

Enfield Equality Impact Assessment (EqIA)

Introduction

The purpose of an Equality Impact Assessment (EqIA) is to help Enfield Council make sure it does not discriminate against service users, residents and staff, and that we promote equality where possible. Completing the assessment is a way to make sure everyone involved in a decision or activity thinks carefully about the likely impact of their work and that we take appropriate action in response to this analysis.

The EqIA provides a way to systematically assess and record the likely equality impact of an activity, policy, strategy, budget change or any other decision.

The assessment helps us to focus on the impact on people who share one of the different nine protected characteristics as defined by the Equality Act 2010 as well as on people who are disadvantaged due to socio-economic factors. The assessment involves anticipating the consequences of the activity or decision on different groups of people and making sure that:

- unlawful discrimination is eliminated
- opportunities for advancing equal opportunities are maximised
- opportunities for fostering good relations are maximised.

The EqIA is carried out by completing this form. To complete it you will need to:

- use local or national research which relates to how the activity/ policy/ strategy/ budget change or decision being made may impact on different people in different ways based on their protected characteristic or socioeconomic status;
- where possible, analyse any equality data we have on the people in Enfield who will be affected eg equality data on service users and/or equality data on the Enfield population;
- refer to the engagement and/ or consultation you have carried out with stakeholders, including the community and/or voluntary and community sector groups you consulted and their views. Consider what this engagement showed us about the likely impact of the activity/ policy/ strategy/ budget change or decision on different groups.

The results of the EqIA should be used to inform the proposal/ recommended decision and changes should be made to the proposal/ recommended decision as a result of the assessment where required. Any ongoing/ future mitigating actions required should be set out in the action plan at the end of the assessment.



Section 1 – Equality analysis details

Title of service activity / policy/ strategy/ budget change/ decision that you are assessing	Council Plan 2023-26: <i>Investing in Enfield</i>
Team/ Department	Chief Executive Corporate Strategy Service
Executive Director	Ian Davis, Chief Executive
Cabinet Member	Cllr Nesil Caliskan, Leader
Author(s) name(s) and contact details	Sarah Gilroy, Strategy and Policy Manager sarah.gilroy@enfield.gov.uk
Committee name and date of decision	Cabinet – 8 February 2023 Council – 23 February 2023

Date the EqIA was reviewed by the Corporate Strategy Service	N/A
Name of Head of Service responsible for implementing the EqIA actions (if any)	N/A
Name of Director who has approved the EqIA	Ian Davis, Chief Executive

The completed EqIA should be included as an appendix to relevant EMT/ Delegated Authority/ Cabinet/ Council reports regarding the service activity/ policy/ strategy/ budget change/ decision. Decision-makers should be confident that a robust EqIA has taken place, that any necessary mitigating action has been taken and that there are robust arrangements in place to ensure any necessary ongoing actions are delivered.

Section 2 – Summary of proposal

Please give a brief summary of the proposed service change / policy/ strategy/ budget change/project plan/ key decision

Please summarise briefly:

What is the proposed decision or change? What are the reasons for the decision or change?



What outcomes are you hoping to achieve from this change? Who will be impacted by the project or change - staff, service users, or the wider community?

What is the proposed decision or change?

The new Council Plan 2023-26: *Investing in Enfield* sets out a renewed vision for the Council as it continues to invest in the borough to deliver positive outcomes for residents.

The Plan sets out five overarching priorities; five principles; and six future outcomes we're working towards. The Plan will be used to inform and guide staff across the organisation on the Council vision and priorities and will be available online for all our stakeholders and partners to learn more about the Council and our goals.

The five priorities are:

- Clean and green places
- Strong, safe and healthy communities
- Thriving children and young people
- More and better homes
- An economy that works for everyone

Each priority is underpinned by a set of strategic high-level actions.

The way the Council engages and works with residents, businesses and partners and the way it makes decisions and allocates resources are fundamental to the success of the Council Plan. The Council Plan principles explain how the Council will work to deliver its vision for Enfield and are:

- Fairer Enfield
- Accessible and responsive services
- Financial resilience
- Collaboration and early help
- Climate conscious

What are the reasons for the decision or change?

The new Council Plan 2023-26 replaces our previous Council Plan 2020-22: *A Lifetime of Opportunities.* We have reflected on progress made on delivery this 2020 Plan; and on the challenges and opportunities for the borough and its residents for the next three years to create a new refreshed vision and priorities for 2023-26.

What outcomes are you hoping to achieve from this change?



We have identified six future outcomes that we are seeking to positively impact over the four years of the Council Plan and beyond. We have identified measurable indicators to help us understand progress on achieving these outcomes for all residents. Most of these indicators will show us how we're going on tackling long-standing challenges, such as poverty and health inequality, which are impacted by many complex factors, including those outside of our control. While these challenges can only be addressed by many institutions and individuals working together over the longer term, we are investing in Enfield and delivering our priorities with the aim of contributing towards improvement across all these indicators for the future. The six future outcomes are:

- Residents live happy, healthy and safe lives
- Residents have enough income to support themselves and their families
- Children and young people do well at all levels of learning
- Residents age well
- Residents live in good quality homes they can afford
- Residents live in a carbon neutral borough

Who will be impacted by the project or change?

The Council Plan will impact on all Enfield residents, staff and our partners.



Section 3 – Equality analysis

This section asks you to consider the potential differential impact of the proposed decision or change on different protected characteristics, and what mitigating actions should be taken to avoid or counteract any negative impact.

According to the Equality Act 2010, protected characteristics are aspects of a person's identity that make them who they are. The law defines 9 protected characteristics:

- 1. Age
- 2. Disability
- 3. Gender reassignment.
- 4. Marriage and civil partnership.
- 5. Pregnancy and maternity.
- 6. Race
- 7. Religion or belief.
- 8. Sex
- 9. Sexual orientation.

At Enfield Council, we also consider socio-economic status as an additional characteristic.

"Differential impact" means that people of a particular protected characteristic (eg people of a particular age, people with a disability, people of a particular gender, or people from a particular race and religion) will be significantly more affected by the change than other groups. Please consider both potential positive and negative impacts, and provide evidence to explain why this group might be particularly affected. If there is no differential impact for that group, briefly explain why this is not applicable.

Please consider how the proposed change will affect staff, service users or members of the wider community who share one of the following protected characteristics.

Detailed information and guidance on how to carry out an Equality Impact Assessment is available <u>here</u>.



Age

This can refer to people of a specific age e.g. 18-year olds, or age range e.g. 0-18 year olds.

Will the proposed change to service/policy/budget have a **differential impact [positive or negative]** on people of a specific age or age group (e.g. older or younger people)?

Please provide evidence to explain why this group may be particularly affected. According to the 2021 Census, Enfield's population in March 2021 was estimated to be 330,000 (rounded to the nearest hundred).¹

Age breakdown of Enfield's population

Age group	Enfield population
0-4	21,300
5-9	22,800
10-14	24,100
15-19	21,300
20-24	19,100
25-29	21,200
30-34	23,100
35-39	24,000
40-44	24,600
45-49	22,700
50-54	22,700
55-59	21,100
60-64	17,100
65-69	12,800
70-74	11,200
75-79	8,200
80-84	6,500
85+	6,400

Children and young people

Enfield has higher proportions of residents aged under 20 than regional and national averages.

Priority One: Clean and green places

Road safety

Children are more vulnerable to being killed or seriously injured in road traffic incidents.

¹ ONS, <u>Population and household estimates, England and Wales: Census 2021</u>



Between 2018 and 2020, 30 children in Enfield were killed or seriously injured in road traffic incidents, a rate of 13.1 per 1,000 children, higher than the London average of $11.^{2}$

Air pollution

Young people are particularly vulnerable to the effects of air pollution. Long-term exposure to negative air quality can lead to reduced lung development, asthma, developmental problems and more wheezing and coughs in younger people.³

Physical activity

Children aged five to 18 are recommended to do at least 60 minutes of moderate intensity activity each day. In 2020/21, 31.8% of children and young people in Enfield were physically active, significantly lower than London (44.4%) and England (44.6%) averages.⁴

Delivery of this priority is expected to have a positive impact on children and young people, helping to improve air quality and increase physical activity rates through the following actions:

- Enhance biodiversity and protect our parks, woodlands, watercourses, wetlands, trees, shrubs and open spaces so that children and young people can benefit from them
- Enable active and low carbon travel including by introducing new cycle lanes, more pedestrian crossings and School Streets,
- Reduce carbon emissions from our buildings, street lighting, fleet and the goods and services we procure working towards a carbon neutral organisation by 2030

Priority Two: Strong, healthy and safe communities

Obesity

Children living in Enfield are more likely to be overweight or obese than regional and national averages.

In 2021/22, 25.3% of children in Reception in Enfield were classified as overweight or obese, higher than London (21.9%) and national (22.2%) averages.⁵

In 2021/22, 42.2% of children in Year 6 in Enfield were classified as overweight or obese, higher than London (40.5%) and national (37.8%) averages.⁶

² Office for Health Improvement & Disparities, <u>Children killed and seriously injured (KSI) on England's</u> <u>roads</u>, 2018-20

Public Health England, <u>Health matters: air pollution</u>, 2018

⁴ Office for Health Improvement & Disparities, <u>Percentage of physically active children and young</u> people, 2020/21

Office for Health Improvement & Disparities, Obesity Profile, 2021/22



Mental health and wellbeing

The mental health and wellbeing of young people have been significantly impacted by the pandemic. Published in February 2022, the Prince's Trust Youth Index which surveyed 2,106 16–25-year-olds reported that the happiness and confidence of young people is at the lowest point in the survey's 13-year history.⁷ Almost half (48%) of all young people report experiencing a mental health problem and more than a fifth (23%) of young people feel they will 'never recover' from the emotional impact of the pandemic.

Serious youth violence

Enfield has recorded a decline in the number of serious youth violence victims. In the year end to September 2022, a total of 278 serious youth violence victims were recorded in Enfield, representing a 16.7% decrease from the previous year. Enfield is now ranked 6th for number of serious youth violence victims compared to the 32 London boroughs after historically recording the highest number of serious youth violence victims.⁸

Our response

Our Council Plan sets out our vision for strong, healthy and safe communities and includes actions to tackle crime and antisocial behaviour; to prevent and tackle obesity; and improve the wellbeing and mental health of children and young people.

Delivery of this priority is expected to have a positive impact on children and young people, in particular the following actions:

- Improve feelings of safety and tackle crime and antisocial behaviour
- Improve our leisure and sports opportunities to enable more active lifestyles
- Work with our partners to provide high quality and accessible health services
- Support communities to access healthy and sustainable food

Priority Three: Thriving children and young people

Take up of funded early years places

Take up of funded early years places in Enfield is lower than national averages.⁹

Age group	Percentage registered with a childcare provider in 2021	Percentage registered with a childcare provider in 2019	National average 2021
Two-year-	49%	53%	62%

⁶ Office for Health Improvement & Disparities, Local Authority Health Profile, <u>Year 6: Prevalence of</u> <u>obesity</u>

⁷ The Prince's Trust, <u>Youth Index 2022</u>

⁸ Data provided by Enfield Council Community Safety Intelligence Team

⁹ Department for Éducation, Education provision: children under 5 years of age, 2021



olds			
Three-year- olds	75%	81%	87%
Four-year- olds	88%	89%	93%

Attainment¹⁰

In 2019 attainment of Enfield pupils at KS1 was below London and England averages.

	% pupils achieving the expected standard in reading, KS1	% pupils achieving the expected standard in writing, KS1	% pupils achieving the expected standard in maths, KS1
Enfield average	70.0	65.0	73.0
London	77.0	72.0	79.0
average			
England	75.0	69.0	76.0
average			

In 2019 attainment of Enfield pupils at KS2 was level with or above England averages but below London averages.

	% pupils achieving the expected standard in reading, KS2	% pupils achieving the expected standard in grammar, punctuation and spelling, KS2	% pupils achieving the expected standard in maths, KS2
Enfield average	73.0	80.0	81.0
London	78.0	84.0	84.0
average			
England	73.0	78.0	79.0
average			

There are attainment gaps for children and young people eligible for free school meals and those with special educational needs and disabilities which will be explored later in the EqIA.

