crime do not report it to the police.

Justice is served in a tiny minority of cases. A small proportion of the estimated incidents of hate crime (including the more recently recognised forms, targeting people on the basis of sexual orientation, disability, or transgender status) lead to a charge being made in England and Wales.

Costs

Hate crime is an assault on the basic human rights of any victim. Some attacks result in death: 70 homicides were charged as hate crimes between 2007/08 and 2009/10. The Home Office suggests that other attacks may have profound emotional, physical and financial impacts, including: anger, fear, depression, poorer mental and physical health, and direct financial cost (such as the cost of repairing or replacing vandalised property, or income lost through time off work). There are some indications that hate crimes can cause greater psychological harm to victims than similar crimes without a motivation of prejudice.¹⁶ We also know that victims take action themselves to reduce the chance of suffering hate incidents or hate crimes. Some change their appearance, alter their daily routines (for example, by taking a different route to work or not going out at night) and some leave employment or education or move house altogether.¹⁷

Hate crimes can affect more people than the direct victims themselves. They can create a climate of fear for people sharing a protected characteristic, and mar good relations between different groups. There are no official estimates of the cost of hate crime to the wider economy and to society as a whole, though it is likely that there are costs (in terms of, among other things, lost days at work, and demands on the justice system).

With crimes that have been recognised as such for a relatively short time, there is no reliable means of establishing whether their incidence is increasing or decreasing over generations. Paradoxically, any future rise in the rates of crime reported to police might be interpreted as evidence of progress, in as much as it might attest to increased confidence in the ability to secure justice. It is therefore difficult to make a meaningful estimate of the future cost of lack of action to reduce the incidence of hate crime and increase conviction rates.

Whatever the potential future trends, however, qualitative evidence – specifically, the political, media and public reaction to cases including the deaths of Fiona Pilkington and Francesca Hardwick, the racist murder of Stephen Lawrence, and the homophobic murder of Ian Baynham – suggest that the wider costs of hate crime are generally recognised, and seen as utterly unacceptable in a modern society.

¹⁶ Home Office. 2009. *Hate Crime: The Cross Government Action Plan*. Page 13.

¹⁷ See Equality and Human Rights Commission, 2009. *Promoting the Safety and Security of Disabled People*.

Challenge: To reduce incidence of homophobic, transphobic, disability-related and religiously motivated bullying in schools and workplaces***Scale and nature of the challenge***

Bullying continues to blight the lives of people from a number of different groups, particularly those who look or behave differently from their peers. Disabled people, lesbian, gay and transgender people seem to be particularly at risk. A quarter of religious students also report being bullied on the basis of faith. The exponential growth of “cyberbullying” has added a new dimension to an old problem.

At school, young people with disabilities and special educational needs are most at risk of being bullied. There is evidence that schools do, however, provide substantial support to these students. With regard to homophobic bullying, the evidence shows that schools could be doing more. Despite two-thirds of lesbian, gay and transgender secondary students reporting that they have been victims of often severe bullying (17% of those bullied reported having received death threats), most teachers say that their schools do little to very actively promote respect towards lesbian, gay and transgender young people. Homophobic bullying also seems to be more common in faith schools.

The same groups are most likely to report bullying or harassment in the workplace, with disabled workers twice as likely as non-disabled workers to report bullying, and gay and lesbian people twice as likely as heterosexuals to report discrimination and unfair treatment.

Costs

Being bullied at school can have serious consequences for a young person’s life chances. Those who report being bullied in England did 15% worse at GCSE, and were twice as likely to be not in education, employment or training at aged 16, with all that implies for their future earning potential and ability to contribute to the wider economy.

Bullying in the workplace contributes to the many other problems disabled people face in securing well-paid and fulfilling employment.

Challenge: To raise the rate of rape convictions further

Scale and nature of the challenge

The victims in more than 90% of reported rapes are women. Despite improvements, rape is still drastically under-reported and the rate of conviction has remained stubbornly low – worse than for similar crimes such as violence and other forms of sexual assault.

Costs

2005 research on behalf of the Home Office¹⁸ suggested rape to be ‘the most costly violent crime’, with an overall impact several times greater than each of robbery, common assault and other forms of assault. Alongside the obvious emotional trauma, the possible costs to the individual include compromised physical health (including sexual health) and mental health, including risk of anxiety, depression and drug abuse. The costs to the economy include health treatment for people who have experienced rape, and lost productivity from time off at work.

Rape (although its legal definition has changed in recent years) has been recognised as a serious offence for generations, yet it remains a persistent problem. Of the minority of victims who approach the police, a minority see justice done: and while this remains the case, the majority of rapes will go unreported and unpunished. Therefore raising the conviction rate is a significant challenge.

Challenge: To reduce the rate of repeat domestic violence offences

Scale and nature of the challenge

Over 1 in 4 women and around 1 in 6 men have experienced domestic abuse since reaching the age of 16 in England and Wales. In Scotland, 1 in 7 women and 1 in 9 men have experienced physical partner abuse since reaching the age of 16. Women were the victims of just under three-quarters (73%) of the domestic violence recorded in the 2009/10 British Crime Survey.

Domestic violence is associated with a higher rate of repeat-victimisation than any other kind of violent or acquisitive crime: in 2009/10, three-quarters (76%) of all incidents of domestic violence in England and Wales were repeat offences. Almost half (47%) of victims experienced domestic violence on more than one occasion between 2009 and 2010, compared to 31% of victims of acquaintance violence and 16% of victims of stranger violence. Only a small proportion of domestic violent incidents result in a charge being made.

¹⁸ Brand, S. and Price, R. 2005. *The Economic and Social Costs of Crime*. Home Office.

Costs

Domestic violence is an assault on basic human rights. It can lead to loss of life: in 2008/09, the number of women killed by a partner, ex-partner or lover rose above 100 for the first time in 4 years. Often, domestic violence compromises not only on an individual's physical safety, but their sense of worth, independence, and confidence. Some people, especially those who experience repeated domestic violence, may feel trapped by their abuser and cut off from sources of support.

Domestic violence imposes a wider cost on society. People who experience it may feel physically or mentally incapable of work, leading to lower productivity. Violence also increases demands on services such as health care, emergency housing, the criminal justice system and social services. Research has estimated that these costs of lower productivity and increased demand on services total close to £6bn each year.¹⁹

Although the British Crime Survey suggests that levels of domestic violence are decreasing, and that the numbers of incidents reported to police is increasing, our evidence suggests that many incidents still go unreported. This is therefore a problem that demands continued attention and, given that women are disproportionately likely to experience domestic violence, and particularly its most acute forms, it is a significant challenge to equality today.

¹⁹ Walby, S. 2004. *The Cost of Domestic Care*.

Aim 5: To give more people greater personal autonomy and civic power

Challenge: To reduce the rise of the need for and cost of informal care, and to increase autonomy, choice and control for both carers and those who receive care.

Scale and nature of the challenge

The number of people aged 65 and over with care and support needs is estimated to rise by 87% between 2001 and 2051 as our society ages.²⁰

One in eight people in England provide unpaid care to adults. Society depends heavily on this unpaid workforce. By 2041, it is projected that nearly 1.3 million disabled older people will require informal care – an increase of around 90%.²¹

Some groups are more likely to provide care than others; women more than men, and people in their 50s more than any other age group. 25% of women in their 50s and 18% of men in their 50s are carers.

In some cases these are people who have spent their 20s, 30s or 40s caring for children and now find themselves responsible for looking after a partner, parent, or other relative.

Evidence suggests that there are also a significant number of younger carers – 175,000 aged under 18 in 2001 – whose needs are less well recognised than adult carers’.

A disproportionate number of these young carers are from certain ethnic minority backgrounds (including Bangladeshi, Black African, Black Caribbean and Pakistani backgrounds).

Costs

For some, caring is a positive choice, and a rewarding and fulfilling activity. Others may feel that they have less choice. In either case, caring can impose personal costs: it can be hard to combine with paid work, education or training. It can result in physical ill-health and mental stress. This in turn can impact on carers’ ability to save for old age.

²⁰ Equality and Human Rights Commission. 2009b. *From safety net to springboard – a new approach to care and support for all based on equality and human rights*.

²¹ Equality and Human Rights Commission. 2009b. Page 10.

The contribution of unpaid carers to the economy has been estimated at £87bn each year.²² Conversely, whilst many people combine care and paid work, family and caring responsibilities account for 26% of economic inactivity in the UK working age population compared with 19% in Germany and 18% in the Netherlands.²³ A third of carers have never been in paid employment and 20% have declined work opportunities because they are responsible for providing care and support.²⁴

It is therefore in society's long-term interest to reform our approach to care and support. Any settlement must achieve a sustainable balance between the capacity of the economy to fund care and support and its ability to cope with increasing levels of economic inactivity among those leaving the workforce to provide unpaid care and support and the reasonable limits of individual and family contributions.

In the case of young carers, it is crucial that they have the opportunities to acquire education and training, as missing such opportunities may hinder their prospects for the long-term. In the case of middle-aged people, caring responsibilities may prevent them from contributing to local society in other ways (though volunteering, charity work, and other forms of civic action.)

As society continues to age, and with the ratio of people of working age to people of retirement age decreasing, the demand for care will increase. Failure to arrive at a new settlement for care and support will impose ever greater costs as time goes by, and so developing those forms of support is a significant challenge today.

²² Buckner, L. and Yeandle, S. 2007. *Valuing Carers: Calculating the Value of Unpaid Care..* Carers UK and the University of Leeds.

²³ Equality and Human Rights Commission. 2009b. Page 49.

²⁴ Equality and Human Rights Commission. 2009, Page 49.

Challenge: To close the ‘power gap’ in public bodies on all protected grounds

Scale and nature of the challenge

Democracy is predicated on the idea that every individual, no matter what their background or personal circumstances, should have an equal opportunity to have a say in decisions about the country’s future. However, many bodies that exercise power and influence are far from representative of the population as a whole. This is true of gender – women represent fewer than a quarter of Westminster MPs, and barely 3 in 10 councillors in England. It is true of race; 4% of Westminster MPs are from an ethnic minority background, less than the proportion of the adult population that is from an ethnic minority background (though this may in part reflect the fact that people from ethnic minorities tend to be younger than average, and people in decision-making bodies do not). The evidence also suggests that some groups defined by religion, age, disability and sexual orientation are under-represented.

Costs

The costs of lack of representativeness in decision-making bodies cannot be expressed in economic terms. The Speaker’s Conference Report on parliamentary diversity²⁵ argues, instead, that decision-making bodies ‘can do [their] work effectively only if [their] Members are in tune with the experiences of the people they represent’. The report, and other similar independent reports,²⁶ argue that proper representativeness is a question of justice, effectiveness and legitimacy. Public bodies make better decisions when they are informed by a range of different views; they benefit from drawing from the widest possible pool of talent; and a body which truly looks like the people it serves may find it easier to take difficult, but necessary decisions in the public interest.

Some public bodies have been becoming more representative in some ways in recent years. Women make up nearly half of the Welsh Assembly; the number of Muslim MPs, doubled at the 2010 election, and there are more openly lesbian, gay or bisexual MPs than at any point in history. However, progress towards greater representativeness on many counts is slow, uneven across different bodies and geographic areas, and in some cases representativeness is decreasing. The average age of councillors in England is increasing over time. Closing the ‘power gap’ remains a significant challenge.

²⁵ House of Commons, 2010. *Speaker’s Conference on Parliamentary Representation – Final Report*.

