Equality statistics in practice at a local level

Gary Fry and Sue Yeandle

CIRCLE, University of Leeds

Royce Turner and Andrea Wigfield

Policy Evaluation Group

Equality statistics in practice at a local level

Gary Fry and Sue Yeandle

CIRCLE, University of Leeds

Royce Turner and Andrea Wigfield

Policy Evaluation Group

CENTRE FOR INTERNATIONAL
RESEARCH ON CARE,
LABOUR & EQUALITIES

UNIVERSITY OF LEEDS

Contents

Page

Acknowledgements

The authors would like to thank all the members of staff from the case study organisations who participated in the telephone interviews and provided relevant documentation to this project.

Executive summary

Introduction

Equality statistics in practice at a local level was commissioned by the Equality and Human Rights Commission (the Commission) from the Centre for International Research on Care, Labour and Equalities (University of Leeds) and the Policy Evaluation Group (PEG). It reports on a study of locally-based public sector organisations (referred to hereafter as CSOs – case study organisations), designed to investigate what equality statistics they collect and use, and the specific uses they make of statistical data in their policies and practices relating to equality, diversity and human rights.

The study was designed to support the work of the Commission, which has powers and responsibilities under the Equality Act 2006. Using a measurement framework outlined in the Equality Review (2006), the Commission is required to assess progress towards equality goals in relation to gender, age, disability, race, religion or belief and sexual orientation.

In recent years, Britain's 45,000 public sector organisations have been given statutory obligations to promote equality in relation to race (from 2001), disability (from 2006) and gender (from 2007).

A case study methodology, involving a review of organisational websites, telephone interviews with key personnel and documentary analysis, was adopted for the study. Eleven public sector organisations, including local authorities, regional development agencies, fire and rescue services, primary care trusts (PCTs) and a university, took part in the study. The case studies were drawn from different parts of England, Scotland and Wales.

Key findings

Analysis of the data collected in the 11 CSOs revealed that organisations have a range of motivations, and employ different rationales in undertaking equalities work and employing equalities statistics. Some wish to be recognised as 'exemplar' employers, displaying good practice and a progressive approach; others emphasise the importance of the 'business case' for taking equality issues seriously and offering equal opportunities to all. In some cases, this approach is also linked to an organisational commitment to social inclusion in a particular sphere of influence. In some of the CSOs, individual staff with strong personal commitments to the equalities agenda exerted considerable influence.

The CSOs reported undertaking a wide range of activities in pursuit of equalities goals; in many cases they relied on statistical evidence in designing their approach and carrying out their policies. Key areas of activity included:

- Allocating some of the responsibility for equality and diversity issues to particular staff, or teams of staff.

- Undertaking equality impact assessments (EIAs) of policy developments, services and projects (often with considerable reliance on statistical evidence).

- Statistical monitoring of the profile of their own workforce, often to ensure it was reasonably representative of the local resident population, in terms of race and disability.

- Seeking to ensure that their suppliers and providers of goods and services had appropriate equalities policies in place.

- Checking that services were being used by, and delivering appropriate levels of support to, their customers, clients and users from different groups.

- Drawing on statistical evidence at local, regional and national level to enhance their understanding of equality and diversity issues.

This aspect of the study revealed a number of gaps in equality and diversity data, and the way these statistics are used. It also emerged that all the CSOs offered some form of training and awareness-raising to their staff on equality and diversity issues; in some cases, this involved use of statistical sources. In a number of the CSOs, some work was also being undertaken to promote equality and diversity with external partners.

The study focused particular attention on the way the CSOs were using statistical data to enhance their activities in each of the six major dimensions of equality, and in the area of human rights. This revealed:

- Most work on age was focused on older people and children/young people. Statistics on young people were often accessible from local education surveys/reviews and from health-based organisations. Statistics on older people were often acquired from health-based organisations, and in some cases from in-house staff surveys.

- The focus on the CSOs on disability included analysis of the situation for disabled staff, as well as attention to the needs of disabled clients and service users. Disability statistics tended to be drawn from national sources (for

example the Census) and in-house workforce surveys. Some CSOs felt accurate disability statistics were hard to obtain due to a lack of disclosure and/or definitional problems.

- Most CSOs had used gender-disaggregated statistics to analyse their workforce, focusing on pay, grade and applications for jobs. Amongst the CSOs, the local authorities were making the most extensive use of national data sets to explore gender issues in relation to service development and delivery. Respondents felt this equality strand was generally well-served by existing data sources.

- While many of the CSOs were trying to address issues relating to race, and religion or belief, there were very limited data available on the latter. Some CSOs were collecting statistical information on these topics about their own workforce. In the PCTs, some patient profiling exercises were also in place to examine these topics, but there were sometimes weaknesses in the data due to small samples and poor response rates. The Census of Population offered a key source for data on race and religion, but (in 2008, when the latest Census had been collected in 2001) was regarded by many of the CSOs as 'out of date'.

- Very few CSOs had made much progress in exploring issues of sexual orientation or transgender, although most had in place relevant anti-discrimination policies. There was a widespread view that the data in this area were very limited; it was widely assumed that the data were very difficult to obtain due to concerns about data protection and disclosure. A few CSOs were working with voluntary organisations in this field to address weaknesses in the evidence base.

- Human rights issues were poorly understood in most of the CSOs. There was a general lack of certainty about whether or how issues relating to human rights could be captured in statistical evidence. However, some CSOs felt human rights issues were addressed in the development of work with refugees, asylum seekers and some ethnic minority groups, as well as through engagement with faith networks and trade unions.

The organisational arrangements for dealing with equality and diversity issues and policy varied considerably between the CSOs. At one extreme, one of the PCTs had a separate unit with considerable resources; at the other, there was only a single person with responsibility for equality and diversity, with limited evidence of progress towards mainstreaming these issues. It was particularly evident that in most

organisations, the effort and attention paid to equality and diversity issues varies between different departments.

On the basis of the study's findings, several good practice examples are presented in the report, and a number of policy implications recommended. The good practice examples include a Patient Research Initiative aimed at the service users of a PCT, a data-management scheme from a university designed to capture staff and student equality information, and a comprehensive report based on a county council region demonstrating good use of statistics. Policy implications include that:

- Organisations should be encouraged, with support from relevant national level organisations where appropriate, to seek statistical evidence bases more effectively.

- To encourage good practice, national level equality and diversity schemes should be promoted and local level public sector organisations should be assisted to share their schemes and policies.

- More support should be made available to local level public sector organisations to assist them in identifying, using and interpreting relevant statistics. More guidance from the Office for National Statistics (ONS) may be needed to help such bodies identify, access and use sources which are particularly useful for local level analysis, such as Census data.

- Obtaining 'sensitive' data (for example on sexual orientation or transgender status), and on data where disclosure can be difficult (disability, religion, etc) is important; new approaches may need to be developed and more guidance would be welcomed.

- Organisations should be encouraged to become exemplar employers in their use of statistics.

- Organisations should consider appointing staff skilled in statistical analysis and interpretation, dedicated to equality and diversity work.

1. Introduction

This report, and the research on which it is based, was commissioned by the Equality and Human Rights Commission (in March 2008 from the University of Leeds, in collaboration with the Policy Evaluation Group.

The Commission aims to champion equality and human rights for all, working to eliminate discrimination, reduce inequality, protect human rights and build good relations, and to ensure that everyone has a fair chance to participate in society. It has specific responsibilities under the Equality Act 2006 and was established as a non-governmental public body with statutory powers in October 2007. The study reported here was commissioned alongside another linked project, which was designed to produce a broad overview of the extent to which statistics on the six equality areas are collected, analysed and made publicly available at the national and regional levels (Walby, Armstrong and Humphreys, 2008).

The Equality Act 2006 placed new equality and diversity responsibilities on public bodies. Those with a local or regional, rather than national, remit, face some significant new challenges in carrying out their new roles. The studies were commissioned to assist the Commission in (i) planning its activities to support public bodies in meeting their new obligations, and (ii) to enable the Commission to assess the progress being made, by these bodies, in achieving better outcomes in line with the requirements of the new legislation.

This study was designed to explore relevant issues in locally based public sector organisations of different types in England, Scotland and Wales, and the research was conducted between March and October 2008. Its specific aims were to:

- Investigate the collection and use of equality statistics by selected public sector local level case study organisations (CSOs) in England, Scotland and Wales.

- Collect information on the use made by the selected CSOs of equality statistics from national, regional and local level sources and data services; including the use for equality purposes and for tackling human rights issues.

- Identify what additional primary data collection the CSOs carry out (if any) in relation to equality and human rights issues, including data relating to attitudes and prejudices, community cohesion and good relations.

- Identify what they perceive to be the information gaps/problems with existing data.

- Identify examples of good practice in the collection and use of data by the CSOs, including the use of data to assess the effectiveness of policy interventions.

The work commissioned was designed to build on several earlier studies, including a review of gender statistics (Breitenbach, 2006) carried out for the Equal Opportunities Commission (EOC) (one of the Equality and Human Rights Commission's predecessor bodies) and the recently completed Equalities Review (Equalities Review, 2007). The Equalities Review established a measurement framework, listing 10 dimensions of 'substantive freedom': longevity; physical security; health; education; standard of living; productive and valued activities; individual, family and social life; participation, influence and voice; identity, expression and self-respect; and legal security. To assess progress towards equality goals, statistics disaggregated by sex, age, disability, ethnic group, religion or belief and sexual orientation are required for each of the dimensions of substantive freedom, and the study aimed to explore how far locally based public sector organisations were already working in these fields. In particular, it was designed to explore whether the selected CSOs were using official statistics and other published data for equalities purposes, and whether they were commissioning new investigations which were producing relevant data.

While many of the provisions of the framework of equalities legislation in place in the UK cover all citizens and agencies, there are 45,000 public organisations which have a range of additional statutory obligations (i.e. specific, legally enforceable duties). Under the following legislation which applies in England, Scotland and Wales:

- The Race Relations (Amendment) Act 2000 placed a statutory duty on public authorities to promote race equality. This includes a requirement to prepare and publish a race equality scheme every three years.

- The Disability Discrimination Act 2005. From 4 December 2006, the Disability Equality Duty introduced in this legislation has required all public bodies actively to look at ways of ensuring that disabled people are treated equally, and to produce and implement a disability equality scheme.

- The Equality Act 2006 (which amended the *Sex Discrimination Act 1975)* introduced the Gender Equality Duty, which came into force in April 2007. This

requires public organisations to demonstrate that they are promoting equality for women and men and eliminating sexual discrimination and harassment. They are also required to produce gender equality schemes and carry out pay reviews.

- Other legally enforceable measures relating to equalities and diversity, with which public bodies must comply, include: the Human Rights Act 1998; the Employment Equality (Religion or Belief) Regulations 2003; the Racial and Religious Hatred Act 2006; the Employment Equality (Sexual Orientation) Regulations 2003; and the Employment Equality (Age) Regulations 2006.

The Equality and Human Rights Commission has specific responsibilities for promoting and enforcing the law in relation to equalities and human rights and has enforcement powers which it can use where necessary to guarantee people's equality. Some public authorities also need to meet additional standards in relation to equalities, diversity and human rights. For example, local authorities are expected to work towards improving their performance against the Equalities Standard for Local Government, and each Learning and Skills Council (LSC) is expected to comply with the arrangements set out in the national LSC's Equality and Diversity Strategy, which stresses that:

> ... the LSC is an organisation with influence and we must use our leadership role effectively to achieve greater equality and diversity.
> (DCLG, 2007)

Chapter 2 of this report describes the design of the study and the methods used in carrying it out. Chapter 3 explores the motivations of, and rationales given by, the organisations studied for undertaking equality and diversity activities, and for using statistical sources to support them in this work. It includes a consideration of how far equality and diversity practice is 'mainstreamed' in the organisations studied. Chapter 4 reviews the range of activities carried out by the CSOs covering their policies relating to: equalities impact assessments; their own staff; their service users; their suppliers; and their partners. The chapter also considers gaps in data and staff training needs. Chapter 5 explores how the CSOs are approaching each of the different dimensions of equality that they are required to address under the legal framework outlined in Chapter 1. Finally, Chapter 6 presents conclusions and policy implications based on the evidence in the previous chapters. Throughout, the report is illustrated, where possible, by examples of good practice in drawing on equality statistics to support effective action to promote equality, diversity and human rights.

2.   Study design and methodology

In agreement with the Equality and Human Rights Commission, a case study methodology was employed for this investigation. This involved a number of different elements, outlined below.

2.1   Identifying CSOs

Our aim in selecting the CSOs was to ensure that at least one CSO was based in Wales and one in Scotland, and that in England, the participating CSOs were operating in a number of different regions. We also sought to include different types of public sector bodies, as shown in Table 2.1. The CSOs selected comprised a mix of local and regional publicly funded agencies. Summary data on the organisations approached to take part in the study, showing those which agreed to take part and were able to provide research access in the relevant timeframe, are provided in Table 2.1.

Table 2.1   Profile of case study organisations

Type of organisation	Number contacted	Number CSOs	Number interviews	Location
Local Authorities	3	**3**	11	Wales, Scotland, England
Regional Development Agencies	2	**2**	6	England
Learning and Skills Councils	*	**1**	3	England
Universities and colleges	2	**1**	3	England
Health-related organisations	**	**2**	6	England
Police, fire and rescue	4	**2**	6	England
Sports and leisure	2	**0**	-	…
All public sector organisations	…	**11**	35	

Notes: * All 47 local offices of the 9 regional offices of the Learning and Skills Council (LSC) were sent an email request to establish if they were willing to take part in the study; approximately 25 per cent responded indicating their willingness to take part.

** Via the national Race for Health initiative, an (unknown) number of health-related organisations were contacted. Two responded indicating their willingness to take part and were included in the study.

In total, 11 CSOs took part in the study. Some other organisations were contacted, but either declined, were unable to participate because of internal organisational pressures, or were not selected for the survey. In most cases, we made an initial informal approach to establish general willingness to take part in the study. Where

the response was positive, a formal letter (from the Commission) was then sent (see the Appendix to this report). Most CSOs needed to secure internal agreement to participate (which took some weeks to achieve in certain cases, and could not be achieved at all in others). Some organisations were willing to take part, but could not do so within the necessary timescale; others, on consideration, felt that because their equality and diversity arrangements were still in development, they did not wish to become involved; in a few cases, the organisation was co-operative at the organisational level, but the individual staff identified for interview were absent, busy on other duties, or unable to prioritise engagement with the study.

2.2   Web research

Once a CSO had agreed to take part in the study, the first step was to investigate its use of equality statistics by examining its website. A range of key words, covering all aspects of equality and diversity work, was used, and document archives available via these websites were searched.

This enabled relevant documents, such as equality policies and equality impact assessments (EIAs), and any reports or other documentation which used equality statistics produced by other agencies, or collected 'in-house', to be identified. In each case, the original statistical sources used were noted, where these were available. In a few cases, relevant documents were not publicly available on the website, for example where the document was in draft form, or intended for internal organisational use only. In these cases, we made a note to ask our contacts in the CSOs to supply the relevant documents, and in almost all cases, this was done.

2.3   Telephone interviews with key staff

The next step was to arrange telephone interviews (each lasting approximately 45 minutes) with a small number of personnel in each CSO. Interviewees were selected to provide coverage, across all the CSOs included in the study, of the following areas of public sector activity:

- Regeneration, housing, economic development, neighbourhood renewal.
- Crime, justice, disorder, safety, drugs action, emergency response.
- Human resources (recruitment, staff management, staff development).
- Health and social care, children's services.
- Education, skills, training.
- Transport, leisure, recreation.
- Equality and diversity – covering age, disability, ethnicity, gender, religion or belief and sexual orientation.