Our response

Our Council Plan sets out our vision for thriving children and young people. Delivery of this priority is expected to have a positive impact on all children and young people:

- Help all children to have the best start in life
- Safeguard children and increase support in-borough for looked after children with complex needs
- Improve educational outcomes for all children and young people, by increasing educational attainment and continuing our efforts to reduce the number of

¹⁰ Enfield Council, Education Borough Profile



children and young people who are excluded from school

- Increase local education, play and leisure opportunities for children and young people with special educational needs and disabilities
- Engage children and young people in positive activities
- Involve young people in decisions that affect their lives

Priority Four: More and better homes

As of October 2022, there were 4,381 children in Enfield living in temporary accommodation.¹¹

The Council Plan sets out our vision for more and better homes. Delivery of this priority is expected to have a positive impact on children and young people, in particular children living in temporary accommodation. We also commit to providing a range of specialist housing for those who need it, including for care leavers aged 18 to 25.

Priority 5: An economy that works for everyone

Child poverty

Data from the Department of Work and Pensions shows that 15.9% of children under 16 in Enfield were living in relative poverty¹² in 2020/21.¹³ Most of these children (72%) live in families where at least one adult works. When children aged up to 19 years are added, nearly 17% are living in low-income households. 13% of under 16s and 14% of under 20s are estimated to be living in families with absolute low income.¹⁴

Levels of child poverty differ depending on which ward children are living in. 25.2% of children under 16 living in the former Edmonton Green ward are from relative low-income families, compared with 6.9% of children in the former Grange ward. 21% of children under 16 living in the former Edmonton Green ward are from absolute low-income families, compared with 6% of children in the former Grange ward.¹⁵

After accounting for housing costs, 33.7% of children living in Enfield were in poverty in 2020/21.¹⁶

Young people not in education, employment or training (NEET)

In 2021 (3-month average between December and February) 4.6% of 16-18-year-olds in

¹¹ Enfield Council

¹² Relative low income is defined as a family whose equivalised annual income is less than 60% of the current UK median.

¹³ Department for Work and Pensions, <u>Children in low income families: local area statistics 2014 to</u> 2021

¹⁴ Absolute low income is defined as a family whose equivalised annual income is less than 60% of the UK median in 2011.

¹⁵ Data is not yet available for the new wards

¹⁶ End Child Poverty



Enfield were not in education, employment or training (NEET) or not known. This is slightly higher than the NEET rate in 2020 of 4.1%. This is lower than the England average of 5.5% but slightly higher than the London average of 4%.¹⁷

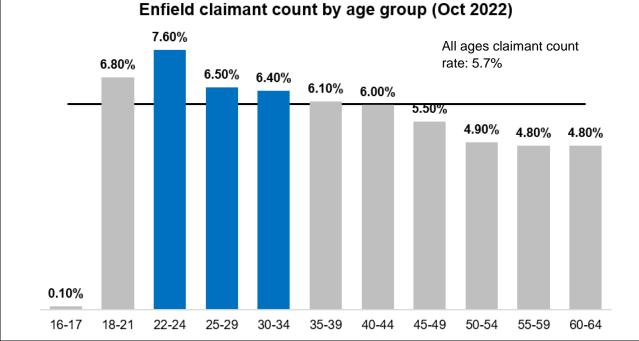
Employment prospects

One in five young people don't think that their employment prospects will ever recover from the pandemic, rising to 27% for young people who are NEET and 23% for young people from poorer backgrounds.¹⁸ 47% of young people say they never have enough money to save after paying bills. Half of all young people who have missed out on school or work due to the pandemic believe that they will be overlooked for jobs in the future.

According to The Prince's Trust Youth Index, wellbeing and confidence for those not in work, education or training (NEET) is considerably lower than for those in jobs or education. 34% of those who are NEET feel that they will fail in life, 12% more than their peers and 46% of this group said they felt hopeless because they were unemployed.¹⁹

Youth unemployment

In October 2022, 5.7% of working age people (16-64) in Enfield were unemployed. People aged 35 and under in the borough were more likely to be unemployed than other age groups. People aged 22 to 24 are the most likely to be unemployed with a claimant count rate of 7.6%.



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¹⁸ The Prince's Trust, <u>Youth Index 2022</u>

¹⁹ The Prince's Trust, Youth Index 2021



Our response

In the Council Plan we set out our vision for an economy that works for everyone. Delivery of this priority is expected to have a positive impact on all children and young people with a particularly positive impact on children living in low-income families, and young people who are NEET:

- Enable local people to develop skills to access good quality work
- Support local businesses and encourage inward investment in growing sectors which offer sustainable employment to local people
- Provide support and advice for residents on low incomes

People aged 65 and over

The proportion of over 65s in Enfield has grown by 16% in the last ten years.²⁰

Priority One: Clean and green places

Air pollution

Older people are particularly vulnerable to the adverse effects of air pollution, partly because they are more likely to have multiple long-term conditions occurring at the same time. Exposure to air pollution is also associated with accelerated cognitive decline in older people and the increased risk of stroke.²¹ Air pollution in London is largely caused by road traffic.

Road safety

Older people may be more likely to experience mobility impairment, affecting movement and reaction times, and some may use mobility aids for walking.

Our response

The Council Plan sets out our vision for clean and green places. Delivery of this priority is expected to have a positive impact on older people, in particular the following actions:

- Keep our streets and public spaces clean and welcoming. This includes installing more seating areas.
- Enable active and low carbon travel which will reduce the number of vehicles on our roads and decrease emissions from road traffic resulting in improved air quality.
 - Additional and improved space for pedestrians is expected to have a positive impact on older people who may find it more difficult to negotiate narrow or crowded footways.

²⁰ ONS, Population and household estimates, England and Wales: Census 2021

²¹ Impact on Urban Health, <u>Air pollution and older people</u>



Priority Two: Strong, healthy, and safe communities

Health

Long-term conditions are more prevalent in older people (58% of people over 60 compared to 14% under 40).²² According to research, two-thirds of adults aged over 65 are expected to be living with multiple health conditions (multi-morbidity) by 2035. Seventeen percent would be living with four or more diseases, double the number in 2015. One-third of these people would have a mental illness like dementia or depression.²³

Enfield has a higher than average mortality rate from all cardiovascular diseases for residents aged 65 years. In 2020, 1,203 per 100,000 people in Enfield aged 65+ died as a result of cardiovascular disease, higher than London (932.8) and England (1,007) averages.²⁴ The main risk factors for cardiovascular disease are diabetes and hypertension. 8.2% of residents (age 17+) in Enfield have diabetes, higher than London (6.7%) and England (7.1%) averages.²⁵ 13% of residents (all ages) in Enfield have hypertension, higher than London (10.8%) but slightly lower than England (13.9%) averages.²⁶ The risk of developing these conditions can be reduced through lifestyles changes such as eating a healthy diet and exercising regularly.

Mental health and loneliness

36% of older people (5.8 million) have said that they feel more anxious since the start of the pandemic, with 43% of older people saying they feel less motivated to do things they eniov since the start of the pandemic.²⁷

Living alone is a major risk factor for loneliness. According to ONS data, in 2021 36.8% of people in Enfield aged 65 and over are estimated to live in a single person household, higher than London (32.2%) averages.

Digital inclusion

12% of people aged between 65 and 74 years, and 40% of people aged over 75 years, say they do not use the internet.²⁸ Some elderly people reported to Age UK that they find it more difficult to do some things because they aren't online, and they feel they are being left behind or missing out. For those who are keen to develop digital skills, Age UK

²² The King's Fund, Long-term conditions and multi-morbidity

²³ National Institute for Health and Care Research, <u>Multi-morbidity predicted to increase in the UK</u> over the next 20 years, 2018 ²⁴ Office for Health Improvement & Disparities, <u>Mortality rate from all cardiovascular diseases, ages</u>

⁶⁵⁺ years, 2020 ²⁵ Office for Health Improvement & Disparities, <u>Diabetes: QOF prevalence (17+)</u>, 2020/21

²⁶ Office for Health Improvement & Disparities, Hypertension: QOF prevalence (all ages), 2020/21

²⁷ Age UK, Impact of Covid-19 on older people's mental and physical health: one year on

²⁸ Age UK, Living in a digital world after Covid-19 – the experience of older people who don't live their lives online, December 2021



recommended ongoing support, tailored to their needs and preferences.

Crime

While research shows that those aged 65+ are less at risk of crime overall than other groups, some crime types – such as those linked to physical, mental, or financial abuse - disproportionately affect older people.²⁹

Our response

The Council Plan sets out our vision for strong, healthy and safe communities. Delivery of this priority is expected to have a positive impact on older people, in particular the following actions:

- Improve feelings of safety and tackle crime and antisocial behaviour
- Protect vulnerable adults from harm and deliver robust early help and social care services. This includes providing residents with support to connect people digitally through our libraries and investing in innovative smart technology to enable adult social care users to stay happier, safer and more independent.
- Work with partners to provide high quality and accessible health services •
- Improve our leisure and sports opportunities to enable more active lifestyles, helping to reduce the risk of developing certain long-term conditions
- Connect people through culture, helping to reduce social isolation and improve physical and mental health and wellbeing

Priority Four: More and better homes

Our housing programme will seek to provide housing for people with additional and specialist needs, including elderly people. These homes will be affordable, safe, accessible, and energy efficient. This will also include creating more care facilities for the growing elderly population in our borough.

Priority Five: An economy that works for everyone

Povertv

The number of pensioners living in poverty is increasing. In 2019/20, 2.1 million (18%) were living in relative poverty after housing costs, an increase from 1.6 million in 2013/14.30

Our response

The Council Plan sets out our vision for an economy that works for everyone. Delivery of this priority is expected to have a positive impact on residents aged 65+ who are living in

²⁹ Her Majesty's Inspectorate of Constabulary and Fire & Rescue Services, <u>The poor relation: The</u> police and CPS response to crimes against older people, July 2019

Age UK, Poverty in later life, January 2022



poverty, in particular through the following action:

• Provide support and advice for residents on low incomes. This includes maximising the income of residents by encouraging take up of benefits, including Pension Credit.

Mitigating actions to be taken

The Council Plan 2023-26 is expected to have a positive impact on residents from all age groups with particular positive impacts for children and young people and those aged 65+.

Disability

A person has a disability if they have a physical or mental impairment which has a substantial and long-term adverse effect on the person's ability to carry out normal day-day activities.

This could include: physical impairment, hearing impairment, visual impairment, learning difficulties, long-standing illness or health condition, mental illness, substance abuse or other impairments.

Will the proposed change to service/policy/budget have a **differential impact [positive or negative]** on people with disabilities?

Please provide evidence to explain why this group may be particularly affected. The 2011 census provides the latest data on disability which covers the whole population. At the 2011 census, 47,979 (15.4%) of Enfield residents reported a longterm health problem or disability. More recent data on disability among the working age population estimated that in the year ending December 2020, 52,700 (nearly 25%) Enfield residents aged 16-64 had a disability, higher than London (17.9%) and England (22.4%).³¹

Principle: Fairer Enfield

The Council Plan includes a principle of Fairer Enfield that will inform our work to deliver transformation in the borough and help us make the right decisions. This section details how, through the delivery of our Fairer Enfield Equality, Diversity and Inclusion Policy and eight equalities objectives, we will create an equal and inclusive borough where all residents, service users and Council staff are supported to fulfil their potential, are treated equally and with respect and are actively involved in shaping the decisions that affect their workplace and wider community.

Priority Two: Strong, healthy and safe communities

³¹ Enfield Council, <u>Borough Profile</u>, 2021

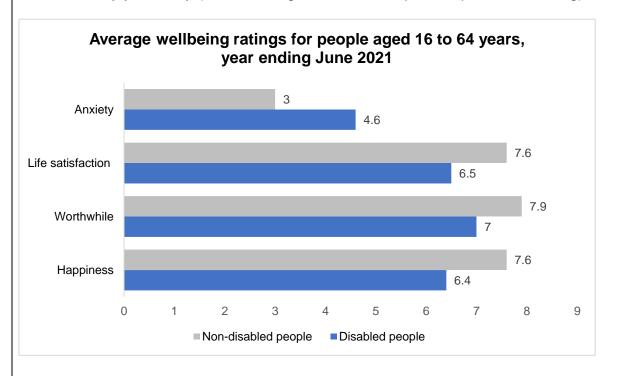


Mental health and wellbeing

According to national data from March 2022, on average disabled people aged 16 to 64 years had poorer ratings than non-disabled people on all four personal wellbeing measures, with the greatest disparity in average anxiety levels.³²

The four personal wellbeing measures are as follows:

- Life satisfaction (out of 10, higher numbers equal better wellbeing)
- Feeling that the things done in life are worthwhile (out of 10, higher numbers equal better wellbeing)
- Happiness yesterday (out of 10, higher numbers equal better wellbeing)



Anxiety vesterday (out of 10, higher numbers equate to poorer wellbeing)

According to national data from 2020/21, loneliness was significantly higher for people with a limiting long-term illness or disability. 41% of people with a limiting long-term illness or disability reported feeling lonely 'often/always' or 'some of the time', compared to 21% for people without a limiting long-term illness or disability.³³

Anti-social behaviour

³² ONS, <u>Outcomes for disabled people in the UK</u>, 2021

³³ Department for Digital, Culture, Media & Sport, <u>Community Life Survey</u>, 2020/21



According to national data, disabled people aged 16 years and over (43.4%) were more likely to have experienced anti-social behaviour in the year ending March 2020 than non-disabled people (39%).³⁴

Hate crime

In the year ending October 2022 there were 13 disability hate crime offences in Enfield.³⁵

Our response

Our Council Plan sets out our vision for strong, healthy and safe communities. Delivery of this priority is expected to have a positive impact on disabled people, in particular through the following actions:

- Improve feelings of safety and tackle crime and antisocial behaviour
- Protect vulnerable adults from harm and deliver robust early help and social care services
- Work with partners to provide high quality and accessible health services. Our outcome measures for this will include mental wellbeing as well as physical health.

