



# Equality and health analysis guidance and template

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## Guidance notes

### Things to remember:

Under the Public Sector Equality Duty (PSED) public authorities are required to have due regard to the aims of the general equality duty when making decisions and when setting policies. Understanding the affect of the council's policies and practices on people with different protected characteristics is an important part of complying with the general equality duty. Under the PSED the council must ensure that:

- Decision-makers are aware of the general equality duty's requirements.
- The general equality duty is complied with before and at the time a particular policy is under consideration and when a decision is taken.
- They consciously consider the need to do the things set out in the aims of the general equality duty as an integral part of the decision-making process.
- They have sufficient information to understand the effects of the policy, or the way a function is carried out, on the aims set out in the general equality duty.
- They review policies or decisions, for example, if the make-up of service users changes, as the general equality duty is a continuing duty.
- They take responsibility for complying with the general equality duty in relation to all their relevant functions. Responsibility cannot be delegated to external organisations that are carrying out public functions on their behalf.
- They consciously consider the need to do the things set out in the aims of the general equality duty not only when a policy is developed and decided upon, but when it is being implemented.

Best practice guidance from the Equality and Human Rights Commission recommends that public bodies:

- Consider all the [protected characteristics](#) and all aims of the general equality duty (apart from in relation to marriage and civil partnership, where only the discrimination aim applies).
- Use equality analysis to inform policy as it develops to avoid unnecessary additional activity.
- Focus on the understanding the effects of a policy on equality and any actions needed as a result, not the production of a document.
- Consider how the time and effort involved should relate to the importance of the policy to equality.
- Think about steps to advance equality and good relations as well as eliminate discrimination.
- Use good evidence. Where it isn't available, take steps to gather it (where practical and proportionate).
- Use insights from engagement with employees, service users and others can help provide evidence for equality analysis.

Equality analysis should be referenced in community impact statements in Council reports. Community impact statements are a corporate requirement in all reports to the following meetings: the cabinet, individual decision makers, scrutiny, regulatory committees and community councils. Community impact statements enable decision makers to identify more easily how a decision might affect different communities in Southwark and to consider any implications for equality and diversity.

The public will be able to view and scrutinise any equality analysis undertaken. Equality analysis should therefore be written in a clear and transparent way using plain English. Equality analysis may be published under the council's publishing of equality information, or be present with divisional/departmental/service business plans. These will be placed on the website for public view under the council's Publications Scheme.

Equality analysis should be reviewed after a sensible period of time to see if business needs have changed and/or if the effects that were expected have occurred. If not then you will need to consider amending your policy accordingly. This does not mean repeating the equality analysis, but using the experience gained through implementation to check the findings and to make any necessary adjustments.

Engagement with the community is recommended as part of the development of equality analysis. The council's Community Engagement Division and critical friend, the Forum for Equality and Human Rights in Southwark can assist with this (see section below on community engagement and [www.southwarkadvice.org.uk](http://www.southwarkadvice.org.uk)).

Whilst the equality analysis is being considered, Southwark Council recommends considering health and wellbeing implications, as health and health inequalities are strongly influenced by the environment we live and work in. As a major provider of services to Southwark residents, the council has a legal duty to reduce health inequalities and this is reflected in its values and aims. For this reason, the council recommends considering health & wellbeing impacts in all equality analyses, not forgetting to include identified potential mitigating actions.

**Section 1: Equality analysis details**

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<b>Proposed policy/decision/business plan to which this equality analysis relates</b>	- Approach to Community Engagement
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<b>Department</b>	Place and Well Being	<b>Division</b>	Community and Voluntary Sector Engagement		
<b>Period analysis undertaken</b>	July 2019				
<b>Date of review (if applicable)</b>	December 2019				
<b>Sign-off</b>		<b>Position</b>		<b>Date</b>	

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## Section 2: Brief description of policy/decision/business plan

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### 1.1 Brief description of policy/decision/business plan

Cabinet in September 2018 requested a review of our Approach to Community Engagement. At the first stage of this process we developed, in partnership with residents, community groups and voluntary sector through a series of workshops, a vision and set of principles for our approach to community engagement. This was adopted in April 2019

Both our vision and the principles identify diversity as a key part of our proposals.