Heads of appropriate departments were targeted for interview. The aim of the interviews was to gain both factual information and the perceptions of those interviewed, using a schedule with the following topics and headings:

- An overview of equality, diversity and human rights (EDHR) activities.
- The importance accorded to EDHR activities.
- The extent to which EDHR activities were integrated in wider policy.
- The types of EDHR statistics collected.
- How EDHR statistics from national/regional/local sources were used.
- Whether additional primary data relating to EDHR issues were collected.
- Examples of good practice in using these data sources.

In the interviews, the discussion of EDHR statistics specifically explored the kinds of statistics that interviewees were aware of, identified the particular statistics they knew were collected and used, and questioned interviewees about the kinds of statistics they were aware of, but which were not used. It also examined the precise purposes for which the statistics were collected, identified whether any primary statistics were collected, and asked interviewees to identify any gaps in the statistics available locally, regionally or nationally.

Interviewees were also asked how far the statistics collected were analysed and used within the organisation. (A copy of the topic guide used for these interviews is included in the Appendix to this report.)

2.4 Follow-up desk research

In the course of the interviews, some interviewees mentioned specific documents that had not been identified during the initial web review. These were often internal 'tools', unpublished documents, or 'work-in-progress'. Where possible, these documents were obtained, analysed and added to the database established from the web reviews. Staff in the CSOs often identified these documents as examples of good practice. Most were documents which made use of equalities statistics to assess the effectiveness of policy interventions. Examples included a data-management scheme developed to capture all dimensions of internal EDHR work; a document detailing revised workforce goals with target figures for employment by 2010; and a Patient Research Initiative detailing extensive EDHR work in terms of service delivery.

2.5 Data analysis

The data collected in the web review, the interview notes and any documentary analysis were analysed using a template. This closely followed the structure of the

interview schedule, which had been designed with the Commission's 10 dimensions of substantive freedom and the six equality areas (described in Chapter 1) in mind. This template was used to highlight key themes, and through systematic analysis, all issues raised in the data were captured in eight overarching 'main' themes, each divided into sub-themes. This combination of main and sub-themes provided the structure used in the discussion of the findings which forms the remainder of this report.

2.6 Abbreviations

The following abbreviations are used in subsequent chapters to describe the CSOs:

- LA – Local Authority (1, 2 and 3)
- PCT – Primary Care Trust (1 and 2)
- RDA – Regional Development Agency (1 and 2)
- FRS – Fire and Rescue Service (1 and 2)
- LSC – Learning and Skills Council
- For the university, no abbreviation is used.

3. Organisational rationales

The key issues the study was designed to explore included the organisational rationale for CSOs undertaking equality and diversity activities. As would be expected, all the public sector CSOs included in the study explicitly stated that one of their main reasons for undertaking equality and diversity activities was to comply with legislation and to fulfil, and if possible exceed, their statutory duties as public sector bodies. These duties, outlined in Chapter 1, mean that all should have in place equality schemes relating to race, disability and gender. However, the research revealed that almost all the organisations also had wider reasons for undertaking equality and diversity activities, going beyond their statutory obligations. During the telephone interviews, all (except LA1, a county council) drew specific attention to these wider reasons.

This chapter outlines these additional motivations and rationales, which included: the desire to be an 'exemplar' employer or 'employer of choice'; a belief that there is a 'business case' for promoting equality and diversity goals; and a desire to work towards a more socially inclusive approach in pursuing organisational aims. The role played by influential individuals within the organisations is also recognised, under the heading 'equality champions'.

3.1 Exemplar employers

Three organisations (PCT1, the university, and the LSC) stated that among the driving forces behind their equality and diversity activities and the collection of relevant data were their decisions, taken at a strategic level, to work towards an organisational 'exemplar employer' public image. These organisations all believe that implementing equality and diversity activities contributes to this image. This was reinforced in one example by a representative of PCT1, who stated that, as equality and diversity issues are currently driving the government's agenda, it is important to be regarded as an exemplar employer in this respect. This PCT has a high level of commitment to being a model employer, and there is a long history within the city in which it operates of collecting data on equality and diversity issues.

An interviewee based in the LSC noted that the desire to be an exemplar employer is their primary aim; this is reflected in all their documents. In the university, a representative explained that the purpose of becoming an exemplar employer has multiple motivations: to ensure the organisation is functioning to its highest potential; to attract and employ the best staff; and to act upon the moral dimension of a genuine commitment to equality and diversity activities.

3.2 The business case for equality and diversity

For the university, the business case for equality and diversity activities is also a key motivating factor. Our interviewees in the university explained that carrying out effective equality and diversity activities, and representing a cross-section of the population (through both staff and students), are essential elements in ensuring that their business is functioning well. LA2 (a city council) also explained that equality and diversity activities, and collecting and analysing relevant equality and diversity data, assist in ensuring that the business functions effectively. Key council services will not be able to meet demand if the council is unaware of the demographic profile of its customers or of their specific needs. Representatives from LA3 reiterated this point and noted the need for council services to meet the demographic profile of its customers. Additionally, both fire and rescue services were committed to making people safer from fire hazards in the region, and adhered stringently to government legislation. FRS2 also stressed the business case for equality and diversity.

RDA1 also mentioned the business case as an important driving force behind its general equality and diversity work, and its specific equality and diversity data collection and utilisation activities. It pointed out that, like other RDAs, its primary role is to improve the economy of its region. It recognised that, insofar as equality and diversity work strengthened the regional economy, this created a 'business case' for carrying out equality and diversity activities. Interviewees in this organisation, who also acknowledged the RDA's statutory duties in this sphere, noted that an explicit economic argument had sometimes been made for carrying out equalities and diversity work, and for the associated collection and analysis of appropriate data. It was normal practice to establish an evidence base (including an economic justification) to support specific activities, including equality and diversity activities, prior to their implementation.

3.3 Social inclusion

Five organisations (RDA1, the LSC, LA2, LA3 and FRS2) also pointed out that they are motivated to carry out equality and diversity activities as a reflection of their 'social inclusion agenda'. For RDA1, this commitment to social inclusion is linked to its business case for promoting equality and diversity activities. The agency wants people to come to live in its region, and to contribute to its economy. RDA1 sees building social capital as an important way of helping to boost the regional economy. This is a particularly pertinent current issue for this agency, which is attempting to respond to outward migration from the region.

Unsurprisingly, the aspects of social inclusion which motivate the LSC's equality and diversity activities are slightly different from those seen in RDA1. The LSC believes

that, to reduce economic and social deprivation, learning providers need to widen opportunities for skill development and to maximise personal potential across all sections of society, with benefits at the individual, economic and societal levels. A key aspect of the guiding philosophy driving their equality and diversity activities is therefore the desire to provide everyone with the chance to develop their skills and potential. The LSC recognises that very diverse populations in some areas are a major influence on the social inclusion agenda. One LSC interviewee cited an example (a city within the region), which has few people from ethnic minority backgrounds, but has identified a rising East European population. As part of its commitment to meet the needs of everyone and to give all the chance to develop their skills and potential, the LSC is engaging with East European community groups to gain an understanding of the needs of this segment of the population, carrying this out through a provider which has forged links with churches and community groups. There are regular meetings in which the provider advertises the services that are on offer. In one area, classes are offered in a local community centre, rather than on college premises.

LA2's rationale in relation to social inclusion is to help meet the needs of different groups of people effectively. Its approach is to go beyond minimum guidance in its efforts to ensure that the profile of its own staff reflects the composition of the wider community. To this end, it uses its equality and diversity policies to try to make employment in the organisation attractive, and has an 'open' flexible employment policy. It believes that its activities in this field also raise the local authority's profile and help it recruit and retain the best staff. LA3 was similarly concerned with recruiting staff who are representative of the wider community. One particular directorate had recently identified an under-representation of Pakistani workers, by comparing the results of its staff census (see section 4.3) with data from the 2001 Census of Population. This directorate aims to put measures in place to redress this imbalance and to improve understanding of the barriers facing Pakistani workers. These include specific recruitment programmes targeting the Pakistani community within the city. The LSC is also trying to reflect the local population among its staff, although at present its ability to do this is restricted because of limited recruitment opportunities. Further details relating to monitoring of staff characteristics are provided in section 4.3.

Box 1 Example of good practice: fire safety project (FRS1)

FRS1 has developed a centre of excellence for the development and delivery of fire safety awareness and education. This CSO is planning to work with local agencies, organisations and communities to promote this awareness. Based in its own premises, the project is to be launched in autumn 2009.

The project will target groups in the region who have been found to be particularly vulnerable to fire-based risks. Among these groups are younger people, ethnic minority groups, disabled people, and older people. Specially tailored training courses will be made available to promote fire safety, as well as regular conferences, meetings, workshops, and flexible creative projects. There will also be a focus on the wider issues that contribute to community safety, such as risk-based behaviour and the people most likely to engage in this.

The project will provide an opportunity to transfer all existing staff training to these new premises, as well as to run open days for people who may wish to join the fire service and who would like to see beforehand what being a fire fighter would involve.

FRS1 was also committed to recruiting members of staff who reflected the local community profile in terms of equality dimensions (age, gender, disability, ethnicity and sexual orientation). Deployment of staff to local fire stations is now undertaken with a view to identifying which staff might best serve particular areas: for instance, ethnic minority fire fighters have been located in areas with a high percentage of ethnic minority residents, to address communications problems in working with non-English speakers.

FRS2 has been given targets by the Department for Communities and Local Government on how many women and ethnic minority people they must employ, but noted that, as it was not currently recruiting many staff, changing the composition of the workforce was difficult. This CSO also pointed out that it receives very few applications from women and people from ethnic minorities.

FRS1 reported that it is developing a fire safety project which aims to promote safety awareness and education among different groups in the region; FRS2 also targets its fire prevention activities at groups which it considers to be vulnerable, such as older people, ethnic minority residents, and disabled people. More detail about FRS1's project can be found in Box 1.

3.4   Equality and diversity champions

A final explanation for an active approach to undertaking equality and diversity activities was given by both the RDAs and one of the PCTs; namely the impetus and support provided by 'equality champions' and 'role models'. In all four of these

organisations, interviewees were keen to point out that the presence of a few key people in senior positions, who are enthusiastic in pushing equality and diversity activities forward, is an important motivating factor. In one of the RDAs, for example, it is the chief executive who wants the organisation to make diversity an area of specific strength. The particular focus of the equality and diversity activities undertaken, and the degree to which, for example, data are collected for one strand more rigorously than for another, often depends on the particular interests of the organisation's equality champions and role models. Thus in one of the RDAs, one member of staff's particular personal interest in issues of disability had given data and activities relating to disability a particularly high profile and much attention. Representatives of LA3 similarly pointed to a recent chief executive as a leading figure who had played a prominent role in promoting equality and diversity issues throughout the past decade.

3.5 Arrangements for dealing with equality and diversity activities

During the interview period, only two organisations, a Primary Care Trust and a local authority, had a separate unit dealing with equality and diversity activities, although a further four CSOs had small teams of equality and diversity staff spread throughout the organisation. The unit in the PCT comprises five members of staff covering service delivery, employment, disability, commissioning, and admissions; the local authority has four staff members covering: gender and sexual orientation; race, religion or belief and cohesion; disability and age; and strategic work. The other organisations included in the study have a variety of mechanisms in place for equalities and diversity issues, rather than a separate unit.

RDA1 has one member of staff responsible for equality and diversity in human resources, another in its statistics division (to 'collect the evidence base'), and another in its social inclusion unit (whose work was described as 'project based'). At least one of the interviewees felt this was a limited staff resource base, which meant equality and diversity could not have the more prominent position they would like; they also noted the need for more guidance on equality and diversity issues from senior staff within the organisation.

The LSC has one staff member dealing specifically with equalities and diversity, its equalities and diversities manager. This job role involves making sure equalities and diversity activities are included within all organisational activities.[1] Using a very different model, the university has an Equal Opportunities Committee, intended to ensure equalities and diversity activities were addressed throughout the organisation; each department within the university also has an equal opportunities officer. More

recently, an equality and diversity manager has been employed in a central administrative role.

3.6   Mainstreamed?

Organisations were asked if equality and diversity activities had become mainstreamed within their organisations (by which we meant fully integrated into the organisation's wider systems and policy work). The answers revealed both that equality and diversity activities were mainstreamed to differing extents within each organisation, and that people have rather different perceptions of what 'mainstreaming' means.

PCT1 felt that equality and diversity activities were mainstreamed to 'some extent' within its organisational practice (for example, equality and diversity considerations are built into the drafting of policy documents and are integral to all policies). Each new policy at this PCT is subjected to an EIA, and developments cannot progress to Board level unless this step has been completed. If for any reason an EIA has not been undertaken, evidence of why it is not needed must be provided.

Nevertheless, it was evident from the comments of interviewees in this PCT that while in some areas equalities and diversity issues are well embedded, this was not true of all parts of the organisation. Interviewees noted that in human resources, all policies are equality impact assessed and monitored, but were aware that other departments within the PCT practice did not always meet this standard.

Interviews with staff in RDA1 demonstrated that different perceptions of what is meant by mainstreaming affect the extent to which equalities and diversity is integrated into the wider organisational policies and activities. For example, although RDA1 mainstreams equalities and diversity policy through its 'sustainable development toolkit', interviewees feel the effectiveness of the toolkit varies across departments, with some being more effective, and undertaking more equalities and diversity checks and assessments than others. This RDA was examining this issue during the interview period, as it recognised that to implement its equality and diversity toolkit effectively, departments needed to see a benefit from using it, rather than simply being told to do so – suggesting that this organisation is seeking ways to implement equalities and diversity activities more effectively.

The discussions with RDA1 indicate that policies can be implemented in different ways in different parts of the same organisation, and can also be perceived in different ways. In RDA1, the human resources' representative interviewed felt that equalities and diversity issues are 'not yet' mainstreamed. Although looking 'good' at

the level of the Regional Economic Strategy, at the next level down, where more detailed business plans and similar documentation are produced, the various equalities and diversity schemes have still to be fully embedded in the process. Interviewees in this RDA expressed the view that their organisation needed a Single Equality Strategy. They felt this would be a more effective way of integrating equalities and diversity into business planning. It was also suggested that, to strengthen the profile and importance of equalities and diversity in the organisation as a whole, heads of teams needed to 'take ownership and responsibility' for the development and implementation of equality and diversity schemes. Currently, it was thought, managers did not take sufficient responsibility, and, in effect, the equality and diversity arrangements tended to be little more than 'paper' responsibilities.

In RDA2, most of our interviewees considered equalities and diversity to be effectively integrated into the organisation's work. All activities, one interviewee said, were governed by the cross-cutting theme of diversity, with all investments 'impact assessed' to review equality and diversity. This RDA also noted that equalities and diversity policy and activities are often 'government driven'. However, another interviewee in this organisation noted that while significant efforts had been made to mainstream equalities and diversity, there was a 'long way still to go'. In particular, equalities and diversity still needed to be built into core training, appraisals and policy.

At the LSC, interviewees indicated that equalities and diversity had been mainstreamed 'in principle'. This had been achieved, for example, through training all of the organisation's 300 managers in impact assessment. A single equality scheme was in place, demonstrating a focused commitment. Equalities and diversity was a topic high on the agendas of the LSC (and many of the other organisations it works with, such as colleges, the Prison Service, and other education and training providers). The LSC saw equalities and diversity as fundamental to what it and other providers should be doing. Nevertheless, even here, where the commitment to equalities and diversity is very strong, it was recognised that to be fully and successfully integrated, equalities and diversity activities needed to be embedded more deeply within the organisation. For example, the LSC was 'good' on issues relating to ethnic minority background, to religion and to sexual orientation, but less good in areas that were 'less clear cut'; for example, it was aware of significant numbers of staff who chose not to register disability.