²⁶ Including Councillors’ Commission, 2008. *Representing the Future – The Report of the Councillors’ Commission*; Turley, A. 2009. *First Among Equals: Diversity in Local Government*. New Local Government Network; Government Equalities Office, 2009. *Black, Asian and Minority Ethnic Women Councillors’ Taskforce Report*.

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Part I, II and III:
Appendices
1, 2, 3, 4 and 5

Appendix 1

Criteria for selecting the indicators

In selecting the indicators for the Equality Measurement Framework a number of criteria were applied to each individual indicator, to the balance of indicators within a domain and to the overall portfolio of indicators.¹

Criteria that apply to individual indicators

Essential criteria

1. **Relevance.** Relevance for assessing equality and human rights, which is likely to be particularly important for one or more groups of people.
2. **Legitimacy.** The indicator in question qualifies as relevant and legitimate in the sense that it is endorsed (and rated highly vis-à-vis other potential indicators) by relevant stakeholders.
3. **Disaggregation by equality characteristics.** The indicator can be disaggregated by population sub-group – the most relevant for our purposes are gender, ethnicity, disability, age, sexual orientation, transgender, religion and belief, and social class.
4. **Geographical coverage.** For each indicator, measures are available that permit monitoring across all three countries that constitute Britain (that is, England, Scotland and Wales), although the sources and technical specification of some measures may differ. In this respect, some indicators will be strictly comparable across Britain, while others are only broadly or loosely comparable.
5. **Aspect of inequality.** The indicator captures a result in terms of an outcome (achievement) or process (discrimination or other forms of disadvantage such as lack of dignity or respect).
6. **Frequency.** The indicator is (or could be) collected reasonably frequently (at least every three years) for monitoring purposes.

¹ These criteria are taken from the Equality and Human Rights Commission report by Alkire, S. *et al.* Further details of each criteria and the consultative process that agreed them are in Appendix 2 of this report. It also presents an evaluation of each selected indicator against the essential selection criteria in the summary tables at the beginning of the discussion of each indicator in the domain-specific chapters, and the ‘balancing’ criteria applying to domains as a whole are discussed in the conclusion to each chapter. Alkire, S., Bastagli, F., Burchardt, T., Clark, D., Holder, H., Ibrahim, S., Munoz, M., Terrazas, P., Tsang, T. and Vizard, P. 2009. *Developing the Equality Measurement Framework: selecting the indicators*. Research Report 31. Manchester: Equality and Human Rights Commission. Available at: <http://www.equalityhumanrights.com/key-projects/equality-measurement-framework/>

7. **Individual level.** The indicator relates where appropriate to individuals rather than households or broader social units.
8. **Robustness.** The indicator is subject to the standard statistical requirements of accuracy, reliability and validity.

Desirable criteria

9. Within the broad equality characteristics, the indicator can be disaggregated into narrow bands.
10. The indicator can be disaggregated by additional population sub-groups such as family type, asylum and refugee status.
11. The indicator can be disaggregated by regions and local areas.
12. The indicator is comparable over time in the sense that existing time series data are available.
13. The indicator is comparable internationally – especially with other EU states.
14. When appropriate, the indicator should be **dynamic** in the sense that it helps identify change or lack of change in valuable capabilities over time – this involves being able to track individuals over time and distinguish between those who become disadvantaged, those who manage to escape disadvantage and those who are persistently disadvantaged.
15. The indicator is derived from a source that allows intersectionalities to be investigated.
16. The indicator is derived from a source that allows cross-domain analysis.
17. When appropriate, the indicator should be sensitive to effective policy interventions without being readily susceptible to manipulation.
18. Proposals for new indicators should take account of cost implications and should be proportional to the needs of stakeholders. New indicators should be proposed only in cases where reasonably close alternatives or suitable proxy indicators are not available.

Criteria that apply to the balance of indicators within each domain

Essential criteria

19. The selected indicators for each domain should highlight the most important aspects of disadvantage and inequality in that domain for each and every group of people.
20. The selected indicators for each domain should include measures that either focus on the whole distribution (for instance the Gini coefficient) or different parts of the same distribution (for instance the proportion of people on low incomes, middle incomes and high incomes).

Desirable criterion

21. The selected indicators for each domain should include some objective and some subjective indicators.

Criteria that apply to the portfolio of indicators as a whole

Essential criteria

22. The portfolio of indicators should be easy to communicate, interpret and comprehend.
23. The portfolio of indicators should be balanced across domains, avoiding overlaps and gaps.

Desirable criterion

24. The portfolio as a whole should include at least some indicators of particular human rights concerns.

These criteria were applied to the selection of indicators in each domain and overall. In practice, the essential criteria proved difficult to meet, so that the 'desirable' criteria were rarely decisive in choosing one indicator over another.

Appendix 2

Indicator comparison

Many institutions and individuals have been involved in supporting the development of the Equality Measurement Framework indicators for adults. These formed the starting point for this Review. Due primarily to data availability issues it was not possible to report on every indicator and the following table shows the relationship between the Equality Measurement Framework indicators and the indicators reported on in this Review.

Table A2.1 The Equality Measurement Framework Indicators and the Indicators used in this Review

Equality Measurement Framework indicators by domain	Indicators with evidence in the Triennial Review by chapter
Life <ul style="list-style-type: none"> • Life expectancy • Specific-cause mortality • Homicide rates • Death rates from non-natural causes for people [in] institutions 	Chapter 6 Life <ul style="list-style-type: none"> • Life expectancy • Mortal illness • Suicide • Accidental death • Homicide • Deaths in institutions
Legal security <ul style="list-style-type: none"> • Offences reported and brought to justice • Equal treatment by the criminal justice system • Detention numbers and conditions • Equal protection and support for individuals with civil justice problems 	Chapter 7 Legal security <ul style="list-style-type: none"> • Offences reported and brought to justice • Equal treatment by the criminal justice system • Detention numbers and conditions
Physical security <ul style="list-style-type: none"> • Violent crime • Hate crime • Fear of crime • Physical security for people [in] institutions 	Chapter 8 Physical security <ul style="list-style-type: none"> • Crimes against the person (violent crime, rape and domestic violence) • Targeted violence • Fear of crime
Health <ul style="list-style-type: none"> • Limiting illness, disability and mental health • Subjective evaluation of current health status • Healthy living • Dignity and respect in health treatment • Vulnerability to accidents (by location) 	Chapter 9 Health <ul style="list-style-type: none"> • Poor health and limiting long-term illness or disability • Poor mental health • Living a healthy life • Dignity and respect in health treatment

Table A2.1 Continued

Equality Measurement Framework indicators by domain	Indicators with evidence in the Triennial Review by chapter
<p>Education and learning</p> <ul style="list-style-type: none"> • Being treated with respect in education • Basic skills • Educational qualifications • Participation in lifelong learning • Use of the Internet 	<p>Chapter 10 Education</p> <ul style="list-style-type: none"> • Level of development at age 5 • Permanent exclusions from school • Bullying, respect and support at school • Educational attainment at age 16 • Participation in higher education • Adult skills and qualifications • Adult learning • Use of the Internet
<p>Productive and valued activities (A)</p> <ul style="list-style-type: none"> • Employment • Earnings • Occupation • Discrimination in employment 	<p>Chapter 11 Employment</p> <ul style="list-style-type: none"> • Employment rates • Pay gaps • Occupational segregation • Injury and illness at work • Unfair treatment, bullying and harassment
<p>Standard of living (A)</p> <ul style="list-style-type: none"> • Poverty and security of income • Housing quality and security • Quality of the local area • Being treated with respect by private companies and public agencies in relation to your standard of living 	<p>Chapter 12 Standard of living</p> <ul style="list-style-type: none"> • Wealth • Low household income and low pay • Housing and neighbourhood quality • Financial exclusion
<p>Standard of living (B)</p> <ul style="list-style-type: none"> • Access to care <p>Productive and valued activities (B)</p> <ul style="list-style-type: none"> • Unpaid care and free time <p>Individual, family and social life (A)</p> <ul style="list-style-type: none"> • Availability of support 	<p>Chapter 13 Care and Support</p> <ul style="list-style-type: none"> • Access to care • Access to child care • Unpaid care
<p>Participation, voice and influence</p> <ul style="list-style-type: none"> • Formal political participation • Perceived influence in local area • Political activity • Taking part in civil organisations • Being treated with dignity and respect while accessing and participating in decision-making forums 	<p>Chapter 16 Power and voice</p> <ul style="list-style-type: none"> • Formal political participation • Perceptions of influence • Political activity • Taking part in decision-making and in campaigning organisations
<p>Individual, family and social life (B)</p> <ul style="list-style-type: none"> • Being free from domestic abuse • Being able to participate in key social and cultural occasions which matter to you • Being able to be yourself • Being able to form and pursue the relationships you want 	
<p>Identity, expression and self respect</p> <ul style="list-style-type: none"> • Freedom to practice your religion or belief • Cultural identity and expression • Ability to communicate in the language of your choice • Self respect • Freedom from stigma 	

Appendix 3

Equality groups

A3.1 Introduction

In Part II of the Triennial Review we methodically looked at the evidence on each indicator for groups in seven equalities strands.¹ The seven strands that we have considered in this first review relate to those identified in the 2006 Equality Act: age, disability, gender, race, religion and belief, sexual orientation and transgender.

This Appendix provides definitions for groups within these strands² and where possible the overall proportion of the population in England, Scotland, Wales and Britain that they account for, using the most reliable source available for population estimates.

Many of the issues covered in this Review have different impacts for younger people as opposed to older ones, for men as opposed to women and for lower socio-economic groups than higher ones. However, it has often not been possible to obtain data for groups that intersect these basic socio-demographic characteristics with the other strand characteristics – e.g. young Muslims in lower socio-economic classes (SEC). It is therefore important to consider when comparing figures for two aggregate groups, for example Asian people compared to White people, whether the differences are likely to reflect in some part a different age or SEC profile, even when the intersectional data are not available. For gender, ethnicity, religion and belief and disability we therefore also present in this Appendix the broad age and SEC profiles for groups to enable any differences in profile to be born in mind when considering the evidence. Consequently we start with the age and SEC definitions and profiles before moving on to the other strands.

A recurring theme in this Review has been the relatively poor availability of quantitative data for sexual orientation and transgender and this limitation applies equally to reliable population data. However, we do briefly summarise the position on population estimates for these groups.

¹ As well as drawing out information on socio-economic groups (SEG) and other groups, such as asylum seekers or homeless people where we have found evidence specifically relating to them.

² Definitions relate both to questions currently used in different sources and where relevant the ‘harmonised’ questions recommended by the ONS to be used on all surveys in the future so that results are comparable.

A3.2 Age

Definitions

Age is almost always defined as ‘age last birthday’ and wherever possible is collected in surveys via date of birth.³ Alternatively, where detailed breakdowns are not required, age groups may be used in the question.

In outputs, age is always reported in age groups. For adults, the most detailed age groups are ‘five-year’ bands, except for the first that covers the four years 16-19 (since adults are defined as aged 16 or over, not 15 or over). This is followed by 20-24, 25-29 etc up to 80-84, finishing with 85 or over. These can be paired to give ‘ten-year’ age groups and then grouped further if fewer or larger groups are required.

Box A3.2.1 Related issue: Labour market and employment data

For studying employment and labour market issues, two groups: ‘working age’ and ‘over state retirement age’ have traditionally been used and are still seen in many analyses. ‘Working age’ is defined as 16-59 for women and 16-64 for men, whilst ‘over state retirement age’ is defined as 60 or over for women and 65 or over for men. In view of changes which will equalise the retirement age for women and men, a proposal has been made to replace these age groups with 16-64 and 65 or over as the standard in relevant analyses.

