

Fairer Enfield

Background Report on the development of our proposed equalities objectives

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The Public Sector Equality Duty requires us to publish one or more specific and measurable equalities objectives every four years that demonstrate areas where we are tackling inequality. We have identified eight focused areas of work to reduce inequality, which affect specific groups in Enfield.

To identify these draft objectives, we have:

- analysed local data on the experiences of different groups in our communities
- analysed national research on inequality
- learnt from the successful approaches taken by councils elsewhere, as well as other public sector and voluntary and community sector organisations
- considered and discussed the views and experiences of the staff in our staff equality networks and the experiences of voluntary and community sector partners.

This briefing provides a summary of the local and national data and best practice which has informed the development of the equalities' objectives.

Overcome racism in Enfield.

Black, Asian and Minority Ethnic groups experience inequality in housing, education, employment, health and criminal justice. In Enfield, our 10% most deprived areas are the most diverse areas with the largest population of residents from ethnic minorities.

This inequality has been evidenced by the disproportionate impact of Covid-19 nationally and locally.¹ In Enfield, data on deaths between 15th March and 5th May shows that Covid-19 deaths in Enfield disproportionately affected the following ethnic groups: Turkish, Somalian, African, Caribbean, East Asian, Bangladeshi and Ghanaian, and among people who spoke Turkish, Arabic, Akan and Bengali.

National analysis of survival rates shows that, after accounting for the effect of gender, age, deprivation and region, people of Bangladeshi ethnicity had around twice the risk of death when compared to people of White British ethnicity. People of Chinese, Indian, Pakistani, Other Asian, Caribbean and Other Black ethnicity had

¹https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/908434/Disparities_in_the_risk_and_outcomes_of_COVID_August_2020_update.pdf

between 10-50% higher risk of death when compared to white British.² To tackle the disproportionate impact of Covid-19 on ethnic minorities, we will implement the recommendations from Public Health England's *Beyond the Data* report.

Children from Gypsy, Roma and Traveller (GTR) communities have the poorest educational outcomes of all ethnic minority groups as they often leave school earlier than other ethnic groups, often resulting in teachers and education authorities having low expectations of GTR children.³ However, for many GTR children, early removal from school can be attributed to parents seeking to remove children from the impacts of discrimination and bullying.⁴ Furthermore, health outcomes for GTR communities are very poor compared to other ethnic groups, which stem from discrimination, difficulties navigating the NHS, and a reluctance by GTR people to seek medical attention until their condition has become very serious. We will work with our partners to reduce the discrimination experienced GTR communities in accessing education, healthcare and services.

London has the highest number of mental health detentions for Black African and African Caribbean patients. The reasons suggested for the high rates of detention have been partly attributed to the population proportion of Black ethnic groups in London and the lack of alternative to inpatient treatment. Whilst, some researchers have attributed the higher rates of detention of Black African and African Caribbean patients compared to white patients, to discrimination and racial stereotyping by health care practitioners.⁵ We want to work with our communities and partners to better understand and address the overrepresentation of Black men in mental health in-patient services at a local level and provide evidence-based interventions.

Black and ethnic minority communities are also particularly vulnerable to increased debt and financial hardship because of the economic lockdown. National analysis found that 12-18% of ethnic minority communities were struggling financially before the crisis, compared to 5% across the population.⁶ We can take action through our work to improve access to benefit and debt advice for all residents.

Enfield has a diverse and growing business sector, 42.2% of company directors in the Borough are non-UK nationals and hail from Cyprus, Turkey, Greece, Africa, Central and Eastern Europe, and Central and South Asia. We want to help Black and ethnic minority-owned businesses in the Borough to thrive, through our procurement processes and by providing local support to small and medium (SME) businesses.

We can also take action as an employer to reduce the ethnicity pay gap for our staff, learning from best practice elsewhere and listening to and working with our Ethnic Minority network.

² https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/908434/Disparities_in_the_risk_and_outcomes_of_COVID_August_2020_update.pdf

³ <https://publications.parliament.uk/pa/cm201719/cmselect/cmwomeq/360/full-report.html#heading-9>

⁴ http://bucks.ac.uk/__data/assets/pdf_file/0028/54649/Rain-Report.pdf

⁵ <https://raceequalityfoundation.org.uk/health-care/mental-health-report-published/>

⁶ <https://www.ippr.org/blog/minority-ethnic-groups-face-greater-problem-debt-risk-since-covid-19>

Furthermore, we are also learning from and responding to the Black Lives Matter movement. We will work with Enfield schools to create a diverse and anti-racist curriculum that educates children and young people on systemic racism, and our local diverse history, as well as working with our communities to deliver an annual programme of educational, challenging and inspiring events celebrating our ethnic minority communities.