Priority Three: Thriving children and young people

Children and young people with special educational needs and disabilities (SEND)

In Enfield, the most recent data from 2020/21 shows that there are 58,472 school age children and young people in the borough. 10.0% of these pupils receive SEN support and 4.3% have an Education, Health and Care Plan (EHCP).³⁶ The proportion of pupils with an EHCP in Enfield is higher than London (3.8%) and national (3.7%) averages.

According to the Education Policy Institute, on average pupils with SEND (without an EHCP) are already almost 10 months behind, and pupils with an EHCP are 15 months behind their peers by the age of 5. By the end of their secondary school education, the gap widens further and pupils with SEND (without an EHCP) are 2 years behind, and those with an EHCP are on average over 3 years behind their peers.³⁷

We can see the impact of this in data from Enfield's schools where attainment of pupils with SEN is consistently below attainment of pupils without SEN at all stages of education. For example, the latest available data from 2019 shows that 75.7% of pupils in Enfield without SEN achieved a good level of development at early years foundation

³⁴ ONS, <u>Disability and crime</u>, 2020

³⁵ Metropolitan Police, <u>Crime Dashboard</u>

³⁶ Department for Education, <u>Special educational needs in England: Pupils in all schools by type of SEN provision</u>, 2021
³⁷ Education Policy Institute, Edit Education All Schools and All Scho

³⁷ Education Policy Institute, Fair Education Alliance and Unbound Philanthropy, <u>Education in England</u> <u>Annual Report 2020</u>



stage, compared to 25.9% of pupils with SEN support and 6.3% of pupils with an EHCP.³⁸ At KS4 level, only 4.9% of pupils with an EHCP and 24.2% of pupils with SEN support achieved a 5+ in English and Maths, compared to 46.7% of pupils without SEN.³⁹

In Enfield pupils with SEN support have a disproportionately higher chance of being excluded. In 2019/20 60% of pupils permanently excluded and 29.4% of pupils with fixed term exclusions were receiving SEN support.⁴⁰

Our response

Our Council Plan sets out our vision for thriving children and young people. Delivery of this priority is expected to have a positive impact on children and young people with special educational needs and disabilities, in particular through the following actions:

- Help all children to have the best start in life
- Safeguard children and increase support in-borough for looked after children with complex needs
- Improve educational outcomes for all children and young people
- Increase local education, play and leisure opportunities for children and young people with special educational needs and disabilities
- Engage children and young people in positive activities (this includes developing inclusive universal youth services)
- Involve young people in decisions that affect their lives (associated policy under development to deliver on this includes how to involve children and young people with SEND)

Priority Four: More and better homes

Housing tenure

Disabled people are more likely to live in the social rented sector. According to the English Housing Survey 2020/21, over half (55%) of households in the social rented sector had one or more household members with a long-term illness or disability.⁴¹

Housing conditions

Research published by homelessness charity Shelter in 2021 found that households with household members who were affected by disability (45%) were significantly more likely to be living in homes with poor conditions than households with no disabled household members (23%). This includes damp, thermal inefficiency, hazards in the home or issues with structural integrity.⁴²

³⁸ Department for Education, Early years foundation stage profile results, 2018/19

³⁹ Department for Education, <u>Key stage 4 performance</u>, 2019

⁴⁰ Enfield Council Knowledge and Insight Hub, Schools exclusions 2019/20 analysis

⁴¹ Department for Levelling Up, Housing and Communities, English Housing Survey, 2020/21

⁴² Shelter, <u>Denied the right to a safe home: Exposing the housing emergency</u>, 2021



Our response

Our priority around more and better homes is expected to have a positive impact on disabled people, in particular through the following actions:

- Build and facilitate more good quality homes that local people can afford
- Deliver low carbon new build homes and facilitate retrofitting of existing homes, • increasing energy efficiency and reducing fuel poverty
- Create well-connected, digitally enabled and well-managed neighbourhoods
- Invest in and improve our council homes
- Drive up standards in the private rented sector •
- Provide a range of specialist housing for those who need it, including homes for people with learning disabilities, mental health needs and physical disabilities.

Priority Five: An economy that works for everyone

Employment

Disabled people in Enfield face lower levels of employment. In 2020/21, it was estimated that 38.2% of disabled people in Enfield were in employment, lower than London (55.1%) and national (55%) averages. People affected by disability have an employment rate that is 32.6 percentage points lower than that of people who are not affected by disability.⁴³ In the UK, disabled people with severe or specific learning difficulties (26.2%) and autism (29.0%) had the lowest employment rates.⁴⁴

In 2020/21, disabled people in the UK were more likely (11.3%) than non-disabled people (8.7%) to be employed in elementary occupations and were less likely to work in the three highest-skilled occupations. Disabled people were also more likely to work part-time (32.5%) than non-disabled people (21.8%).⁴⁵

We are, however, seeing comparatively good employment outcomes for service users of Adult Social Care. The Equals Employment Service is part of Adult Social Care and provides support to adults with learning disabilities to gain and sustain paid employment. In 2020/21, Enfield had the highest proportion in London of working age people (16.8%) who receive support for their learning disability in paid employment. This was the fourth highest proportion nationally and significantly higher than the London (6.1%) and national (5.1%) averages. 46

Pay

⁴³ Department for Work and Pensions, <u>The employment of disabled people</u>, 2021. N.B. At a local authority level the confidence intervals for this data are quite broad due to the relatively small sample ⁴⁴ ONS, <u>Outcomes for disabled people in the UK</u>, 2021

⁴⁵ ONS, <u>Outcomes for disabled people in the UK</u>, 2021

⁴⁶ NHS, Measures from the Adult Social Care Outcomes Framework, 2020-21



In 2021, the disability pay gap in the UK was 13.8% with disabled employees earning a median of £12.10 per hour compared with £14.03 an hour for non-disabled employees. In 2021, disabled employees with autism had the largest pay gap to non-disabled people with no long-lasting health conditions, with their median pay being 33.5% less. Those with severe or specific learning difficulties (29.7% less), epilepsy (25.4% less), or mental illness or other nervous disorders (22.1%), also had a large pay gap to non-disabled employees with no long-lasting health conditions.⁴⁷

Education

In the UK disabled people aged 21 to 64 years were almost three times as likely to have no qualifications (13.3%) than non-disabled people (4.6%). Disabled people aged 21 to 64 years were also more likely to have GCSE grades C and higher as their highest form of qualification (23.3%), in comparison with non-disabled people (17.4%).⁴⁸

Poverty

Disabled people are more likely to be living in poverty than non-disabled people.

According to data published by think tank the Joseph Rowntree Foundation, the poverty rate for disabled people is 32%, 12 percentage points above those who are not disabled. The difference is even more significant for working-age adults: those who are disabled are more than twice as likely to live in poverty than those who are not (38% and 17% respectively).⁴⁹

Research published by disability equality charity Scope in 2019 reported on the extra costs faced by disabled adults and families with disabled children.⁵⁰ They found that disabled adults face, on average, extra costs of £583 per month and families with disabled children face extra costs of £581 per month. These extra costs are driven by factors such as specialist equipment and home adaptations; higher energy use; and inaccessibility of public transport resulting in greater use of taxis.

Scope have also highlighted the significant impact of the cost of living crisis on disabled people, in particular rising energy costs.⁵¹ National research highlights that disabled people are more likely to report feeling worried about the cost of living crisis. According to ONS survey data collected between April and May 2022 over four in five (82%) of disabled people reported feeling worried about the rising costs of living compared with 75% of non-disabled people. Disabled people were also more likely to be very worried (35%) about the rising costs of living than non-disabled people (22%).⁵²

⁴⁷ ONS, <u>Disability pay gaps in the UK</u>, 2021

⁴⁸ ONS, Outcomes for disabled people in the UK, 2021

⁴⁹ Joseph Rowntree Foundation, <u>UK Poverty 2022: The essential guide to understanding poverty in</u>

the UK, 2022 ⁵⁰ Scope, <u>The Disability Price Tag 2019</u>

⁵¹ Scope, <u>Disabled people hit hardest in the biggest cost-of-living crisis in a generation</u>, February 2022

⁵² ONS, Worries about the rising costs of living, Great Britain: April to May 2022



Research published by think tank the Resolution Foundation in January 2023 found that the gap in median household income between adults with a disability (£21,405) and without (£27,766) was 30% in 2020/21.53 When income from disability benefits is excluded, the gap rises to 44%.

According to the research 48% of disabled people have cut back on energy use (compared to 32% of the non-disabled population) and 31% of disabled people have reduced their expenditure on food (compared to 18% of non-disabled people) due to rising prices.

Our response

Our Council Plan sets out our vision for an economy that works for everyone, in relation to support to tackle debt and access relevant benefits and grants; skills support; and inclusivity of our town centres. Delivery of this priority is expected to have a positive impact on disabled people, in particular through the following actions:

- Enable local people to develop skills to access good quality work
- Provide support and advice for residents on low incomes
- Develop town centres that are vibrant, healthy and inclusive

Mitigating actions to be taken

The Council Plan 2023-26 is expected to positively impact Enfield residents who are affected by disability.

Gender Reassignment

This refers to people who are proposing to undergo, are undergoing, or have undergone a process (or part of a process) to reassign their sex by changing physiological or other attributes of sex.

Will this change to service/policy/budget have a differential impact [positive or **negative]** on transgender people?

Please provide evidence to explain why this group may be particularly affected.

For the first time in 2021, the Census asked a voluntary question on gender identity to respondents aged 16 years or over. People were asked "Is the gender you identify with the same as your sex registered at birth?" and had of the option of selecting "Yes", or selecting "No" and writing in their gender identity.⁵⁴

⁵³ Resolution Foundation, <u>Costly differences: Living standards for working-age people with disabilities</u>, January 2023 ⁵⁴ ONS, <u>Gender identity, England and Wales: Census 2021</u>



Gender identity	Enfield population aged 16 years and over	Percentage of residents aged 16 years and over
Gender identity the same as their sex registered at birth	232,329	90.34%
Gender identity different from their sex registered at birth but no specific identity given	1,652	0.64%
Trans woman	518	0.2%
Trans man	486	0.19%
Non-binary	74	0.03%
Another gender identity	58	0.02%
Did not answer	22,065	8.58%

In Enfield 91.42% of residents aged 16 years and over responded to the question.

Cross-cutting theme: Fairer Enfield

The Council Plan includes a principle of Fairer Enfield that will inform our work to deliver transformation in the borough and help us make the right decisions. This section details how, through the delivery of our Fairer Enfield Equality, Diversity and Inclusion Policy and eight equalities objectives, we will create an equal and inclusive borough where all residents, service users and Council staff are supported to fulfil their potential, are treated equally and with respect and are actively involved in shaping the decisions that affect their workplace and wider community. One of our eight equalities objectives is to **improve the wellbeing and celebrate of our LGBT communities.** This objective is expected to support trans people living in Enfield to feel included, valued and safe.

Priority Two: Strong, healthy and safe communities

Crime

National data suggests that transgender people are at greater risk than the general population of being victims of a crime. Data from the Crime Survey for England and Wales (CSEW), found that transgender people (30.7%) were more likely than cisgender people (20.7%) to have been victims for all CSEW crime and personal crime in the year ending March 2020.⁵⁵

Hate crime

⁵⁵ ONS, <u>Crime in England and Wales: Annual Trend and Demographic Tables</u>, year ending March 2020. N.B. The Crime Survey for England and Wales is a face-to-face victimisation survey in which people resident in England and Wales are asked about their experiences of a range of crimes in the 12 months prior to the interview.