³ Other definitions may be used for specific analyses, e.g. academic age, which is age on the preceding 31 August, can be used when studying education and/or young people.

Age profile in Britain, England, Scotland and Wales

Table A3.2.1 shows that about 1 in 7 (15%) of the adult population in Britain is below the age of 25 and about 1 in 5 (20%) is above the age of 65.

Wales has a slightly higher proportion of the population in all the age bands above 55, which together account for 38% of adults in Wales compared to 35% in Scotland and in England.

Table A3.2.1 Resident population by age group: 16 or over in Britain, mid-2009

	Column percentages			
	England	Wales	Scotland	Britain
16-24	15	15	15	15
25-34	16	14	15	16
35-44	18	16	17	18
45-54	17	16	18	17
55-64	14	16	15	15
65-74	10	12	11	11
75-84	7	8	7	7
85 or over	3	3	2	3
Total pop. 16 or over (thousands)	42,105.3	2,449.1	4,281.7	48,836.4

Source: Equality and Human Rights Commission calculations from ONS, 2010, Mid-2009 population estimates for UK, England and Wales, Scotland and Northern Ireland. Published 24 June 2010.

A3.3 Social class

Definitions

The official definition of social class is the National Statistics Socio-economic Classification (NS-SEC). This is an occupationally based classification which can provide coverage of the whole adult population, if information is collected from those who have stopped working, about their previous employment. The information required to create the NS-SEC is occupation and details of employment status.^{4,5}

The standard eight classes of the NS-SEC are shown in the left hand side of the table below which, together with the residual group of full-time students and those not classified for other reasons, cover the whole population. These are often reduced to five or three classes as shown in the second two columns (with the last group of never-worked or long-term unemployed also not numbered).

Social class profile in Great Britain, England, Scotland and Wales

Table A3.3.2 shows a third of the British working age population (34%) is in the managerial and professional class. At the other end of the spectrum, about a fifth (22%) is in semi-routine or routine occupations. A quarter (25%) is in the remaining classes between these. About a fifth, 19%, have never worked, are long-term unemployed, full-time students or otherwise not classified.

Scotland and Wales have a lower socio-economic profile than England. Manual and routine occupations account for 33% in Wales and 32% in Scotland compared to 29% in England.

⁴ Whether an employer, self-employed or employee; whether a supervisor; number of employees at the workplace, whether a full-time student or long-term unemployed.

⁵ Similar information was previously required for social class based on occupation (SC) and socio-economic group (SEG). Other classifications are used outside of government, for example the A- B-C1-C2-D-E classification used by market researchers.

Table A3.3.1 The NS-SEC social class classification

Eight classes	Five classes	Three classes
1. Higher managerial and professional occupations	1. Managerial and professional occupations	1. Managerial and professional occupations
2. Lower managerial and professional occupations		
3. Intermediate occupations	2. Intermediate occupations	2. Intermediate occupations
4. Small employers and own account workers	3. Small employers and own account workers	
5. Lower supervisory and technical occupations	4. Lower supervisory and technical occupations	3. Routine and manual occupations
6. Semi-routine occupations	5. Semi-routine and routine occupations	
7. Routine occupations		
8. Never worked or long-term unemployed	Never worked or long-term unemployed (un-numbered)	Never worked or long-term unemployed (un-numbered)
Full-time students and other not classified (not numbered)*	Full-time students and other not classified (not numbered)*	Full-time students and other not classified (not numbered)*

Source: ONS.

Note: * This residual group is referred to as 'nec' in some of the following tables.

Table A3.3.2 Household population of working age by NS-SEC in Britain, October 2008 - September 2009

Column percentages

	England	Wales	Scotland	Britain
1. Higher managerial and professional	12	8	10	12
2. Lower managerial and professional	22	20	22	22
3. Intermediate	9	9	10	9
4. Small employers and own account workers	8	8	6	8
5. Lower supervisory and technical	8	9	10	8
6. Semi-routine	12	14	13	13
7. Routine	9	10	10	9
8+. Never worked, long-term unemployed and nec	19	22	19	19
Total pop. 16-59/64 (thousands)	31,756.9	1,790.4	3,219.1	36,766.5
<i>Unweighted base</i>	<i>142,836</i>	<i>19,707</i>	<i>27,478</i>	<i>190,021</i>

Source: Equality and Human Rights Commission analysis of ONS, 2010, Annual Population Survey, October 2008-September 2009.⁶

Note: Class 8+ comprises Class 8 and the residual groups full-time students and other not classified.

⁶ Office for National Statistics, *2010 Annual Population Survey, October 2008-September 2009*. Colchester, Essex: UK Data Archive.

Box A3.3.1 Related issue: Social class and age in the working age population

As Table A3.3.3 shows, over-30s are unsurprisingly more likely to be in managerial and professional and intermediate classes and less likely to have never worked, to be long-term unemployed, to be full-time students or otherwise not classified than under-30s. The proportion of the working age population in managerial and professional occupations peaks at age 30-44. In this age group 43% are in these occupations, declining a little to 38% between this group and retirement age.

Among the over-30 working age population around 4 in 10 are in managerial and professional occupations, around 2 in 10 are in intermediate occupations, around 3 in 10 are in routine and manual occupations and about 1 in 10 have never worked or are long-term unemployed, full-time students or not classified.

Table A3.3.3 Household population of working age by age group and NS-SEC in Britain, October 2008-September 2009

	Row percentages					
	Managerial and professional	Intermediate	Routine and manual	Never worked, long-term unemployed, full-time students and nec		<i>Un-weighted base</i>
16-29	20	13	31	37		49,098
30-44	43	18	28	11		64,254
45-59/64	38	19	30	13		76,669
Total 16-59/64	34	17	30	19		190,021

Source: Equality and Human Rights Commission analysis of ONS, 2010, Annual Population Survey, October 2008-September 2009.

A3.4 Gender

Definitions

Gender differences are shown through disaggregating by gender, i.e. male or female. The question may ask ‘What is your sex?’ or just ‘Are you?’ with the answers ‘male’ or ‘female’.

Gender profiles in Great Britain, England, Scotland and Wales

In all three nations women constitute just over half the population because there are more women in older age groups than men.

Table A3.4.1 Resident population aged 16 or over by gender in Britain, mid-2009

Column percentages

	England	Wales	Scotland	Britain
Women	51	52	52	51
Men	49	48	48	49
Total pop. 16 or over (thousands)	42,105.3	2,449.1	4,281.7	48,836.4

Source: Equality and Human Rights Commission calculations from ONS, 2010, Mid-2009 population estimates for UK, England and Wales, Scotland and Northern Ireland. Published 24 June 2010.

Box A3.4.1 Related issue: Men die younger⁷

In all three nations, men outnumber women in all age groups up to the 25-34-year-old band and thereafter women outnumber men due to the higher mortality of younger men compared to women. In Britain, boys or young men account for 51% of those aged 0-15, 16-24 and 25-34. This proportion steadily declines thereafter so that by the 65-74 year age band, men constitute only 48% of the population. The shorter average life expectancy of men, even for those who have already survived until 60, means that among those aged above 85 years, less than a third (32%) are men.

In Scotland the higher mortality of younger men compared to the rest of the country means that the proportion of the population aged over 35 is lower than elsewhere. In Scotland 48% of the 35-44 age band is male compared to 49% in Wales and 50% in England. In the 65-74 age band, males account for only 46% of the population in Scotland compared to 48% in Wales and in England.

⁷ The figures quoted in this box are calculated from the ONS, 2010, mid-2009 population estimates as available on <http://www.statistics.gov.uk/statbase/Product.asp?vink=15106>

Box A3.4.2 Related issue: Gender and social class in the working age population

A higher proportion of women (22%) than of men (17%) have never worked or are long-term unemployed. As with the overall population this is mainly among the under 30s, but the difference between men and women is greatest in the 30-44-year-old age group where women are about twice as likely as men to be in this situation (15% to 7%).

Among people not in this situation, women are more likely to be in intermediate occupations and slightly less likely to be in managerial/professional or in routine/manual occupations.

Table A3.4.2 Household population of working age by gender, age and NS-SEC, October 2008 - September 2009.

Row percentages

	Managerial and professional	Intermediate	Routine and manual	Never worked, long-term unemployed, full-time students and nec	Un-weighted base
Women	32	18	28	22	93,717
Within which: 16-29	20	15	28	38	25,260
30-44	40	20	26	15	34,190
45-59/64	35	20	30	16	34,267
Men	36	16	32	17	96,304
Within which: 16-29	20	11	34	35	23,838
30-44	46	17	30	7	30,064
45-59/64	40	18	31	10	42,402

Source: Equality and Human Rights Commission analysis of ONS, 2010, Annual Population Survey, October 2008-September 2009.

A3.5 Ethnic group

Definitions

Ethnic group is defined as an individual's self-defined identity. Since 2001, ethnic group survey questions have mainly been based on the 2001 Census questions. The categories in the current harmonised questions⁸ are shown in Figure A3.5.1:

Table A3.5.1 Census ethnic categories

Five major categories	England and Wales	Scotland
White	White British	White Scottish
	White Irish	Other White British
	Other White	White Irish
		Other White
Mixed	Mixed, White and Black Caribbean	Mixed
	Mixed, White and Black African	
	Mixed, White and Asian	
	Other mixed	
Asian or Asian British	Indian	Indian
	Pakistani	Pakistani
	Bangladeshi	Bangladeshi
	Other Asian	Chinese*
		Other Asian
Black or Black British	Caribbean	Black Caribbean
	African	Black African
	Other Black	Other Black
Chinese or other ethnic group	Chinese	
	Other ethnic group	Other ethnic group

Source: Census 2001

Note: * For reporting British level ethnic group statistics, the Chinese group in Scotland is moved out of the Asian group and combined with the Chinese group in England and Wales.

⁸ Guidance is available from the ONS website at: <http://www.ons.gov.uk/about-statistics/measuring-equality/ethnic-group-statistics/index.html>

Box A3.5.1 Related issue: What does ‘ethnic minority’ mean?

There is some difference of opinion over the definition of ethnic minorities as a group. Historically only visible ethnic minorities have been included in this definition, which is generally equated to non-White groups in the classification in Table A3.5.1 i.e. Mixed, Asian, Black and Chinese or other. However increasingly White minorities are also included, e.g. the ‘other White’ group.

Ethnic profiles in Great Britain, England, Scotland and Wales

As Table A3.5.2 shows, the White population in mid-2007 accounted for nearly 90% of the England and Wales resident population aged 16 or over, nearly 85% were White British. Just over 10% were non-White. Within this Indian groups were 2.5% of the total, Pakistani and Bangladeshi groups 2%, Black African groups 1.3% and Black Caribbean groups 1.1%. People of mixed ethnicity made up a further 1.1%.

In Wales, non-White groups made up less than 3% of the resident population in mid-2007. Within this about half are South Asian.⁹ The small non-White population means that in most cases there is no separate Welsh data on ethnic minorities for the indicators that we cover in Part II of the Review.

In Scotland the picture is similar, data from the 2009 Scottish Household Survey show that non-White groups made up about 3% of the adult population. Within this Asian groups make up around two-thirds.¹⁰ (See Table A3.5.3).

On the basis of survey data for the British household population, the picture is similar with the proportion of non-White in England being about 11%, whilst in Scotland and Wales it is about 3% (see Table A3.5.4).