An interviewee at LA1 thought that, at a strategic level, equalities and diversity activities and policies had been mainstreamed, but that at roll-out level – for example, in social services and education – this had not been achieved. In LA3, the head of

the equality and diversity team thought equalities and diversity work was 'partly' mainstreamed and that some services areas were better than others, with neighbourhoods and community care, and services for children and young people, identified as leading service areas in this respect.

All three interviewees at FRS2 considered equality and diversity policies to be mainstreamed, 'heavily ingrained' and integrated, pointing out that FRS2 had achieved level 3 of the Equality Standard for Local Government. FRS2 employs ethnic minority advisers (for example, to give talks to groups of people or advise when any festivals that may bring a fire risk are coming up), and sees this as evidence that equality and diversity was well embedded in its work culture.

An interviewee at the university claimed that the organisation's long-term plan was to roll out equality and diversity activities across recruitment and staffing and in its service provision affecting students. Such work was presently in its early stages, although the university's desire to become competitive locally, as well as to be an exemplar employer, was giving the achievement of these goals greater priority.

3.7 Summary

This chapter has examined the motivations behind public sector organisations' existing equality and diversity work. Among the reasons given are a desire to become an exemplar employer, as well as a belief in a 'business case' rationale for equality and diversity work. In a number of CSOs, service delivery is informed by a policy of social inclusion, and some have recruited equality and diversity champions to deal specifically with both service delivery and workforce equality issues. A few CSOs in this study have developed dedicated separate units to focus on equality and diversity issues, although most were working towards mainstreaming these policies across the whole organisation.

4. Scope of activities and use of statistics

This chapter shows that the range of equality and diversity activities undertaken by the CSOs is fairly broad, covering: staffing; EIAs; monitoring of workforce profiles; monitoring of providers; monitoring of users; training, development and awareness-raising for staff; and promoting equality and diversity with external partners. As shown below, the extent and degree to which each CSO has made use of equality statistics in undertaking these activities varies.

4.1 Staffing

Seven of the CSOs have created specific posts to deal with and implement their equality and diversity agenda (one of the PCTs, one of the LAs, both RDAs, the LSC, the university and FRS1). In six of these, a small team of equality and diversity officers has been created, with responsibility for implementing equality and diversity activities, both in relation to the organisation's own workforce and in relation to its service delivery role. Among these six organisations, PCT1 appears to have the most comprehensive approach to staffing for equality and diversity activities. Specific dedicated posts within this PCT include: head of equality and diversity for commissioning (a post it believed did not exist in other PCTs), an officer responsible for equality and diversity in service delivery; a disability adviser for both workforce and service delivery issues; and an equality and diversity officer dedicated to employment matters. While these staff carry out basic analysis of equalities data collected (such as analysis of frequencies), the more sophisticated statistical expertise sits with members of the PCT's public health intelligence team (health intelligence managers) whose role is to support the staff in these posts, providing statistical evidence as and when required. A further post within the PCT has been created to deliver the 'Race for Health' programme.[2]

RDA1 also has a team of staff responsible for 'embedding' equality and diversity commitments within the organisation, which includes people responsible for collecting and analysing statistics, while RDA2 employs an 'Enterprise Champion' whose specific activities include supporting ethnic minority businesses and women-owned businesses in the region. The university has recently appointed an equalities and diversities officer who is dedicated to reviewing existing equalities activities within the organisation and mainstreaming these via management teams across all academic departments, both in terms of workforce and service delivery issues. The university was also looking into employing a dedicated statistician to deal with data, including data relating to equality and diversity.

LA3 has a team of four within the equality and diversity function encompassing posts covering: gender and sexual orientation; race, religion, belief and cohesion; disability and age; and strategic equality and diversity work. These posts are primarily concerned with service delivery issues, but post holders work closely with the LA's corporate organisational development team on issues relating to equality and diversity at a workforce level. (The head of the equality and diversity team was keen to point out that their team of four is relatively small when compared with similar-sized local authorities elsewhere.)

The LSC has a data team responsible for gathering statistical information, which any member of staff can access. The LSC uses these data to explore, for example, the number of ethnic minority learners, or disabled learners. This information is then compared against Census data to assess trends. The LSC feels that while this may not be a statistically valid method, it nevertheless provides a useful overall picture.

FRS1 has a six-person team dedicated to equality and diversity strategies, including two outreach workers and a co-ordinator, working across all six equality strands. A diversity steering group meets quarterly under the guidance of the human resources manager. Any issues raised are explored with managers in the organisation, sometimes leading to internal policy change and development. (For example, this group raised the issue of individual showers for staff, which ethnic minority and female staff had reportedly requested; these are now in place in its fire stations.) Additionally, all internal proposals and documents are routinely examined by the equality and diversity team to ensure that equality issues are factored into all organisational developments.

In FRS2, an Equality Standards Steering Group has been established with representation from all functions within the service, including the director of human resources. This group meets every eight weeks to assess and steer policy.

4.2   Equality impact assessments

As noted in Chapter 1, all public authorities have legal duties relating to race, gender and disability. Their obligations within each area focus on promoting equality of opportunity, good relations, and positive attitudes, and on eliminating harassment and unlawful discrimination. They are mandated to carry out equality impact assessments (EIAs) as a tool to ensure these obligations are met.

An EIA is a process of analysing a proposed or existing service, strategy, policy or project. The aim is to identify any effect, or likely effect, on different groups within the community. The intended outcome is that, as far as possible, any negative

consequences for minority groups are eliminated or minimised, and that opportunities for promoting equality are maximised. The EIA process is designed to assess whether a policy or service disproportionately disadvantages people in relation to race, gender or disability. The principle behind the EIA is that if there is a negative impact, action should be taken to change or mitigate it. This section looks at how EIAs are being implemented across the CSOs.

Some CSOs use EIA toolkits. PCT1 uses a toolkit to monitor policies against each of the six equality areas.[3] Policies cannot be taken to board level without putting forward a case that all the criteria in the toolkit have been met. RDA1, which also checks all projects using a 'sustainable development toolkit', acknowledges that how vigorously this is done varies between departments, suggesting that the exercise is taken less seriously in some departments than in others. RDA1 is currently reviewing this situation, with the aim of implementing the EIA process more effectively, across the whole RDA, in the future.

Across the range of people spoken to, the study found varying levels of awareness of the equality and diversity procedures in place. For example, at PCT1, one senior manager within equalities and diversity was unaware of the toolkit referred to above, suggesting unevenness in the levels of knowledge and awareness across the organisation.

LA2 currently uses several impact assessment tools that it has developed to mainstream equality and diversity policy; these tools will eventually be combined to provide a single tool covering different dimensions of equalities work. PCT2 reported that its EIA was in the process of being developed, and is being linked to its involvement in the Race for Health initiative, but was unable to supply further information. During the interviewing period, this work was at an exploratory stage and still under discussion within the PCT.

The interviews also revealed that some CSOs are starting to implement single equality schemes. Typically, these schemes are focused on ethnicity, disability, gender and (in some cases) age, although CSOs are working towards integrating sexual orientation. These single schemes replace the separate schemes for race, disability and gender, and are seen as offering a more coherent and complete response to recent legislative changes. Six of the CSOs were undertaking this activity, all at different stages of development. PCT1 has already brought all aspects of equality and diversity together. The LSC has also put all duties under one scheme, and has developed an action plan. RDA2 reports that it, too, is moving to a single equality scheme, and now has an Equality Strategy that incorporates gender, race, and disability. The university is also moving towards a single equality scheme,

although this is in its early stages. It is still considering how best to develop this, beyond making its documentation available to its staff, students and committees. It has drawn up an action plan, with the aim of developing a single scheme covering all six dimensions. The race, gender and disability elements are already in place, and it is due to add religion, sexual orientation, and age at some (as yet unspecified) time in the near future. One CSO that had included all equality strands in its single equality scheme was FRS1, which had developed an approach covering: ethnicity, religion and belief, gender, disability, age and sexual orientation. Although these strands had not yet been fully embedded in the wider policy work of the organisation, there were hopes that this would be achieved in the near future.

LA1 recognises that it still needs to co-ordinate its equalities activities, and is aiming to achieve this by implementing EIAs across its 26,000 staff, and by informing the management teams and committees of different departments about equality issues as a way of working towards establishing organisation-wide policies. RDA2 is targeting beneficiaries of its services through its EIA. These EIAs are charting (unspecified) demographic data about beneficiaries, and asking questions such as, 'How does a policy, service, or strategy impact on different groups?' and, 'What more needs to be done?' This approach is being taken forward by monitoring projects, and representatives of RDA2 believe this is now starting to shape policy developments, particularly with regard to those groups of beneficiaries who may presently be inadequately served by existing policies.

4.3   Monitoring workforce profile

Monitoring the profile of their own workforce was one of the key equality and diversity activities identified. It was highlighted by interviewees in nine of the 11 CSOs. This activity links closely to the EIAs discussed above. These CSOs are keen to ensure that the profile of their workforce is similar to that of the wider population, particularly in terms of gender and ethnicity, and are also starting to address age and disability. However, although some early attempts have been made to mirror the wider population in terms of the proportion of lesbian, gay, bisexual and transgender (LGBT) staffing, there have been difficulties in collecting data (see Chapter 5 for details).

Box 2 Example of good practice: data streamlining scheme (PCT1)

PCT1 has decided to develop an accurate workforce equal opportunities profile of its workforce, using a data streamlining scheme. The scheme involves comparing the workforce profile with local demographic data, to establish if the workforce is representative of the local community at all levels. The aim is to set meaningful long-term improvement targets for achieving diversity at all levels in the workforce and to implement a comprehensive framework to monitor its employment practices and policies.

The scheme includes a series of positive action initiatives: a staff survey (already in place and to be periodically updated) to collect consistent and accurate information from staff to produce a demographic profile; and workforce indicators (published quarterly). By comparing these internal data on its own workforce with local and regional data available from the Census and from official public health statistics, PCT1 can compare its staff profile to that of the wider local population, highlighting areas where there are gaps and developing and putting in place measures to rectify the situation. Its aim is to ensure that the workforce profile more accurately reflects the wider population. Low initial response rates (34 per cent) have been identified as a possible barrier to the success of this project, but PCT1 is working to improve these.

Some of the measures already proposed to achieve these goals include putting in place funding and resources for targeted recruitment, as well as funding training and development programmes to help achieve a diverse workforce. The PCT also aims to remove any existing barriers experienced by different members of the community when applying for jobs at the PCT. Finally, staff networks will continue to be developed to ensure that staff can contribute to decision making across the organisation.

Monitoring of the workforce profile is carried out somewhat differently in these nine CSOs. PCT1, for example, has developed a major scheme, which it conceptualises as a 'data streamlining' project. It has developed a three-year plan outlining how it anticipates fulfilling (and exceeding) its statutory obligations as an employer, which provides a positive example of good practice (see Box 2).

The LSC has developed specific targets for the profile of its employees, too, particularly in relation to matching the demographics of the local population for disabled people, and for the local ethnic minority population. It is also profiling women and ethnic minority staff in senior positions. The LSC undertakes its own staff surveys for collecting information on the demographics of its employees. Like PCT1, the LSC then compares these data with national and regional workforce data. Using this approach, common across all LSCs, each head of human resources produces monthly, quarterly and annual local workforce reports for senior management. The data collected includes gender, age, ethnicity, job grade and locality, and the information is incorporated into the LSC's Annual Report to the Secretary of State. The content of the workforce reports is reviewed at both management and board level. The statistical information is used in setting both national and local targets, to

ensure that the LSC's workforce profile reflects the characteristics of the wider working population. These data are used to develop specific workforce equality and diversity activities, including positive action programmes, and feed into internal targets for the national employment profile of the LSC.

The LSC's single equality scheme has targets to retain a diverse workforce and to increase: the numbers of women in senior management; ethnic minority representation in senior management; the numbers of disabled people in senior roles; and the number of disabled people within the workforce. Each LSC region is required to produce a staff action plan to achieve these goals. The LSC also has an Organisational Development Group (ODG) whose members are LSC employees at different levels of the employment hierarchy. Each local LSC office has at least one representative. The ODG has a broad remit and its powers (under its formal terms of reference) include making decisions about how equality and diversity policy is being delivered, and informing the LSC's Regional Management Group of actions which need to be taken.

Among its numerous equality and diversity activities, RDA2 also highlighted its monitoring of equality and diversity, using staff surveys. These are used to collect statistical data on the ethnicity, gender, disability and age of staff. However, as staff are not obliged to complete the surveys, and response rates are low, interviewees felt the quality and representativeness of these data are not adequate as an evidence base for developing policies to meet the needs of different groups. LA2 is also developing an integrated data system and collating information about the demographic profile of its staff by age, gender, ethnicity, disability and sexual orientation, employing the categories used in the Census of Population, to enable comparison of LA2's own survey data with the national picture.

RDA1 had recently completed an equal pay audit, and through this had gathered detailed statistics on its staff and on the differences between men and women in relation to pay and position. Its labour force contains more women than men, but women are under-represented in senior roles. It has few people from an ethnic minority background, and on this indicator, does not match the population profile for its region. The audit did not include any information on sexual orientation.

LA1 collects data on four aspects of equality and diversity: age, gender, ethnicity, and disability. It has information on these variables for people who apply for jobs in the local authority (and for successful/unsuccessful applicants). Using the same variables, it also has detailed information on its workforce relating to: pay grades; harassment and bullying; experiences of training access; flexible working; maternity

leave and returning to work after maternity; internal and external applicants; disciplinary issues; and leavers. Its recruitment statistics inform a toolkit which is compared with Census data, and where differences are found, action is taken.[4]

LA3 carries out two key staff surveys: an annual workforce opinion survey; and a staff census. The former seeks to capture staff opinions of the local authority as an employer, including their views on the organisation's equality policies. The information collected is disaggregated by gender, age, ethnic minority, disability, and (more recently) LGBT. The survey has been operating since 1998, with a response rate of around 45 per cent, although this has increased recently to 56 per cent. Those responsible for conducting the survey pointed out that they continuously look for ways of improving the response rate. However, even the completed questionnaires often contain missing personal data – a problem affecting about 1,000 questionnaires each year. The survey data are analysed and disaggregated, by directorate, and all managers discuss the results with their staff, identifying any management issues for their service areas, and developing an action plan in response to emerging issues. LA3 has recently started publishing the results of the survey on the intranet, including the follow-up actions taken. One interviewee observed that some directorates are much better at acting upon the results than others. LA3 is exploring the possibility of undertaking the survey every two years, rather than annually, in order to devote more resources to it. The authority benchmarks the survey results against other similar local authority surveys, carried out by external research organisations.

LA3's staff census is designed to explore the demographic composition of the workforce and to monitor diversity. Again it was emphasised (in more than one interview) that responsiveness to the survey results varies between directorates. The neighbourhood and community care directorate was highlighted as particularly responsive to issues arising out of the staff census.

FRS1 records staff data relating to gender, ethnicity, age and disability; these data are collected via an internally distributed mail-shot. It is in the process of adding sexual orientation to this process and has prepared a letter addressed to staff members that will be sent to their home address. There are future plans to conduct a similar exercise enquiring about the religious belief of staff members, too.