A report published by Galop in 2020 presents the findings of a survey of 227 transgender people on transphobic hate crimes and prejudice.⁵⁶ In the 12 months prior to completing the survey, 93% of respondents stated they had experienced transphobia and 81% of respondents had experienced a form of transphobic hate crime. Only 14% of respondents reported their experience to the police, suggesting that transphobic hate crime remains significantly underreported.

In the year ending October 2022 there were 11 transphobic hate crime offences in Enfield, a slight increase from the previous year where there were 8 transphobic hate crime offences.⁵⁷

Domestic abuse

According to Stonewall research from 2018 more than a quarter (28%) of trans respondents in a relationship had faced domestic abuse from a partner in the last 12 months.⁵⁸

Health and wellbeing

According to Stonewall research from 2018 LGBT people are at a higher risk of experiencing common mental health problems than the general population. Two-thirds of trans people (67%) had experienced depression in the last year. Almost half of trans people (46%) had thought about taking their own life in the last year.⁵⁹

According to the National LGBT Survey from 2017 21% of trans respondents said their specific needs were ignored or not taken into account when they accessed, or tried to access, healthcare services in the 12 months preceding the survey. 18% said they were subject to inappropriate curiosity and 18% also said they avoided treatment for fear of discrimination or intolerant reactions.⁶⁰

Our response

Our Council Plan sets out our vision for strong, healthy and safe communities. Delivery of this priority is expected to have a positive impact on transgender people, in particular through the following actions:

- Improve feelings of safety and tackle crime and antisocial behaviour
- Work with our partners to provide high quality and accessible health services

Our Fairer Enfield objective around **promoting safer and stronger communities by encouraging the reporting of hate crime and reducing repeat incidents** is also expected to have a positive impact on transgender people who are more likely to

⁵⁶ Galop, <u>Transphobic Hate Crime Report</u>, 2020

⁵⁷ Metropolitan Police, <u>Crime Dashboard</u>

⁵⁸ Stonewall, <u>LGBT in Britain: Trans report</u>, 2018

⁵⁹ Stonewall, <u>LGBT in Britain: Health report</u>, 2018

⁶⁰ Government Equalities Office, <u>National LGBT Survey Summary Report</u>, July 2018



experience hate crime as a result of their gender identity.

Priority Four: More and better homes

Trans people are at a disproportionate risk of homelessness. Stonewall research from 2018 found that one in four trans people had experienced homelessness at some point in their lives.⁶¹

Our Council Plan sets out our vision to deliver more and better homes. Delivery of this priority is expected to have a positive impact on transgender people, supporting them to access good quality housing that meets their needs across a range of tenures.

Mitigating actions to be taken

The Council Plan 2023-26 is expected to positively impact transgender residents.

Marriage and Civil Partnership

Marriage and civil partnerships are different ways of legally recognising relationships. The formation of a civil partnership must remain secular, where-as a marriage can be conducted through either religious or civil ceremonies. In the U.K both marriages and civil partnerships can be same sex or mixed sex. Civil partners must be treated the same as married couples on a wide range of legal matters.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on people in a marriage or civil partnership?

Please provide evidence to explain why this group may be particularly affected.

All residents are expected to be positively impacted by the Council Plan regardless of their marital status.

Mitigating actions to be taken

The Council Plan 2023-26 is expected to positively impact Enfield residents regardless of their marital status.

⁶¹ Stonewall, <u>LGBT in Britain: Trans report</u>, 2018



Pregnancy and maternity

Pregnancy refers to 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.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on pregnancy and maternity?

Please provide evidence to explain why this group may be particularly affected.

In 2020, there were 4,086 live births in Enfield.⁶²

Socio-economic deprivation

Research conducted by the National Maternity and Perinatal Audit found that socioeconomic deprivation is a risk factor for adverse pregnancy outcomes. The analysis found that 24% of stillbirths, 19% of preterm births and 31% of cases of foetal growth restriction⁶³ were attributed to socio-economic inequality. Possible reasons for these disparities include women from deprived neighbourhoods being at a disadvantage due to pollution, poor housing, social isolation, limited access to maternity and health care, insecure employment and stressful live events.⁶⁴

The Council Plan aims to tackle poverty in Enfield through delivery of our five priorities which is expected to have a positive impact on residents who are pregnant or in the maternity period and experiencing socio-economic disadvantage.

Priority One: Clean and green places

There is a growing body of evidence that links maternal exposure to air pollution and adverse pregnancy outcomes such as miscarriage, low birth weight and pre-term birth.⁶⁵

The Council Plan sets out our vision for clean and green places. Delivery of this priority is expected to have a positive impact on residents who are pregnant or in the maternity period, in particular through the following actions which will help to reduce air pollution and contribute to the creation of a carbon neutral borough by 2040:

• Enhance biodiversity and protect our parks, open spaces, woodlands, watercourses, wetlands, trees and shrubs

⁶² ONS, <u>Births in England and Wales</u>, 2020

⁶³ Foetal growth restriction is a condition in which babies are smaller than expected for their gestational age.

 ⁶⁴ National Maternity & Perinatal Audit, <u>Adverse pregnancy outcomes attributable to socioeconomic</u> and ethnic inequalities in England: a national cohort study, 2021
 ⁶⁵ Royal College of Obstetricians and Gynaecologists, <u>Outdoor air pollution and pregnancy in the UK</u>,

⁶⁵ Royal College of Obstetricians and Gynaecologists, <u>Outdoor air pollution and pregnancy in the UK</u>, June 2021



- Enable active and low carbon travel
- Facilitate reuse of materials, reduce waste and increase recycling rates
- Reduce carbon emissions from our buildings, street lighting, fleet and the goods and services we procure

Priority Two: Strong, healthy and safe communities

Health

In Q2 2021/22, 98% of babies received a new baby review within 14 days, against an annual target of 95%.⁶⁶

In 2020 the under 18s teenage conception rate in Enfield was 14.7 per 1,000 women aged 15-17, higher than the London (9.8) and England (13.0) average.⁶⁷

Between 2018 and 2020 the infant mortality rate in Enfield was 3.5 per 1,000 live births, higher than the London average (3.4) but lower than the England average (3.9).⁶⁸

In 2020/21, 5.3% of mothers in Enfield were smoking at the time of delivery, higher than the London average (4.6%) but lower than the England average (9.6%).⁶⁹

Crime

Pregnancy can be a trigger for domestic abuse, and existing abuse may get worse during pregnancy or after giving birth. Research from Safe Lives, a charity dedicated to ending domestic abuse, highlights that around 30% of domestic abuse begins during pregnancy, while 40-60% of women experiencing domestic abuse are abused during pregnancy.⁷⁰ According to data from Women's Aid, in 2020/21 5.9% of women accessing domestic abuse community-based services and 7.3% of women in refuge services were pregnant.⁷¹

Food

During pregnancy, poor diets lacking in key nutrients can cause anaemia, preeclampsia⁷², haemorrhage and death in mothers. They can also lead to stillbirth, low birthweight and developmental delays for children.⁷³

⁶⁶ Enfield Council

⁶⁷ ONS, <u>Conceptions in England and Wales</u>, 2020

⁶⁸ Office for Health Improvement & Disparities, <u>Local Authority Health Profile: Infant mortality rate</u>, 2018-2020

⁶⁹ Office for Health Improvement & Disparities, <u>Public Health Outcomes Framework</u>

⁷⁰ Safe Lives, <u>A Cry for Health: Why we must invest in domestic abuse services in hospitals</u>, 2016

⁷¹ Women's Aid, <u>The Domestic Abuse Report 2022: The Annual Audit</u>, 2022

⁷² Pre-eclampsia is a blood pressure condition that affects some pregnant woman and can be serious if not treated.

⁷³ UNICEF, <u>Maternal nutrition</u>



Our Council Plan sets out our vision for strong, healthy and safe communities. Delivery of this priority is expected to have a positive impact on residents who are pregnant or in the maternity period, in particular the following actions:

- Improve feelings of safety and tackle crime and antisocial behaviour
- Work with partners to provide high quality and accessible health services
- Support communities to access healthy and sustainable food

Priority Three: Thriving children and young people

Our Council Plan sets out our vision for thriving children and young people. Delivery of this priority is expected to have a positive impact on residents who are pregnant or in the maternity period, in particular the following actions:

• Help all children to have the best start in life

Priority Four: More and better homes

Research produced by charities Birthrights and Birth Companions highlighted the negative impact unsuitable or temporary housing can have on women who are pregnant or in the maternity period, causing and/or exacerbating mental health problems and jeopardising access to care.⁷⁴

The Council Plan sets out our vision to deliver more and better homes. Delivery of this priority is expected to have a positive impact on residents who are pregnant or in the maternity period, supporting them to access good quality housing that meets their needs across a range of tenures.

Priority Five: An economy that works for everyone

The Council Plan sets out our vision for an economy that works for everyone. Delivery of this priority will have a positive impact on residents who are pregnant or in the maternity period, particularly those who are experiencing socio-economic disadvantage:

- Enable local people to develop skills to access good quality work
- Provide support and advice for residents on low incomes

Principles: Early help

Under our principles, we commit to providing support as early as possible to prevent problems escalating. We will work with our communities and partners to help everyone in Enfield to be resilient, overcome challenges and lead happy and fulfilling lives. This includes actions around providing clear information, advice and support to residents who are pregnant or in the maternity period.

Mitigating actions to be taken

The Council Plan 2023-26 is expected to positively impact Enfield residents who are

⁷⁴ Birthrights and Birth Companions, <u>Holding it all together: Understanding how far the human rights of</u> women facing disadvantage are respected during pregnancy, birth and postnatal care, 2020



pregnant or in the maternity period.

Race

This refers to a group of people defined by their race, colour, and nationality (including citizenship), ethnic or national origins.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on people of a certain race?

Please provide evidence to explain why this group may be particularly affected.

We are increasingly one of the most diverse areas of London with all the benefits this brings our communities, culture, heritage and local economy. However, ethnic minority groups continue to experience inequality in housing, education, employment, health and criminal justice.⁷⁵

According to the 2021 Census, 40% of Enfield residents were born outside of the UK.⁷⁶

Census 2021 ethnicity data⁷⁷

Ethnicity	Estimated population size	Percentage of total population
Asian or Asian British	37,973	11.5%
Bangladeshi	8,123	2.5%
Chinese	2,611	0.8%
Indian	11,870	3.6%
Pakistani	3,674	1.1%
Any other Asian background	11,615	3.5%
Black, Black British, Caribbean or African	60,512	18.3%
African	36,463	11%
Caribbean	16,990	5.1%
Any other Black, Black British or Caribbean background	7,059	2.1%
Mixed or multiple ethnic groups	19,558	5.9%

⁷⁵ The term 'ethnic minority' or 'ethnic minority group' refers to all ethnic groups except the white British group. This includes white minorities, such as Gypsy, Roma and Irish Traveller groups.

⁷⁶ ONS, International migration, England and Wales: Census 2021

⁷⁷ ONS, Ethnic group: England and Wales, Census 2021



White and Black Caribbean	5,165	1.6%
White and Black African	2,994	0.9%
White and Asian	3,818	1.2%
Any other Mixed or multiple ethnic background	7,581	2.3%
White	171,884	52.1%
English, Welsh, Scottish, Northern Irish or British	103,140	31.3%
Irish	5,969	1.8%
Gypsy or Irish Traveller	374	0.1%
Roma	1,121	0.3%
Any other White background	61,280	18.6%
Other Ethnic Group	40,058	12.1%
Arab	2,535	0.8%
Any other ethnic group	37,523	11.4%

Priority One: Clean and green places

Transport

Data from the National Travel Survey shows that Black people are most likely out of all ethnic groups to live in a household with no access to a car or van. In the 5 years from 2015 to 2019 40% of Black people lived in a household with no access to a car or van, compared to 17% of White people and a 19% average across all ethnic groups.⁷⁸

Access to green space

National research highlights inequality in access to green space. A survey carried out by walking charity Ramblers and YouGov in 2020 found that people who identify as being from a Black, Asian or minority ethnic background (39%) are less likely to live within a 5-minute walk of a green space than people from White ethnic backgrounds (58%).⁷⁹ People from Black, Asian or minority ethnic backgrounds (46%) also reported being less likely to have a variety of different green spaces within walking distance of where they live than people from White ethnic backgrounds (58%).