Our vision

Includes the following statement:

*We believe that everyone has an equal and valuable voice, and we work with our communities to ensure that everyone is well-informed about decision making, can have their say and are listened to.*

In particular the principles set out:

*We will ensure that our engagement reflects the diversity of people who live and work in the borough as this is critical to understanding the needs and aspirations of everyone, deliver better services and places and will be one of the ways we are able to deliver a number of key council commitments such as regeneration for all, and placing people at the heart of our decision making.*

In addition of the 10 principles one is about being *inclusive* and another being *simple and accessible*.

*This report identifies the things we will do to bring life to the principles and sets out a series of commitments we make on how we will deliver these.*

*Once adopted we will produce a comprehensive guide and toolkit that will help staff to deliver our new approach.*

*Our review of the former EA based on the more recent work to develop the approach has required few changes in our analysis.*

**Section 3:** Overview of service users and key stakeholders consulted

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<b>2. Service users and stakeholders</b>	
<b>Key users of the department or service</b>	All council departments, residents and businesses in Southwark and those that work, study and volunteer in the borough
<b>Key stakeholders were/are involved in this policy/decision/business plan</b>	Council officers across departments, voluntary sector organisations, community groups and residents

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## Section 4: Pre-implementation equality analysis

This section considers the potential impacts (positive and negative) on groups with 'protected characteristics', the equality information on which this analysis is based and any mitigating actions to be taken.

The first column on the left is for societal and economic issues (discrimination, higher poverty levels) and the second column on the right for health issues, physical and mental. As the two aspects are heavily interrelated it may not be practical to fill out both columns on all protected characteristics. The aim is, however, to ensure that health is given special consideration, as it is the council's declared intention to reduce health inequalities in the borough. The Public Health Team can assist with research and data.

Age - Where this is referred to, it refers to a person belonging to a particular age (e.g. 32 year olds) or range of ages (e.g. 18 - 30 year olds).	
Potential impacts (positive and negative) of proposed policy/decision/business plan	Potential health impacts (positive and negative)
<p>Positive impact Our engagement faces a number of challenges across different age ranges. In particular there is poor participation from young people (under 24), but also people under 45. These groups form a significant part of the population in the borough.</p> <p>The ambition of this policy is to bring to the fore that it is not just numbers of people engaging that matters but we must ensure that a range of voices and perspectives are listened to when shaping policy and services.</p> <p>Two relevant principles are: <b>Simple &amp; Accessible:</b> We recognise that everyone's needs are not the same. We will provide engagement and consultation in plain English and provide materials in a variety of formats to support our varied communities get involved.</p> <p>And</p> <p><b>Inclusive:</b> We will work with businesses, and those that work, live, worship, study and volunteer in Southwark. We will make a particular effort to connect with seldom heard communities and those likely to be most affected by any potential change</p> <p>Using asset based community development approaches and collaborative working should support the fostering of good relations between persons who share a relevant protected characteristic and persons who do not share it.</p>	

<b>Equality information on which above analysis is based</b>	<b>Health data on which above analysis is based</b>
<p>Experience via use of the consultation hub and Southwark Conversation and local population data. Feedback from the workshops.</p> <p>Over 40% of the Southwark population consists of those aged 20 to 39, compared to 34% in the rest of London and only 8% of the population of Southwark is aged over 65.</p> <p>Both the Southwark Conversation and the Kaizen report identified digital engagement as a means to improve participation. In planning the move to digital has increase the pool of participants from 2000 to 7000 in a relatively short period of time.</p>	
<b>Mitigating actions to be taken</b>	
<p>Through the next phase of our engagement we need to look at the tools we use in our approaches in particular developing digital means (attractive to younger people), how our materials and outreach are targeted to reach these different audiences.</p> <p>In particular the needs of older people will also need to be considered as more traditional mechanisms for engagement may be more likely to result in participation from this group, and we must ensure that through addressing the needs of younger people we do not leave others behind. This will be achieved through using a range of means to connect with our different communities.</p> <p>We will be working through the ageing well work 2019- 2020 with older people as well as developing mechanisms for older people’s insight through a new grant to an older people’s reference group. Both should strengthen our engagement with older people.</p> <p>We will continue the work in the department of developing the youth voice for Southwark young people through the youth council.</p> <p><b>We are currently working on a digital engagement strategy using the digital feed back from our workshops and looking at internal needs.</b></p>	



**Disability** - A person has a disability if s/he has a physical or mental impairment which has a substantial and long-term adverse effect on that person's ability to carry out normal day-to-day activities.