FRS2 collects statistics on its workforce through its human resources department. Staff submit details, online, on a voluntary basis, and can access and amend their personal record at any time. They are asked for their age, gender, ethnicity and any disabilities. FRS2 has recently broadened this to also request information about sexual orientation, religion, and caring responsibilities. The information is used to

support the workforce; thus if an employee has a disability, FRS2 asks how they can help with this and offers support. Ethnic minority employees are asked if they need any adjustments at work, such as prayer time. The information can be accessed only by the individual concerned and human resources, and all information is treated confidentially.

At the university, application forms for jobs come with an (optional) equal opportunities monitoring form, with categories for age, gender, ethnicity and disability. These data are held separately from the application form. The university pointed out that it also has a mandatory responsibility to check nationality (under Home Office regulations). The university's standard application form includes a question on health (in case there is need for a referral to its occupational health team), although it stressed that applicants' responses to this have no bearing on recruitment decisions. The university words its job summaries carefully, to avoid any potentially 'ageist' comments using 'experience', for example, instead of 'mature'. An interviewee from the university commented on the need to be 'practical', however, and to use 'common sense' in this area. Once the recruitment is complete, the data are stored on a data system which is accessed by policy advisers. The university has recently recruited an advertising agency to undertake market research, with a view to exploring the scope for calibrating the organisation's approach with that of other local agencies. All of these activities are part of its ambition to be regarded as an 'employer of choice' in the local labour market, as mentioned in Chapter 3. One of the key documents developed by the university is a data-management scheme. Details about this scheme can be found in Box 3.

Box 3 Example of good practice: data-management scheme (university)

The university has recently developed a data-management scheme which at present captures data from staff and students based on race, disability, gender and age (although it is hoped that in the near future, sexual orientation and religious belief can be added). These data are regarded as essential in terms of assessing the impact of equality policies within the organisation.

The ethnicity category bands individuals in an identical way to the Census, while the disability category, at present, merely records with or without a disability (however, from 2008 onwards, the Higher Education Statistics Agency (HESA) will require the University to acquire information about different types of disability); seven age bands are used. These data will be 'benchmarked' against data available from HESA.

Among the workforce, these data are used to assess whether there is occupational segregation and any pay gaps; who applies for posts; who applies for training; who gets promoted; and issues relating to disciplinary action. Among service users (students), the data are used to assess the profile of applicants and their relative success rates; academic under-achievement; and whether some groups experience more problems during their time of study.

This single assessment document combines these different equality strands and allows for the storage of data in a manipulable form. The scheme is also flexible enough to be developed according to changes in equality and diversity assessment needs.

4.4 Monitoring providers

Only two of the CSOs mentioned monitoring their providers as part of the equality and diversity activities they undertake: the LSC and RDA1. The latter has recently developed a diversity policy for suppliers. To be eligible as one of the RDA's suppliers, potential providers must have appropriate equality and diversity policies in place. At present, this specification is enforced only at the tendering stage, however, and is not yet built into specific provider contracts.

The LSC has developed equality networks for all providers in its four sub-regions. This is a mechanism for it to highlight the need for its providers to implement equality and diversity activities within their service provision. From its statistical information and knowledge, the LSC identifies specific equality and diversity issues which need to be addressed, and each provider is asked to work with the LSC on addressing particular equality and diversity issues relevant to them. For example, where the profile of staff and users does not currently match the demographic profile of the wider local population, the LSC is working with individual providers to increase the proportion of both ethnic minority staff and users.

Information relating to LSC staff is collected and analysed by Life Long Learning UK (LLUK), and from this a workforce development strategy has been developed. This has four priorities:

- Understanding the nature of the workforce.
- Attracting and recruiting the best people.
- Retaining and developing a modern workforce.
- Ensuring that equality and diversity recognition is at the heart of the strategy, policy making, planning, and training.

The LSC collects information about service users from Individual Learner Records (ILRs) which asks learners to provide ethnicity and disability data. This is used to see if particular groups are under-represented, benchmarking against 2001 Census data. The LSC also compares performance and retention against peer groups, to identify any areas of concern.

As part of a move towards self-regulation, the LSC expects its providers to monitor their own performance. It has set regional Equality and Diversity Measures (EDIMs), based on data showing the recruitment, retention and success rates of learners, by variables which include ethnic minority, disabilities and gender. One EDIM, for example, is based around increasing the numbers of ethnic minority learners taking apprenticeships. As part of this, the LSC expects providers to use their own statistics to identify areas where improvements can be made. In the self-assessment guidance, the LSC stresses the importance of monitoring performance and benchmarking. When the LSC partnership teams meet with providers, they ask a range of questions about performance, one of which is about monitoring performance in relation to ethnic minority learners. In the last year, through the LSC's provider equality networks, the LSC has focused specifically on faith communities, developing its curriculum to reflect ethnic minority levels in the local population, and on raising the representation of disabled people. In addressing some issues, it has joined forces with other nearby LSCs. For example, the local further education (FE) college workforce statistical information revealed a very significant under-representation of ethnic minority staff, and of disabled staff, both in the region and across England as a whole. In response, the LSC has joined forces with three adjacent regions to explore ways of addressing this.

4.5   Monitoring users

Many of the CSOs use equality and diversity statistics to monitor the 'end users' of their services, their customers. Seven of the CSOs (all three local authorities, both PCTs, the LSC and the university) indicated that they use equality and diversity data

for this purpose. PCT1 uses Census statistics (for comparison purposes), NHS statistics and public health information on patient profiling, and gathers personal characteristics data from patients and GPs – although one senior manager working within equality and diversity in PCT1 was unaware of the comparability/benchmarking element mentioned above. Neither of the RDAs mentioned monitoring users as part of its data collection process, however.

Health-based organisations

PCT1 has a well-established system of recording patient characteristics, in operation since 1985 (see Box 4). Responsibility for this lies with its public health department, working closely with the PCT's information management and quality improvement teams. PCT1's Patient Research Initiative had been commended by the Commission for Racial Equality, in the past, as reaching the 'gold standard' for ethnicity monitoring in primary care. It was also highlighted as an example of good practice in the Department of Health document, *A Practical Guide to Ethnicity Monitoring* (2005). The initiative enables PCT1 to analyse the proportion of patients on registers relating to specific conditions (coronary heart disease, diabetes, mental health, etc) by several equality and diversity characteristics, including ethnicity. It did not collect any data on sexual orientation/transgender status, as the templates needed to record this information had not been set up on GP practice clinical systems. PCT1's patient research initiative is now being rolled out across PCTs in the wider region; it is described more fully in Box 4.

In contrast, interviewees in PCT2 felt that their organisation faced some challenges in monitoring users of its service, particularly in relation to data quality. For example, key patient profile data on age, gender and ethnicity, which should be collected at hospital admission, is not always recorded accurately. In the research interviews, staff said it was difficult to determine whether the problem was that frontline staff collecting patient characteristics information were not adequately equipped for this role, or whether the poor quality of the data was due to patients' reluctance to disclose personal details. Here, statistical data on ethnicity are missing from a remarkable 40 per cent of hospital admissions data, leading the interviewees in PCT2 to feel the data that are collected are of limited use.

One PCT2 interviewee, who felt more primary care data were needed from GPs, pointed out that GPs are not currently obliged to provide these. Guidance from the Department of Health Quality Outcomes Framework instructs GPs to monitor ethnicity data, but, according to one interviewee, the financial inducement to do so is an inadequate incentive for many doctors. This interviewee felt the British Medical Association should exert pressure on GPs to carry out this task.An interviewee at

PCT2 also thought there was a tension between trying to incorporate all equality strands and meeting government targets. Locally, because ethnicity and gender have emerged in regional surveys as more relevant to smoking rates than (say) sexual orientation has, gathering information on ethnicity and gender is given higher priority, and is more strongly supported at senior level. While this interviewee felt an ideal situation would be for **all** equality and diversity strands to be addressed in its anti-smoking projects, s/he felt to focus on all the strands, while pursuing rigorous annual targets for smoking cessation, was impractical. In her view, only certain strands (gender, ethnicity) were related to significant differences in smoking rates, while others (disability, sexual orientation) were not.

Box 4 Example of good practice: Patient Research Initiative 2007 (PCT1)

The Patient Research Initiative involves collecting key demographic and health data from patients via GP surgeries. To date, 44 GP surgeries have been assisted to profile their patients. With the recent creation of a geographically larger PCT area, this now represents less than half the surgeries covered by the PCT. All the new practices have been approached to encourage them to adopt the same patient profiling system.

Over a period of seven years, PCT1 has developed an initiative designed to acquire data based on the profile of patients accessing medical practices across the region. Patient information forms were distributed to each practice, as well as an information pack and a template for recording data. Training was also provided for staff to enable them to carry out the profiling.

Data on over 120,000 patients from 56 practices were collected in 2007 (60 per cent of all service users in the practices). The survey captured data relating to the following: religious orientation, languages spoken, languages read, ethnicity, country of birth, caring status, need for sign language facilities, and need for an interpreter (in the medical services context).

The profiling data produced has been used to inform reports for a regional care consortium; to contribute to services delivered to people suffering diabetes and coronary heart disease; and to inform cervical screening programmes. The initiative has also been used to support other PCTs in the district; to provide training to medical staff for collecting ethnic minority data; and to evaluate mental health registers.

In the future, the Patient Research Initiative will be used to encourage more medical practices to participate in the scheme, to support other PCTs in the district, and to expand the kind of data collected (for example, by including a disease register).

Local authorities

All three local authorities monitor the characteristics of their service users, although each approaches this in a slightly different way. LA1 has a 'Care First System', which includes key information about its social care customers (including age, gender and ethnic origin). It is considering expanding this to include other indicators relevant to the equalities agenda, such as mental health and learning disabilities, and exploring how it can incorporate information on sexual orientation. This local authority feels it is preferable to collect this kind of 'sensitive' information from customers as they use services (on a 'people through the door' basis), rather than via questionnaires, although it recognises this is not always possible. Interviewees in LA1 felt there is no 'perfect' way of collecting this kind of equality and diversity data; however, during the interview period, it was working on generating new ways to improve its data collection arrangements (though none had yet been developed sufficiently to report on).

In addition to its 'Care First System', LA1 has also carried out a small-scale household survey (of 1,000 residents), in an attempt to collect key demographic data, followed up by a series of focus groups designed to collect more in-depth information. However, a difficulty here was that the small sample size produced 'non-generalisable' data. Response rates from all groups, particularly ethnic minority and older people, were considered 'disappointing' in view of the efforts made to collect this information.

LA2, a Welsh county council, has piloted a tool for collecting data (age, ethnicity and religion) from users as part of its 'Unified Assessment Scheme',[5] adopted across all its departments. This is its first attempt to collect this kind of information itself; previously it has subcontracted such work to external consultants. When these data have been analysed, LA2 hopes to use the information to highlight specific areas of council services which need to be prioritised, and to identify which particular residents need additional support.

LA2 has also carried out a survey of its customers (funded through a tenant empowerment grant awarded by the Welsh Assembly). This was an audit of existing tenants, rather than a survey of all service users. The audit collected demographic information about tenants (age, gender, disability and ethnicity), as well as their requirements for housing services, to enable the council to be better informed about customer wishes, and to put appropriate measures in place.

LA2 also gathers statistical information from some of its own departments. Its Housing Department collects statistics on the local population (homelessness data

are collected by age, gender and ethnicity), and its Education Department collects information on the numbers of people from an ethnic minority background. Despite the small numbers of ethnic minority learners in the local area, this has revealed that there are 20 different languages spoken by pupils and students in the locality. The Social Services Department has statistical data on the numbers of people who are registered as disabled.

Local people's perceptions about the area in which they live and their local authority's services are recorded in LA3's Place Survey, commissioned from an external research organisation. This feeds into the new performance framework for local government, for which a new national indicator set has been developed in 2008, providing a single set of indicators reflecting national priorities across government, and replacing the Best Value Performance Indicators.

Other CSOs
The LSC has recently taken steps to improve its monitoring of users, and the interviewees felt it now has a much better system in place. Since April 2008, learners are being asked for their profile details only once; the information is then stored on a central statistical database within human resources. In the Individual Learner Record, they are asked for gender, age, and ethnicity, and whether they consider that they have a disability. Our interviewees also noted that the LSC recognises that disability and health statuses can change over time, with some people recovering from illness, or sporadically affected by their condition. This is not captured by current monitoring. Prior to this, learners were sometimes asked for their details each time they started or left a course. Asking for the information only once helps to reduce customer resistance to disclosing information, and storing it centrally means analysis is much easier and provides more consistent and comparable data. Individual managers within the LSC can ask for specific information of interest to them in relation to users of LSC funded provision.

The LSC also holds a database, from which it produces reports on participation in programmes, both locally and across the country. Providers hold statistical information on every learner, including: the course they are on and when they started; participation rates in different programmes across the country; and information on ethnicity, age and gender. This means the LSC can access statistical information about different groups of people; for example, the number of young people not in education, employment or training; on apprenticeships; prisoners who are learners; men and women entering different occupations. When collecting data on ethnicity, it uses the same ethnic groupings as defined in the Census. The LSC thus has quite detailed personal characteristics data on: people in education;

retention rates; success rates; disabled learners, etc, and can use this information to guide policy.

An interviewee in FRS1 felt that there was a need to improve the way data about service users were produced. Because in the fire and rescue service contact with service users tends to be at times of great crisis, it is often difficult (or insensitive) to ask for relevant information. FRS1 was just starting to consider new procedures, such as returning to service users at a later date, to record more accurate data. It had recently introduced new staff training to help staff work more sensitively with specific or vulnerable groups (for example disabled people, people from ethnic minorities, older people).

The university gathers statistical information on the progress of its students, drop-out rates, qualifications and complaints. It also records the numbers of: students entering the university through clearing or through UCAS, offers/acceptances; part-time and full-time students; subjects studied; students engaged in campus or distance learning; and undergraduate and postgraduate students. It also conducts student and staff satisfaction surveys. Its aim is to use these data to ensure its services are delivered equitably.

4.6   Geographical levels
CSOs can access statistical data at different geographical levels, improving their overall understanding of equality and diversity issues. All the CSOs draw statistical data from a variety of sources, often with a view to benchmarking local data against a national profile.

Local level data
At the local level, PCT1 compares its statistical data with the data gathered by other PCTs in the same region, and uses Census, public health and NHS data for national comparisons. It has local information at both GP practice level and postcode levels. However, as patients voluntarily complete the relevant forms, and, on average only 57 per cent do so, the data are not as complete as is desirable.

The LSC holds information on learners by individual colleges in its region. It can thus select a college and identify, for example, how many hairdressing trainees there are, and how many are from ethnic minority backgrounds, how many have a disability, what types of disability are declared, or the age and gender of learners. For each of its four sub-regions, it can draw on an area-based team of equalities and diversity advisers. It also has the capacity to access information at postcode level, but is not currently using these data.

LA2 has acquired local level data from its social services department, particularly numbers of disabled people accessing services. It has also acquired information from national insurance claims, as well as data about the number of disabled people who seek access to local sports and leisure facilities.

FRS1 compares its data across the five LAs under its remit. Senior managers from each LA meet quarterly to discuss equality mapping issues, and these partnerships have proved useful in terms of choreographing equality and diversity schemes in a way which is consistent across the fire and rescue service.