⁹ Including Indian, Pakistani, Bangladeshi, and other Asian, but excluding Chinese.

¹⁰ The Scottish Government, 2010. Scotland’s People Annual Report: Results from 2009 Scottish Household Survey. Here Asian includes Chinese.

Table A3.5.2 Resident population aged 16 or over by ethnic group in England and Wales, mid-2007

	England	Wales	England and Wales
White	89.2	97.4	89.6
Within which:			
• White British	84.1	94.8	84.7
• White Irish	1.3	0.6	1.3
• White other	3.7	2.0	3.6
Non-White	10.8	2.6	10.4
Within which:			
• Mixed	1.2	0.6	1.1
• Asian Indian	2.6	0.5	2.5
• Asian Pakistani	1.5	0.3	1.5
• Asian Bangladeshi	0.6	0.2	0.6
• Other Asian	0.6	0.2	0.6
• Black Caribbean	1.2	0.1	1.1
• Black African	1.3	0.2	1.3
• Other Black	0.2	--	0.2
• Chinese	0.8	0.3	0.8
• Other other	0.8	0.3	0.8
Total pop. 16 or over (thousands)	41,436.2	2,423.5	43,859.7

Source: Equality and Human rights Commission calculations from ONS, 2010, Population estimates by ethnic group (experimental) mid-2007.

Note: -- Less than 0.05%.

Table A3.5.3 Household population by ethnic group aged 16 or over in Scotland, 2009

	Percentage
	Scotland
White	96.8
Within which:	
• White Scottish	82.1
• White Other British	11.4
• White Irish	0.9
• White other	2.4
• Non-White	3.2
Within which:	
• Mixed	0.1
• Asian Indian	0.5
• Asian Pakistani	0.7
• Asian Bangladeshi	0.1
• Asian Chinese	0.4
• Other Asian	0.4
• Black Caribbean	--
• Black African	0.3
• Other Black	0.1
• Any other	0.7
• Unweighted base	12,543

Source: The Scottish Government, 2010, Scotland's People Annual report: Results from 2009 Scottish Household Survey.

Note: -- Less than 0.05%.

Table A3.5.4 Household population aged 16 or over by ethnic group, Britain, October 2008-September 2009

	Column percentages			
	England	Wales	Scotland	Britain
White	89	97	97	90
Non-White	11	3	3	10
Total pop. 16 or over (thousands)	41,332.4	2,412.7	4,228.4	47,973.4
<i>Unweighted base</i>	<i>195,733</i>	<i>29,141</i>	<i>39,125</i>	<i>263,999</i>

Source: Equality and Human Rights Commission analysis of ONS, 2010, Annual Population Survey, October 2008-September 2009.

Note: Non-White includes Mixed, Asian, Black, Chinese and other ethnic groups.

Box A3.5.2 Related issue: Non-White ethnic groups have a younger age profile

Table A3.5.3 shows the younger age profile of ethnic minority groups compared to the White population. Over half the adults of Chinese (57%), Pakistani/Bangladeshi (56%) mixed ethnicity (60%), Black African (51%) 'other' ethnicity (50%) are under the age of 35, compared to 29% of White adults and 30% Black Caribbean. Fewer than 1 in 7 of these minority groups and fewer than 1 in 5 Indian people are aged 55 or over compared to over a third of White people and a quarter of Black Caribbean people.

Table A3.5.5 Resident population by age and ethnic group, aged 16 or over in England and Wales, 2007

	Column percentages							
	White	Mixed	Indian	Pakistani/ Bangladeshi	Black Caribbean	Black African	Chinese	Other
16-24	14	35	19	26	15	22	24	21
25-34	15	25	26	30	15	28	34	29
35-44	18	20	20	20	26	27	19	23
45-54	16	10	16	12	19	14	13	14
55-64	15	5	10	6	8	8	7	8
65 or over	21	5	9	7	16	4	5	5
Pop. (thousands)	39,309	492	1,086	884	497	554	356	681

Source: Equality and Human Rights Commission calculations from ONS, 2010, Population estimates by ethnic group (experimental), mid-2007.

Box A3.5.3 Related issue: Ethnicity and social class in the working age population

The apparently lower socio-economic profile for some ethnic minority groups is due mainly to higher proportions of people who are full-time students or have 'never worked' combined with younger age profiles.

Table A3.5.6 shows that over 10% of working age non-White ethnic groups over the age of 30 have never worked or are long-term unemployed, compared to less than 3% of the White group. For the 16-29 age group there are high proportions of people who are full-time students, particularly among the non-White population: 39% compared to 25% of White 16-29-year-olds).

Apart from that there is little overall class difference between working age White and non-White groups. For those above the age of 30 there are slightly higher proportions of White people than non-White ethnic minorities in the

Box A3.5.3 Continued

management and professional class (49% to 44% for 30-44-year-olds and 44% to 40% for those aged 45 to retirement age), but for younger people (16-29) a higher proportion of non-White ethnic minorities are in the managerial and professional group than their White counterparts (35% to 30%).

Table A3.5.7 shows data for some larger ethnic groups within the non-White ethnic population. The big differences again are seen in the proportions who have never worked, are long-term unemployed, full-time students or who have no social class specified. Only 17% of the White group are in this situation, rising to 24% of Indians, 33% of Black people and 46% of Pakistani/Bangladeshi people.

For people in social classes 1-7, although the proportion of the non-White group overall who are in the professional/managerial class is the same as for the White group (just over 40%), Indian people are much more likely to be in this class (51%) and Pakistani/Bangladeshi people much less likely (28%).

Table A3.5.6 Household working age population by social class, age and ethnic group in Britain, 2009

	Column percentages							
	16-29		30-44		45-59/64		16-59/64	
	White	Non-White	White	Non-White	White	Non-White	White	Non-White
Never worked and long-term unemployed	7	15	3	13	2	12	4	13
Full-time students	25	39	1	5	--	--	8	17
Not classified	1	--	5	--	10	9	6	4
Class 8 and residual groups	33	55	9	22	12	23	17	34
Classes 1-7	67	45	91	78	88	77	83	66
<i>Unweighted base</i>	<i>42,770</i>	<i>6,296</i>	<i>56,489</i>	<i>7,737</i>	<i>72,209</i>	<i>4,416</i>	<i>171,468</i>	<i>18,449</i>

Of those in classes 1-7

Managerial and professional	30	35	49	44	44	40	42	41
Intermediate	20	21	21	20	22	23	21	21
Routine and manual	49	45	31	36	35	37	37	39
<i>Unweighted base</i>	<i>27,181</i>	<i>2,736</i>	<i>51,134</i>	<i>5,986</i>	<i>62,914</i>	<i>3,372</i>	<i>141,229</i>	<i>12,094</i>

Source: Equality and Human Rights Commission analysis of ONS, 2010, Annual Population Survey, October 2008-September 2009.

Note: -- Estimate of lower precision not shown.

Table A3.5.7 Household working age population by social class and ethnic group in Britain, 2009

	Column percentages				
	White	Non-White, of which:	Indian	Pakistani/ Bangladeshi	Black
Never worked or long-term unemployed	4	13	--	24	13
Full-time students	8	17	12	16	17
Not classified	6	4	--	--	--
Class 8 and residual groups	17	34	24	46	33
Classes 1-7	83	66	76	54	67
<i>Unweighted base</i>	<i>171,468</i>	<i>18,449</i>	<i>4,080</i>	<i>3,881</i>	<i>3,938</i>

Of those in classes 1-7

Managerial and professional	42	41	51	28	38
Intermediate	21	21	19	28	19
Routine and manual	37	39	30	44	43
<i>Unweighted base</i>	<i>141,229</i>	<i>12,094</i>	<i>3,107</i>	<i>2,076</i>	<i>2,619</i>

Source: Equality and Human Rights Commission analysis of ONS, 2010, Annual Population Survey, October 2008-September 2009.

Note: -- Estimate of lower precision not shown.

A3.6 Religion and belief

Definitions

The official statistics approach to measuring religion and belief, such as in the 2001 Census, is to record broad identity or religious affiliation and not to ask about belief or practice. This has been contentious as it does not recognise non-religious beliefs, although these are covered by the equality legislation, and the results are open to misunderstanding and misrepresentation as showing the level of religious belief in Britain.¹¹ Guidance has recently been published by the ONS in an attempt to discourage the latter.¹² The harmonised questions on religion and belief are shown in Figure A3.6.1:

Figure A3.6.1 Harmonised religion and belief questions and categories

What is your religion, even if you are not currently practising?

CODE ONE ONLY

1. Christian (including Church of England, Catholic, Protestant and all other Christian denominations)
2. Buddhist
3. Hindu
4. Jewish
5. Muslim
6. Sikh
7. Any other religion, please describe
8. No religion

With the optional follow up question:

Do you consider that you are actively practising your religion?

1. Yes
2. No

Source: Office for National Statistics, 2008. *Harmonised Concepts and Questions for Social Data Sources*.

¹¹ See the British Humanist Association website for details, e.g.: <http://www.humanism.org.uk/campaigns/census-2011>

¹² Office for National Statistics, 2009. Guidance on presenting and discussing religion data. <http://www.ons.gov.uk/about-statistics/measuring-equality/ethnic-group-statistics/index.html>

In the following section the figures are in relation to only the first question being asked i.e. 'What is your religion even if you are not currently practicing.' Thus the figures relate to a sense of religious affiliation, rather than relating to current active religious practice.

Religion and belief profiles in Britain, England, Scotland and Wales

On the basis of religious affiliation rather than practice, about three-quarters of all adults in each of the three nations report Christian affiliation. The proportion who say they have no religious affiliation is between a fifth and a quarter (18.2% in England, 21.7% in Scotland and 24.8% in Wales). This leaves 8.1% affiliated to non-Christian religions in England, 2.9% in Scotland and 2.7% in Wales. Because of sample size issues, separate figures breaking down the non-Christian religions are not shown for Wales and Scotland. For Britain overall 7.4% of the population report affiliation to a non-Christian religion. Nearly half of these are Muslim, accounting for 3.5% of the adult population. Other groups are Hindu (1.3%), Sikh (0.6%), Jewish (0.5%) and Buddhist (0.4%). All other religious affiliations account for 1.1% of the population.

Table A3.6.2 Household population by religion and belief, aged 16 or over in Britain, October 2008-September 2009

	England	Wales	Scotland	Column percentages Britain
Christian	73.7	72.4	75.4	73.8
Non-Christian	8.1	2.7	2.9	7.4
of which:				
Buddhist	0.4	--	--	0.4
Hindu	1.4	--	--	1.3
Jewish	0.6	--	--	0.5
Muslim	3.9	--	--	3.5
Sikh	0.7	--	--	0.6
Any other	1.1	--	--	1.1
No religion	18.2	24.8	21.7	18.9
<i>Unweighted base</i>	<i>195,488</i>	<i>29,106</i>	<i>39,100</i>	<i>263,694</i>

Source: Equality and Human Rights Commission analysis of ONS, 2010, Annual Population Survey, October 2008-September 2009.

Notes:

1. Non-Christian includes Buddhist, Hindu, Jewish, Muslim, Sikh and any other religion.
2. -- Estimate of lower precision not shown.

Box A3.6.1 Related issue: Non-Christian groups have a younger age profile

Table A3.6.3 shows within the adult population (aged 16 or over), the much younger age profile of Muslim people and to a lesser extent Sikh and Hindu people is apparent. The proportions below age 35 are 55% for Muslim, 43% for Hindu and 41% for Sikh, compared to 25% reporting Christian affiliation. In contrast two-fifths of Christian people are above the age of 55 (40%) compared to a tenth of Muslim people (11%) and about a fifth of Hindu and Sikh people (20% and 23% respectively).