Potential impacts (positive and negative) of proposed policy/decision/business plan	Potential health impacts (positive and negative)
<p>Positive impact Again there is a challenge for engagement with people who are disabled even when targeting people directly as service users.</p> <p>The new approach places the onus on the council to find the means to reach and include this group of residents that form a significant minority in the borough.</p> <p>Two relevant principles are: <b>Simple &amp; Accessible:</b> We recognise that everyone's needs are not the same. We will provide engagement and consultation in plain English and provide materials in a variety of formats to support our varied communities get involved.</p> <p>And</p> <p><b>Inclusive:</b> We will work with businesses, and those that work, live, worship, study and volunteer in Southwark. We will make a particular effort to connect with seldom heard communities and those likely to be most affected by any potential change.</p> <p>Using asset based community development approaches and collaborative working should support the fostering of good relations between persons who share a relevant protected characteristic and persons who do not share it.</p>	
Equality information on which above analysis is based	Health data on which above analysis is based
<p>It is estimated that almost 47,600 adults in Southwark experience a common mental disorder (CMD), which comprises different types of depression and anxiety, and this is expected to rise to approximately 52,000 individuals over the next decade as our population grows.</p> <p>Severe mental illness refers to psychotic conditions such as schizophrenia and bipolar affective disorder, which affects 1.2% of Southwark residents (4,000 people), compared to</p>	

<p>1.1% in London. The prevalence of SMI increases with age among both men and women, peaking among those in their fifties. In contrast to the estimated prevalence of common mental disorders, the number of men diagnosed with SMI in Southwark is greater than women across each age group up to 70.</p> <p>In Southwark, approximately 1% of the GP registered population have three or more chronic conditions, equivalent to over 3,500 patients. The large majority of people with multiple long term conditions in Southwark are aged over 50 and more than half of people with multiple LTCs are aged 70 and over.</p> <p>In the 2011 census about 13.5% of residents reported a long term condition that limited them this includes those with physical and mental disability as well as illness..</p>	
<p><b>Mitigating actions to be taken</b></p>	
<p>Through the next phase of our engagement we need to look at the tools we use in our approaches, in particular working through our community and voluntary and statutory partners may work well. Accessibility is also a key especially thinking about venues, and materials and type of engagement activity.</p> <p>As part of our work on Tideway' we are action testing asset based community development approaches; one of the areas of focus will be resident well being and improving mental health. Lessons learnt from this approach will be mainstreamed across all the work we do.</p> <p>There is a need to strengthen our links to organisations locally that offer support to and campaign on behalf of people with a range of disabilities and working with Community Southwark and CCG should also help achieve this.</p>	

<b>Gender reassignment</b> - The process of transitioning from one gender to another.	
<b>Potential impacts (positive and negative) of proposed policy/decision/business plan</b>	<b>Potential health impacts (positive and negative)</b>
<p>Any consultation process that is particularly relevant to this protected characteristic, the principle of being inclusive will mean that the council will seek to engage with those likely to be most affected by any potential change.</p> <p>Sometimes a more targeted approach will be needed for specific groups around gender identity and Transgender. We will work closely with the Southwark LGBTQI Network and LGBTQI staff support network as helpful ways forward for consultation and engagement.</p>	
<b>Equality information on which above analysis is based.</b>	<b>Health data on which above analysis is based</b>
<p>ONS estimates that Southwark has the second largest gay or lesbian population in London at 5%. Lambeth has the highest.</p>	
<b>Mitigating actions to be taken</b>	
<p>We will need to work with the LBGTQ+ community to improve our understanding and reach of this community.</p> <p>With Healthwatch, the Local LBGTQ+ network have made a set of recommendations on how to improve life across a number of areas for this community and we are beginning to work with them in order to support their work.</p>	

