Is Britain Fairer?

The state of equality and human rights 2015

Equality and Human Rights Commission

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Presented to Parliament pursuant to Section 12 of the Equality Act 2006
as amended by the Enterprise and Regulatory Reform Act 2013

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Any enquiries regarding this publication should be sent to us at correspondence@equalityhumanrights.com.

Print ISBN 9781474119832

Web ISBN 9781474119849

ID SGD008103 10/15

Printed on paper containing 75% recycled fibre content minimum.

Printed in the UK by the Williams Lea Group on behalf of the Controller of Her Majesty's Stationery Office.

About this publication

What is the purpose of this publication?

Is Britain Fairer? The state of equality and human rights 2015 is the Equality and Human Rights Commission's statutory five-yearly report on equality and human rights progress in England, Scotland and Wales.

In 2010, the Commission produced its first progress report on equality, entitled *How Fair is Britain?* A separate human rights progress report, the *Human Rights Review*, was published in 2012. *Is Britain Fairer?* is the Commission's follow-up report on both equality and human rights.

This report outlines our findings and sets out the challenges for the future.

Who is it for?

This report is intended for policy makers and influencers across all sectors.

What is inside?

The report includes:

- an executive summary
- the legal framework
- context
- key findings related to:
  - education and learning
  - work, income and the economy
  - health and care
  - justice, security and the right to life
  - the individual and society
- the most significant areas requiring improvement.

The collected evidence, details of the review methodology and its context, a technical appendix and data tables have been published separately, and are available at www.equalityhumanrights.com/IsBritainFairer.

When was it published?

The report was published in October 2015.

Why did the Commission produce the report?

The Equality and Human Rights Commission promotes and enforces the laws that protect our rights to fairness, dignity and respect. As part of its duties, the Commission provides Parliament and the nation with periodic reports on equality and human rights progress in England, Scotland and Wales.

What formats are available?

The full report is available in PDF and Microsoft Word formats in English. An executive summary of the report is available in English (PDF and Word), Welsh (PDF and Word), Easy Read (PDF) and British Sign Language (digital video) formats.
All of the above may be found at www.equalityhumanrights.com/IsBritainFairer.

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Acknowledgements

A very wide range of people from a great number of institutions have helped realise this report. Without their assistance this review would not have been possible, although responsibility for the analysis and its accuracy remains with the Commission.

We would like to express our sincere gratitude to the Is Britain Fairer (IBF) Commissioner Working Group (Ann Beynon, Chris Holmes, Kaliani Lyle, Lorna McGregor, Sarah Veale and Swaran Singh) for their continuous support and guidance throughout this process.

Our thanks also go to the Is Britain Fairer? domain owners (Andrew Nocon, Chris Thoung, Gwen Oliver, Hazel Wardrop, Janna Miletzki, Liz Speed, Richard Keyte, Rosanna Mann and Verena Brähler) and the rest of the IBF team (Colin Douglas, David Sparrow, Gregory Crouch, Helen Norman, Jennifer Dunne, Josh Scherzer, Karen Hurrell, Marc Verlot, Maxine Taylor, Preeti Kathrecha, Rana Ranjit, Sarah Munro and Sonia Carrera).

We would also like to acknowledge the ongoing contribution of those working in other teams in the Commission, especially the IBF domain Working Groups, Communications, Legal, Treaty Monitoring, Scotland, Wales and the Senior Management Team.

We would also like to thank the report writers Clare Collins and Jonathan Bashford.

We are indebted to the following organisations, which have supported us with data collection and analysis:

- CASE, London School of Economics and Political Science: Eleni Karagiannaki, Ellie Suh, Tania Burchardt, Polly Vizard
- Cicely Saunders Institute: Joanna Davies, Jonathan Koffman
- Crucible Centre for Human Rights Research, University of Roehampton: Harriet Hoffler, Katie Boyle, Michele Lamb
- Independent Social Research Ltd: Carola Groom, Nick Coleman, Wendy Sykes
- University of Reading: Antonia Fernandez, Giovanni Razzu

We would like to thank the government departments and devolved governments listed below for commenting on our analysis:

- Department for Business, Innovation and Skills
- Department for Communities and Local Government
- Department for Culture, Media and Sport
- Department for Education
- Department for Work and Pensions
- Department of Health
- Government Equalities Office
- HM Treasury
- Home Office
- Ministry of Justice
- Scottish Government
- Welsh Government