Sample sizes are small for Jewish and Buddhist people and the figures need to be treated with caution. But broadly the age profile of Jewish people is similar to those with Christian affiliation whilst more Buddhist people are aged under 55 (81% compared to 60% Christian).

Those reporting no religious affiliation have a younger profile than those of Christian affiliation and the contrast between these groups in the chapters that follow partly reflects this. Around half (47%) of adults with no religious affiliation are aged under 35 compared with a quarter Christian (25%). Whereas 2 in 5 Christian people are 55 or over, only 1 in 6 of those with no religion and belief are of this age.

Table A3.6.3 Household population by religious affiliation, aged 16 or over in Britain, 2009

	16-34	35-54	55 or over	Row percentage <i>Unweighted base</i>
Christian	25	34	40	200,702
Non-Christian	45	36	19	16,289
of which:				
Buddhist	38	43	19	845
Hindu	43	38	20	2,626
Jewish	28	30	42	1,040
Muslim	55	34	11	7,473
Sikh	41	36	23	1,491
Any other	32	38	30	2,814
No religion	47	37	16	46,703

Source: Equality and Human Rights Commission analysis of ONS, 2010, Annual Population Survey, October 2008-September 2009.

Box A3.6.2 Related issue: Religious groups' class profile

Those affiliated to non-Christian religions are more likely to have never worked or to be long-term unemployed than Christian people or those with no religion, the percentages are 15% and 4% respectively. This is as true for older as for younger people. Among those in NS-SEC classes 1-7, the class profile of those with Christian affiliation, those with non-Christian religious affiliation and those with no religious affiliation is generally similar at all ages. (See Figure A3.6.4)

Of the non-Christian religions only Muslim affiliation has a large enough sample to provide reliable estimates. The proportion of Muslim people who have never worked, are long-term unemployed or students or do not have a class specified, is much higher than for Christian people (46% compared to 17%) partly reflecting the much younger age profile of this group. Among adults not in these situations, Muslim people have a lower class profile than Christian with 31% in the professional/managerial class compared to 42% Christian, but again this will in part reflect their younger age profile. (See Figure A3.6.5)

Table A3.6.4 Household population by social class, age and religious affiliation, working age, Britain, 2009

	16-29			30-44			45-59/64		
	Ch	N-C	No	Ch	N-C	No	Ch	N-C	No
Never worked and long-term unemployed	7	16	8	3	16	3	2	12	2
Full-time students	28	36	23	2	--	--	--	--	--
Not classified	--	--	--	4	--	5	10	12	9
Class 8 and residual groups	36	53	32	9	25	9	12	25	12
Classes 1-7	64	47	68	91	75	91	88	75	88
<i>Unweighted base</i>	<i>30,186</i>	<i>4,518</i>	<i>14,302</i>	<i>42,983</i>	<i>5,591</i>	<i>15,600</i>	<i>61,109</i>	<i>3,744</i>	<i>11,730</i>

Of those in classes 1-7

Managerial and professional	31	35	30	48	45	49	42	42	50
Intermediate	20	22	20	21	22	20	22	24	21
Routine and manual	49	42	50	31	33	32	36	34	30
<i>Unweighted base</i>	<i>18,426</i>	<i>2,049</i>	<i>9,412</i>	<i>38,897</i>	<i>4,176</i>	<i>14,003</i>	<i>53,293</i>	<i>2,787</i>	<i>10,175</i>

Source: Equality and Human Rights Commission analysis of ONS, 2010, Annual Population Survey, October 2008-September 2009.

Notes:

1. Ch = Christian, N-C = Non-Christian, which includes Buddhist, Hindu, Jewish, Muslim, Sikh and any other religion, No = No religion.

2. -- Estimate of lower precision not shown.

Table A3.6.5 Household working age population by social class and religious affiliation in Britain, 2009

	Column percentages			
	Christian	No religion	Non-Christian religion	Of which: Muslim
Never worked or long-term unemployed	4	5	15	23
Full-time student	8	10	15	17
Not classified	6	5	5	6
Class 8 and residual groups	17	19	35	46
Classes 1-7	83	81	65	54
<i>Unweighted base</i>	<i>134,278</i>	<i>41,632</i>	<i>13,853</i>	<i>6,856</i>
Of those in classes 1-7				
Managerial and Professional	42	43	41	31
Intermediate	21	20	23	25
Routine and manual	37	37	36	44
<i>Unweighted base</i>	<i>110,616</i>	<i>33,590</i>	<i>9,012</i>	<i>3,652</i>

Source: Equality and Human Rights Commission analysis of ONS, 2010, Annual Population Survey, October 2008-September 2009.

A3.7 Disability

Definitions

The existence of several sets of survey questions on disability and/or illness prompted a joint project between the Office for National Statistics and the Office for Disability Issues to develop a suite of questions which will allow harmonised data to be collected on both disability as defined in the Disability Discrimination Act (DDA) and disability defined in relation to the social barriers faced by people with impairments. A harmonised suite of questions has been developed and testing will continue into 2011. In the meantime, Figure A3.7.1 shows the different definitions used in different data sources.

Figure A3.7.1 Definitions of disability used in different surveys

Family Resources Survey

This has the most extensive suite of questions for collecting data according to the DDA definition of disability. For example, it asks about children's health, about the effects of health problems in the absence of medication or treatment and about past illness, disability or infirmity.

Labour Force Survey/Annual Population Survey

This uses a suite of questions to collect data on both work-limiting disability and DDA disability, and defines disability overall as either one or both of these. The work-limiting disability questions are only asked of respondents of working age, plus older people in employment and this limits analysis overall to those of working age.

England, Wales and Scotland Health Surveys

The Health Survey for England asks:

'Do you have any long-standing illness, disability or infirmity? By long-standing I mean anything that has troubled you over a period of time, or that is likely to affect you over a period of time?'

followed by:

'What (else) is the matter with you?' and 'Does this illness or disability/do any of these illnesses or disabilities limit your activities in any way?'

The Welsh Health Survey collects the same information in one question:

'Do you have any long-term illness, health problem or disability which limits your daily activities or the work you can do? (Include problems which are due to old age.)'

Figure A3.7.1 Continued

The Scottish Health Survey follows a similar pattern to the English survey, but specifies a period of time:

‘Do you have a long-standing physical or mental condition or disability that has troubled you for at least 12 months, or that is likely to affect you for at least 12 months?’

followed by:

‘What (else) is the matter with you?’ and ‘Does (name of condition) limit your activities in any way?’

The data in Tables A3.7.2 and A3.7.3 are based on Family Resources Survey data.¹³ Tables A3.7.4 and A3.7.5 showing social class are based on Annual Population Survey data.

Disabled profiles in Britain, England, Scotland and Wales

These define the disabled as those people with a long-standing illness, disability or impairment, and who have substantial difficulty with day-to-day activities. Additional questions allow the identification of other groups covered by the DDA, however analysis by other definitions is not shown here.

On this basis, about 1 in 5 adults (21%) in Britain are disabled. In Scotland and Wales slightly higher proportions of adults are disabled (23% and 27% respectively).

Table A3.7.2 Household population by disability, adults aged 16 or over in Britain, 2008

	Column percentages			
	England	Wales	Scotland	Britain
Disabled	21	27	23	21
Not disabled	79	73	77	79
<i>Unweighted base</i>	<i>30,960</i>	<i>1,888</i>	<i>7,377</i>	<i>40,225</i>

Source: Equality and Human Rights Commission analysis of DWP, 2009. Family Resources Survey 2007-08.

¹³ Department for Work and Pensions, 2009 *Family Resources Survey, 2007-2008*. Colchester, Essex: UK Data Archive.

Box A3.7.1 Related issue: Disabled peoples' age profiles

Disabled people have an older age profile than non-disabled people. Overall, disabled people are more than three times as likely to be aged over 65 as non-disabled (45% compared to 13%). Also, among adults aged 16-64, 64% of disabled people are over 45 compared to only 36% of non-disabled. Some differences between these two groups discussed in this Review will thus reflect the fact that on average disabled people are older than non-disabled.

Table A3.7.3 Household population by age and disability, adults aged 16 or over, Britain, 2008

	Column percentages	
	Disabled	Not disabled
16-34	9	34
35-44	11	22
45-54	14	18
55-64	21	14
65-74	19	8
75 or over	26	5
<i>Unweighted base</i>	<i>9,483</i>	<i>30,742</i>

Source: Equality and Human Rights Commission analysis of DWP, 2009, Family Resources Survey 2007-08.

Box A3.7.2 Related issue: Disabled peoples' class profiles

The proportion of disabled people who have never worked, are long-term unemployed, full-time students or not classified is nearly double that for non-disabled people (31% compared to 17%). Within this the proportion who have never worked or are long-term unemployed declines with age for both disabled and non-disabled people, but as Table A3.7.4 shows, in all age groups the proportion of disabled in this group is higher. For people in classes 1-7, the class difference between disabled and non-disabled people is not as great, but the profile is significantly lower for disabled than non-disabled people with 44% of disabled adults being in the routine/manual class compared to 35% of non-disabled adults (see Table A3.7.5).

Table A3.7.4 Household population by social class, age and disability, working age, Britain, 2009

Column percentages

	16-29		30-44		45-59/64	
	Disabled	Not disabled	Disabled	Not disabled	Disabled	Not disabled
Never worked and long-term unemployed	19	7	10	3	5	2
Full-time students	23	28	--	2	--	--
Not classified	--	1	15	3	24	4
Class 8 and residual groups	44	36	27	8	29	6
Classes 1-7	56	64	73	92	71	94
<i>Unweighted base</i>	<i>5,012</i>	<i>44,086</i>	<i>10,141</i>	<i>54,113</i>	<i>22,661</i>	<i>54,008</i>

Of those in classes 1-7

Managerial and professional	24	32	37	50	35	46
Intermediate	19	20	21	20	22	22
Routine and manual	57	48	42	30	43	33
<i>Unweighted base</i>	<i>2,712</i>	<i>27,218</i>	<i>7,265</i>	<i>49,873</i>	<i>15,656</i>	<i>50,668</i>

Source: Equality and Human Rights Commission analysis of ONS, 2010, Annual Population Survey, October 2008-September 2009.

Note: -- Estimate of lower precision not shown.

Table A3.7.5 Household population by social class and disability, working age, Britain, 2009

	Column percentages				
	DDA disabled and work-limiting disabled	DDA disabled only	Work-limiting disabled only	All disabled	Not disabled
Never worked or long-term unemployed	11	--	--	9	4
Full-time students	3	--	--	4	10
Not classified	27	--	--	18	3
Class 8 and residual groups	41	12	21	31	17
Classes 1-7	59	88	79	69	83
<i>Unweighted base</i>	<i>23,179</i>	<i>8,762</i>	<i>5,873</i>	<i>37,814</i>	<i>152,207</i>

Of those in classes 1-7

Managerial and professional	28	44	34	34	44
Intermediate	22	20	22	21	21
Routine and manual	49	36	44	44	35
<i>Unweighted base</i>	<i>13,305</i>	<i>7,742</i>	<i>4,586</i>	<i>25,633</i>	<i>127,759</i>

Source: Equality and Human Rights Commission analysis of ONS, 2010, Annual Population Survey, October 2008-September 2009.