**Marriage and civil partnership** – In England and Wales marriage is no longer restricted to a union between a man and a woman but now includes a marriage between a same-sex couple. Same-sex couples can also have their relationships legally recognised as 'civil partnerships'. Civil partners must not be treated less favourably than married couples and must be treated the same as married couples on a wide range of legal matters. **(Only to be considered in respect to the need to eliminate discrimination.)**

<b>Potential impacts (positive and negative) of proposed policy/decision/business plan</b>	<b>Potential health impacts (positive and negative)</b>
<p>Any consultation process that is particularly relevant to this protected characteristic, the principle of being inclusive will mean that the council will seek to engage with those likely to be most affected by any potential change.</p>	
<b>Equality information on which above analysis is based</b>	<b>Health data on which above analysis is based</b>
<b>Mitigating actions to be taken</b>	

**Pregnancy and maternity** - Pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth, and is linked to maternity leave in the employment context. In the non-work context, protection against maternity discrimination is for 26 weeks after giving birth, and this includes treating a woman unfavourably because she is breastfeeding.

<b>Potential impacts (positive and negative) of proposed policy/decision/business plan</b>	<b>Potential health impacts (positive and negative)</b>
<p>Any consultation process that is particularly relevant to this protected characteristic, the principle of being inclusive will mean that the council will seek to engage with those likely to be most affected by any potential change.</p>	

<b>Equality information on which above analysis is based</b>	<b>Health data on which above analysis is based</b>
<b>Mitigating actions to be taken</b>	

<p><b>Race</b> - Refers to the protected characteristic of Race. It refers to a group of people defined by their race, colour, and nationality (including citizenship) ethnic or national origins. N.B. Gypsy, Roma and Traveller are recognised racial groups and their needs should be considered alongside all others</p>	
<b>Potential impacts (positive and negative) of proposed policy/decision/business plan</b>	<b>Potential health impacts (positive and negative)</b>
<p>Positive impact: By creating vision and set of principles that places diversity at the centre of what we do this should improve our reach to a range of BAME communities. Working closely with organisations such as community southwark and faith communities, as outlined in our recently adopted faith strategy, embedded in our approach should also improve our reach to BAME communities.</p> <p>Two relevant principles are: <b>Simple &amp; Accessible:</b> We recognise that everyone's needs are not the same. We will provide engagement and consultation in plain English and provide materials in a variety of formats to support our varied communities get involved.</p> <p>And</p> <p><b>Inclusive:</b> We will work with businesses, and those that work, live, worship, study and volunteer in Southwark. We will make a particular effort to connect with seldom heard communities and those likely to be most affected by any potential change.</p> <p>How we deliver our principles which will be developed in the next phase of our work to build</p>	

<p>our approaches, will continue to focus on how we are inclusive and accessible, and place diversity at the heart of what we do..</p>	
<p><b>Equality information on which above analysis is based</b></p>	<p><b>Health data on which above analysis is based</b></p>
<p>Census 2011 Information:  54.2%: White Ethnic backgrounds, which includes 39.7% from White British backgrounds and 12.4% from White Other Ethnic backgrounds.</p> <p>45.8%: BAME backgrounds, which includes 26.9% from Black African and Caribbean backgrounds; 9.4% from Asian backgrounds; 6.2% from Mixed ethnic backgrounds and 3.3% from Other Ethnic backgrounds.</p> <p>Ward profile data also demonstrates where many communities are located and the wide ranging diversity of the borough.</p>	
<p><b>Mitigating actions to be taken</b></p>	
<p>Currently we are working to develop the capacity of the Latin American community and supporting their better integration with the work of the council. Our work with faith organisations should also support our reach with BAME communities. For some people from Black, Asian and Minority Ethnic backgrounds, religion is integral to their ethnicity and not separate from it.</p> <p>This has important implications for services developed and provided. This also has important implications for promoting good relations.</p> <p>Further work on inclusivity principle and equalities as we develop a toolkit/guidance for teams across the council.</p>	

<p><b>Religion and belief</b> - Religion has the meaning usually given to it but belief includes religious and philosophical beliefs including lack of belief (e.g. Atheism). Generally, a belief should affect your life choices or the way you live for it to be included in the definition.</p>	
<p><b>Potential impacts (positive and negative) of proposed policy/decision/business plan</b></p>	<p><b>Potential health impacts (positive and negative)</b></p>