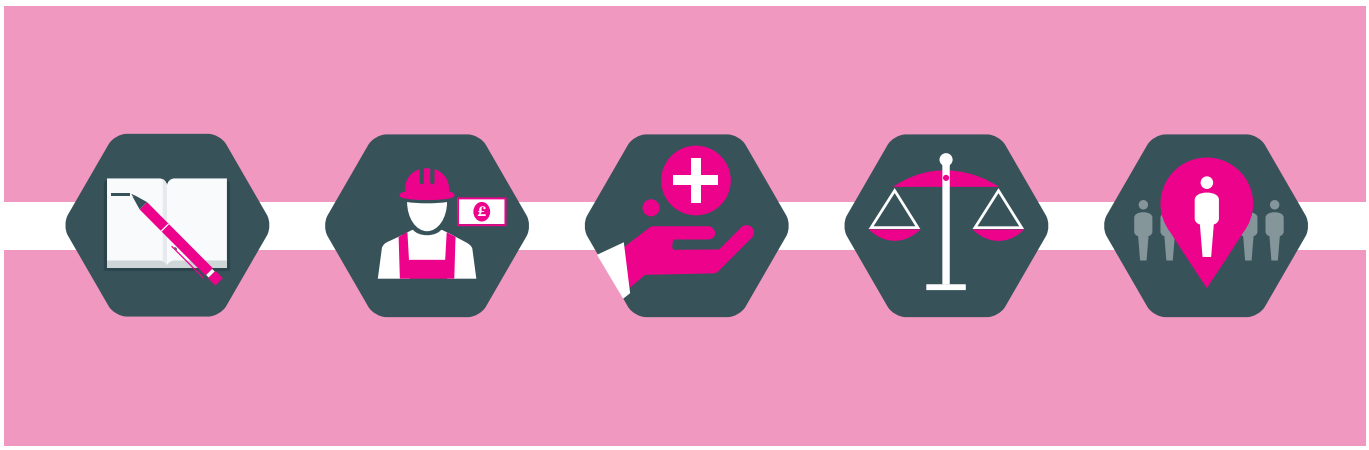
We are very grateful to all those who contributed to this review through a range of consultation events and discussions. A full list of stakeholders can be found on our website (see below).

Acronyms

AHC	After housing costs
APPG	All-Party Parliamentary Group
ASN	Additional support needs
BIS	Department for Business, Innovation and Skills
CAMHS	Children and Adolescent Mental Health Services
CPS	Crown Prosecution Service
CQC	Care Quality Commission
CRC	UN Convention on the Rights of the Child
CSEW	Crime Survey for England and Wales
DCLG	Department for Communities and Local Government
DH	Department of Health
DoLS	Deprivation of Liberty Safeguards
ECHR	European Convention on Human Rights
EDC	Equality and Diversity Council
EHRC	Equality and Human Rights Commission
EU	European Union
FRA	EU Agency for Fundamental Rights
FSM	Free school meals
GP	General practitioner
HMIC	Her Majesty's Inspectorate of Constabulary for England and Wales
HMICS	Her Majesty's Inspectorate of Constabulary in Scotland
HMIP	Her Majesty's Inspectorate of Prisons for England and Wales
HRA	Human Rights Act 1998
HSCIC	Health and Social Care Information Centre
IAPT	Improving Access to Psychological Therapies
IER	Individual Electoral Registration
IPCC	Independent Police Complaints Commission
JCHR	Joint Committee on Human Rights
LASPO	Legal Aid, Sentencing and Punishment of Offenders Act 2012
LGB	Lesbian, gay and bisexual
LGBT	Lesbian, gay, bisexual and transgender
MP	Member of Parliament
MSP	Member of the Scottish Parliament
NAO	National Audit Office
NEET	Not in education, employment or training

NGO	Non-governmental organisation
NHS	National Health Service
ONS	Office for National Statistics
RCGP	Royal College of General Practitioners
S4	Fourth year of secondary schooling in Scotland
SCJS	Scottish Crime and Justice Survey
SEN	Special educational needs
SHQS	Scottish Housing Quality Standard
SHRC	Scottish Human Rights Commission
UK	United Kingdom
UN	United Nations
UNHRC	United Nations Human Rights Council
VSH	Virtual School Head
WAMs	Welsh Assembly Members
ZHC	Zero-hours contract

Executive summary



The Equality Act 2006 gave the Equality and Human Rights Commission (EHRC) the duty to report regularly on the extent to which equality and human rights are improving in Britain. We published *How fair is Britain?* (a review of equality) in 2010, followed by the *Human Rights Review* in 2012.