Note: -- Estimate of lower precision not shown.

A3.8 Sexual orientation

Definitions

Between 2006 and 2009, the ONS' Sexual Identity Project developed a question on sexual identity for use on social surveys and for equality monitoring. However, despite extensive lobbying the ONS refused to include a question on sexual orientation in the 2011 Census.

The definition 'sexual identity' was chosen since 'sexual orientation' can include several dimensions, such as behaviour and attraction as well as identity. The term 'sexual identity' narrows this down to how an individual identifies themselves.

Following consultation and testing, the harmonised question was selected and added to the Integrated Household Survey (IHS) in January 2009. A showcard methodology has been developed to maintain confidentiality when collecting responses in face-to-face surveys. Data collected in the first year will be used to produce the first baseline estimates in September 2010 of the size and characteristics of the lesbian, gay and bisexual (LGB) populations (in terms of identity).

Modified versions are provided for telephone surveys and self-completion. Guidance has been published by ONS.¹⁴

The Citizenship Survey has also adopted a show card based approach¹⁵ and the British Crime Survey has adopted a similar question which is asked at the end of a self-completion module and restricted to 16-59-year-olds (16-69-year-olds from April-September 2009).

The harmonised question being used in the IHS, the Citizenship Survey question and the British Crime Survey question are shown in Figure A3.8.1.

Various other small-scale surveys have also collected data on sexual orientation. A review commissioned by the Commission in 2009 contains details.¹⁶

¹⁴ Haseldon, L., and Joloza, T. 2009. *Measuring Sexual Identity: a guide for researchers*.

¹⁵ NatCen. 2008. *Communities Study 2008/09 Quarter 1 to Quarter 3 Questionnaire*.

¹⁶ Aspinall, P. 2009. *Estimating the size and composition of the lesbian, gay, and bisexual population in Britain*. Equality and Human Rights Commission Research Report 37.

Sexual identity profile

No surveys have yet collected data from a large enough sample to provide a precise estimate of the size of the LGB population, and many people choose not to answer the question about sexual identity.

The Citizenship and British Crime Surveys have each collected data on sexual identity and respectively estimated the population of LGB who are willing to identify as such in these surveys as 1.5% and 2.4% (both cover England and Wales).

Other data sources have given estimates ranging from 0.3% to 10%, however these are generally not based on representative samples of the population (see Aspinall, P., 2009 for details).

The Integrated Household Survey has also included the harmonised question on sexual identity since 2009 and the first results will be published in September 2010.

Figure A3.8.1 Sexual identity questions currently used on large surveys

Harmonised question for sexual identity used in the IHS

Which of the options on this card best describes how you think of yourself?

Please just read out the number next to the description (ONLY IF CONCURRENT INTERVIEW)

The numbers on each card are different for each person.

- 27. Heterosexual/Straight
- 21. Gay/Lesbian
- 24. Bisexual
- 29. Other
(Spontaneous Don't know/Refusal)

Figure A3.8.1 Continued

Citizenship Survey question for sexual identity

Looking at this card, which of the options best describes your sexual identity?

Please just read out the letter next to the description

- W. Heterosexual or straight
- P. Gay or lesbian
- H. Bisexual
- S. Other (how would you describe your sexual identity?)
- G. Or would you prefer not to say?

British Crime Survey question for sexual identity

Please choose a category from this list which best describes how you would think of yourself

- 1. Heterosexual or straight
- 2. Gay or lesbian
- 3. Bisexual
- 4. Don't know
- 5. Do not want to answer

A3.9 Transgender

There are no estimates of the full transgender population. Administrative sources do provide some population estimates in relation to the process of applying and being awarded Gender Recognition Certificates. However, it should be noted that many transgender people do not apply for these certificates. In Part II we have referred to small surveys and qualitative work where relevant to the indicators, but these do not provide population estimates. The lack of data on transgender and the fact that population surveys would not ever be the main source of evidence on transgender issues is discussed in Chapter 15.

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NatCen. 2008. *Communities Study 2008/09 Quarter 1 to Quarter 3 Questionnaire*.

Weblinks

British Humanist Association website <http://www.humanism.org.uk/campaigns/census-2011>

Appendix 4

Data sources

Below is a list of the indicators contained within each of the core evidence chapters, and corresponding sources of data used for each equality strand, as well as socio-economic status. For comprehensive detail of the data used, please see corresponding chapter.

Legend

	<p>= Large-scale data source used Additional literature may have been used to supplement this source.</p>
	<p>= Alternative sources used For example, small studies, literature, alternative or proxy sources. This includes where major survey data is used but for a 'proxy' equality characteristic such as free school meals, area deprivation, income levels for socio-economic groups; or special educational needs for disabled people.</p>
	<p>= No data used</p>
	<p>= Data has been used at the GB or UK level In some cases data is used at the England and Wales combined level. Additional literature may have been used to supplement this source at the national level.</p>

List of abbreviations

APS	Annual Population Survey
ASHE	Annual Survey of Hours and Earnings
BCS	British Crime Survey (Crime in England and Wales)
BES	British Election Study
BHPS	British Household Panel Survey
CENSUS	Census
CEYPW	Childcare and Early Years Provision in Wales
COPFS	Crown Office and Procurator Fiscal Services
CPS	Crown Prosecution Service
CS	Citizenship Survey
DfE	Department for Education
ELSA	English Longitudinal Study of Ageing
ESLS	England Skills for Life Survey
EYFSP	Early Years Foundation Stage Profile
FRS	Family Resources Survey
FTW	Fair Treatment at Work Survey
GHS	General Household Survey
GROS	General Register Office of Scotland
GUS	Growing Up in Scotland
HBAI	Households Below Average Income
HESA	Higher Education Statistics Agency
HMIPS	Her Majesty's Inspectorate of Prisons Survey

List of abbreviations

HO	Home Office
HSE	Health Survey for England
IPCC	Independent Police Complaints Commission
LFS	Labour Force Survey
LIW	Living In Wales Survey
MOJ	Ministry of Justice
ONSILT	ONS Interim Life Tables
ONSMS	ONS Mortality Statistics
ONSLS	ONS Longitudinal Survey
ONSOS	Office for National Statistics, Opinions Survey
PCCS	Police Complaints Commissioner for Scotland
SCCS	Scottish Community Care Statistics
SCJS	Scottish Crime and Justice Survey
SCR	Scotland's Councillors Research Report
SGOV	Scottish Government
SHS	Scottish Household Survey
SHeS	Scottish Health Survey
SRGARP	Scottish Registrar General's Annual Review of Population
WAS	Wealth and Assets Survey
WBSS	Wales Basic Skills Survey
WHS	Wealth Health Survey
WLGA	Welsh Local Government Association
YCS, LSYPE	Youth Cohort Study and Longitudinal Study of Young People in England

England

	Age	Gender	
Chapter 6: Life			
Life expectancy	ONSILT	ONSILT	
<i>Cause-specific mortality</i>			
• Ischaemic heart disease	ONSMS	ONSMS	
• Cerebrovascular disease	ONSMS	ONSMS	
• All cancers	ONSMS	ONSMS	
Suicide	ONSMS	ONSMS	
Accidental death	ONSMS	ONSMS	
Homicide	HO	HO	
<i>Deaths in institutions</i>			
• Deaths during and following contact with the police	IPCC	IPCC	
• Self-inflicted deaths in prisons	MOJ	MOJ	
Chapter 7: Legal security			
<i>Offences reported and brought to justice</i>			
• Rape	BCS, HO, CPS	BCS, HO, CPS	
• Domestic violence	BCS, CPS	BCS, CPS	
• Hate crime	CPS	CPS	
<i>Equal treatment by the CJS</i>			
• Percentage stopped and searched	BCS	BCS	
• Percentage confident in CJS	BCS	BCS	
• Percentage satisfied with handling of police complaints	IPCC	IPCC	
<i>Detention</i>			
• Numbers	MOJ	MOJ	
• Conditions		MOJ	
Chapter 8: Physical security			
<i>Crimes against the person</i>			
• Violent crime	BCS	BCS	
• Sexual assault and domestic abuse	BCS	BCS	
• Targeted violence	BCS	BCS	
• Fear of crime	BCS	BCS	

For legend colour key, see page 721.

For a list of abbreviations see pages 722-723.

	Socio-economic	Disability	Ethnicity	Religion or belief	Sexual orientation	Transgender
	ONSLs					
		CPS	HO/MOJ, CPS	CPS	CPS	CPS
			IPCC			
			MOJ			
		CPS	BCS, HO, CPS	BCS, HO, CPS	CPS	CPS
		BCS	MOJ			
		BCS	BCS			
			IPCC			
		HMIPS	MOJ	HMIPS		
			MOJ, HMIPS	MOJ, HMIPS		
	BCS	BCS	BCS	BCS		
	BCS	BCS	BCS	BCS	BCS	
		BCS	BCS	BCS	BCS	
	BCS	BCS	BCS	BCS		

England

	Age	Gender	
Chapter 9: Health			
<i>Poor health and LLTI or disability</i>			
• Percentage reporting poor current health status	HSE	HSE	
• Percentage reporting a LLTI or disability	HSE	HSE	
Poor mental health	HSE	HSE	
<i>Living a healthy lifestyle</i>			
• Percentage who smoke	HSE	HSE	
• Percentage exceeding alcohol limits	HSE	HSE	
• Percentage achieving recommended physical activity	HSE	HSE	
• Percentage consuming five portions of fruit/veg	HSE	HSE	
• Percentage who are obese	HSE	HSE	
Dignity and respect in health treatment			
Chapter 10: Education			
Level of development at age 5		EYFSP	
Permanent exclusion from school		DfE	
Bullying, respect and support at school		YCS, LSYP	
Educational attainment at age 16		DfE	
Participation in higher education	HESA	HESA	
<i>Adult skills and qualifications</i>			
• Percentage of people of working age achieving functional literacy and numeracy skills	ESLS	ESLS	
• Percentage of adults with no educational qualifications	LFS	LFS	
• Percentage of adults with a degree level qualification	LFS	LFS	
Adult learning	LFS	LFS	
Use of the internet	ONSOS	ONSOS	
Chapter 11: Employment			
<i>Employment rates</i>			
• Percentage of working age population employed	LFS	LFS	
• Percentage of 16-24-year-olds NEET	LFS	LFS	
Pay gaps	LFS	ASHE	
Occupational segregation	LFS	LFS	
Illness and injury at work	LFS	LFS	
Unfair treatment, bullying and harassment	FTW, CS	FTW, CS	

**For legend colour key, see page 721.
For a list of abbreviations see pages 722-723.**

	Socio-economic	Disability	Ethnicity	Religion or belief	Sexual orientation	Transgender
		HSE	Census	Census		
	GHS	n/a	Census	Census		
	HSE	HSE				
	HSE	HSE				
	HSE	HSE				
	HSE	HSE				
	HSE	HSE				
	HSE	HSE				
			EYFSP			
			DfE			
			YCS, LSYP			
			DfE			
		HESA	HESA			
	ESLS	ESLS	ESLS			
	LFS	LFS	LFS	LFS		
	LFS	LFS	LFS	LFS		
	LFS	LFS	LFS			
	ONSOS					
		LFS	LFS	LFS		
	YCS, LSYP	LFS	LFS	LFS		
		LFS	LFS	LFS		
		LFS	LFS	LFS		
	LFS	LFS	LFS			
		FTW, CS	FTW	FTW, CS	FTW, CS	