<p>Positive impact.</p> <p>Southwark is home to over 400<sup>1</sup>faith organisations and many of these groups play an active role in their communities, and in particular refugee and new migrant communities are supported through their places of worship. Faith groups have a key role to play in reaching some of our harder to reach communities.</p> <p>We have recently developed a faith strategy which supports the delivery of our vision and principles.</p> <p>In particular the following principle is relevant to this protected group:</p> <p><b>Inclusive:</b> We will work with businesses, and those that work, live, worship, study and volunteer in Southwark. We will make a particular effort to connect with seldom heard communities and those likely to be most affected by any potential change.</p> <p>Working with faith organisations in the ways outlined in the faith strategy will greatly improve the connectivity of people of faith in shaping the services provided by the council.</p> <p>Working more closely with faith organisations will improve the variety of mechanisms of delivery improving take up and support for people of faith who live in the borough.</p> <p>Bringing faith organisations together to discuss areas of common concern and encouraging collaborative working with the wider community and voluntary sector and other faith organisations will strengthen social integration and community resilience.</p>	
<p><b>Equality information on which above analysis is based</b></p>	<p><b>Health data on which above analysis is based</b></p>
<p>Census data 2011</p> <p>This identified the following belief make up of the borough:</p> <p>52.54% Christian; 1.35% Buddhist; 1.27% Hindu;0.35% Jewish; 8.52% Muslim;0.23% Sikh;0.47% other religion; 26.74% no religion; 8.54% did not say.</p>	

<sup>1</sup> The number of faith organisations in the Borough can only be speculative as there is no licensing of faith groups, and smaller and newer congregations do not always have permanent or obvious premises and may be visible only to their own followers and networks.

<b>Mitigating actions to be taken</b>	

<b>Sex</b> - A man or a woman.	
<b>Potential impacts (positive and negative) of proposed policy/decision/business plan</b>	<b>Potential health impacts (positive and negative)</b>
<p>In most consultations women are more likely to respond than men although most achieve reasonable parity.</p> <p>Involvement of men on some issues can be challenging.</p> <p>Two relevant principles are:  <b>Simple &amp; Accessible:</b> We recognise that everyone's needs are not the same. We will provide engagement and consultation in plain English and provide materials in a variety of formats to support our varied communities get involved.</p> <p>And</p> <p><b>Inclusive:</b> We will work with businesses, and those that work, live, worship, study and volunteer in Southwark. We will make a particular effort to connect with seldom heard communities and those likely to be most affected by any potential change.</p>	
<b>Equality information on which above analysis is based</b>	<b>Health data on which above analysis is based</b>
<p>Experience of running consultations.</p> <p>Census 2011 data:  Female: 50.5%  Male: 49.5%</p>	



<b>Mitigating actions to be taken</b>	
<p>Although on some issues men can be hard to reach the next phase of the work on our approaches should identify how we can reach some of the harder to reach men. Many of our voluntary sector organisations already deliver services in imaginative settings and we should explore how we can make best use of these activities to reach out.</p> <p>Our sessions on faith have also demonstrated that many of our faith leaders are men and working with faith organisations also provides a useful pathway to reach this group.</p> <p>Our tool kit and guidance note that is being developed to accompany the new approach as a resource for engagement planning will provide advice and guidance on reach and inclusion.</p>	

<b>Sexual orientation</b> - Whether a person's sexual attraction is towards their own sex, the opposite sex or to both sexes	
<b>Potential impacts (positive and negative) of proposed policy/decision/business plan</b>	<b>Potential health impacts (positive and negative)</b>
<p>Positive impact. Southwark has a large LBGTQ+ community, and their voice and perspective is important when shaping our policies and developing strategies for the borough.</p> <p>In particular the following principle is relevant:</p> <p><b>Inclusive:</b> We will work with businesses, and those that work, live, worship, study and volunteer in Southwark. We will make a particular effort to connect with seldom heard communities and those likely to be most affected by any potential change. One of the strands for consideration as we develop the approaches in the next phase will be how to ensure that we use engagement to integrate and better deliver our obligations under the Public Sector Equality Duty (PSED) and ensure that when we consult with the public that participants reflect the diversity of the people who live and work in the borough.</p>	