This, in 2015, is our first report on progress. We hope that this report will be of value to policy makers and influencers across all sectors. Our purpose is to report our findings, set out the challenges for the future, and invite those who have the statutory responsibilities or an interest in these areas to address the issues by identifying and implementing the necessary solutions. We do not speculate on the impact of proposed future legislative or policy changes, nor do we try to explain the causes of differences, or set policy solutions.

We have gathered data and evidence based around 10 domains: education; standard of living; productive and valued activities; health; life; physical security; legal security; individual, family and social life; identity, expression and self-respect; and participation, influence and voice. Within each of these domains, there is a set of indicators and measures that we have used in order to evaluate progress. Produced in parallel with this report are 10 detailed evidence papers (one for each domain), available on our website.

When deciding what (from the 10 evidence papers) to include in this report, we used three criteria:

- the degree to which there has been change over time
- the proportion of the specific population group that the issue affects, and
- the scale of impact on life chances.

The quantitative evidence we used draws from major surveys and administrative data compiled by public bodies. Given the time lag between gathering the data and analysing and checking it, most of our core quantitative data covers the period from 2008 to 2013. This has been supplemented by some more recent data drawn from other published analysis that meets our strict criteria. The qualitative data we used is more recent and includes reports by inspectorates and regulators, international organisations, parliamentary committees, the UK and devolved governments, and non-governmental organisations (NGOs).

The first three chapters of the report set out the introduction (Chapter 1), the equality and human rights legal framework (Chapter 2), and the economic and demographic context (Chapter 3). The subsequent five chapters set out our key findings, as summarised below.

Education and learning (Chapter 4)

Areas of progress over the review period include:

- general improvements in educational attainment in schools; in England, a narrowing of the attainment gap between White pupils and Pakistani/Bangladeshi and African/Caribbean/Black pupils
- more effective use of pupil premium funds
- good educational outcomes in secure training centres
- rising levels of participation of 16–18 year olds in education and training, and
- falling percentages of men and women with no qualifications of any kind.

Challenges include:

- some persistent and in some cases widening educational attainment gaps (for example, among Gypsy and Traveller pupils, children from poorer backgrounds and particularly White boys, children with special educational needs and children in the care system); within the context of an overall fall, higher exclusion rates for some children (for example, children with special educational needs)
- higher rates of bullying carried out against some children (for example, disabled children and lesbian, gay and bisexual children)
- lower participation of disabled young people in education, employment and training
- women were more likely to have no qualifications than men, in contrast with the situation in higher education, where women more than closed the gap with men,[1] and
- while more Black pupils in England went on to study at a higher education institution, they were less likely than White, mixed and Asian pupils to go to higher-ranked institutions.

[1] In this context, a qualification covers: academic qualifications from GCSE (or equivalent) and above; vocational qualifications; and other awards, certificates and diplomas at any level. An individual with no qualifications holds none of these.

Work, income and the economy (Chapter 5)

Areas of progress include:

- increasing recognition (in, for example, the Modern Slavery Act 2015) of the human rights violations arising as a result of trafficking, forced labour, servitude and exploitation
- a narrowing of the gender gap in employment rates
- a voluntary target for the FTSE 100 of 25% female board representation was met, and
- in England, fewer adults and children lived in substandard accommodation; homelessness in Wales and Scotland fell.

Challenges include:

- a rise in reported trafficking (and an increase in the proportion of victims who were UK nationals)
- a lower overall employment rate[2]
- men were more likely to be unemployed than women, but women were more likely to be in part-time work; the numbers of women in part-time work who wanted to be in full-time work increased
- women and people from some ethnic minorities remained less likely to be in both executive and non-executive directorships
- 16–24 year olds had the lowest employment rates, and the employment gap between the oldest and the youngest age groups increased;[3] unemployment rates increased for disabled people;[4] unemployment rates were significantly higher for ethnic minorities; Pakistani/Bangladeshi women were less than half as likely to be employed compared with average female employment rates; Muslims experienced the highest unemployment rates, lowest employment rates and lowest (and decreasing) hourly pay rates over the period
- all age groups below the age of 55 experienced significant reductions in average hourly pay, with the biggest declines in the younger age groups; there were persistent gender pay gaps among graduates; employment and earnings premiums for training and qualifications among graduates were higher for men than for women; some ethnic minorities and disabled people experienced greater declines in average pay, and
- poverty rates were higher for children in households headed by someone from an ethnic minority; material deprivation for disabled people above the poverty level increased and the gap between disabled and non-disabled people of working age widened.