England

	Age	Gender	
Chapter 12: Standard of living			
Wealth	WAS		
<i>Low pay and low income</i>			
• Low hourly pay	APS	APS	
• Low household income (AHC)	HBAI	HBAI	
<i>Housing and neighbourhood quality</i>			
• Overcrowding	HSS	HSS	
• Substandard accommodation and neighbourhood quality (pollution and crime)	GHS	GHS	
<i>Financial exclusion</i>			
• Bank account	FRS	FRS	
• Insurance		FRS	
• Credit			
Chapter 13: Care and support			
Access to care	ELSA	ELSA	
Access to childcare	CEYSP		
Satisfaction with unpaid care responsibilities	Census	Census	
Chapter 14: Power and voice			
<i>Formal political participation</i>			
• Electoral turnout	BES	BES	
• Political representation			
Perceptions of influence	CS	CS	
Political activity	CS	CS	
Taking part in decision-making and campaigning organisations	CS	CS	

**For legend colour key, see page 721.
For a list of abbreviations see pages 722-723.**

	Socio-economic	Disability	Ethnicity	Religion or belief	Sexual orientation	Transgender
	WAS	WAS	WAS	WAS		
		APS	APS	APS		
		HBAI	HBAI			
	HSS	HSS	HSS			
	GHS	GHS	GHS			
		FRS	FRS			
		FRS	FRS			
			ELSA			
	CEYSP	CEYSP	CEYSP			
		Census	Census			
	BES	BES	BES	BES		
	CS	CS	CS	CS	CS	
	CS	CS	CS	CS	CS	
	CS	CS	CS	CS	CS	

Wales

	Age	Gender	
Chapter 6: Life			
Life expectancy	ONSILT	ONSILT	
<i>Cause-specific mortality</i>			
• Ischaemic heart disease	ONSMS	ONSMS	
• Cerebrovascular disease	ONSMS	ONSMS	
• All cancers	ONSMS	ONSMS	
Suicide	ONSMS	ONSMS	
Accidental death	ONSMS	ONSMS	
Homicide	HO	HO	
<i>Deaths in institutions</i>			
• Deaths during and following contact with the police	IPCC	IPCC	
• Self-inflicted deaths in prisons	MOJ	MOJ	
Chapter 7: Legal security			
<i>Offences reported and brought to justice</i>			
• Rape	BCS, HO, CPS	BCS, HO, CPS	
• Domestic violence	BCS, CPS	BCS, CPS	
• Hate crime	CPS	CPS	
<i>Equal treatment by the CJS</i>			
• Percentage stopped and searched	BCS	BCS	
• Percentage confident in CJS	BCS	BCS	
• Percentage satisfied with handling of police complaints	IPCC	IPCC	
<i>Detention</i>			
• Numbers	MOJ	MOJ	
• Conditions		MOJ	
Chapter 8: Physical security			
<i>Crimes against the person</i>			
• Violent crime	BCS	BCS	
• Sexual assault and domestic abuse	BCS	BCS	
• Targeted violence	BCS	BCS	
• Fear of crime	BCS	BCS	

For legend colour key, see page 721.

For a list of abbreviations see pages 722-723.

	Socio-economic	Disability	Ethnicity	Religion or belief	Sexual orientation	Transgender
	ONSLS					
		CPS	HO/MOJ, CPS	CPS	CPS	CPS
			IPCC			
			MOJ			
		CPS	BCS, HO, CPS	BCS, HO, CPS	CPS	CPS
		BCS	MOJ			
		BCS	BCS			
			IPCC			
		HMIPS	MOJ	HMIPS		
			MOJ, HMIPS	MOJ, HMIPS		
	BCS	BCS	BCS	BCS		
	BCS	BCS	BCS	BCS	BCS	
		BCS	BCS	BCS	BCS	
	BCS	BCS	BCS	BCS		

Wales

	Age	Gender	
Chapter 9: Health			
<i>Poor health and LLTI or disability</i>			
• Percentage reporting poor current health status	HSW	HSW	
• Percentage reporting a LLTI or disability	HSW	HSW	
Poor mental health	HSW	HSW	
<i>Living a healthy lifestyle</i>			
• Percentage who smoke	HSW	HSW	
• Percentage exceeding alcohol limits	HSW	HSW	
• Percentage achieving recommended physical activity	HSW	HSW	
• Percentage consuming five portions of fruit/veg	HSW	HSW	
• Percentage who are obese	HSW	HSW	
Dignity and respect in health treatment	LIW	LIW	
Chapter 10: Education			
Level of development at age 5	n/a		
Permanent exclusion from school		WAG	
Bullying, respect and support at school			
Educational attainment at age 16	n/a	WAG	
Participation in higher education	HESA	HESA	
<i>Adult skills and qualifications</i>			
• Percentage of people of working age achieving functional literacy and numeracy skills	WBSS	WBSS	
• Percentage of adults with no educational qualifications	LFS	LFS	
• Percentage of adults with a degree level qualification	LFS	LFS	
Adult learning	LFS	LFS	
Use of the internet	ONSOS	ONSOS	
Chapter 11: Employment			
<i>Employment rates</i>			
• Percentage of working age population employed	LFS	LFS	
• Percentage of 16-24-year-olds NEET	LFS	LFS	
Pay gaps	LFS	ASHE	
Occupational segregation	LFS	LFS	
Illness and injury at work	LFS	LFS	
Unfair treatment, bullying and harassment	FTW, CS	FTW, CS	

For legend colour key, see page 721.

For a list of abbreviations see pages 722-723.

	Socio-economic	Disability	Ethnicity	Religion or belief	Sexual orientation	Transgender
		HSW	Census	Census	CS	
	HSW	n/a	Census	Census	CS	
	HSW	HSW				
	HSW	HSW				
	HSW	HSW				
	HSW	HSW				
	HSW	HSW				
	HSW	HSW				
	LIW	LIW	LIW			
			WAG			
		HESA	HESA			
	WBSS	WBSS	WBSS			
	LFS	LFS	LFS	LFS		
	LFS	LFS	LFS	LFS		
	LFS	LFS	LFS			
	ONSOS					
		LFS	LFS	LFS		
		LFS	LFS	LFS		
		LFS	LFS	LFS		
		LFS	LFS	LFS		
	LFS	LFS	LFS			
		FTW, CS	FTW, CS	FTW	FTW, CS	

Wales

	Age	Gender	
Chapter 12: Standard of living			
Wealth	WAS		
<i>Low pay and low income</i>			
• Low hourly pay	APS	APS	
• Low household income (AHC)	HBAI	HBAI	
<i>Housing and neighbourhood quality</i>			
• Overcrowding	LIW	LIW	
• Substandard accommodation and neighbourhood quality (Pollution and Crime)	GHS	GHS	
<i>Financial exclusion</i>			
• Bank account	FRS	FRS	
• Insurance		FRS	
• Credit			
Chapter 13: Care and support			
Access to care			
Access to childcare		CEYPW	
Satisfaction with unpaid care responsibilities	Census	Census	
Chapter 14: Power and voice			
<i>Formal political participation</i>			
• Electoral turnout	BES	BES	
• Political representation			
Perceptions of influence			
Political activity			
Taking part in decision-making and campaigning organisations	LWS	LWS	

**For legend colour key, see page 721.
For a list of abbreviations see pages 722-723.**

	Socio-economic	Disability	Ethnicity	Religion or belief	Sexual orientation	Transgender
	WAS	WAS	WAS	WAS		
		APS	APS	APS		
		HBAI	HBAI			
	LIW	LIW	LIW			
	GHS	GHS	GHS			
		FRS	FRS			
		FRS	FRS			
	CEYPW		CEYPW			
		Census	Census			
	BES	BES	BES	BES		
	LWS	LWS	LWS	LWS		

Scotland

	Age	Gender	
Chapter 6: Life			
Life expectancy	ONSILT	ONSILT	
<i>Cause-specific mortality</i>			
• Ischaemic heart disease	SRGARP	SRGARP	
• Cerebrovascular disease	SRGARP	SRGARP	
• All cancers	SRGARP	SRGARP	
Suicide	SRGARP	SRGARP	
Accidental death	SRGARP	SRGARP	
Homicide	SGOV	SGOV	
<i>Deaths in institutions</i>			
• Deaths during and following contact with the police			
• Self-inflicted deaths in prisons			
Chapter 7: Legal security			
<i>Offences reported and brought to justice</i>			
• Rape		SGOV, COPFS	
• Domestic violence		SGOV	
• Hate crime			
<i>Equal treatment by the CJS</i>			
• Percentage stopped and searched			
• Percentage confident in CJS			
• Percentage satisfied with handling of police complaints		PCCS	
<i>Detention</i>			
• Numbers	SGOV	SGOV	
• Conditions			
Chapter 8: Physical security			
<i>Crimes against the person</i>			
• Violent crime	SCJS	SCJS	
• Sexual assault and domestic abuse	SCJS	SCJS	
• Targeted violence	SCJS	SCJS	
• Fear of crime	SCJS	SCJS	

For legend colour key, see page 721.

For a list of abbreviations see pages 722-723.

Scotland

	Age	Gender	
Chapter 9: Health			
<i>Poor health and LLTI or disability</i>			
• Percentage reporting poor current health status	SHeS	SHeS	
• Percentage reporting a LLTI or disability	SHeS	SHeS	
Poor mental health	SHeS	SHeS	
<i>Living a healthy lifestyle</i>			
• Percentage who smoke	SHeS	SHeS	
• Percentage exceeding alcohol limits	SHeS	SHeS	
• Percentage achieving recommended physical activity	SHeS	SHeS	
• Percentage consuming five portions of fruit/veg	SHeS	SHeS	
• Percentage who are obese	SHeS	SHeS	
Dignity and respect in health treatment			
Chapter 10: Education			
Level of development at age 5	n/a		
Permanent exclusion from school		SGOV	
Bullying, respect and support at school			
Educational attainment at age 16	n/a	SGOV	
Participation in higher education	HESA	HESA	
<i>Adult skills and qualifications</i>			
• Percentage of people of working age achieving functional literacy and numeracy skills			
• Percentage of adults with no educational qualifications	LFS	LFS	
• Percentage of adults with a degree level qualification	LFS	LFS	
Adult learning	LFS	LFS	
Use of the internet	ONSOS	ONSOS	
Chapter 11: Employment			
<i>Employment rates</i>			
• Percentage of working age population employed	LFS	LFS	
• Percentage of 16-24-year-olds NEET	LFS	LFS	
Pay gaps	LFS	ASHE	
Occupational segregation	LFS	LFS	
Illness and injury at work	LFS	LFS	
Unfair treatment, bullying and harassment	FTW	FTW	

For legend colour key, see page 721.

For a list of abbreviations see pages 722-723.