Air pollution

⁷⁸ Department for Transport, <u>Ethnicity facts and figures: Car or van ownership</u>, December 2020

⁷⁹ Ramblers, <u>The grass isn't greener for everyone: Why access to green space matters</u>, 2020



According to analysis by the Greater London Authority (GLA), areas in London where people from a non-white⁸⁰ background are more likely to live are more likely to have higher levels of air pollution. In 2019, annual average concentrations of nitrogen dioxide were on average between 16 and 27 per cent higher in areas where non-white people were most likely to live compared with areas where white people were most likely to live.⁸¹

Our response

The Council Plan sets out our vision for clean and green places. Delivery of this priority is expected to have a positive impact on residents from all ethnic groups, and in particular ethnic minority groups who may be more likely to experience lack of access to green space, live in areas where air pollution is higher, and not have a car. This includes the following actions:

- Enhance biodiversity and protect our parks, woodlands, watercourses, wetlands, trees, shrubs and open spaces
- Enable active and low carbon travel
- Reduce carbon emissions from our buildings, street lighting, fleet, and the goods and services we procure

Priority Two: Strong, healthy and safe communities

Health inequalities

National and local data and research highlights health inequalities between ethnic minority and white groups, and between ethnic minority groups.⁸² As highlighted by the King's Fund, the causes of these health inequalities are multiple and include higher levels of socio-economic deprivation experienced by ethnic minorities.⁸³

The Covid-19 pandemic has had a disproportionate impact on ethnic minority communities, who have experienced higher infection and mortality rates than the white population.

Obesity

Childhood obesity rates are higher among Black and Asian children.⁸⁴

⁸⁰ Several terms are routinely used by government departments, public bodies and the media to refer to the collective ethnic minority population. This report reflects the language and terminology originally used in the studies to which we refer. However, we fully recognise the importance of the heterogeneity within these terms.

⁸¹ Greater London Authority, <u>Air Pollution and Inequalities in London: 2019 update</u>, 2021

⁸² The King's Fund, <u>The health of people from ethnic minority groups in England</u>, 2021

⁸³ The King's Fund, Ethnic health inequalities and the NHS: Driving progress in a changing system, 2021

⁸⁴ NHS Digital, <u>National Child Measurement Programme</u>, England, 2019/20



Ethnic group	Proportion of children aged 4-5 years who are obese	Proportion of children aged 10-11 years who are obese
White	9.6	19.4
British	9.7	19.0
Irish	10.9	20.4
Any other White background	9.1	22.5
Mixed	10.3	23.4
White and Black Caribbean	13.0	26.4
White and Black African	13.3	28.2
White and Asian	6.7	17.9
Any other mixed background	9.6	22.5
Asian	9.6	25.3
Indian	7.2	21.6
Pakistani	10.8	26.2
Bangladeshi	12.6	30.1
Any other Asian background	9.4	24.7
Black	15.0	29.7
Caribbean	13.1	30.3
African	15.9	30.5
Any other Black background	13.9	27.4
Chinese	4.5	19.6
Any other ethnic group	10.7	25.4

Long term conditions

South Asian ethnic groups have a higher incidence of and mortality from heart disease and stroke than White groups and develop heart disease at a younger age. Black ethnic groups have a lower risk of heart disease compared to the general population, but have a higher incidence of, and mortality from, hypertension and stroke.⁸⁵

The prevalence of diabetes is higher among South Asian and Black ethnic groups than in the White population and people in these groups develop the condition at a younger age. The risk of developing diabetes is up to six times higher in South Asian ethnic groups than in White ethnic groups and South Asian ethnic groups have a higher mortality from diabetes. Diabetes prevalence in Black ethnic groups is up to three times higher than in the White population and people in these groups have a higher mortality from diabetes.⁸⁶

Pregnancy and maternity

⁸⁵ The King's Fund, Ethnic health inequalities and the NHS: Driving progress in a changing system, 2021

⁸⁶ The King's Fund, <u>The health of people from ethnic minority groups in England</u>, 2021



Research conducted by the National Maternity and Perinatal Audit found that racial inequalities are a risk factor for adverse pregnancy outcomes. The analysis found that 12% of stillbirths, 1% of preterm births and 17% of cases of foetal growth restriction were attributed to racial inequality.⁸⁷

Compared with the white group, the rate of women dying in the UK between 2017 and 2019 during or up to one year after pregnancy was more than four times higher in the Black ethnic group, and almost double in the Asian and Mixed ethnic groups (although the number of such deaths is relatively low).⁸⁸

Mental health

In the year to March 2020, Black people were more than 4 times as likely as White people to be detained under the Mental Health Act.⁸⁹ This disparity is reflected at a local level. Between January – October 2021, 159 men were detained in hospital in Enfield for mental health, 28% of which were from Black ethnic backgrounds.⁹⁰ However, Black men make up only 17% of the borough's population.

Covid-19 vaccine uptake

As of March 2022, vaccination rates in Enfield were highest among the Asian-Indian and White British ethnic groups, with 88% and 84% having received their first dose respectively. People from the Gypsy Roma Traveller (GRT) community had the lowest vaccination rate with 34% having received their first dose. People from the Black

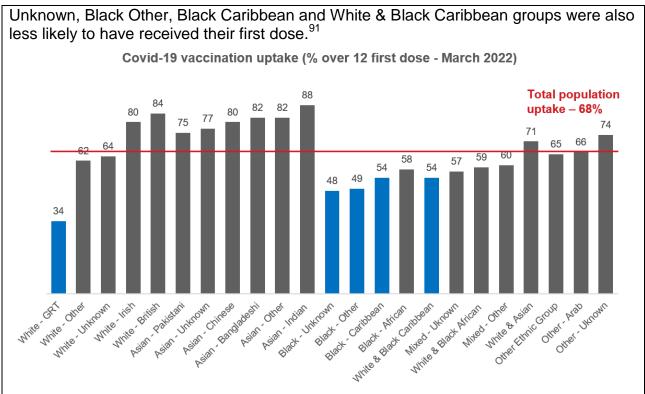
⁸⁷ National Maternity & Perinatal Audit, <u>Adverse pregnancy outcomes attributable to socioeconomic</u> and ethnic inequalities in England: a national cohort study, 2021

⁸⁸ MBRRACE-UK, <u>Saving Lives</u>, <u>Improving Mothers' Care</u>: <u>Lessons learned to inform maternity care</u> from the UK and Ireland Confidential Enquiries into Maternal Deaths and Morbidity</u>, 2017-19, November 2021

⁸⁹ ONS, <u>Detentions under the Mental Health Act</u>, March 2021

⁹⁰ Enfield Council, Public Health Intelligence Team, 2021





Stop and search

In England and Wales people from a Black ethnic group were significantly more likely to be stopped and searched than people from a White ethnic group. Between April 2020 and March 2021 there were 7.5 stop and searches for every 1,000 White people, compared with 52.6 for every 1,000 Black people.⁹² Enfield residents from Black or Black British backgrounds are the most frequently stopped and searched ethnic group by police.⁹³ Between July 2021 and June 2022, 29.7 per 1,000 Black residents were stopped and searched compared to 15.2 for every 1,000 White residents.

Our response

The Council Plan sets out our vision for strong, healthy and safe communities. Delivery of this priority and accompanying actions is expected to have a positive impact on all ethnic groups, with a particularly positive impact on minority ethnic groups experiencing inequalities in health and criminal justice:

- Improve feelings of safety and tackle crime and antisocial behaviour
- Improve our leisure and sports facilities to enable more active lifestyles
- Work with partners to provide high quality and accessible health services
- Support communities to access healthy and sustainable food

Priority Three: Thriving children and young people

⁹¹ Enfield Council, Public Health Intelligence Team, March 2022

⁹² Home Office, <u>Ethnicity facts and figures: Stop and search</u>, May 2022

⁹³ Metropolitan Police, <u>Stop and Search Dashboard</u>, July 2021 to end June 2022



Education and attainment

The Spring 2021 School Census records 189 languages or dialects being spoken by pupils who live in Enfield.⁹⁴ 2021/22 school data from the Department for Education reveals that just over half of pupils (51.7%) in Enfield's schools have English as a first language – a lower percentage than in London (55.4%), and significantly lower than the average for England (80.1%).⁹⁵

The 5 largest ethnic groups in Enfield's schools are White British (19%), Black African (12%), White Turkish (11%), White Eastern European (9%) and Black Caribbean (4%).

When examining the educational attainment of children from these ethnic groups, in 2019, the number of children reaching the expected standard of reading, writing, maths at Key Stage 2 is highest for pupils from a White British background, (71.4%), and is lowest for pupils from an Eastern European background, (53.5%). When looking at average attainment 8 score, the lowest score in 2019 was students from White Eastern European ethnic groups (36.6), and the highest score on average were students from the White British ethnic groups (50.3), a gap of 13.7 points.⁹⁶

Free school meals

As of January 2022, 27% of pupils in Enfield were eligible for free school meals. Rates of free school meals eligibility in Enfield in 2022 were highest among pupils in the Traveller of Irish heritage (76%), White and Black Caribbean (41%) and Any other Black background ethnic groups. Rates were lowest among pupils of Chinese (6%) and Indian (9%) ethnic groups.⁹⁷

Children in need

Children in need are supported by children's social care due to safeguarding and welfare needs, including: children on child in need plans; children on child protection plans; looked after children; and disabled children.

As of June 2022, there were 714 children in Enfield with a Child in Need Plan. Of the children whose ethnicity has been recorded (697), the majority (79%) were from ethnic minority backgrounds. The highest proportion of children with Child in Need Plans were from White British (21%), Any other Black background (16%), Any other White background (15%) and Black African (15%) ethnic backgrounds.

⁹⁴ Enfield Council, <u>Borough Profile</u>, 2021

⁹⁵ Department for Education, <u>Schools, pupils and their characteristics</u>, 2021/22. N.B. data does not include independent schools

⁹⁶ Enfield Council Education Department

⁹⁷ Department for Education, <u>Schools, pupils and characteristics</u>, 2021/22

⁹⁸ Enfield Council, Children and Family Services, June 2022. N.B. Children whose ethnicity has not been recorded have not been included.



As of June 2022, there were 284 children in Enfield subject to a Child Protection Plan. The majority of children subject to a Child Protection Plan (70%) were from ethnic minority backgrounds. The highest proportion of children with Child Protection Plans were from White British (30%), Any other White background (19%), Any other Black background (15%), and Black African (13%) ethnic backgrounds.⁹⁹

As of June 2022, there were 397 looked after children in Enfield. The majority of looked after children (71%) were from ethnic minority backgrounds. The highest proportion of looked after children were from White British (29%), Any other White background (21%), Any other Black background (16%), and Black African (10%) ethnic backgrounds.¹⁰⁰

Convictions and cautions

In 2020/21, there were 161 cautions or sentences for young people aged 10-17 in Enfield. Proportionately, in Enfield, more young people from Black ethnic backgrounds (38%) were convicted of youth offences than other ethnic groups in 2020/21.

Our response

The Council Plan sets out our vision for thriving children and young people. Delivery of this priority is expected to have a positive impact on children and young people from all ethnic groups, across all the actions.

Priority Four: More and better homes

Housing conditions

In the 3 years to March 2019, an average of 3% of households in England were overcrowded, that is, they had fewer bedrooms than they needed to avoid undesirable sharing. White British households (2%) were significantly less likely to be overcrowded than households from all other ethnic groups. The households with the highest rates of overcrowding were in the Bangladeshi (24%), Pakistani (18%), Black African (16%), Arab (18%) and Mixed White and Black African (14%) ethnic groups.¹⁰¹

Research published by homelessness charity Shelter in 2021 found that Black (56%) and Asian (49%) households were significantly more likely to be living in homes with poor conditions than White households (33%), such as damp, thermal inefficiency, hazards in the home or issues with structural integrity.¹⁰²

Homelessness

⁹⁹ Enfield Council, Children and Family Services, June 2022. N.B. Children whose ethnicity has not been recorded have not been included.

¹⁰⁰ Enfield Council, Children and Family Services, June 2022. N.B. Children whose ethnicity has not been recorded have not been included.