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[2] Employment rate: the number of people in employment as a percentage of the population (our analysis uses the working age population, aged 16–64).

[3] Increases in young people's participation in full-time education only explain some of the falls in employment and increases in unemployment. Even accounting for this increased participation, the employment rate for young people has fallen and the unemployment rate risen over the review period.

[4] Unemployment rate: the number of people not currently in a job as a percentage of the 'economically active population' (those who are able to work and have adequate availability to work; this does not include those not working through sickness, disability or because they are studying).

Health and care (Chapter 6)

Areas of progress include:

- a narrowing of the gender gap in life expectancy
- a fall in the infant mortality rate in England and Wales for White, Pakistani/Bangladeshi and African/Caribbean children
- a decrease in the proportion of men and women who currently smoke in England, and in men who exceed low-risk drinking guidelines
- a decrease in the suicide rate in Scotland (although the overall rate in Scotland remained higher than in England and Wales), and
- in England and Wales, substantial funding available for psychological therapies; Scotland was the first country in Britain to introduce a target to ensure faster access to psychological therapies; positive developments in the availability of high-quality mental health care.

Challenges include:

- self-reported health status for some people with specific characteristics (for example, Gypsies and Travellers and disabled people) was worse (in the 2011 Census); lower life expectancy for people with serious mental illness or a learning disability, Gypsies and Travellers and homeless people
- increased suicide rate in England and Wales, resulting in a widening of the gap between men and women, with middle-aged men particularly at risk
- worse end of life outcomes for people in more disadvantaged socioeconomic positions
- concerns about access to palliative care for children with cancer
- increased risk of poor mental health among adults in England, with high risk for people identifying as gay/lesbian/bisexual/other; Black/African/Caribbean/Black British people had the highest rate of contact with specialist mental health services; and Black people were more likely to have been compulsorily detained under the Mental Health Act 1983 as part of an inpatient stay in a mental health unit; serious concerns about access to mental health services for children and young people; care of prisoners with mental health needs was inconsistent across establishments
- increased number of people in England with health problems requiring both health and social care and with 'complex health needs', within a context of an overall fall in social care provision
- people with learning disabilities and/or autism placed in inappropriate settings for too long and a long distance from their family and home
- some people – for example, transgender people and people from migrant communities – experienced problems accessing healthcare services, and
- legal safeguards provided by the Human Rights Act 1998 to prevent inhuman or degrading treatment were not as widely used as they should have been; a number of inquiries highlighted serious flaws (and sometimes abuse) in the care of vulnerable patients, such as those with learning disabilities, older people and patients with dementia.

Justice, security and the right to life (Chapter 7)

Areas of progress include:

- a fall in several serious crimes affecting personal safety and the right to life across or in parts of Britain, and
- a number of significant legislative reforms and policy initiatives, including an increase in the volume of referrals from the police of 'honour-based' violence-related offences for prosecution; increased legal protection for 17 year olds in police custody and increases in the number of applications for Deprivation of Liberty Safeguards; a strengthened procedural obligation to investigate any deaths for which the State may have a degree of responsibility; and the setting of international human rights standards for the treatment of women prisoners, which were incorporated into the regulatory inspection framework.

Challenges include:

- a rising incidence of Islamophobic and anti-Semitic hate crime
- serious issues in relation to child sexual abuse and exploitation in England and Wales
- flaws in the police response to domestic abuse and in the use of stop and search powers
- the potential impact of legal aid reforms in England and Wales on the access of vulnerable individuals to civil and family justice
- serious concerns were expressed by regulators about the operation of safeguards to protect people from being unlawfully deprived of their liberty across Britain, and about the use of restraint affecting detained individuals in health, care and detention settings
- the Home Secretary announced an independent review of deaths and serious incidents in police custody in England and Wales. There have been 133 deaths during or following police custody in England and Wales between 2007/08 and 2014/15, and 444 apparent suicides following police custody.
- concerns voiced by regulators about overcrowding in prisons across Britain, rising violence in some men's prisons in England and Wales, and the treatment of children and torture victims subject to immigration controls, and
- the lack of an immigration detention time limit in the UK remains in contrast to other European Union member countries.