Deliver positive interventions to reduce serious youth violence in Enfield.

Enfield continues to suffer high levels of serious youth violence. It is evidenced in national research that people who identify as Black, Asian, Mixed or 'Other' ethnicities are more at risk of becoming involved in crime;⁷ and in local data which shows Black people are over-represented in youth convictions. The Lammy Review 2017 highlights that the BAME proportion of young people offending rose for the first time from 11% in the year ending March 2006, to 19% in the year ending March 2016.⁸ There is also local evidence that Black people in Enfield are over-represented in youth convictions.

We can take action with our partners to increase our understanding of the causes of this at a local level, and by providing targeted and evidence-based interventions to help prevent people most at risk from being drawn into crime.

Increase the number of residents with special educational needs and disabilities (SEND) in paid employment

Disabled residents are disproportionately impacted by unemployment. Data from 2019 showed that only 42.6% of disabled persons in Enfield were in employment. This is lower than the national average, which estimates 53.2% of disabled persons are in employment.⁹

The Council already has successful programmes in place to support residents with SEND into employment, which can be further developed to achieve this objective. The supported internship scheme is a yearlong study program, commissioned by the Council to West Lea School, for 16-24-year olds who have an Educational Health Care Plan or a Statement of Special Educational Needs. From the 2018/19 Cohort, 62% of students went straight into paid employment and only 5% finished without a job offer or an offer to extend their placement.

The Equals Employment Service is part of Adult Social Care and provides support to adults with disabilities to gain and sustain paid employment. Once students graduate from the supported internship scheme, they are be transferred to the 'Equals Team' for support.

⁷ Youth Justice Statistics 2018-2019:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/862078/youth-justice-statistics-bulletin-march-2019.pdf

⁸ https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/643001/lammy-review-final-report.pdf

⁹ National Population Survey, 2019

Improve the wellbeing and celebrate the contribution of our Lesbian, Gay, Bi and Trans Community.

It is estimated by the Department for Trade and Industry that between 5-7% of the UK population are lesbian, gay or bi. However, the ONS 2018 Annual Population Survey estimated that 2.4% of the UK population identified themselves as Lesbian, Gay or Bi. London had the largest proportion of the population who identified as LGB (2.8%) in 2018, which could be associated with a relatively young and diverse population. Assuming and applying those estimates to Enfield's population of 333,794, the LGB population in Enfield may be anywhere between around 7,677 (applying the national ratio) and 9,346 (applying the London ratio) by the ONS Annual Population Survey Estimate.¹⁰

Although we do not have local data on outcomes for our LGBT community, Stonewall have produced a report based on YouGov research with 5,000 lesbian, gay, bi and trans people across Britain.¹¹ The study shows that 52% of LGBT people had experienced depression in the last 12 months; almost half (46%) of trans people have thought about taking their own life; and 31% of LGB people who aren't trans have said the same.

The School Report, published by Stonewall in 2017, demonstrated the need to further support LGBT young people to reach their full potential. This report found that nearly half of LGBT pupils are bullied for being LGBT at school and just 40% of LGBT young people said they have an adult that they can talk to about being LGBT.

Furthermore, a study by University College London and Sussex University to assess mental health among lesbian, gay, bisexual, transgender and queer (LGBTQ) people during the pandemic found high levels of stress and depressive symptoms amongst young and transgender respondents. This is because many younger people have been unable to access support during lockdown, especially where home has not been a safe space for them to speak openly about their identity.¹² We can act locally, working with our schools, to help improve the wellbeing of our LGBT community and tackle homophobic, biphobic and transphobic bullying.

Another national survey carried out by Stonewall found that 23% of respondents have experienced a negative or mixed reaction from others in the workplace due to being LGBT or being thought to be LGBT.¹³ We can take action as an employer, learning from best practice guidance provided by Stonewall, to create an LGBT inclusive workplace.

Provide access to support services and networks to reduce social isolation

According to Enfield Council's Scrutiny Review of Loneliness 2019, 31% of Enfield residents over 65 live alone and the Campaign to End Loneliness estimated that

¹⁰ Borough Profile 2020

¹¹ https://www.stonewall.org.uk/system/files/lgbt_in_britain_health.pdf

¹² <https://www.medrxiv.org/content/10.1101/2020.08.03.20167403v1>

¹³ https://www.niesr.ac.uk/sites/default/files/publications/160719_REPORT_LGBT_evidence_review_NIESR_FINALPDF.pdf

30% of the local population aged over 65 feel mildly to severely lonely.¹⁴ Enfield's over 65 population is predicted to grow by 23% in the next 10 years and is the part of our population projected to grow fastest, with increasing numbers of older people at risk of loneliness and isolation.