Regional level data

Two of the CSOs gather data at the regional level. RDA2 draws on CBI and Jobcentre Plus regional data, but notes that ethnicity data gathered at this level is 'not reliable'.[6] RDA2 has consulted with the ethnic minority business base in its region, carrying out a telephone survey of 200 businesses (drawn from a Business Link database). It has also conducted face-to-face interviews with representatives from these businesses, while tracking national issues, to examine what their business needs are. It considers that the methodology it uses could be used nationwide – and said it would be willing to share this good practice. LA2 has recently completed a regional project (a two-year study) exploring disability, gender, and ethnicity.[7]

National level data

The university uses Office for National Statistics (ONS) data and UCAS data on disability and ethnicity, and HESA data for benchmarking. It uses a specialist UK Resource Centre located in a major city in the region for all statistics relating to science, engineering and technology. LA1 draws on the Scottish elements of the Labour Force Survey, but notes that because the LFS is based on a small sample, its usefulness for its purposes is somewhat limited. RDA2 draws on the National Business Survey and the Scottish Household Survey, both of which include data on gender, ethnicity and disability. It has also bought data from the Ordnance Survey and works with universities, local authorities and businesses, and uses data available from commercial, market research and shopping surveys. It also occasionally shares data with organisations with which it has established data-sourcing relationships and which might benefit from some of its own survey material. RDA2 also draws on ONS data, but notes that information available from this source does not always apply at the local level. Data on London, for example, may not be relevant to towns and cities elsewhere in the country, especially in relation to the needs of ethnic minority people. PCT1, LSC, LA3 and RDA2 all felt that in 2008 the 2001 Census was 'out of date'

(and therefore no longer accurate), especially in relation to ethnic minority residents. This perception of the Census is discussed in Chapter 6.

Interviewees in PCT2 noted a 'conflict' between national and local level data. Citing its own example, the PCT pointed out that its region is both rural and affluent, yet includes significant areas of poverty. An interviewee here felt that national data were not always applicable or relevant, as the local area had particular, idiosyncratic features. The perception here was that in London more frequent surveys of ethnic minority populations and their needs could be undertaken, but that in rural areas, keeping track of ethnicity was much more difficult because of 'constantly changing' patterns of migrant labour.

LA2 acquires statistical data from a variety of sources, and also uses documents from the Welsh Local Government Association and its enquiry and justice teams. Data from the Welsh Assembly were viewed as 'not always sensitive to this (rural) area', being geared to metropolitan and urban settings. Moreover it was not always practical for representatives from LA2 to attend the quarterly meetings of the Welsh Assembly in Central Wales (which produces quarterly bulletins), because of the region's geographical remoteness. Interviewees in LA2 felt there were distinct and specific local equality and diversity issues relating to age and disability which were unique to their area.

FRS1 acquires most of its data for existing schemes and projects from the Department for Communities and Local Government (CLG). CLG provides up-to-date data on the ethnic minority and gender composition of local labour forces. This was considered important as interviewees in FRS1 felt the Census 2001, to use for comparisons, was now out of date. CLG also provides a national strategy for equality and diversity, which the FRS has drawn on in developing its own local approach. The data available from CLG also allow FRS1 to benchmark its own strategies against four other metropolitan fire and rescue services (in London, Merseyside, Greater Manchester and West Midlands).

4.7   Gaps in data

Most of the CSOs highlighted some gaps in information. Representatives from PCT1 felt their organisation lacked data on the number of disabled children. The Patient Research Initiative it uses (see section 4.5) produces data which, at present, cannot be disaggregated by disability, as this information is not collected routinely by GP surgeries. The LSC lacks information on religion or belief, and instead has to make assumptions based on other data considered relevant. Gathering information on faith was seen as difficult because of 'definitional issues'. LA1 and LA3 also referred to

definitional problems, in their cases in relation to disability. Interviewees here felt there was no clear definition of disability, and noted that there is an unmet need for clear local data on local disabled people, to shape educational provision. The LSC felt it lacked information on its local Gypsy/Traveller population (as did LA3), but also noted that the size of this population changes frequently, as people move from area to area. RDA1 felt it lacked suitably disaggregated information on young people not in education, employment or training.

An interviewee at the LSC noted that people are sometimes reluctant to provide information on issues such as mental health and dyslexia, but considered that if more people provided such information, it could respond positively, by offering different and appropriately tailored services (for example, for dyslexia). The LSC interviewee felt using postcode level statistics (not currently available to them) would provide a better picture than current methods of determining the geographical distribution of socio-economic deprivation. This would enable it to pinpoint specific areas of deprivation and target its response accordingly.

Nine of the 11 CSOs (both PCTs, both RDAs, both FRSs, LA3, the LSC, the university) felt that there was unwillingness to disclose certain information, particularly that relating to sexual orientation, transgender, ethnic minority and belief issues. At FRS2, for example, one third of staff do not provide information on sexual orientation. Some of the CSOs also referred to 'ambiguity' over what constitutes a disability.

FRS2 reported that some information that might be useful, while not currently collected from service users, will be available in the future. They will be asking service users about their ethnicity, gender, age, and whether they have any disability (but not about faith, regarded as 'not easy'). Currently, FRS2 collects this information only from fire and rescue casualties.

Detailed analysis of the evidence collected in the study suggests that gaps in data sometimes arise from inadequate questioning of users. PCT1 reported that staff in hospitals or GP surgeries are not always trained in how to ask questions, so their records can be based on assumptions about people's race or religion, for example. They also note that because most surveys are available only in English, some people in ethnic minority communities cannot respond to them. As noted earlier, PCT2 also felt that GPs are either not paid for patient profiling (or are paid a fee which does not serve as a sufficient incentive) and are thus unlikely to carry it out.

LA2 indicated that it would welcome assistance, from the Equality and Human Rights Commission or other relevant agencies, on how to use the statistical data it collects. Guidance on how to use data would be very helpful, but to date this has not been available. An interviewee from LA2 was aware that the Commission had called for a 'creative' response to equality and diversity issues, but commented that no guidelines had been offered on how to achieve this. A suitable template would be helpful to enable them to use available data in the most effective way. These comments echo the view of the university (noted earlier) that, while it is moving towards a single equality scheme, how it can best deploy the resulting document (beyond informing staff, students and university committees) remains unclear. Representatives of PCT1 feel that there is inconsistency in the types of information collected by different PCTs; that people do not always complete questionnaires fully; and that they provide only a 'snapshot' of some the main equality and diversity issues (for example, in relation to ethnic minority and mental health). The PCT interviewee believes the ONS needs to collect more standardised data, and 'better' quantitative statistics.

4.8   Staff training and awareness-raising

Half the CSOs mentioned that raising staff awareness and carrying out staff training was a key element in their equality and diversity activities. All these CSOs use online training, and in three of the organisations, this is also supplemented by 'face-to-face' training.

The LSC, for example, has an 'e-workbook', displaying information about equality and diversity activities on its intranet (albeit pitched at a very basic level). The university also offers its equality and diversity training via e-learning; this presently comprises modules on age, disability and sexual orientation, though it is hoped that all equality strands can be added in the future. The LSC's online training is intended to be mandatory for staff, though not all staff have completed it; the university training is optional. Both approaches raise questions about effectiveness, completeness and impact. PCT1 has a new online equality and diversity strategic training framework, and through this offers equality and diversity training for all staff, which includes training in EIA. RDA1 offers a half-day induction for all staff on equality and diversity through online training.

The organisations which provide training and other activities beyond this online learning include PCT1, which offers additional face-to-face training for all managers in equality and diversity. The LSC has also held 'lunch and learn' sessions for its own staff; one recent session was on the hajj. A similar approach is taken in RDA1. Here, the RDA provides 'fact cards' for staff on sexual orientation, disability, age, and

cultural communication, and runs a series of lunchtime sessions for staff to attend, based on these issues.

The LSC also provides mentoring for career enhancement for ethnic minority staff, with either a senior manager or someone at their own level within the organisation. This is a pilot being carried out alongside another LSC, demonstrating the organisation's commitment to taking forward equality and diversity activities. Similarly, RDA1 works with human resources staff and managers to attempt to iron out 'hotspots' and increase staff understanding and awareness of equality and diversity.

FRS1 was planning an equal opportunities conference for all staff members under its regional remit. This would focus on dealing with specific groups of service users, such as older people, disabled people and ethnic minority groups, and would provide an opportunity for staff to provide feedback on their own thoughts about the equality and diversity issues relevant to the fire and rescue service.

4.9 Promoting equality and diversity with external partners

Half the CSOs mentioned promoting equality and diversity with their external partners as a key aspect of their equality and diversity activities.

RDA1, for example, has tried to increase the profile of equality and diversity in its region. It has funded a networking facilitation forum for a series of events, and formed a partnership of organisations in the region to explore the business and economic case for equality and diversity. This partnership has helped to design an equality and diversity regional action plan – a package to examine all equality and diversity issues, which aims to link issues emerging from 'grass roots' to policy decision-making. Interviewees noted that the RDA decided to take this lead on equality and diversity in the region because no other organisation was willing or able to take on this role. RDA1 is also trying to persuade private sector organisations to mainstream equality and diversity into their employment practices, and to promote the business benefits of having a more diverse workforce. It has devoted £1 million per annum to this, and has commissioned a review of equalities statistics from a local university.

RDA2 also works with an external agency (a major telecommunications company), in a city within its region, and is feeding into its national policy in this area. Although, overall, the telecommunications company's local workforce fits the regional job profile for people from an ethnic minority background, these jobs are often in 'back office' roles. The telecommunications company wants to change this image, and make

highly paid jobs more accessible to people from ethnic minority groups. On the basis of this work, other organisations have participated in similar equality and diversity schemes. (For example, a major high street store.) The aim of this work is to draw upon the region's changing workforce profile, particularly younger people from two expanding ethnic minority groups in the area. RDA2 recognises that the region has a growing labour market and is eager to draw upon this to best advantage in the future.

Over the past two years, LA2 has worked with a Welsh housing organisation scheme[8] to help mainstream equality and diversity in its housing allocations. It has also set up an internal group and database relating to ethnic minority groups. Local authorities in the region received funding four years ago to develop an ethnic minority housing strategy, responding to a Welsh Assembly policy initiative. However, locally, the ethnic minority population forms just 1 per cent of residents (500 people), and is diverse and dispersed. The housing organisation scheme was engaged to help find out how many ethnic minority people can access information for work, education, and health. This local authority also works with another housing organisation to share information and good practice and attend forums, and uses benchmarking data to compare with other subscribers.

FRS1 has developed relationships with many local partners to promote fire and safety regulations. Among these partners are social services, drugs and alcohol services, health care services, asylum/refugee services, ambulance service, energy advice centres, the Department for Work and Pensions, family services, and children's services. Information is distributed via each of these organisations to ensure vulnerable groups are made aware of fire and safety issues. Similarly, FRS2 works with organisations which represent vulnerable groups, such as MIND.

4.10 Summary

It is clear from the evidence provided in this chapter that the CSOs which participated in this study carry out a broad range of activities in relation to equality and diversity and utilise a variety of sources of both primary and secondary data for this purpose. However, the comprehensiveness and impact of both the activities undertaken and the way data sources are understood, collected and utilised vary on a number of different levels: within organisations from one department to another; between organisations in particular between type of organisation (i.e. local authority, health-related organisation, RDA, LSC, university and fire and rescue services); and between the different strands of equality and diversity (i.e. age, disability, gender, race, religion or belief, sexual orientation or transgender status). Indeed, it appears that data collection on disability and sexual orientation or transgender status is particularly problematic.

5.   Dimensions of diversity

This chapter explores the six dimensions of diversity in terms of how far the CSOs are already working in these fields, making use of available statistical evidence, and/or commissioning new investigations producing relevant data.

5.1   Age

Among the sample CSOs, equality and diversity activities relating to age fell broadly into two categories: activities aimed at young people, and activities aimed at older people. Both these categories involve workforce as well as service delivery issues.

Several CSOs are engaged in projects specifically aimed at improving the employment opportunities of young people in their region. PCT1 works in collaboration with local schools to recruit young people to work in non-clinical positions. The LSC is striving to meet PSA targets for increasing the proportion of 19year-olds gaining NVQ level 3 qualifications, successfully completing apprenticeships, and reducing the proportion of young people in work who do not have NVQ qualifications. There is also a focus in the LSC on raising the employment prospects of young people from ethnic minorities, particularly 16–18 year-olds from Black Caribbean and Bangladeshi backgrounds. The LSC is also particularly keen to reduce the skills gap between young people by promoting training. In developing this work, use is being made of data derived from an audit (in 2006) of the region's young people and their participation in further education, work-based learning, adult and community learning, and sixth form colleges. Additionally, benchmarking data were drawn from the Train to Gain scheme, the ONS Annual Population survey, and the Race for Opportunity scheme.

PCT2 had recently conducted a children's needs assessment in partnership with the county council; here there is a focus on the kinds of services accessed by young people – sport and leisure, health-related services, etc – with a view to improving these services in the longer term. The university is also involved in working in partnership with children's organisations. RDA1 has decided that, because there is a regional LSC national curriculum in schools, younger people are not in need of any additional support. RDA1 also pursues some policies aimed at ending occupational discrimination, but believes that other organisations exist which can offer additional support to young people.

An in-house review of statistics relating to younger people revealed that RDA2 has produced a comprehensive document detailing the graduate profile of the region: this includes the numbers of young people in further education (FE) and higher education

(HE), as well as how these data relate to employment. The FE/HE population data was derived from a regional student population profile in 2002/03 commissioned by the RDA, working in partnership with the Government Office for the region, the Small Business Service, the Sector Skills Development Agency, a regional Skills Intelligence agency, universities within the region and the Association of Colleges. The employment data were derived from 2001/02 HESA First Destination Surveys of those graduating from full-time undergraduate courses; as well as from the Labour Force Survey; Centre for Higher Education Research; and ONS[9] data, used as a basis for comparing the regional situation to the national picture. A companion study reported on young people's attitudes to employment opportunities in the region – their confidence levels in terms of finding suitable work, and the area's potential for providing these opportunities. These data were derived from a study commissioned jointly by RDA2, the Government Office for the region, the region's LSC and other local organisations.

PCT2 has produced a report (based on a Strategic Needs Assessment it has commissioned, which drew, in part, on official Recorded Deaths data (2003–05), detailing levels of deprivation in the region and how these relate to young people in terms of future low income and projected life expectancy. LA2 has produced a comprehensive report on young people in the region based on multiple data sources, both local and national. Some of these data are broken down by gender and ethnicity, but for many topics the information is reported only as general statistical trends. Box 5 provides a description of the report.

Activities for older people among the sample CSOs include a large project being carried out by RDA1. This project was designed with the intention of exploring how older workers can be helped to remain in employment. A regional forum has been developed, with 30 organisations involved and five dedicated workers; the forum's purpose is to influence policy on ageing and to promote better health services, as well as to develop a general health strategy for the region. RDA1 has also developed an age-profiling scheme in collaboration with a local voluntary organisation, with a view to influencing policies and strategies.

Box 5 Example of good practice: regional report featuring equality and diversity data (LA2)

LA2 has recently published a comprehensive document covering all salient issues in the region, including good coverage of equality and diversity issues. Every topic in the report draws on statistical data sources to support its conclusions.

The report covers six broad themes, under each of which most key equality and diversity issues are dealt with, and boasts a particularly impressive range of statistical data, drawing from a range of sources at local, regional and national levels. There is also information relating to future plans for the region, as well as contact details through the report to provide assistance for readers on particular topics.