¹⁰¹ Ministry of Housing, Communities and Local Government, <u>Overcrowded households</u>, 2020

¹⁰² Shelter, <u>Denied the right to a safe home: Exposing the housing emergency</u>, 2021



Residents from a Black ethnic background are disproportionately affected by homelessness. In 2020/21, 35% of households in Enfield owed a homelessness prevention or relief duty were from a Black or Black British ethnic background.¹⁰³ Residents from Black ethnic groups make up 15% of the population in Enfield.¹⁰⁴

Our response

The Council Plan sets out our vision to deliver more and better homes. Delivery of this priority and accompanying actions is expected to have a positive impact on residents from all ethnic groups with a particular positive impact on residents from Black and Asian households who are more likely to be homeless or experience poor housing conditions:

- Build and facilitate more good quality homes that local people can afford
- Deliver low carbon new build homes and facilitate retrofitting of existing homes
- Create well-connected, digitally enabled and well-managed neighbourhoods
- Invest in and improve our council homes
- Drive up standards in the private rented sector •

Priority Five: An economy that works for everyone

Poverty

Poverty rates between ethnic groups vary significantly, with some groups at a much higher risk of poverty than others. Nationally, according to research from the Joseph Rowntree Foundation, poverty rates for the Bangladeshi and Pakistani ethnic groups are higher than other ethnic groups. The poverty rate for the Bangladeshi ethnic group is 53% and 48% for the Pakistani ethnic group, compared to the white group where it is **19%**.¹⁰⁵

Employment

The unemployment rate for people from a White ethnic background was 3.1% between January and March 2022 compared to 7.1% for people from minority ethnic backgrounds. People from Bangladeshi (9.3%) and Black/African/Caribbean/Black British (9%) backgrounds had the highest unemployment rates.¹⁰⁶

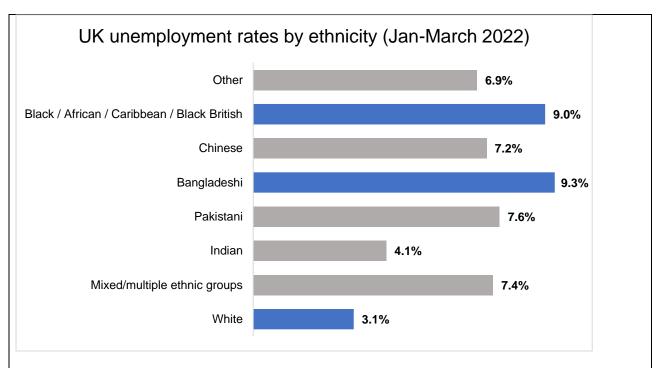
¹⁰⁴ Enfield Council, <u>Borough Profile</u>, 2021

¹⁰³ Department for Levelling Up, Housing & Communities, <u>Statutory homelessness in England</u>, 2020/21

¹⁰⁵ Joseph Rowntree Foundation, <u>UK Poverty 2022: The essential guide to understanding poverty in</u> the UK, 2022

ONS, Labour market status by ethnic group, May 2022





Impact of Covid-19

Black and minority ethnic workers were disproportionately impacted by the pandemic and are now experiencing a slower recovery than white workers.

Workers from Black, Asian and Minority Ethnic (BAME) workers were more likely to work in sectors that shut down as a result of the Covid-19 pandemic, such as retail, passenger transport, accommodation and food, and arts and leisure. Of workers in the shutdown sectors, 15% are from BAME backgrounds, compared to a workforce average of 12%. Some shutdown sectors had a particularly high proportion of BAME workers. BAME workers made up 28% of the vulnerable jobs in the transport sector and 16% of the vulnerable jobs in the accommodation and food service sector.¹⁰⁷

For both white and BME¹⁰⁸ workers, the unemployment rate during the pandemic peaked in Q4 2020. The unemployment rate for white workers rose to 4.5%. The unemployment rate among BME workers rose faster and higher, reaching 9.8% in the same quarter.¹⁰⁹

As of Q4 2020/21 the unemployment rate for BME workers is 1.9 percentage points higher than it was pre-pandemic, for white workers it is 0.1 percentage points higher.

Insecure work

¹⁰⁷ House of Commons Women and Equalities Committee, <u>Unequal Impact? Coronavirus and BAME</u> <u>people: Third Report of Session 2019-21</u>, December 2020

 ¹⁰⁸ The term BME is used here to reflect terminology originally used in the study to which we refer.
 ¹⁰⁹ Trades Union Congress, <u>Jobs monitor – the impact of the pandemic on BME employment</u>, June 2022



A 2022 report by think tank, Work Foundation, found that people from ethnic minorities are more likely to be in severely insecure work than white workers (24% versus 19%).¹¹⁰ The gap is especially stark for men - almost 1 in 4 (23%) men from an ethnic minority were experiencing insecure work in 2021 compared to just over 1 in 8 (13%) of white men.¹¹¹

Pav

Nationally, coverage of the minimum wage varies among workers from different ethnic backgrounds. In 2019/20 coverage was highest for workers from Bangladeshi backgrounds (almost 14.5%), compared with 8.4% among White workers.¹¹² Coverage was also higher for workers from Pakistani backgrounds (13.4%) and from Black African, Caribbean and Black British backgrounds.

In 2020, the gap in median hourly pay between White employees and Black, Asian and minority ethnic group employees in London was 28.2%, significantly higher than that across the rest of England and Wales (5.5%).¹¹³ The highest pay gaps in London were among Pakistani employees (37%), Black African (36.8%) and Bangladeshi (34.4%) employees.¹¹⁴

Ethnic minority led businesses

42% of company directors in Enfield are non-UK nationals.¹¹⁵ Ethnic minority-led businesses are over-represented in sectors such as hospitality, retail and transport and as a result have been disproportionately impacted by the Covid-19 crisis.¹¹⁶

Our response

Our Council Plan sets out our vision for an economy that works for everyone. Delivery of this priority is expected to have a positive impact on residents from all ethnic groups, in particular those from minority ethnic groups who are more likely to be experiencing poverty and unemployment; and those who may be running their own small or medium sized business:

- Enable local people to develop skills to access good quality work
- Support local businesses and encourage inward investment in growing sectors which offer sustainable employment to local people

¹¹⁰ Severe insecurity is defined as workers experiencing involuntary part-time or involuntary temporary forms of work, or a combination of two or more of these factors: low-pay, part-time work and underemployment. ¹¹¹ Work Foundation, <u>The UK Insecure Work Index</u>, May 2022

¹¹² Low Pay Commission, Low pay and ethnicity, May 2021

¹¹³ Greater London Authority, London Datastore: Ethnicity Pay Gap. N.B. Ethnicity pay gap compares median pay for all Black Asian and minority ethnic groups with median pay for all White groups ¹¹⁴ N.B. Compared with White British

¹¹⁵ Enfield Council, <u>An Economy that Works for Everyone: Economic Development Strategy</u>, 2021

¹¹⁶ Centre for Research in Ethnic Minority Entrepreneurship, <u>Time to Change: A Blueprint for</u> Advancing the UK's Ethnic Minority Businesses, May 2022



Provide support and advice for residents on low incomes

Mitigating actions to be taken

The Council Plan 2023-26 is expected to positively impact on Enfield residents from all ethnic groups.

Religion and belief

Religion refers to a person's faith (e.g. Buddhism, Islam, Christianity, Judaism, Sikhism, Hinduism). 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.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on people who follow a religion or belief, including lack of belief?

Please provide evidence to explain why this group may be particularly affected.

Religion	Proportion of Enfield population
Christian	46.4%
Buddhist	0.5%
Hindu	3.1%
Jewish	1.1%
Muslim	18.6%
Sikh	0.4%
Other religion	3.1%
No religion	19.8%
Religion not stated	7.0%

Religious profile of Enfield (2021 Census)¹¹⁷

Principle: Fairer Enfield

The Council Plan includes a principle of Fairer Enfield that will inform our work to deliver transformation in the borough and help us make the right decisions. This section details how, through the delivery of our Fairer Enfield Equality, Diversity and Inclusion Policy and eight equalities objectives, we will create an equal and inclusive borough where all residents, service users and Council staff are supported to fulfil their potential, are treated equally and with respect and are actively involved in shaping the decisions that affect their workplace and wider community. Delivery of our Fairer Enfield Policy is expected to have a positive impact on residents of all religions and beliefs.

Priority Two: Strong, healthy and safe communities

¹¹⁷ ONS, <u>Religion, England and Wales: Census 2021</u>



Hate crime

Religious hate crime includes crimes motivated by prejudice based on religion or faith. In the year ending October 2022 there were 658 racist and religious hate crime offences in Enfield.¹¹⁸

Our response

Our Council Plan sets out our vision to sustain strong, healthy and safe communities. Delivery of this priority is expected to have a positive impact on people from all religions and beliefs, in particular the following action:

- Improve feelings of safety and tackle crime and antisocial behaviour (including hate crime)
- Connect people through culture helping to promote cohesion, mutual understanding and respect and celebrate the diversity and culture of our communities.

Priority Three: Thriving children and young people

The Council Plan sets out our vision for thriving children and young people. Delivery of this priority is expected to have a positive impact on children and young people of all religions and beliefs, in particular through the following action:

• Involve young people in decisions that affect their lives to allow them to shape their borough and ensure the decisions we make are inclusive.

Priority Five: An economy that works for everyone

The Council Plan sets out our vision for an economy that works for everyone. Delivery of this priority is expected to have a positive impact on children and young people of all religions and beliefs, in particular through the following action:

• Develop town centres that are vibrant, healthy and **inclusive**. This means that our town centres will represent and celebrate our diverse communities.

Mitigating actions to be taken

The Council Plan 2023-26 is expected to positively impact on Enfield residents of all religions and beliefs.

¹¹⁸ Metropolitan Police, <u>Crime Dashboard</u>



Sex

Sex refers to whether you are a female or male.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on females or males?

Please provide evidence to explain why this group may be particularly affected.

According to Census 2021 data, 52% of Enfield's population is estimated to be female and 48% male.¹¹⁹

Priority Two: Strong, healthy and safe communities

Health

Although life expectancy is higher for women in Enfield than men (reflecting national figures), women in Enfield spend on average a greater proportion of their lives in ill health. Women in Enfield spend on average 62.1 years of their life in good health, compared to 64.3 years for men.¹²⁰

Menopause

In Enfield, 20% of females are aged between 45-59 years old (menopause usually starts during the ages of 45 and 55).¹²¹ Menopause usually happens between the ages of 45 and 55 and can cause symptoms like anxiety, mood swings, brain fog, hot flushes and irregular periods.¹²² This can have a considerable impact on a women's life, including relationships and work.

Mental health and wellbeing

According to national data, women (20%) are more likely to experience common mental health conditions, such as anxiety or depression, than men (12.5%). While rates have remained relatively stable in men, this research found that prevalence was increasing in women. Young women in particular have been identified as a high-risk group, with over a quarter (26%) experiencing a common mental disorder compared to 9.1% of young men.¹²³

¹¹⁹ ONS, <u>Population and household estimates</u>, England and Wales: Census 2021

¹²⁰ Office for Health Improvement & Disparities, <u>Public Health Outcomes Framework</u>

¹²¹ ONS, Population and household estimates, England and Wales: Census 2021

¹²²NHS, <u>Menopause</u>

¹²³ NHS Digital, <u>Adult Psychiatric Morbidity Survey: Survey of Mental Health and Wellbeing, England</u>, 2014



Suicide rates in the UK are significantly higher among men than women. In 2020, threequarters of registered suicide deaths were for men.¹²⁴

Caring

Women are more likely to take on caring roles than men. According to national data from 2020/21, women are more likely to be informal carers, with 2.5 million women versus 1.7 million men.¹²⁵ Female carers are also more likely to work part-time, with 22% of women in comparison to 8% of men.

Domestic abuse

In the year ending January 2022 there were 6,276 domestic abuse incidents in Enfield.¹²⁶ Anyone can experience domestic abuse but women are more likely to be victims of domestic abuse than men.¹²⁷

Between May 2020 – December 2021, the Council's Domestic Abuse Hub received 242 contacts via phone calls and emails. Where gender was recorded, 141 contacts related to female victims and 12 related to male victims of domestic abuse. In relation to perpetrator gender, 119 calls were in relation to male perpetrators and 10 calls in relation to female perpetrators.

Safety

According to data from March 2022, more women (27%) than men (16%) reported they had experienced at least one form of harassment in the previous 12 months.¹²⁸ Women aged 16 to 34 years felt the most unsafe of any age and sex group using public transport alone after dark (58%).

Youth justice

In the year ending March 2021, 87% of children cautioned or sentenced were boys.¹²⁹

Our response

The Council Plan sets out our vision for strong, heathy and safe communities. Delivery of this priority is expected to have a positive impact on male and female residents:

• Improve feelings of safety and tackle crime and antisocial behaviour (including

¹²⁴ ONS, <u>Suicides in England and Wales: 2020 registrations</u>

¹²⁵ Department for Work and Pensions, <u>Family Resources Survey</u>, 2020/21

¹²⁶ Enfield Council, Community Safety Unit, 2022

¹²⁷ ONS, <u>Domestic abuse victim characteristics</u>, <u>England and Wales</u>, year ending March 2021

¹²⁸ ONS, <u>Perceptions of personal safety and experiences of harassment, Great Britain</u>: 16 February to 13 March 2022

¹²⁹ Youth Justice Board for England and Wales, <u>Youth justice statistics</u>, 2020/21



domestic abuse)

Work with our partners to provide high quality and accessible health services, including services that address health issues specific to men and women outlined above and mental health services

Priority 3: Thriving children and young people

In cases of Children in Need (CiN), child protection, care leavers and looked after children, a greater proportion are boys.