	Socio-economic	Disability	Ethnicity	Religion or belief	Sexual orientation	Transgender
		SHeS	Census	Census		
	GHS	n/a	Census	Census		
	SHeS	SHeS				
	SHeS	SHeS				
	SHeS	SHeS				
	SHeS	SHeS				
	SHeS	SHeS				
			SGOV			
		HESA	HESA			
	LFS	LFS	LFS	LFS		
	LFS	LFS	LFS	LFS		
	LFS	LFS	LFS			
	ONSOS					
		LFS	LFS	LFS		
		LFS	LFS	LFS		
		LFS	LFS	LFS		
		LFS	LFS	LFS		
	LFS	LFS	LFS			
		FTW	FTW	FTW	FTW	

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	Age	Gender	
Chapter 12: Standard of living			
Wealth	WAS		
<i>Low pay and low income</i>			
• Low hourly pay	APS	APS	
• Low household income (AHC)	HBAI	HBAI	
<i>Housing and neighbourhood quality</i>			
• Overcrowding	HSS	HSS	
• Substandard accommodation and neighbourhood quality (pollution and crime)	GHS	GHS	
<i>Financial exclusion</i>			
• Bank account	FRS	FRS	
• Insurance		FRS	
• Credit			
Chapter 13: Care and support			
Access to care			
Access to childcare			
Satisfaction with unpaid care responsibilities			
Chapter 14: Power and voice			
<i>Formal political participation</i>			
• Electoral turnout	BES	BES	
• Political representation			
Perceptions of influence	SHS	SHS	
Political activity			
Taking part in decision-making and campaigning organisations	SHS	SHS	

**For legend colour key, see page 721.
For a list of abbreviations see pages 722-723.**

	Socio-economic	Disability	Ethnicity	Religion or belief	Sexual orientation	Transgender
	WAS	WAS	WAS	WAS		
		APS	APS	APS		
		HBAI	HBAI			
	HSS	HSS	HSS			
	GHS	GHS	GHS			
		FRS	FRS			
		FRS	FRS			
	SHS	SHS				
	GUS	GUS	SHS			
	BES	BES	BES	BES		
		SHS	SHS	SHS		

Appendix 5

Contributors to consultations and calls for evidence

During the course of compiling evidence for the Triennial Review we consulted extensively with a wide range of stakeholders. We would like to thank all those who responded to our Call for Evidence between October 2009 and February 2010, either in writing or through the face-to-face sessions. Below is a list of those individuals and organisations who responded publicly to the initial consultation. Copies of written public submissions that were agreed to be made public are available in the Triennial Review section of the Equality and Human Rights Commission website.

Following on from the Call for Evidence, we hosted several roundtable events for participants to review some of our initial analyses as well as offer further insights and input into the review. These sessions were incredibly valuable to us, and again we are extremely grateful to those who contributed.

Alongside these roundtables, the Commission also held a number of regional events looking to gather input from other vulnerable groups in society. We are very thankful to the people, organisations, and service users listed below for taking part in these.

Below is a list of all those who made submissions to the Call for Evidence, those who contributed further following on from the Call for Evidence, those who took part in the roundtables and those who took part in regional events. We greatly appreciate all the contributions, but responsibility for the content of the Triennial Review is entirely that of the Commission.

1. Submissions to the Call for Evidence

Accord

Amnesty International (Aberdeen Group)

Article 12

Association of Disabled Professionals

Association of Teacher's Widows

Asylum Aid

Autonomy Shropshire

BID Services (Alison Leach)

British Association of Social Workers

British Association of Social Workers Scotland Committee

BRAP
British Humanist Association
Catch 22
Children's Rights Alliance England
Citizens Advice Bureau
Combating Obesity Ltd
Cornerstone
Count Me In Too
Coventry Refugee Centre
DANDA
East Suffolk Advocacy Network
End Violence Against Women
Fair Play South West
Fatima Women's Organisation
Federation of Irish Societies
Fios Diversity Consultancy Service (Ken MacLennan)
Friends, Families and Travellers
GIRES
Grampian Fire and Rescue Service (Joan Robertson)
Haven Refuge, Wolverhampton
Health and Safety Executive
In Control
Independent Academic Research Studies
Kalayaan
Maternity Action
Mencap
Muika Associates Limited (Mui Li)
Neuro Diverse International
Older Women's Network, Europe
Optua (Linda Hoggarth)
Oxfam
The Poppy Project (Sarah Edwards)
Quaker Asylum and Refugee Network
R D Ops Team
Race On The Agenda
Refugee Action
Refugee Council
Royal National Institute of the Blind
Saheli Women's Refuge
South Essex Rape and Incest Crisis Centre
South Wales Police
Thurrock Racial Unity Support Taskgroup
Torbay Line Rail Users Group
Unison (North Ayrshire Branch)
Unit for the Social Study of Thalassaemia and Sickle Cell, De Montfort University

Women's Budget Group
Women's National Commission
Working Families (Vanessa Wheeler)
Young Minds
YWCA England and Wales

2. Individual responses to the Call for Evidence

Anna
Gita Banerji
Paul Bell
Marina Bielenky
Tim Blackwell
J Bradley
Jane Brown
Neil Campbell
Will Charlton
Clare Clements
Gary Davies
Robert Desborough
Abby Drummond
Maureen Erdwin
Ben Falat
Jackie Fearnley
Roy Fox
Paul Francis
Houri Ghamian
David Gillon
Victoria Griffiths
John Haig
Bill Hetherington
Simon Hinds
Zita Holbourne
Hanno Koppel
Peter George Mackie
Paidamoyo Mahovo
Peter Marson
Rosemin Najmudin
NR
Micheail O'Sniadhaigh
Roderick Ogley
Tony Parton
Carrie Pemberton
Diane Pennick
Shenaz Rashid
Andy Rawling

Donna Reeve
Colin Revell
Emma Rundall
Jane Sales
Mike Sales
Elizabeth Sclater
Shawkat Spahi-Shoaib
P Simms
Nadine Stavonina-de Montagnac
Stealthmodeon
Chika Taylor
Joseph Taylor
Leah Thorn
Trevor Trueman
John Wilkinson

3. Attendees at roundtable events

Helen Batty (a:gender)
Sarah Wood (a:gender)
Katherine Hill (Age UK)
Tara Flood (Alliance for Inclusive Education)
Joy Shaw (Association of Teacher's Widows)
Abigail Morris (British Chamber of Commerce)
Pepper Harrow (British Humanist Association)
Alan Marsh (Cabinet Office)
Bevan Powell (Cabinet Office)
Lou Hart (Camden LGBT Forum)
Margherita Rendel (CBT London)
Ben Wright (CEMVO)
Gillian Crosby (Centre for Policy on Ageing)
Sally Rendall (Changing Faces)
Samantha Dimmock (Children's Rights Alliance England)
Carla Garnelas (Children's Rights Alliance England)
Ilona Pinder (Children's Society)
Nick Bason (Employers Forum on Disability)
Martin Green (English Community Care Association)
Moira Dustin (Equality and Diversity Forum)
Don Horrocks (Evangelical Alliance)
Farrukh Khan (Estyn)
Nancy Doyle (Faithworks)
Anne Page (Family and Parenting Institute)
Daisy Sands (Fawcett)
Marie-Claude Hemming (Federation of Small Businesses)
Chris Whitwell (Friends, Families and Travellers)
Paul Cahill (Gay Police Association)

Paula Dooley (GIRES)
Kaisu Fagan (Girlguiding UK)
Kevin Mantle (Government Equalities Office)
Catherine Cottam (Health and Safety Executive)
Sara Westerberg (Helen Bamber Foundation)
Marian Bloodworth (Hogal Lovells LLP)
Maleiha Malik (Kings College London)
Paul Martin (Lesbian and Gay Foundation)
Helen Wildbore (London School of Economics)
Rosalind Bragg (Maternity Action)
Marsh Stichtman (Mencap)
Michael Bradshaw (Ministry of Justice)
Mui Li (Muika Associates Limited)
Rowan Davies (Mumsnet)
Zoe Renton (National Children's Bureau)
Simon Langley (National Grid)
Harri Weeks (National Union of Students)
Bethia McNeil (National Youth Agency)
Yan Lovelock (Network of Buddhist Organisations)
Susan Himmelweit (Open University)
Judith Cherry (Opportunity Now)
Sarah Edwards (The Poppy Project)
Sandra Kerr (Race for Opportunity)
Marije Davidson (Radar)
Kat Lorenz (Refugee Action)
Becky Francis (Roehampton University)
Andrew Kaye (Royal National Institute of the Blind)
Omar Khan (Runnymede Trust)
Abigail Bracken (Sainsburys)
Louise King (Save the Children)
Cristina Sarb (Scope)
Robert Holland (Skill)
Nick Johnson (Smith Institute)
Denise Anderson (Spectrum London)
Jonathan Finney (Stonewall)
Bob Green (Stonewall)
Derek Munn (Stonewall)
Ele Hicks (Stonewall Cymru)
Peter Purton (Trade Union Congress)
Hannah Reed (Trade Union Congress)
Linda Stewart (Trade Union Congress)
Will Sullivan (Trade Union Congress)
Narmada Thiranagama (Trade Union Congress)
Beth Seymour (Transcend)
Erin Power (UK Lesbian and Gay Immigration Group)

Chris Goldsmith (UNISON)
Yong Lee (UNISON)
Jackie Lewis (UNISON)
Bronwyn McKenna (UNISON)
Carola Towle (UNISON)
Collette Cork-Hurst (UNITE)
Dianna Holland (UNITE)
Naomi Alleyne (Welsh Local Government Association)
Janet Veitch (Women's Budget Group)
Jessica Southgate (YWCA England and Wales)
Naomi Brightmore
Juliette Brown
Eleri Butler
Neil Campbell
Alice King
Richard Lawrence
Ken MacLennan
Chandrika Makwana
Anna Michaels
Rosemin Najmudin
Barbara Nea
Lloyd Page
Brian Pearce
Ellen Pugh
Trevor Trueman

4. Regional events

Addiction Dependency Solutions
Asylum Link (Liverpool)
Brent Refugee and Migrant Forum
Bristol Avon Chinese Women's Group
Cambridge Housing Society
Chartered Institute of Housing, Homeless Link
Citysafe
Coventry Rape and Sexual Abuse Centre
Derby Racial Equality Council
Derbyshire Gypsies Liaison
Diverse
EQUALITY FIRST
Friends, Families and Travellers
Gay Advice Darlington and Durham
George House Trust, Manchester
Government Office East England
Government Office North East
Greater London Authority

Helen Bamber Foundation
HM YOI and RC Glen Parva
Holdeforth Court Hostel
Inclusion South West
Irish Traveller Movement in Britain
Julian House (Bath)
Leeds and Bevin Court Hostel
Leeds Resource Centre
London Gypsy and Traveller Unit
London Safe Guarding Children's Board, Harrow Council
Merseyside Network for Change
Migrant and Refugee Community Forum
National Offender Management Service North West
NOBEL KHAN ltd
North East Council on Addictions
Parenting with prospects, South Tyneside
The Poppy Project
Praxis Community Project
Princess Royal Trust (Bristol)
Refugee Action
Refugee Council
Roma Support Group
Salvation Army
Shelter
Society for the Promotion and Advancement of Romany Culture
SOVO ltd
St Anne's Community Services
STRIVE, Encouraging Women to Speak Up
Surrey Womens Aid
Thorn Cross Young Offender Institution
Walsall Domestic Violence Forum
Womenzone, Bradford
York Carer's Centre
Young Mothers to be, South Tyneside
Young Mothers Unit (Tynemet Sixth Form Academy)
Young Parents' Support Group (Cave)

Contacts

England

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Arndale House, Arndale Centre, Manchester M4 3AQ

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Fax 0845 604 6630

Scotland

Equality and Human Rights Commission Helpline
FREEPOST RSAB-YJEJ-EXUJ
The Optima Building, 58 Robertson Street, Glasgow G2 8DU

Main number 0845 604 5510
Textphone 0845 604 5520
Fax 0845 604 5530

Wales

Equality and Human Rights Commission Helpline
FREEPOST RRLR-UEYB-UYZL
3rd Floor, 3 Callaghan Square, Cardiff CF10 5BT

Main number 0845 604 8810
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Fax 0845 604 8830

Helpline opening times:

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