Insufficient social connection can have a detrimental effect on psychological health and increase risk of physical health issues. Amongst elderly people, loneliness has been linked to a 29% increase in the risk of developing cardiovascular disease and an increase in the risk of accelerated cognitive decline.¹⁵ Social isolation also puts people at risk of injury, contributing to the risk of falls. Between April 2017 and March 2018, 805 Enfield residents were admitted to hospital due to falls.¹⁶

During the COVID-19 pandemic, risk of isolation and loneliness has increased further, with certain groups of people particularly impacted. A survey conducted by Alzheimer's Society found that 56% of people with dementia living on their own felt lonelier over the lockdown period; whilst 23% of people with dementia who live with another person felt lonelier during this period.¹⁷ In Enfield, it is estimated that 3,280 people are living with dementia.¹⁸

People living in care homes and assisted living communities have also been particularly impacted, unable to see family and friends, or even their informal carers due to 'no visitors' policies. The cancellation of group activities and communal dining in care homes, to reduce the risk of coronavirus transmission, added to the isolation that people experienced.

We can take action to provide opportunities for social connection and reduce the risk of social isolation for over 65s in Enfield, in our role as care provider, and in our role as community leader – by continuing to find innovative ways to help connect and empower communities to support one another.

Work with our partners to mitigate the impact of Covid-19 on Children and Young People's mental health and wellbeing.

The Covid-19 pandemic has had a profound impact on children and young people's mental health and wellbeing. There have been additional challenges for young people who were already struggling with their mental health and for others the pandemic has created new mental health issues, as a result of the loss of routine, loss of education, social isolation, traumatic experiences and a breakdown of formal and informal support networks.¹⁹ A NHS study, in July 2020, found that clinically significant mental health conditions amongst children had risen by 50% compared to

¹⁴ <https://governance.enfield.gov.uk/documents/s73329/LonelinessandSocialIsolationScrutinyWorkstreamReportFinalDraft.pdf>

¹⁵ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5102822/>

¹⁶ <http://www.enfieldccg.nhs.uk/Downloads/Equality-and-diversity/Equality%20information%20report%202016.pdf>

¹⁷ <https://www.alzheimers.org.uk/news/2020-07-30/lockdown-isolation-causes-shocking-levels-decline-people-dementia-who-are-rapidly>

¹⁸ RNIB. Sight Loss Data Tool Version 4.0 (Accessed Nov 2020)

¹⁹ <http://www.instituteofhealthequity.org/resources-reports/build-back-fairer-the-covid-19-marmot-review/build-back-fairer-the-covid-19-marmot-review-full-report.pdf>

three years earlier. A staggering 1 in 6 children now have a probable mental health condition.²⁰

A national survey conducted by Young Minds revealed that 81% of respondents agreed that their mental health had become worse as a result of the Covid-19 crisis. Of these, 41% said that it had made their mental health much worse.²¹

To mitigate the impact of Covid-19 on children and young people's mental health, we will work in partnership with young people so that mental health support can be understood and talked about in a common language that everyone understands, and that help is provided in a way that is right for them and when they need it.

We are acutely aware of the importance of schooling in a child's development. Prior to the Covid-19 pandemic, research had found that students from more disadvantaged backgrounds had, on average, levels of attainment 18 months behind their more affluent peers.²² This gap is not closing, and research shows that children from more disadvantaged backgrounds fall further behind during school breaks.

On average students affected by special educational needs are 3 years behind their peers at the end of secondary education. The Disabled Children's Partnership has highlighted significant concerns about the impact of Covid-19 lockdowns on the mental wellbeing of disabled children.²³ The lack of personalisation of instruction available to many young people affected by special educational needs, in their online lessons and home education, has acted as a barrier to learning during school closures.

The amount of time children spent on school-work during the Covid-19 lockdowns varied due to both the parent's ability to support remote schooling and what the schools offered. Children from high-income families spent 30% more time on home learning than those from poorer families.²⁴ Furthermore, the proportion of students estimated to need of intensive-catch-up support was higher in schools with higher proportions of students from ethnic minorities, which reflects that a higher proportion of ethnic minorities live in deprived areas.²⁵

We will work with schools to mitigate, as far as possible, the disproportionate impact of the Covid-19 lockdowns on the mental health, wellbeing and educational attainment of children and young people in low income families and children and young people affected by special educational needs and disabilities.

Keep people safe from domestic abuse.