The sources of age-related equality statistical data used in preparing this document demonstrate the comprehensiveness of the report:

- **health** (Health Needs Assessment Trend data: National Public Health Survey, 2007)
- **conception rates** (ONS)
- **pregnancy and abortion** (Abortion Statistics England and Wales, 2005)
- **mental health** (Welsh Health Survey, 2005/06)
- **smoking rates** (Welsh Health Survey, 2005/06; Health Behaviour in School-aged Children (HBSC) survey)
- **school** attendance and absence rates, achievement in primary and secondary schools (County Council education department)
- **young carers** (NCH - The Children's Charity)[10]
- **learning difficulties** (Regional Health Needs Profile, 2007)
- **anti-social behaviour** (local police data)
- **physical activity rates** (HBSC survey; Sports Council for Wales)
- **leisure facilities** visited in the region (County Council survey)
- **youth clubs** visited (County Council review)
- **older people**: numbers of carers in the area (ONS; Carers Wales); older people's health needs (NHS; Alzheimer's Society; Welsh Health Survey).

FRS2 has addressed age by raising awareness of how a fire fighter might deal with situations involving older people – recognising, for example that people over 75 are more likely to have hearing difficulties, and that fire fighters need to know how to communicate with them. RDA2 has contracted with three local age-related organisations which support older people to conduct an assessment of the needs of older people in the region. RDA2 also has a specific older people's agenda, linked to the economic profile of the region: this has highlighted that the region has one area with a high number of older residents, and the RDA is committed to focusing on their employment needs. The social services department of LA1 has recently promoted a

free swimming scheme for over 65 year-olds, a home library service, and a pension fund scheme.

PCT1 has conducted a Patient Research Initiative based on the national Race for Health scheme, and is able to disaggregate the data by age. A review of the statistical material available in key documents from PCT1 revealed that there are data relating to the regional deprivation of older people, numbers on low income, and projected life expectancy. PCT1 uses a variety of sources for this information, with information on low income coming from NOMIS or the Department for Work and Pensions (DWP), projected life expectancy from the Department of Health (although this is not broken down beyond gender). There were notable differences in awareness across the PCT, with one senior manager being unaware of a data set specifically identifying deprivation levels by age.

LA2 has produced a comprehensive report on the region which includes data relating to older people (see Box 4). LA3 has a panel of older people who meet to discuss their views on particular issues including service delivery. It has also developed a particularly innovative DVD outlining the services available for older people.

Several of the sample CSOs had developed specific schemes aimed at older people in their workforce. RDA1 operates a 'fact card' system based on age; these cards are given to all members of staff and contain information about changes in legislation and what the organisation has done in relation to this. Other CSOs were working specifically with existing schemes: LA1 has recently begun to endorse its recruitment policy with the 'Age Champion' logo, a scheme designed to promote the employment opportunities and rights of older staff members. In response to a DWP initiative, PCT1 has also become an 'age-positive organisation' by applying for this standard and providing examples of good practice. The Age Positive campaign promotes the benefits of employing a mixed-age workforce that includes older and younger people. It encourages employers to make decisions about recruitment, training and retention that do not discriminate against someone because of their age. The LSC examines its own workforce statistics annually in terms of pay trends, including how these relate to older workers; and seeks to eliminate any perceived inequalities. An interviewee at FRS1 claimed that the organisation is very much committed to providing 'jobs for life', and aims to employ staff across a wide range of ages. The organisation also employs an older people's co-ordinator to work in the region promoting fire safety.

Box 6 Example of good practice: DVD providing information about services available to older people (LA3)

The Neighbourhoods and Community Care directorate of LA3 has produced an innovative DVD which provides information about the services available to older people living in the city.

The DVD is available in four languages: English; Urdu; Somali; and Arabic and is narrated by an individual from an ethnic minority. Images representing different groups of older people and their carers are reflected in the DVD including women, men, and ethnic minority groups. The DVD outlines how individuals can access council services and provides a brief and simple description of the services available including: home support; shopping services; different kinds of residential care, respite and short-term care; and day care.

Recipients of the DVD are talked through the process involved in seeking support from the council, taking them from the initial contact stage to completion of their request. Information relating to financial implications and to the benefits available to both older people and their carers is also provided.

The university was the only CSO indicating that it had hitherto done very little work on age-related concerns. LA2 told us that although it had attempted to engage with older people in the region via various surveys, responses showed that older people in the area were well served by other organisations (predominantly voluntary organisations) and were content with the services provided by them. The LA2 interviewee ascribed this to the fact that the region has a relatively small population which has a high average age, and there are a good range of existing services geared towards older people.

5.2 Disability

Among the sample CSOs, equality and diversity activities concerning disability fell broadly into two categories: activities aimed at the organisation's workforce, and activities geared towards service delivery issues.

Most CSOs were actively engaged in addressing the needs of disabled staff, as well as removing barriers to enable disabled people to seek employment within their organisation. PCT1 had recruited an adviser on disability issues, and both workforce and service delivery policies were assessed by this person prior to implementation. Additionally, PCT1 recently carried out an in-house survey to inform its disability equality scheme (which was in development during the study period). This revealed a larger number of disabled staff than was previously recorded. The disability equality scheme includes a three-year action plan with a number of policies for managing staff who have a disability. The organisation has also engaged with the 'Two Ticks'

scheme. Two Ticks is a recognition given by Jobcentre Plus to employers based in Great Britain who have agreed to take action to meet five commitments regarding the employment, retention, training and career development of disabled employees. Thus the scheme confers additional responsibility for addressing the needs of disabled staff on the CSO.

The university has also engaged with the Two Ticks scheme and uses its logo on recruitment literature to show that it adheres to official standards. Additionally, the university has conducted an internal survey showing the number of disabled staff, by department and staff group (academic, clerical, research, etc). Data are also available from a university staff satisfaction survey geared towards issues of disability, with a focus on how satisfied staff are with the support disabled people receive, the training needs of disabled people, and the organisation's overall focus on disability issues. One interviewee from the university noted that 17 per cent of staff do not declare disability information, pointing out that the university is eager to explore the reasons for this.

RDA1 also uses the Two Ticks scheme. It too has developed a 'fact card' system, informing all staff about changes in legislation and what steps the organisation has taken to implement them. The organisation is currently considering whether to sign up to the 'Mindful Employer' scheme. Led and supported by employers, the Mindful Employer initiative is aimed at increasing awareness of mental health at work and providing support for businesses in recruiting and retaining staff.

Another of the CSOs using the Two Ticks scheme was FRS1; it has used this scheme for eight years. FRS1 also works with local disability agencies and provides work placement schemes for disabled people, for example premises have been modified to cater for disabled people (hearing loops have been installed). FRS1 has also developed a DVD promoting fire safety for people with learning disabilities in the region.

FRS2 tries to engage with its local community to discover how it can reach and interact effectively with people with different types of disability who may be vulnerable to particular kinds of fire risk, and to liaise with MIND and similar organisations. FRS2 also records rates of reported disability among staff members.

LA1 has recently completed a toolkit which provides guidance for managers in dealing with, and supporting, disabled staff members, particularly in relation to working conditions, retention and recruitment. This CSO has also produced documents (based on internal surveys) detailing the numbers of disabled staff,

applicants and leavers, which include data on grievances, disciplinary action and reported harassment.

Turning to service delivery, it emerged that several of the CSOs were working to promote the rights and opportunities of disabled people in their region. PCT1 is implementing the national policy 'Every Disabled Child Matters', drawing on Census 2001 data to provide numbers of disabled people in the region, benchmarked against national figures. It is also using the Race for Health Patient Research Initiative, but cannot yet disaggregate these data by disability, as this information is not collected by GP surgeries.

Although RDA1 feels that there is a lack of accurate data on the number of disabled people in the region, it has pledged to collect this information in the near future. It is involved with several pilot schemes, facilitated by GP referrals, designed to help disabled people enter employment. The three pilot projects in the region include one aiming to assist people to move off Incapacity Benefit and into employment via GP referrals. For this, a nurse was trained to assess individuals and draw up a plan of action to help them to return to work, addressing business and occupational health issues.

In contrast, RDA2 feels that it has a good range of data relating to the numbers of disabled people in the region: information acquired from the ONS Annual Population Survey 2005 shows the number of disabled people by gender, employment rates (supplemented with data acquired from the Smith Institute, 2006, and a regional report commissioned by the Small Business Service, 2003), and by the town or city in which they live.

PCT2 is currently working with the Adults' and Children's Services departments of its local authority; social care services are involved with the joint commissioning of services delivered by the PCT. A joint strategic needs assessment, conducted with the county council, has identified disability issues. However, PCT2 presently has limited information on different aspects of disability, and is seeking to acquire information which breaks disability data into more useful categories. It has acquired data from the Disability Rights Commission on disabled people eligible for Disability Living Allowance, which are disaggregated by age and type of illness.

LA2 is also working with partners. In collaboration with leisure organisations, it is actively promoting sporting opportunities for disabled people, particularly the visually impaired and hearing impaired. Impact assessments have addressed access to sporting venues and events. This local authority has also published data (based on

information acquired from Jobcentre Plus) on numbers of people in receipt of Incapacity Benefit, including disabled people.

LA3 records disability among staff and cross-tabulates these figures with gender and ethnicity, as well as job type. With these data, LA3 monitors equality of opportunity in the organisation among these diversity groups.

The university is eager to promote access to its disability support centre for students, while the LSC is also focused on education. It wants to increase the number of learners who declare their disability; it believes it has a responsibility to ensure disabled people receive a good education, and, in specific circumstances, it funds disabled people to attend specialist colleges.

5.3   Gender

The CSOs' equality and diversity activities relating to gender again focused on both workforce and service delivery issues.

Several CSOs were addressing issues relating to gender and its impact on the workforce. Three CSOs had either recently conducted, or were in the process of conducting, internal equal pay audits. The LSC examines its own workforce statistics annually and analyses trends, with a view to reducing the gap between male and female pay. The university has embedded an equal pay procedure in its job evaluation process, and its data show number of staff and students by gender. Staff data are broken down by job type, full- and part-time work, wage grade, any reported grievances, and starters and leavers. Student data are broken down to show numbers of males and females undertaking undergraduate and postgraduate courses.

LA1 has a new pay policy designed to ensure equal pay for men and women. It is currently reviewing its appeals process, and recognises that it needs to review the implementation of such appeals, as well as to continue to comply with legislation relating to gender inequality and pay. It has recently published internal data which cross-tabulate gender with pay-scale, job type, and ethnic minority.

PCT1 has developed a gender equality scheme for integration with its broader equality and diversity policy. Impact assessments are carried out and cover all strands of equality activity, including those related to gender. The organisation is particularly keen to ensure that whatever policies are pursued, they do not have a negative impact on any of the six equality groups. Similarly, an internal survey in

PCT2 has identified that 70 per cent of staff in the health services are female and the PCT is actively seeking to address their needs.

A major project related to workforce issues, but also linked to service delivery, is being carried out by the university. Its 'Project X' is designed to address the reasons why women, despite entering higher education on science-based courses at a relatively equal number to men, do not go on to higher status and higher paid posts in mainstream employment. There are low levels of women in these posts, and the university is currently exploring the reasons why. Data collection is presently under way, and the whole project is regarded as important for the university, in the context of its equal opportunities policy development.

FRS1 has recently made a large effort to recruit female fire fighters. They run regular women-only awareness day courses to enable women to experience what being a fire fighter would involve; these courses include tours of fire stations and question-and-answer sessions. FRS2 records numbers of female staff members, particularly with a view to ensuring that women are represented at senior levels in the organisation.

In relation to service delivery, PCT1 is carrying out a project targeting Somali women with help and advice on issues such as counselling, trauma, fertility issues, child birth, assistance with contraception and changing perceptions of cancer. The PCT1 interviewee said uptake of smear tests among this group is low, and the project is striving to reverse this. On the basis of knowledge that the majority of older people in the region are female, PCT2 is targeting resources intended to promote privacy and dignity in the health services they access: one example is recognising the importance of single sex wards. LA1 also reported that it is working with regional educational achievement data,[11] as well as collaborating with partners in culture and sport, as a way of exploring gender issues.

A review of the kinds of data acquired by the sample CSOs revealed that information relating to gender was regarded as a priority, either because it had already been collected or was a major concern with regard to future projects. RDA1 is presently seeking an evidence base to support the business case for reducing pay gaps.

Other CSOs had acquired data relating to other dimensions of gender. RDA2 examines regional data by the district in which men and women live, age groups, and long-term illnesses. The organisation's gender equality scheme details data relating to life expectancy, types of disease, GP consultations, employment rates and pay grades. These data are recorded at both a national and regional level, to show how

far the local situation reflects the wider national picture and what idiosyncrasies exist in the region.[12]

By far the most comprehensive use of gender-disaggregated data was found in the reviews of published material from the LAs. LA1 has acquired local level data from the Census 2001 on numbers of men and women in the city. Its gender equality scheme includes data about gender in terms of age group (analysis by the Scottish Executive), occupational segregation (the EOC), the pay gap (an internal Workforce Pay and Benefits review), health and obesity (a regional Health and Wellbeing study), life expectancy (a Regional Centre for Population Health report), rates of domestic violence (police data; Rape Crisis), and drug use (source not indicated). LA1 also seeks regional data from questionnaires, pupil councils (in schools) and focus groups – gender is a major concern in these surveys. The organisation has a 'stop violence against women' policy; it also works with the trade union UNISON in developing some of its equality activities. Finally, with regard to gender, LA1 is focused on achieving educational equality in the region.

5.4   Race, religion, belief

The equality and diversity activities among the sample CSOs addressing race, religion and belief, were again aimed both at their own workforces, and at service users and delivery issues.

Most CSOs were addressing issues relating to ethnicity among their workforce. LA1 is working on attracting and retaining ethnic minority staff and regularly records data on its staff profile by ethnic minority group; it has also developed a toolkit to determine what kinds of jobs people from ethnic minorities tend to apply for. However, one interviewee at the organisation claimed that not enough work had yet been carried out to ensure that the staff profile of the CSO reflects the ethnic minority profile of the region. This was regarded as particularly important, because staff from different ethnic minoritybackgrounds are seen as more sensitive to, and more knowledgeable about, the needs of these local groups.

As well as recording numbers of ethnic minority staff by ethnicity and gender, PCT1 has developed an ethnic minority network for staff and is also seeking to establish patient level networks. Race is covered in all its equality and diversity employment policies; its three-year action plan indicates that all these policies will be monitored for their impact on race in the near future. RDA1 has developed a 'fact card' system geared towards facilitating cultural communication. The cards also detail changes in legislation and how the organisation is responding to them. The LSC annually evaluates internal statistics based on staff surveys, with a view to analysing trends

and working towards equal pay across all ethnic minority groups. FRS1 holds regular day sessions for people from ethnic minorities to attend with a view to seeing what being a fire fighter would be like. Ethnic minority staff at FRS1 have a prayer room at the organisation's headquarters, and any staff observing Ramadan are permitted to alter their working timetables to accommodate their fasting.

FRS2 reports that there is only a small ethnic minority population in the area that it is responsible for, and that it feels that it is attracting applications from ethnic minorirties in proportionate numbers. Not all are successful in their applications, but FRS2 considers it particularly important to attract them as potential recruits. FRS2 also records data on staff by ethnicity and job position to examine whether ethnic minority groups are appropriately represented at senior levels within the organisation.

FRS2 also has a 'language link' in each fire tender. If an interpreter is needed, fire fighters have a card to show which is designed to establish in which language assistance is needed. Its community team, which deals with fire prevention and related issues, includes both women and ethnic minority fire fighters. FRS2 fire crews are given information about the localities where ethnic minority populations live, as well as where there are single parents, and vulnerable people. Indices of deprivation are taken into account to ensure they are well informed about where they should be targeting fire prevention work. Census 2001 is used in order to inform the PINA system (People Need Impact Assessment), used to target areas for fire prevention.