Our response

The Council Plan sets out our vision for thriving children and young people. Delivery of this priority is expected to have a positive impact on children and young people in Enfield regardless of their gender with a particular positive impact on boys who are more likely to have a safeguarding risk, in particular the following action:

Safeguard vulnerable children and increase support in-borough for looked after children with complex needs

Priority Four: More and better homes

According to national data, lone parent households with dependent children make up a higher proportion of households in the social rented sector than other tenures (18% compared to 3% of owner occupied households and 11% of private rented households).¹³⁰ According to ONS data, lone parents are significantly more likely to be women. In 2021, an estimated 86% of lone parents were women.¹³¹

Rough sleeping

During 2021/22, people seen rough sleeping in the borough were significantly more likely to be men than women, with 151 men and 30 women.¹³²

Our response

The Council Plan sets out our vision for more and better homes. Delivery of this priority is expected to have a positive impact on both men and women.

Priority 5: An economy that works for everyone

Poverty

¹³⁰ Department for Levelling Up, Housing and Communities, <u>English Housing Survey: Social rented</u> sector, 2020-21 ¹³¹ ONS, <u>Families and households</u>, 2021

¹³² Greater London Authority, <u>CHAIN Annual Report: Outer Boroughs</u>, 2021/22



According to data from the Joseph Rowntree Foundation, working age lone parent families have the highest poverty rates of any family type (49%).¹³³ Currently, 49 percent of children in single parent families are in poverty, compared with 25 percent of children in couple families. In 2022, 31 percent of working-age lone parents and thirty-five percent of their children are in "persistent poverty", which was considerably higher than for any other group.¹³⁴ Persistent poverty is defined as an individual experiencing poverty (a net household income below 60% of the median in that year) for at least 3 of the past 4 years.

Employment

Between January 2021 and December 2021, men aged 16 to 64 in Enfield (72.1%) were more likely to be in employment than women (68.1%), this is also reflected regionally and nationally.¹³⁵ Women are significantly more likely to work part time, with 38% of women in employment working part-time at the end of 2021, compared to 13% of men.¹³⁶

Pay disparity

The gross weekly pay of men in Enfield is significantly higher than for women. In 2021, male full-time workers in Enfield on average received £745.90 gross weekly pay, compared to £595.10 for women, a difference of £150.80 a week. This is significantly higher than the pay disparity in London (£94.90) and the UK (£97.40).¹³⁷

For both men and women, the proportion of residents' jobs that pay below the London living wage is one of the largest in London with men at 27.3% and women at 30.9%.¹³⁸

Our response

The Council Plan sets out our vision for an economy that works for everyone. Delivery of this priority is expected to have a positive impact on male and female residents, in particular the following actions are expected to have a positive impact on tackling issues disproportionately experienced by women:

- Enable local people to develop skills to access good quality work
- Provide support and advice for residents on low incomes

Mitigating actions to be taken

The Council Plan 2023-26 is expected to have a positive impact on all residents, regardless of their sex.

 ¹³³ Joseph Rowntree Foundation, <u>UK Poverty 2022: The essential guide to understanding poverty in the UK</u>, 2022
 ¹³⁴ Gingerbread, <u>The invisible family: The impact of the Covid-19 pandemic on single parents living in</u>

¹³⁴ Gingerbread, <u>The invisible family: The impact of the Covid-19 pandemic on single parents living in</u> London, June 2022 ¹³⁵ Namin Lobour Medicat Define Enfield

¹³⁵ Nomis, <u>Labour Market Profile: Enfield</u>

¹³⁶ House of Commons Library, Women and the UK economy, March 2022

¹³⁷ Nomis, <u>Labour Market Profile: Enfield</u>

¹³⁸ Trust for London https://www.trustforlondon.org.uk/data/low-pay-in-London-boroughs/



Sexual Orientation

This refers to whether a person is sexually attracted to people of the same sex or a different sex to themselves. Please consider the impact on people who identify as heterosexual, bisexual, gay, lesbian, non-binary or asexual.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on people with a particular sexual orientation?

Please provide evidence to explain why this group may be particularly affected.

For the first time in 2021, the Census included a voluntary question on sexual orientation for all respondents aged 16 and over.¹³⁹ The different sexual orientations that people could choose from included:

- Straight or heterosexual
- Gay or lesbian
- Bisexual
- Other sexual orientation (respondents were then asked to write in the sexual orientation with which they identified)

In Enfield, 90.3% of residents aged 16 and over responded to this question.

Sexual orientation	Enfield population aged 16 years and over	Percentage of Enfield residents aged 16 years and over
Straight or heterosexual	226,705	88.15%
Gay or lesbian	2,342	0.91%
Bisexual	2,073	0.81%
Pansexual	944	0.37%
Asexual	74	0.03%
Queer	35	0.01%
All other sexual orientations	151	0.06%
Not answered	24,858	9.67%

Principle: Fairer Enfield

The Council Plan includes a principle of Fairer Enfield that will inform our work to deliver transformation in the borough and help us make the right decisions. This section details how, through the delivery of our Fairer Enfield Equality, Diversity and Inclusion Policy

¹³⁹ ONS, <u>Sexual orientation</u>, England and Wales: Census 2021



and eight equalities objectives, we will create an equal and inclusive borough where all residents, service users and Council staff are supported to fulfil their potential, are treated equally and with respect and are actively involved in shaping the decisions that affect their workplace and wider community. One of our eight equalities objectives is to **improve the wellbeing and celebrate of our LGBT communities.** This objective is expected to support Lesbian, Gay and Bisexual (LGB) people to feel included, value and safe.

Priority Two: Strong, healthy and safe communities

Crime

National data suggests that LGB people are at greater risk than the general population of being victims of a crime. Data from the Crime Survey for England and Wales (CSEW), found that gay/lesbian people (21.2%) and bisexual people (21.5%) were more likely than heterosexual people (13.8%) to have been victims of all CSEW crime and personal crime in the year ending March 2020.¹⁴⁰

Hate crime

Anti-abuse charting Galop published a report on experiences of hate crime in Lesbian, Gay, Bisexual and Transgender+ (LGBT+) communities which involved a survey of 1166 LGBT+ people and 15 interviews. The research found that a large proportion of LGBT+ people (64% of respondents) have experienced hate crime, including verbal abuse, online abuse, harassment, sexual and physical violence. The research also reported that very few LGBT+ people reported their experiences of LGBT+ hate crime to the police or other relevant agencies, suggesting that LGBT+ hate crime remains significantly underreported.¹⁴¹

In the year ending October 2022 there were 92 homophobic hate crime offences in Enfield, an increase from the previous year where there were 64 homophobic hate crime offences.¹⁴²

Domestic abuse

Research conducted by Stonewall in 2018 found that more than one in ten LGBT people (11%) had faced domestic abuse from a partner in the last year.¹⁴³

Health and wellbeing

¹⁴⁰ ONS, <u>Crime in England and Wales: Annual Trend and Demographic Tables</u>, year ending March 2020. N.B. The Crime Survey for England and Wales is a face-to-face victimisation survey in which people resident in England and Wales are asked about their experiences of a range of crimes in the 12 months prior to the interview.

¹⁴¹ Galop, <u>Hate Crime Report 2021: Supporting LGBT+ victims of hate crime</u>, 2021

¹⁴² Metropolitan Police, <u>Crime Dashboard</u>

¹⁴³ Stonewall, <u>LGBT in Britain: Home and communities</u>, 2018



According to Stonewall research from 2018 one in eight LGBT people (13%) have experienced some form of unequal treatment from healthcare staff because they're LGBT.¹⁴⁴

The NHS has produced national data on health outcomes for LGB people.¹⁴⁵ In 2021, the prevalence of limiting longstanding illness was higher among LGB adults (26%) than heterosexual adults (22%).

Health-related behaviours

LGB adults (32%) were more likely to drink at levels which put them at increased or higher risk of alcohol-related harm (14 units in the last week), than heterosexual adults (24%).

LGB adults (27%) were also more likely than heterosexual adults (18%) to be current smokers.

Mental health and wellbeing

LGB adults had lower average mental wellbeing scores on the Warwick-Edinburgh Mental Wellbeing Scale¹⁴⁶ (48.9) compared with heterosexual adults (51.4), with LGB women reporting the lowest well-being scores (47.3).

The Covid-19 pandemic has also had a negative impact on the mental health and wellbeing of LGBT people. In London, almost 4 in 5 (79%) of LGBT people said that their mental health had been negatively impacted by the Covid-19 lockdown.¹⁴⁷

Our response

Our Council Plan sets out our vision for strong, healthy and safe communities. Delivery of this priority is expected to have a positive impact on LGB adults, in particular the following actions:

- Improve feelings of safety and tackle crime and antisocial behaviour (including hate crime and domestic abuse)
- Work with partners to provide high quality and accessible health services

Priority Four: More and better homes

Housing

According to Stonewall research from 2018, one in six LGB people have experienced homelessness at some point in their lives.

¹⁴⁴ Stonewall, <u>LGBT in Britain: Health Report</u>, 2018

¹⁴⁵ NHS Digital, <u>Health and health-related behaviours of Lesbian, Gay and Bisexual adults</u>, July 2021

¹⁴⁶ The Warwick-Edinburgh Mental Wellbeing Scale is a set of 14 questions scored from 1 to 5 designed to monitor mental wellbeing at a population level. The total score ranges from 14 to 70.

¹⁴⁷ LGBT Hero, <u>The LGBTQ+ Lockdown Wellbeing Report</u>, 2020



Our response

Our Council Plan sets out our vision to deliver more and better homes. Delivery of this priority is expected to have a positive impact on LGB people who experience a disproportionate risk of homelessness.

Mitigating actions to be taken

The Council Plan 2023-26 is expected to positively impact Enfield residents regardless of their sexual orientation.

Socio-economic deprivation

This refers to people who are disadvantaged due to socio-economic factors e.g. unemployment, low income, low academic qualifications or living in a deprived area, social housing or unstable housing.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on people who are socio-economically disadvantaged?

Please provide evidence to explain why this group may be particularly affected.

As of 2019, Enfield was the 74th most deprived local authority in England overall and the 9th most deprived London borough.¹⁴⁸

Priority One: Clean and green places

Transport

According to research undertaken by Transport for London in 2019, the most commonly used form of transport for Londoners with lower household incomes (below £20,000) is walking.¹⁴⁹ The bus is the next most commonly used form of transport with 69% of people with lower household incomes taking the bus at least once a week compared to 59% of all Londoners.

Air pollution

According to an analysis commissioned by the Greater London Authority (GLA), communities which have higher levels of deprivation are more likely to be exposed to

¹⁴⁸ Enfield Council, <u>Borough Profile</u>, 2021

¹⁴⁹ Transport for London, <u>Travel in London: Understanding our diverse communities</u>, 2019



higher levels of air pollution. In 2019, the mean annual average NO2 concentration for the most deprived areas was 3.8 μ g/m3, 13% higher than for the least deprived areas.¹⁵⁰

Our response

The Council Plan sets out our vision for clean and green places. Under this priority we commit to enabling more active and low carbon travel through delivery of School Streets, more pedestrian crossings, cycle lanes, etc. Delivery of this action is expected to have a positive impact on all residents with a particularly positive on residents facing socio-economic disadvantage who are more likely to walk and use public transport to get around. Furthermore, road transport is the greatest contributor to air pollution in London. Increasing low carbon and active travel is therefore expected to have a positive impact on residents experiencing socio-economic disadvantage by reducing road traffic and associated air pollution.

Priority Two: Strong, healthy and safe communities

Food poverty

In 2021/22 12,805 food parcels were distributed to Enfield residents from food banks in the Trussell Trust's network, a 28% increase from 2019/20 where 10,003 parcels were distributed (levels were significantly higher in 2020/21 as a result of the pandemic). 5,287 of these parcels were distributed to children.¹⁵¹ This was the 7th highest level among the London boroughs. North Enfield foodbank doubled its support between 2019-2020 and 2021-22, with 1500 households accessing food aid in Enfield on a weekly basis. Low income and benefit changes/delays are the two main reasons for accessing food support.