²⁰ <https://www.childrenscommissioner.gov.uk/wp-content/uploads/2021/01/cco-the-state-of-childrens-mental-health-services-2020-21.p>

²¹ Young Minds. Coronavirus: Impact on young people with mental health needs Survey 2: Summer 2020. London: Young Minds, 2020

²² Education Policy Institute. Proposals from the Education Policy Institute. London: Education Policy Institute, 2020

²³ <https://disabledchildrenspartnership.org.uk/wp-content/uploads/2020/06/LeftInLockdown-Parent-carers%E2%80%99-experiences-of-lockdown-June-2020.pdf>

²⁴ http://bucks.ac.uk/__data/assets/pdf_file/0028/54649/Rain-Report.pdf

²⁵ The National Foundation for Educational Research. The challenges facing schools and pupils in September 2020

An estimated 2 million adults in England and Wales aged 16-59 years experienced domestic abuse in the year ending March 2018, equating to a prevalence rate of approximately 6 in 100 adults. Women were around twice as likely to have experienced domestic abuse than men.²⁶ Over the 12 months to December 2020, Enfield recorded 4,052 incidents of domestic abuse and during the first Covid-19 lockdown Enfield recorded the third highest level of domestic violence with injury in London.

In England, it is estimated that more than 1 in 4 gay men and lesbian women and more than 1 in 3 bi people report at least one form of domestic abuse since the age of 16.²⁷ Data shows that gay and bisexual men might be twice as likely to experience domestic abuse compared to heterosexual men. Evidence also suggests prevalence rates of domestic abuse may be higher for transgender people than any other section of the population.²⁸ We will ensure that our work to tackle domestic violence and abuse is inclusive of the needs of LGBT communities, by including LGBT-specific issues as part of our publicity campaigns and are considered as a part of all training on domestic violence and abuse.

We can take action locally by working with all relevant partners to offer a quick response and reduce risk to vulnerable adults and their children, through our new dedicated multi agency domestic abuse hub. We also have a Violence against Women and Girls Strategy which is informed by best practice and research and sets out the actions we are taking to prevent and tackle domestic violence and abuse.

Promote cohesion and tackle hate crime

Hate Crime in Enfield has decreased by 4.5% in the year ending December 2020, with 1,660 offences recorded when compared with 1,735 the previous year.²⁹

Islamophobic hate crime is the highest proportion of the hate crime strands; with 874 offences recorded over the year.³⁰ There was a 51% increase in racist hate crime over the 12 months to December 2020. As well as continuing to take action with our partners to tackle this crime, we can take action by supporting the Enfield faith groups and their faith communities to promote peace, mutual understanding and respect and to support and encourage others to do likewise.

Disability hate crime increased by the highest percentage (145.5%) in Enfield over the 12 months to December 2020, rising from 11 to 27 offences.³¹ We will continue to take action with our partners to reduce the risk of crime against vulnerable people with illness, disability and frailty.

Gypsies, Travellers and Roma people continue to face widespread prejudice and discrimination, to such an extent that it is often referred to as the 'last acceptable

²⁶ <https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/bulletins/domesticabuseinenglandandwales/yearendingmarch2018#understanding-domestic-abuse>

²⁷ http://www.galop.org.uk/wp-content/uploads/Galop_RR-v4a.pdf

²⁸ http://www.galop.org.uk/wp-content/uploads/Galop_RR-v4a.pdf

²⁹ The nature of hate crimes is complex and can have multiple aggravating factors.

³⁰ <https://www.met.police.uk/sd/stats-and-data/met/hate-crime-dashboard/>

³¹ <https://www.met.police.uk/sd/stats-and-data/met/hate-crime-dashboard/>

form of racism'.³² A study carried out by the Traveller Movement identified 77% of the Gypsy, Roma and Traveller Communities have been victims of hate speech or a hate crime. Although a clear causation can not be established between the experiences of hate crime and suicide, respondents in a study 'stressed the corrosive effect on mental health and wellbeing of being subject to hate speech and discrimination'.³³ We will work reduce harassment and discrimination towards Gypsy, Roma and Traveller communities, by promoting good relations between settled communities and the Gypsy, Roma and Traveller communities.

To promote cohesion and tackle cohesion, we will implement an education programme in schools, to build young people's understanding of diversity and create community spaces that promote cohesion and where we can celebrate the diversity, culture and heritage of our communities, through the inclusive design of all council-led regeneration schemes, including Meridian Water and Joyce and Snells.

We can act locally by working with the Enfield Hate Crime Forum to tackle extreme behaviour, encourage the reporting of hate crime and ensure that victims are supported through the criminal justice system. We have a Hate Crime Strategy which is informed by best practice and research, which sets out the actions we are taking to achieve this objective.

³² Traveller Movement, 2017

³³ http://bucks.ac.uk/__data/assets/pdf_file/0028/54649/Rain-Report.pdf