The individual and society (Chapter 8)

Areas of progress include:

- the introduction of equal marriage legislation across Britain; a continued rise in public acceptance of lesbian, gay and bisexual people across Britain; and evidence of decreased stigma around mental health in England and Wales
- clarification by case law of the capacity of people with learning disabilities to make their own decisions about relationships, and the freedom of individuals to express their religion or beliefs
- a number of important changes to the legal framework, including new duties and responsibilities given to local authorities in England that affect the care and support of adults, and new legislation across Britain extending the support available to young people leaving the care system
- the creation of new criminal offences relating to forced marriage, emotional and financial domestic abuse and controlling or coercive behaviour
- the strengthening of the Information Commissioner's powers to regulate the Data Protection Act 1998
- legislation introduced to encourage participation in civil society across Britain
- improvements in the diversity of the UK Parliament following the 2015 general election; though the gender balance remains better in the Scottish Parliament and National Assembly for Wales, and
- an increase in Scotland of political participation, including by young people, and the proportion of people perceiving that they can influence local decisions.

Challenges include:

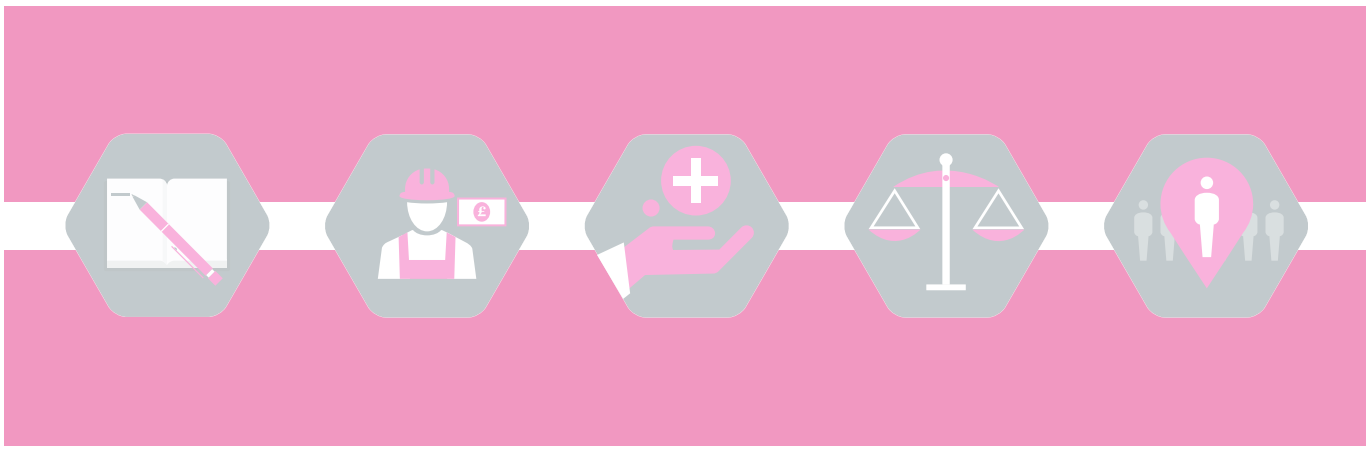
- a rise in public unease about the use of people's personal data by organisations, after a number of cases of loss/misuse
- placements far from home being allocated to people with learning disabilities, children in custody and children in care, which affect their access to social networks (as do reductions in public transport)
- bias/hostility continued to be experienced by disabled people, Gypsies, Roma and Travellers, transgender people and immigrants
- the political under-representation of young people, women and people from some ethnic minorities persisted
- young people and those from some ethnic minorities remained less likely to be politically active; compared with those in managerial and professional groups, all other sub-groups were also less politically active
- the blanket ban on prisoners voting remained in place, in violation of Convention rights
- there were concerns about covert police operations and intrusive surveillance of protests, and
- disabled people, some ethnic minorities and people aged 75 and over were less likely than others to perceive that they could influence local decisions.