Adverse health outcomes linked to poor diet include dental caries, being overweight or obese, type 2 diabetes, cardiovascular disease and some cancers.¹⁵²

Low-income households are less able to afford some food groups, such as fruit and vegetables. Healthy foods, such as fruit and vegetables, are typically more expensive and their price has increased more significantly recently than unhealthy foods. The poorest 20% need to spend 47% of their disposable income on food to meet dietary recommendations, compared to 11% for the richest 20%.

The Council Plan sets out our vision for strong, healthy and safe communities. Delivery of this priority is expected to have a positive impact on residents facing socio-economic disadvantage, in particular the following actions:

• Support communities to access healthy and sustainable food

¹⁵⁰Logika Noise Air Quality Consultants, <u>Air Pollution and Inequalities in London: 2019 update</u>, 2021

¹⁵¹ Trussell Trust, <u>End of year statistics</u>, 2021/22

¹⁵² UK Parliament POSTnote, <u>Diet related health inequalities</u>, December 2022



Priority Three: Thriving children and young people

Free school meals

As of January 2022, 27% of pupils in Enfield were eligible for free school meals.¹⁵³ The proportion of pupils eligible for free school meals in Enfield is slightly higher than the London average of 25% and England average of 23%.¹⁵⁴

Attainment of pupils receiving free school meals is consistently below overall attainment of all pupils. The latest available data from 2019 shows that 60.7% of pupils receiving free school meals achieved a good level of development at Early Years Foundation Stage, compared to 69.7% of all pupils.¹⁵⁵

KS1 (2019)

Pupil characteristics	% of pupils achieving expected standard in reading	% of pupils achieving expected standard in writing	% of pupils achieving expected standard in maths
All pupils	71%	66.2%	73.6%
Pupils eligible for free school meals	62.2%	56.2%	63.6%

KS4 (2019)

Pupil characteristics	% of pupils achieving 5+ in English and maths
All pupils	49.6%
Pupils eligible for free school meals	28.5%

The Council Plan sets out our vision for thriving children and young people. Delivery of this priority is expected to have a positive impact on children and young people facing socio-economic disadvantage, in particular the following actions:

- Help all children to have the best start in life
- Safeguard children and increase support in-borough for looked after children with complex needs
- Improve educational outcomes for all children and young people
- Engage children and young people in positive activities

Priority Four: More and Better Homes

¹⁵³ Data provided by Knowledge and Insight Hub

¹⁵⁴ Department for Education, <u>Schools pupils and their characteristics</u>, 2021/22

¹⁵⁵ Enfield Council, Education Borough Profile 2020



Homelessness and rough sleeping

In 2021/22, 183 people were seen sleeping rough in Enfield, this includes 120 new rough sleepers.¹⁵⁶

In 2021/22, we received 4,013 homelessness applications.¹⁵⁷ The cost of living crisis is starting to contribute to an increase in homelessness applications with 1,041 applications in Q1 2022/23, a 32% increase from Q1 2021/22 where there were 783 applications.

Temporary accommodation

As of October 2022, there were 3,094 households in Enfield living in temporary accommodation.¹⁵⁸

Housing needs register

As of March 2022, there were 5,978 households on the housing needs register.

Social housing tenants

According to the Census 2021, 10% of households in Enfield live in local authority owned properties and 7% live in registered provider homes.¹⁵⁹

Fuel poverty and energy efficiency

The Department for Business, Energy and Industrial Strategy estimated that in 2020 (latest data available) the number of fuel-poor households in Enfield was 16,030, representing 12.4% of households In Enfield.¹⁶⁰ This is higher than both the Outer London average of 11.5% and the London average of 11.4%.

According to national data, households living in the private rented sector are more likely to live in dwellings with lower energy efficiency rating (EER).¹⁶¹ 39% of private renters lived in homes with an energy efficiency rating of C, compared with 63% of social renters. 10% of social renters lived in dwellings with an EER band E and 4% lived in dwellings with the poorest energy efficiency (EER bands F or G).

¹⁵⁶ Greater London Authority, <u>CHAIN Annual Report: Outer Boroughs</u>, 2021/22

¹⁵⁷ Enfield Council, 2022

¹⁵⁸ Enfield Council, 2022

¹⁵⁹ ONS, <u>Housing, England and Wales: Census 2021</u>

¹⁶⁰ Department for Business, Energy & Industrial Strategy, <u>Fuel poverty sub-regional statistics</u>, 2020

¹⁶¹ Department for Levelling Up, Housing and Communities, <u>English Housing Survey: Private rented</u> <u>sector</u>, 2020-21. The Energy Efficiency Rating uses an A to G banding system where band A represents high energy efficiency and band G represents low energy efficiency.



Homes that are cold due to fuel poverty exacerbate health inequalities. Cold homes can cause and worsen respiratory conditions, cardiovascular diseases, poor mental health, dementia, hypothermia and problems with childhood development.¹⁶²

The Council Plan sets out our vision for more and better homes. Delivery of this priority is expected to have a positive impact on residents experiencing socio-economic disadvantage, in particular the following actions:

- Build and facilitate more good quality homes that local people can afford to reduce numbers of people living in temporary accommodation
- Deliver low carbon new build homes and facilitate retrofitting of existing homes to improve energy efficiency and reduce fuel poverty
- Create well-connected, digitally-enabled and well-managed neighbourhoods
- Invest in and improve our council homes
- Drive up standards in the private rented sector to create more secure tenancies and better-quality homes

Priority Five: An economy that works for everyone

Enfield has historically had lower employment and economic activity rates than London and UK.

Unemployment

As of October 2022, 5.7% of Enfield's working-age population were officially unemployed, higher than London (4.7%) and UK (3.6%) averages.¹⁶³ Enfield's unemployment rate was the seventh highest of the 32 London boroughs.

Unemployment is estimated to be highest in the five wards of Edmonton Green (9.9%), Lower Edmonton (9.6%), Upper Edmonton (7.6%), Jubilee (7.6%) and Ponders End (7.4%). Unemployment rates are estimated to be lowest in Grange Park (1.9%), Cockfosters (2.1%), Bush Hill Park (2.6%), Oakwood (3.2%) and Town (3.3%).

Pay

Low-paid workers were significantly impacted by the pandemic. They were far more likely to be furloughed, particularly in the sectors most exposed to lockdown measures such as hospitality and leisure.¹⁶⁴ Low paid workers also reported to the Low Pay Commission concerns over health and safety, mental wellbeing and surviving on low levels of sick pay during the pandemic.

¹⁶² Institute of Health Equity, <u>Fuel poverty, cold homes and health inequalities in the UK</u>, August 2022

¹⁶³ Enfield Council, November 2022

¹⁶⁴ Low Pay Commission, National Minimum Wage: Low Pay Commission Report, 2021



Brent and Enfield were the boroughs in 2021 that saw the highest proportions of residents' jobs being paid less than the London Living Wage with 29.5% and 29% respectively. The largest increases in London residents suffering from low pay in the last decade were in Enfield, Havering, and Haringey.¹⁶⁵

Qualifications

Approximately 10,000 people in Enfield do not have a qualification (4.5%) which is lower than London (5.5%) and national (6.6%) averages. 192,700 people have a level 1 qualification (87.5%) achieving similar levels to the London and national averages. 67.9% of people in Enfield have a level 3 qualification, lower than the London average (71.4%), but higher than the national average (61.5%). 49.2% have achieved a level 4 qualification, which is again, lower than the London average of 58.9%, but higher than the national average (43.5%).¹⁶⁶

Household income

As of 2022, Enfield's median household income was £41,100, the 10^{th} lowest of the London boroughs. 11.4% of households in Enfield have an annual gross income under £15,000, higher than the London average (10.1%). 35% of Enfield households earn less than £30,000 per annum, the 10^{th} highest proportion in London.¹⁶⁷

Household receiving help with housing costs¹⁶⁸

As of August 2022, 44,539 households in Enfield were receiving state support with their rental costs via Housing Benefit or Universal Credit:

- o 37% are tenants in social rented sector
- o 62% are tenants in PRS
- 1% are households whose rental sector is unknown or homeowners who have successfully claimed UC to assist with mortgage interest payments

Council Tax Support

As of Q2 2022/23 35,478 households in Enfield were receiving Council Tax support, representing one third of households. Enfield has the highest Council Tax support caseload in London.¹⁶⁹

Cost of living crisis

¹⁶⁸ Enfield Council, 2022

¹⁶⁵ Trust for London, <u>Low pay in London boroughs</u>, 2021

¹⁶⁶ Nomis, <u>Labour Market Profile – Enfield</u>, 2021

¹⁶⁷ Enfield Council, <u>Borough Profile</u>, 2022

¹⁶⁹ Enfield Council, 2022



According to national data, social renters are less likely to have savings than private renters and owner occupiers which leaves them more vulnerable to experiencing financial difficulties as a result of the cost of living crisis. In 2020/21, 69% of social renters had no savings, compared to 19% of owner occupiers and 45% of private renters.¹⁷⁰

Research by economic research organisation Institute for Fiscal Studies highlighted that inflation for poorest households could increase faster for the poorest households as they spend a they spend a much larger share of their total household spending on gas and electricity.¹⁷¹

Research by the Joseph Rowntree Foundation from October/November 2022 found that of those in the bottom 40% of incomes, 7.3 million households (62%) are currently going without essentials such as food, warm home, toiletries or showers.¹⁷²

The Council Plan sets out our vision for an economy that works for everyone. This priority aims to support local businesses, develop our town centres, encourage investment in the borough and the development of skills. Delivery of this priority is expected to have a positive impact on residents experiencing socio-economic disadvantage, in particular the following actions:

- Enable local people to develop skills to access good quality work
- Support local businesses and encourage inward investment in growing sectors • which offer sustainable employment to local people
- Provide support and advice for residents on low incomes

Health inequalities

There is a significant body of research that links socio-economic disadvantage with poor physical and mental health outcomes.¹⁷³ The conditions in which people grow, live, work and age can make it harder for them to live healthier lives.

Health inequalities exist between the east and west of the borough. As of 2021, a man living in Upper Edmonton can expect to live 7.3 years less than a man living in Grange ward. A woman living in Upper Edmonton can expect to live 8.5 years less than a woman living in Highlands ward.¹⁷⁴

As of 2021, a man living in Edmonton Green can expect to live 12.4 years less in good

¹⁷⁰ Department for Levelling Up, Housing and Communities, <u>English Housing Survey: Social rented</u>

sector, 2020-21 ¹⁷¹ Institute for Fiscal Studies, <u>Inflation for poorest households likely to increase even faster than for</u> the richest, and could hit 14% in October, May 2022 ¹⁷² Joseph Rowntree Foundation, <u>Going under and without: JRF's cost of living tracker</u>, winter

^{2022/23} ¹⁷³ Institute for Fiscal Studies, <u>Health inequalities</u>, November 2022

¹⁷⁴ ONS, Life expectancy by census ward. N.B. data is not yet available for the new wards



general health than a man living in Grange ward. A woman living in Edmonton Green can expect to live 13.9 years less in good general health than a woman living in Grange ward.

Our response

Across all our five priorities, we are seeking to address the wider determinants of physical and mental health – housing, education, welfare, work and poverty – and contribute to reduce health inequalities.

Mitigating actions to be taken

The Council Plan 2023-26 is expected to positively impact residents experiencing socioeconomic disadvantage.



Section 4 – Monitoring and review

How do you intend to monitor and review the effects of this proposal?

Who will be responsible for assessing the effects of this proposal?

We will create new corporate performance scorecards for 2023/24 onwards in line with the priorities set out in the Council Plan, to track our performance and progress in delivering our five new priorities. These will be reported to Directorate Management Teams, Executive Management Team and Cabinet quarterly. This performance management framework will enable senior leadership and Cabinet to monitor the progress being made towards delivering the Plan; consider the current and future strategic risks associated with the information provided and use this to inform decision-making; and challenge progress with responsible officers as necessary.

Alongside quarterly review of Key Performance Indicators in the new scorecards, all Council departments will produce annual service plans that detail the work they are undertaking to deliver on the Council Plan priorities. Services will review progress against their service plans and report on this to their Departmental Management Team mid-year and at the end of each year.

The Council Plan will be reviewed each year based on our performance and on the economic, social, legal and regulatory environment and will be refreshed and updated as needed during the three-year period of the Plan.



Section 5 – Action plan for mitigating actions

Any actions that are already completed should be captured in the equality analysis section above. Any actions that will be implemented once the decision has been made should be captured here.

Identified Issue	Action Required	Lead officer	Timescale/By When	Costs	Review Date/Comments
N/A – No mitigating actions identified					