<b>Equality information on which above analysis is based</b>	<b>Health data on which above analysis is based</b>
<p><b>Mitigating actions to be taken</b></p> <p>One of our strands of work in the division is working with the LBGTQ+ network facilitated by Community Southwark. This work should ensure that there is better engagement of this community in shaping decisions about the future of southwark and their needs and aspirations are met. Previous work has already highlighted concerns about housing and care for older LBGTQ+ residents and the closure of LBGTQ+ safe venues. Public health is also working this year to improve the take up of sexual health services among the BAME LBGTQ+ community. This supports the delivery of our new vision and principles.</p> <p>Further work on inclusivity principle and equalities as part of the next phase of engagement approach development and information in the guidance notes and tool kit should support the council reach and engage this community.</p>	
<p><b>Socio-economic disadvantage</b> – although the Equality Act 2010 does not include socio-economic status as one of the protected characteristics, Southwark Council recognises that this continues to be a major cause of inequality in the borough.</p> <p>Socio economic status is the measure of an area's, an individual's or family's economic and social position in relation to others, based on income, education, health, living conditions and occupation.</p>	
<b>Potential impacts (positive and negative) of proposed policy/decision/business plan</b>	<b>Potential health impacts (positive and negative)</b>
<p><b>Positive impact</b></p> <p>Based on the feedback from those that attended the workshops and discussions at the Forum for Equalities Human Rights and Southwark Voice. It is clear that some of the most vulnerable in our communities feel that they have no voice and decisions are made that impact them without being able to influence those decisions.</p> <p>The development of this vision and the principles seeks to address these concerns. In particular an asset based approach to engagement should strengthen the participation and involvement of people experiencing socio-economic disadvantage, as should a stronger connectivity with community and voluntary sector organisations close to residents.</p> <p>Current work being undertaken to review our resident involvement in housing will also help contribute to this area.</p>	

<b>Equality information on which above analysis is based</b>	<b>Health data on which above analysis is based</b>
<b>Mitigating actions to be taken</b>	
<p>When developing the approaches we will need to ensure that consideration is given to how we engage with and involve residents experiencing socio-economic disadvantage.</p> <p>The development of Social regeneration charters and the great estates programme, and work in the resident involvement review should also strengthen our work to address socio-economic disadvantage.</p>	

<p><b>Human Rights</b>  There are 16 rights in the Human Rights Act. Each one is called an Article. They are all taken from the European Convention on Human Rights. The Articles are The right to life, Freedom from torture, inhuman and degrading treatment, Freedom from forced labour , Right to Liberty, Fair trial, Retrospective penalties, Privacy, Freedom of conscience, Freedom of expression, Freedom of assembly, Marriage and family, Freedom from discrimination and the First Protocol</p>
<b>Potential impacts (positive and negative) of proposed policy/decision/business plan</b>
Neither positive nor negative impact.
<b>Information on which above analysis is based</b>
<b>Mitigating actions to be taken</b>

**Section 5: Further actions and objectives**

<b>5. Further actions</b>			
Based on the initial analysis above, please detail the key mitigating actions or the areas identified as requiring more detailed analysis.			
<b>Number</b>	<b>Description of issue</b>	<b>Action</b>	<b>Timeframe</b>
1	Further developing inclusive practice	Produce a guidance note for officers	By January 2020
2			
3			
4			

<b>5. Equality objectives (for business plans)</b>				
Based on the initial analysis above, please detail any equality objectives that you will set for your division/department/service. Under the objective and measure column please state whether this objective is an existing objective or a suggested addition to the Council Plan.				
<b>Objective and measure</b>	<b>Lead officer</b>	<b>Current performance (baseline)</b>	<b>Targets</b>	
			<b>Year 1</b>	<b>Year 2</b>

<b>5. Health objectives (for business plans)</b>				
Based on the initial analysis above, please detail any health objectives that you will set for your division/department/service. Under the objective and measure column please state whether this objective is an existing objective or a suggested addition to the Council Plan.				
<b>Objective and measure</b>	<b>Lead officer</b>	<b>Current performance (baseline)</b>	<b>Targets</b>	
			<b>Year 1</b>	<b>Year 2</b>