PCT1 uses its Patient Research Initiative to support its service delivery for ethnic groups, using data acquired from seven GP surgeries within the region. The data available include information on race, ethnic group, languages read, languages spoken, smoking rates, cervical screening, and numbers of carers. This information is being shared with other PCTs in the region. PCT1 is also profiling ethnic minority groups in the region, by their employment rates and wage grade. The organisation has a race equality scheme which includes a three-year action plan for service delivery.

PCT2 is engaged in a number of schemes which involve ethnic minority groups. Its Gypsy/Traveller scheme focuses on the needs of these groups in the region, and other schemes are being piloted in the area under the Race for Health national strategy, some of which involve ethnic groups. The organisation also uses local level data on ethnic minority groups from the 2001 Census, and on the basis of this information is seeking to establish patient level networks in the region.

FRS1 is currently targeting EU migrant workers, particularly the Polish community in its region. By conducting focus group interviews with these people, the organisation hopes to understand which fire and safety promotions are likely to be the most effective. FRS1 has also recently debated whether to translate all fire and safety literature into different languages, though no decision has yet been made.

RDA1 is currently working with the Equality and Human Rights Commission on a one-year funded project which seeks to help a local authority in the region to increase their capacity to strengthen its communities. RDA1 also analyses detailed data from the 2001 Census about local ethnic minority populations and their employment rates in the region. As part of a study it had commissioned into integration and work outcomes for refugees (published in December 2007), it has also published data generated by the North of England Refugee Service which provides numbers of refugees wishing to start up businesses and wishing to receive employment support in the area.

RDA2 is currently involved in a project linking Local Education Authorities in the region with local Madrassas, focusing on GCSE pupils. The organisation also records data by ethnic minority population in the region, employment profile, and rates of recruitment and training. As noted in the section on age (section 5.1), the LSC is also involved in promoting take-up rates for apprenticeships among people from an ethnic minority background, particularly those from the Bangladeshi community, as well as Black Caribbeans, especially women, who are felt to be struggling in the employment market.

Like PCT2, LA1 is also engaged in work with local Gypsy/Traveller communities and records data relating to the number of different groups in this category and their residential location, as well as information derived from a needs assessment which details their attitudes and opinions on the LA's provision of services. All of these data were acquired from a regional accommodation needs assessment report. LA1 also records data on the ethnic minority population in the region (acquired from the 2001 Census) and the changing employment records of ethnic minority groups, both in-house (based on internal assessments) and in the region (no source is indicated, but it is mentioned that applications from ethnic minority groups for apprenticeships in the region have increased). These data are incorporated into its race equality scheme. Another feature of its general equality and diversity policies is an attempt to increase the reporting from ethnic minority groups of racist incidents in the region; a racist incidents database has been developed.

A few CSOs indicated that their equality and diversity activities relating to ethnic groups needed to be addressed in the near future. One interviewee from the university claimed that its race equality scheme needed reviewing, to incorporate new changes such as adjustments to academic timetables to accommodate religious holidays and festivals. The university also planned to review its services geared to attracting and retaining international students, and to review issues such as veil-wearing and prayer services among ethnic minority staff and students.

LA2 reported some difficulties in developing policies geared towards ethnic groups. Census 2001 data were being used for an understanding of the region's ethnic minority population, but one interviewee claimed that, because the ethnic population in the area was transitory, it was hard to know the extent to which any new policies would accurately address the needs of these groups. The region is host to a rapidly changing group of migrant workers (predominantly involved in food packing work), and meeting their needs is proving a 'constant challenge'. Its own surveys aimed at ethnic minority groups had suffered low return rates; as a result, the data were considered to be based on too small a sample to be generalisable. To address this, 'surgeries' designed to offer migrant workers advice on LA services have been arranged, available at weekends and in non-working hours. These have had some success, particularly in addressing the needs of the local Chinese community.

With regard to belief, the university had pledged to seek relevant data. The LSC does not collect data based on religion or belief, but makes assumptions based on information from other sources.[13] The LSC considers that, on the whole, the religious beliefs of learners does not affect their learning, but in some areas with a high number of Pakistani learners (for example) an assumption is made that a number will follow Islam and that this could have an impact on delivery during Ramadan or mean that timetabling should take into account arrangements for prayers on Fridays. No other CSOs mentioned belief as a specific issue it took into account. One interviewee (RDA1) suggested that belief was the 'least important' equality and diversity issue in relation to its work in the economy, and that the organisation had therefore done very little to address it.

5.5 Sexual orientation and transgender

By contrast with the equality and diversity strands discussed above, activities relating to sexual orientation or transgender status were much less developed. Nevertheless, most had carried out some work in this area, though there were clearly difficulties in doing so.

In relation to its workforce, RDA1 had incorporated sexual orientation into its 'fact card' system, including information on relevant legislation and what the organisation had done in response. RDA1 had arranged some 'lunchtime' sessions to highlight the issue of sexual orientation to staff members.

PCT1 had become a 'Stonewall diversity champion', joining a scheme that ensures the organisation has good practice in lesbian and gay issues for staff. Stonewall diversity accreditation indicates that an organisation demonstrates a commitment to positive employment and uses positive images in all recruitment and selection materials. PCT1 also offers to support lesbian and gay staff and consults them over changes in policy. Similarly, FRS1 has made considerable progress at recruiting LGBT members of staff and has been endorsed by a major organisation in the field as a diversity champion. The organisation will soon hold a LGBT conference which will be attended by all managers as a way of raising awareness of needs. FRS2 also has recruitment stalls at some gay and lesbian events.

LA1 is also working with Stonewall: a recent staff satisfaction survey was successful and its data were added to the organisation's standard equality and diversity guidelines. Nevertheless, one interviewee from LA1 claimed that there had been some debate within the organisation as to whether these data went far enough; it was suggested that an alternative strategy might be to try to develop a safer environment for lesbians and gay men to 'come out'. However, little work has been done so far on this.

In terms of service delivery, a number of CSOs were addressing the issue of sexual orientation or transgender status. PCT1 had researched the barriers to accessing services in wards and secondary care in the region.[14] It had provided training for managers to ensure they knew what this equality and diversity issue meant in practice. However, although PCT1 had captured data relating to sexual orientation or transgender status as part of its Race for Health patient profiling assessment, it was unable to disaggregate these data.[15] RDA2 has also trained all providers of services to be able to offer information and guidance on how to work with people of a different sexual orientation, and this work has focused particularly on college staff to enable all learners to understand the issue.

PCT2 has acquired data relating to sexual orientation or transgender status from local sexual health services; it also possesses official statistics on sexually transmitted diseases.[16] However, one interviewee from the organisation claimed that little is known about the general population in terms of this issue. RDA1 had funded

one project on transgender issues with a view to doing work on capacity building in the region in relation to service delivery.

LAs 1 and 2 had published data on the regional profile of the LGBT population. LA1 has drawn on Stonewall data[17] to provide up-to-date knowledge of lesbians and gay men in the area, while LA2 has acquired up-to-date data on this issue from various sources: a survey conducted by Inside Out in 2007, and the national Cynnwys project. Inside Out is a community led piece of research focusing on lesbian, gay and bisexual (LGB) people's experiences of accessing health services in the region, which recognised that LGB people themselves are the best people to understand the health issues relevant to other LGB people. The Cynnwys Project is a project set up by the regional Advice and Information Partnerships to look at the needs of ethnic minority, disabled and LGBT people living in the area. Meanwhile, LA3 uses a variety of sources for information on estimates of the LGBT population such as health data relating to HIV and sexual health, as well as data on individuals taking up civil partnerships in the city. However, LA3 are keen to point out that these data sources are unlikely to reflect accurately the LGBT population size.

Other CSOs are intending to incorporate this equality and diversity strand into their forthcoming strategies. The university is responding to 2008 guidance from the Equality Challenge Unit, while RDA2 is reviewing existing evidence. Nevertheless, in both cases, interviewees told us that they do not know what to do with this information once they have it. Indeed, interviewees in most CSOs claimed that sexual orientation and transgender status were problematic strands of equality and diversity work. There were difficulties in getting people to disclose related information, probably, it was thought, because of fear of discrimination and concerns about data protection. In reviewing the web-based documentation, the study found data on this issue in only two CSOs (both local authorities).

Finally, an interviewee in RDA1 claimed that since this issue did not greatly impact upon its work in the regional economy it was not regarded as a major concern. An interviewee in PCT2, responsible for managing a major regional anti-smoking project, suggested that since sexual orientation or transgender status does not impact upon smoking rates in the same way that ethnicity and gender does, it would be impractical to try to factor it in as a variable. This was particularly in light of pressure derived from national targets for smoking cessation that the organisation had to meet annually.

5.6   Human rights

In contrast to the other equality and diversity strands, human rights were poorly understood by the interviewees in the CSOs. Many were uncertain about what the term actually meant, though some related it to existing projects as if it was an implicit factor in all their equality and diversity activities. The website review of documentation produced little material explicitly related to human rights. The few examples of relevant activities are highlighted below.

RDA1 is in the process of developing a refugee strategy which will address the need to work with refugee networks and migrant labourers; this will be based on the recent study of such groups. One RDA1 interviewee claimed that human rights could be seen as integral to their work with church and faith networks, as well as to their engagement with trade unions.

PCT1 was looking to incorporate human rights into its overall equality and diversity strategy in the near future, but this strand had not been added to its otherwise comprehensive Patient Research Initiative. Similarly, although RDA1 intends to include human rights into its single equality scheme, very little explicit work in this area has been carried out. Staff at the organisation had received some basic training on human rights, but there was nonetheless a lack of understanding about what exactly human rights meant within the context of equality and diversity activities.

5.7   Summary

This chapter has demonstrated the degree to which equality and diversity strands are being addressed by public sector organisations in terms of existing activities and statistical awareness/collection. As can be seen, some strands have been addressed more effectively than others. The issues of age, gender, disability and ethnicity have led to varying levels of equality and diversity activity among the CSOs involved in this study; although there are difficulties involved in related projects and schemes, representatives of the organisations hope that they will move towards successful integration of these equality and diversity strands in terms of both workforce issues and service delivery. Nevertheless, CSOs have been less successful in integrating sexual orientation and transgender as equality and diversity strands; this is perceived to be largely a result of sensitivities, or a lack of clarity in definition, relating to these issues, as well as to a perceived absence of relevant statistical data in the public domain.

6. Conclusions and policy implications

6.1 Conclusions

This study has revealed that the CSOs which participated in the research carry out a broad range of activities in relation to equality and diversity, and utilise primary and secondary data from a variety of sources for this purpose. The comprehensiveness and impact of both the activities undertaken, and the way data sources are understood, collected and utilised, vary on several levels.

First, differences exist within organisations and between one department and another (for example in RDA1, some departments have a more systematic approach to equality and diversity activities than others). Intra-organisational differences of this type tend to occur when there has been a less comprehensive approach to equality and diversity work, and where it has been mainstreamed less rigorously. Within PCT1, for example, mainstreaming of equality and diversity activities has been much more successful, and as a result, inter-departmental differences were much less prominent in this organisation.

It is also evident that different perceptions exist both within and between the different CSOs, in relation both to the degree of success of their equality and diversity work, and in their use of statistical data to support the activities involved. In PCT1, for example, expectations in relation to equality and diversity are high, and therefore their assessment of the progress made is much more self-critical than (for example) within RDA1, where there is a general perception that equality and diversity work has been very successful. The discussions with RDA1 also indicated that policies are perceived in different ways in different parts of the same organisation, and that the degree to which they are implemented with rigour and determination also varies. In RDA1, the view of the human resources' representative interviewed was that equalities and diversity issues are 'not yet' mainstreamed. Although looking 'good' at the level of the Regional Economic Strategy, at the next level down, where more detailed business plans and similar documentation are produced, the various equalities and diversity schemes have still to be fully embedded in the process.

Differences between organisations – in particular between different types of organisation (i.e. local authority, health-related organisation, RDA, LSC and university) – seemed to be linked to a range of factors: the types of services the organisations offer; the kinds of customers they serve; the legislative requirements of them as public sector organisations; and their overall aims and objectives. There are key differences (for example) between RDAs, with their economic agenda, and the LSC, whose main role is to provide its services to all sections of the population. It is

perhaps somewhat surprising that (in the interviews conducted for this study) two of the three local authorities did not emphasise the social inclusion agenda.

Other differences between the organisations may be connected with the degree to which they have invested in equality and diversity activities and issues. Most of the CSOs had only small teams of staff responsible for implementing equality and diversity issues; in only very few cases were these individuals statistical experts. It may be that more resources need to be directed towards these activities, linked to the relevant business case for each specific organisation, and that greater awareness of the range, scope and applicability of statistical data is needed.

There are also significant differences between the activities and types of data sources used in addressing issues connected with the different strands of equality and diversity; age, sex, disability, race, religion or belief, sexual orientation and transgender status. All the CSOs found identifying and/or collecting data on disability and sexual orientation and transgender status highly problematic. However, it was difficult to determine whether their perception that people will not answer questions about sexual orientation, and other issues such as mental health status, is correct. It also needs to be noted that very little work has so far been carried out by any of the CSOs on human rights; what was most striking was the lack of awareness about human rights, and about the impact, relevance and importance of this as an element in the national equality, diversity and human rights agenda. Most CSOs were able to access statistical data disaggregated by sex and ethnicity for at least some of their areas of responsibility, and collected data using these variables on their own workforce. However, data on age, particularly data disaggregated by age categories within the non-elderly adult population, were less commonly referred to. Given the difference in the educational and skills levels of different age groups, and differences in their economic activity rates and health, this is perhaps a surprising and rather worrying finding.

Another very clear message from the evidence of this study was that nationally collected data sources, including official data which can be accessed with relative ease and may offer considerable scope for regional or local analysis (such as the Census, Labour Force Survey and other official data), were not fully exploited by the CSOs. Here it seems there is a clear need to increase awareness of the availability, usefulness and appropriateness of data of this type, so that public sector organisations can use the information more widely and more effectively.

6.2 Policy implications

In this section, we draw together policy implications based on the findings of the present study. These points relate both to general equality and diversity activities and the acquisition of related statistics.

Encouraging equality and diversity activities

To encourage more organisations to undertake equality and diversity activities, it may be important for the national level organisations which have influence or a degree of control over the activities of the local organisation we studied to take more of a lead. For example, such bodies might wish to stress the business case to employers of undertaking equality and diversity activities, using robust equalities data – highlighting, for example, the improved image associated with being an exemplar employer, and the opportunities to attract a wider pool of skilled labour. As the business case for different types of public sector organisations will vary according to their particular remit, perhaps this could be accounted for when the business case is formulated. This would arguably be more advantageous than simply putting forward the legislative argument to organisations, which sometimes do not recognise the direct benefits of the equality and diversity activities.

Equality and diversity champions

It may be desirable for organisations to be encouraged, with the support of appropriate advice and guidelines, formally to identify 'equality and diversity champions' within their organisation. One approach which might be successful could be to identify a champion for each of the six strands. These should preferably be staff at senior levels within the organisation, who can raise issues, emphasise the different rationales for equality and diversity activities, ensure that policies are implemented, and perhaps develop specialist expertise in the available sources of data relating to their own area of focus.

Equality and diversity schemes

Engagement with existing equality and diversity schemes might be a good way of encouraging organisations to promote related work. For example, several of our CSOs were working with the Two Ticks scheme. This scheme ensured a good standard of practice in relation to disabled people and enabled the organisations to adhere to a number of commitments for which they were annually accountable. The use of logos on recruitment material is also a good way of promoting an organisation's good practice with regard to equality activities. There may be a role for the Equality and Human Rights Commission in promoting or accrediting suitable national schemes designed to promote equality and in publicising them.

Identifying, using and interpreting relevant statistics

Organisations need support in developing their capacity to identify, use and interpret relevant statistics. It was evident that some CSOs would benefit from raised awareness and knowledge of local and regional data sources. 'Up-skilling' of staff in public sector organisations could be achieved through training, appropriate briefings and perhaps regular updates from those responsible for the major national data sets, to support organisations in their equality and diversity roles. This kind of capacity building and training would enable some of the good practice developed (of which there is evidence in this report) to be built on for the next stage of equality and diversity implementation. For example, PCT1's Patient Research Initiative evidence (good practice example 3 – see Chapter 4) is based on very small samples and may not be suitable for generalisation to larger groups. However, this could be improved if more staff were appropriately trained in sampling techniques. Sector bodies, representing or indeed regulating local level public sector organisations, may have a particular role to play here; and there may be a role for the ONS, perhaps working in partnership with the Commission, to develop appropriate guidance. Such incentives could be particularly important for health-related organisations where systems of financial incentives are in place. Perhaps capacity building efforts could take place on a sub-regional or regional level with organisations from different sectors to assist with inter-organisational collaboration and sharing of data and good practice.

There is also a need to acquire better information from surveys of staff and users. Consideration should be given to the development of appropriate training in the use of those national data sets which can appropriately be analysed at regional and local geographical levels, including ensuring that training in the use and analysis of 2011 Census data is provided in good time for its first release. More generally, local agencies could work more effectively with colleges and universities in their regions, commissioning qualified statisticians and data analysts to provide the specialist, tailored services and training they require. This might promote better staff training to enable individuals to design robust surveys and administer them in a way that generates a good response rate from both workforce and service users; staff could also be trained to be aware of the representativeness of data, the importance of sample sizes, how to use already acquired data and how to access 'hard to reach' groups.

Another good way of enhancing the usefulness of data would be to ensure its standardisation; one way this might work would be for the Commission and other national bodies to encourage the use of harmonised Census categories in local surveys so that the local regional picture can be more effectively compared with the national picture. If organisations plan to sub-contract statistical work to consultants,

they need to be aware of the appropriateness of the data they are commissioning. Good practice example 4 (included in Chapter 5) shows what can be achieved when an organisation accesses a broad range of statistical sources in a comprehensive and robust manner. Several interviewees in the present study suggested that although the Commission had encouraged a 'creative' response to equality and diversity work, direct guidance from it on acquiring and using data would be useful.

Centralising databases

Several of our interviewees noted the importance of centralising databases so that all information is asked for only once. The university's data management scheme (good practice example 2 – see Chapter 4) was an example of how this might be achieved. It was also thought important that any analysis and use of information stored on databases is easy to understand, with access to this information for those who require it relatively straightforward.

Census data

Many interviewees in the study claimed that Census data were often their best source of information about particular equality and diversity issues. However, it was not always evident that our interviewees fully understood the capacity of the Census, in terms of its possibilities to provide data for analysing local and regional data by equality and diversity variables. A frequent comment made was that these data are 'out-of-date' and thus inapplicable to current needs. The ONS may need to do more to raise awareness of the unique possibilities of Census data, especially at lower levels of geographical analysis, and for exploring data by multiple variables (for example, by sex and ethnicity), or establishing trends over time. Demonstration documents illustrating the scope that the Census offers could be made available to encourage effective use of it. Nonetheless it is true that the most recent Census 'snapshot' relates to April 2001, almost eight years ago at the time of writing this report. Where up-to-date statistics are required, agencies may also need support in identifying suitable alternative data sources, and in using multiple data sources.

Minimum requirement profiles

The creation of a 'minimum requirement profile' for each equality and diversity strand, detailing the basic information that is required, may be helpful to local public sector agencies. Such a profile could offer guidance on the potential range of datasets available and on where these can be located. Organisations could also be encouraged to link their own ad-hoc surveys to Census data by using common definitions.

Sharing of information

Some organisations were already finding it useful to share information between organisations. For example, RDA2 has exchanged data with, and bought data from, other organisations. Similarly, some of the CSOs were sharing the equality and diversity schemes they had developed with other related organisations (for instance, PCT1's patient profiling scheme had been used by other PCTs in the district). National organisations, including the Equality and Human Rights Commission, might therefore encourage the sharing of databases, data collection instruments and existing equality-based schemes among similar organisations.

Consistency of approach

It may be desirable to encourage more consistency between the different departments of local public sector organisations, as well as between the same types of public sector organisations nationwide. While some differences between equality and diversity schemes are inevitable, and probably desirable, learning from others about good and effective practice, both within and between organisations, seems to be undeveloped at present. Our study suggests that currently, different organisations are engaged in different projects with varying degrees of success. Standardisation, at least in some core activities, might lead to the sharing of databases and good practice mentioned in the previous recommendation.

Sensitive information

Data gathering in the equality and diversity field was sometimes hampered by concerns about the sensitivity of this information, particularly sexual orientation or transgender status, disability, and ethnicity. Interviewees claimed that both staff and service users were often reluctant to provide this information. Some had concerns about data protection, while others displayed a fear of discrimination. Clearly the precise reasons why people feel unable to provide these data, and how organisations can overcome this barrier need to be investigated. It may be that an effective, sensitive way of acquiring such information will allay anxieties and result in a greater willingness to provide it.

Human rights

There is clearly some confusion among representatives of organisations as to the relevance of human rights to equality and diversity work. Overall, our interviewees had little understanding of the concept, particularly with regard to whether it was a distinctive category unrelated to other equality strands or whether it was in fact an intrinsic component of existing equality work. Some national level clarification and awareness-raising may be needed to help organisations promote human rights more effectively.

Local level data

Often in rural contexts, there was a perception that national data were often 'urban-centric' – based on town- or city-based populations. This made it difficult for organisations to identify relevant benchmarking statistics, applicable in their local rural situation. Some sensitivity to this issue might help these organisations conduct their equality and diversity work more effectively. Greater awareness of data availability at lower geographical levels, such as postcode level may also be needed, particularly in tackling socio-economic deprivation and related issues.

Language

Finally, response rates in local/regional surveys might improve if questionnaires and other research instruments were available in a wider range of languages. This might raise response rates among minority ethnic groups and among some religion and belief communities. This would be highly desirable, as (because of smaller numbers among some of these groups), achieving additional interviews and responses in these groups is particularly important.

References

Breitenbach, E. (2006) *Gender statistics: an evaluation*. Equal Opportunities Commission Working Paper Series no. 51. Manchester: EOC.

Walby, S., Armstrong, J. and Humphreys, L. (2008) *Review of equality statistics*. Equality Human and Rights Commission Research Report No. 1. Manchester: EHRC.

References

Appendices

Appendix 1: Equality and Human Rights Commission letter to case study organisations

Director of Research
Equality and Human Rights Commission
3 More London
Riverside
Tooley Street
SE1 2RG

May 2008

A REVIEW OF EQUALITY STATISTICS:
Case Studies of Local Public Sector Organisations

I am writing to ask for your organisation's co-operation with the above study which is being undertaken during spring–summer 2008 by the *University of Leeds* and the *Policy Evaluation Group*, acting on behalf of the *Equality and Human Rights Commission* (EHRC). The EHRC was established in 2007 to champion equality and human rights for all, working to eliminate discrimination, reduce inequality, protect human rights and build good relations, and to ensure that everyone has a fair chance to participate in society.

The aims of this study are to:

- Investigate the collection and use of equality statistics in selected public sector organisations.

- Collect information on the use made by these organisations of equality statistics from national, regional and local level sources and data services.

- Identify what (if any) additional data collection these organisations carry out in relation to equality and human rights issues, and what they perceive to be the information gaps and problems with existing data.

- Identify examples of good practice in the collection and use of data in the selected case study organisations, including the use of data to assess the effectiveness of policy interventions.

Your organisation has been selected as a possible case study organisation for inclusion in the study. **The final report will be published by the EHRC and so it will be a good opportunity for organisations to promote any positive work they have done in the area of equalities.**

Taking part in the study will involve:

- Agreeing that approximately 4 staff in relevant positions within your organisation will take part in (pre-booked) **telephone interviews** with research staff working as part of the University of Leeds team carrying out the work on behalf of the EHRC.

- Supplying appropriate **documentation** produced within your organisation to the research team (existing reports, plans and studies prepared by your organisation for your own purposes).

- The study team will also be reviewing the publicly available **websites** of all selected study organisations.

The research team will be operating completely independently. Apart from informing the EHRC of the names of the case study organisations, it is not intended that the case study organisations will be identified in the research report. Information conveyed to the research team in the telephone interviews will be treated as completely confidential and will not be shared with the EHRC or other organisations. (The only exception to this will be that, if *good practice* is identified in your organisation, *and* you agree that your organisation can be identified as a good practice example, we may ask for your consent to include details of your approach and practices in the study report.)

A member of the research team, which is led by Professor Sue Yeandle of the University of Leeds' *Centre for International Research on Care, Labour and Equalities*, will be contacting you by phone within the next month to answer any questions you may have about the study and to establish whether you are willing to take part in it. The EHRC regards this study as an important step in establishing its forward programme of work and I therefore hope very much that you will agree to participate. In the meantime, if you wish to contact the EHRC or the University of Leeds about the study, please do so using the contact details indicated below.

Yours sincerely

Contact details of relevant staff:

EHRC	**University of Leeds**	**PEG**
Dr David Perfect	Professor Sue Yeandle	Dr Andrea Wigfield
Research	Co-Director, CIRCLE -	Director
Equality and Human Rights Commission	*Centre for International Research on Care, Labour and Equalities*	*Policy Evaluation Group*
Arndale House	School of Sociology and Social Policy	Wishing Well Lodge
Arndale Centre		50 Manchester Road
Manchester	University of Leeds	Thurlstone
M4 3EQ	LS2 9JT	Sheffield
0161 8388320	0113 3434442	S36 9QT
David.Perfect@equalityhumanrights.com	s.m.yeandle@leeds.ac.uk	01226 763711
		awigfield@policyevaluation.co.uk

Appendix 2: Telephone interview topic guide

INTRODUCTION
The University of Leeds and the Policy Evaluation Group (PEG) have been commissioned by the Equality and Human Rights Commission to carry out some research into the collection and use of equality statistics by a selection of public sector organisations in England, Scotland and Wales. [Name of Organisation] has agreed to participate in this research and therefore we are seeking your views on how equality statistics are used by [name of organisation]. This interview is completely confidential and anonymous. You will not be identified in the subsequent report as an individual or as an organisation without your explicit agreement.

Section 1: Details of respondent
1. Name:
2. Position:
3. Organisation:
4. Contact details:
5. What are your roles and responsibilities?
Section 2: Information about general equality issues in [the organisation]
6. Please could you tell us what activities your organisation is carrying out in terms of equalities work? (at both a workforce and service delivery level)
7. Specifically can you tell us what activities your organisation carries out in relation to the following (at both a workforce and service delivery level):   Age   Disability   Gender   Race, religion or belief   Sexual orientation or transgender status   Human rights
8. In terms of the equalities activities that you have just outlined can you tell us the main reasons for the organisation's work in this area (prompt: because of legal requirements, due to a desire to be seen as a good practice organisation etc)
9. Are the equalities activities that you have outlined carried out by a separate dedicated department/unit? (get details and examples)
10. To what extent are equalities activities integrated into the organisation's wider policy work (to what extent are they mainstreamed)? (get details and examples)
Section 3: Equality Statistics
11. What equality statistics are you aware of: (Prompt: equality statistics in relation to age, disability, gender, race, religion or belief, sexual orientation or transgender status, human rights)

12. Please give details of the kinds of equality statistics that you are aware of in relation to [the organisation's] workforce?
13. Please give details of the kinds of equality statistics you are aware of in relation to [the organisation's] service delivery?
14. Of those statistics that you have just talked about please could you tell us which you use for information at different geographical levels: Locally   Sub-regionally   Regionally   Nationally
15. Are there any dimensions of equality statistics where you have noticed a lack of data?   Locally   Sub-regionally   Regionally   Nationally
16. Are there any dimensions of equality statistics where you have noticed a lack of data in terms of: age, disability, gender, race, religion or belief, sexual orientation or transgender status, human rights?
17. What kinds of equality statistics are collected within your organisation? (Prompt: equality statistics in relation to age, disability, gender, race, religion or belief, sexual orientation or transgender status, human rights)
18. Can you provide us with some details of the precise purposes for which the equality statistics are collected?
19. How are these equality statistics used by your organisation?
20. To what extent are the equality statistics that are collected analysed and used? (please provide us with examples where possible)
21. In your specific area of responsibility are there any equality statistics that you are aware of that are not collected or used by the organisation? (please provide details) (prompts: workforce level, service delivery)
22. Does [the organisation] collect any statistics itself? (prompts: for example through surveys, questionnaires) What kinds of statistics do you collect? How are they collected? Are they analysed? And how are they used? (provide examples where appropriate)
23. Please provide any examples of good practice in the organisation in using equality statistics.
24. Can you suggest any key documents that we should review for this work and if so can you let us know how to get copies of them? (get details of relevant documents)
25. If necessary, may we contact you again to clarify any points or to obtain future information?

Thank you for your time

Do you have any questions about the study?

Endnotes

---

[1] Some of the direct learning providers funded by the LSC to deliver education and training will have additional equalities and diversity activities, and staff working on these issues. The example of a college, which had changed lesson times so that Friday lunchtimes become free for learners to go to the Mosque, was cited.

[2] Race for Health is a Department of Health-funded, NHS based programme that works with PCTs and Trusts to drive forward improvements in health for people from ethnic minority backgrounds.

[3] It has not been possible to identify whether any statistical analysis is employed in using this toolkit.

[4] The CSO was unable to supply additional information on this point.

[5] The CSO was unable to supply additional information on this scheme.

[6] The CSO was unable to supply further information for this report.

[7] However, the CSO was unable to supply additional information about it.

[8] The CSO was unable to supply additional information on this matter.

[9] The CSO was unable to identify the primary source for this ONS data.

[10] NCH is now called Action for Children.

[11] However, the CSO's interviewees were unable to supply any additional information about this.

[12] The CSO was unable to supply additional information on this matter.

[13] The CSO was unable to supply additional information on this matter.

[14] The CSO was unable to supply additional information on this matter.

[15] The CSO was unable to supply additional information on this matter.

[16] The CSO was unable to supply additional information on this matter.

[17] The CSO was unable to supply additional information on this matter.

Contact us

You can find out more or get in touch with us via our website at:

www.equalityhumanrights.com

or by contacting one of our helplines below:

Helpline - England
Telephone: 0845 604 6610
Textphone: 0845 604 6620
Fax: 0845 604 6630

Helpline - Scotland
Telephone: 0845 604 5510
Textphone: 0845 604 5520
Fax: 0845 604 5530

Helpline - Wales
Telephone: 0845 604 8810
Textphone: 0845 604 8820
Fax: 0845 604 8830

9am–5pm Monday to Friday except Wednesday 9am–8pm.

Calls from BT landlines are charged at local rates, but calls from mobiles and other providers may vary.

Calls may be monitored for training and quality purposes.

Interpreting service available through Language Line, when you call our helplines.

This report is available for downloading from our website.
If you require it in an alternative format and/or language please contact the relevant helpline to discuss your needs.

This report examines what equality statistics are collected and used by selected locally-based public sector organisations. Based on detailed research in 11 case study organisations in England, Scotland and Wales, the report also assesses how they specifically use statistical data in their policies and practices relating to equality, diversity and human rights.