Conclusion

We conclude with Chapter 9, which draws on the evidence in the previous chapters and sets out eight key equality and human rights challenges for Great Britain over the coming years:

1. **Improve the evidence** and the ability to assess how fair society is.
2. Raise standards and close attainment gaps in **education**.
3. Encourage fair recruitment, development and reward in **employment**.
4. Support improved **living conditions** in cohesive communities.
5. Encourage **democratic participation** and ensure **access to justice**.
6. Improve access to **mental health** services and support for those experiencing (or at risk of experiencing) poor mental health.
7. Prevent **abuse, neglect and ill-treatment in care and detention**.
8. Tackle targeted **harassment and abuse** of people who share particular protected characteristics.

Chapter 1
Introduction



Fairness is important to us all in Britain. There are few things against which we react more strongly than a sense of unfairness or injustice. It is because we believe that fairness is important that we have put in place an infrastructure of laws and enforcement mechanisms to defend this principle.

These include:

- the Human Rights Act 1998 (HRA), which transferred into UK law the rights set out in the European Convention on Human Rights (ECHR), making them enforceable by individuals in the UK courts
- the Equality Act 2006, which created the Equality and Human Rights Commission, and
- the subsequent Equality Act 2010, widely regarded as the strongest anti-discrimination framework in the world.

As part of this legal framework, *Is Britain Fairer?* is unique around the world as a process for reporting on progress in implementing equality and human rights.

By posing the question, Is Britain fairer?, we assess whether our society is fairer today than it was five years ago. Whatever our strengths and weaknesses, there will always be room for improvement as we strive to be a society in which everyone is treated with dignity and respect. The first reviews we conducted were *How fair is Britain?* (a review of equality in 2010), followed by the *Human Rights Review* in 2012. In 2015, *Is Britain Fairer?* is the first time we have reported on progress since previous reviews.

Is Britain Fairer? is unique around the world as a process for reporting on progress in implementing equality and human rights.

There are inevitably limitations to any evidence-gathering process as substantial as this, owing to gaps in data and difficulties involved in collecting information, particularly about disadvantaged and vulnerable people. While recognising these limitations, this report presents a rich range of evidence on how people's rights to fairness are being realised in practice. We set out a clear, evidence-based assessment of where we have made progress, where we have fallen back, and where we have stood still.

We believe that this report will be of value to policy makers and influencers across all sectors. Our purpose is to:

- report our findings
- set out the challenges for the future, and
- invite those who have the statutory responsibilities to address the issues by identifying and implementing the necessary solutions.

We have looked at the protections and rights afforded by legislation in place during the period of the review. We do not speculate on the impact of proposed future legislative or policy changes. Nor do we try to explain why there are differences in experience and outcomes for some people who share a characteristic protected by law, or propose policy solutions.

This report is based on a substantial process of gathering data and evidence based around 10 domains. These domains cover the following:

Domain	Chapter of this report where it is covered
Education	Chapter 4 – Education and learning
Productive and valued activities	Chapter 5 – Work, income and the economy
Standard of living	
	Chapter 6 – Health and care
Health	
Life	
	Chapter 7 – Justice, security and the right to life
Physical security	
Legal security	
Individual, family and social life	Chapter 8 – The individual and society
Identity, expression and self-respect	
Participation, influence and voice	

Within each of these domains, there is a set of indicators and measures that we have used in order to assess progress. We are publishing much more detailed information alongside this main report, including:

- ten comprehensive evidence papers, one for each of the domains of the measurement framework
- detailed data tables, providing the quantitative data that we have analysed for this work
- a context paper (commissioned from the University of Reading) that sets out the economic and demographic changes that Britain has faced since 2008, and
- a detailed methodology paper and technical appendix describing how we carried out this review.

These are available on our website at www.equalityhumanrights.com/IsBritainFairer/evidence.

Over the coming year, we plan to publish individual reports on:

- England, Scotland and Wales
- specific sectors, and
- the experience of people sharing certain protected characteristics under the Equality Act 2010 (gender, race, disability, sexual orientation, religion or belief, transgender people, and age).

In building the evidence for this report, we relied on a variety of methods and sources to establish an initial picture. We spoke to hundreds of organisations across Great Britain in order to test and verify this.

We relied on a mix of quantitative and qualitative evidence:

- **Quantitative**. We drew from major surveys and administrative data compiled by public bodies. The unavoidable time lag between gathering, analysing and checking the data means that the core quantitative data we use is not current. Most of it covers the period from 2008 to 2013. This has been

supplemented by some more recent data drawn from other published analysis that met our standard of rigour.

- **Qualitative**. This data is more recent. It includes reports by inspectorates and regulators, international organisations, parliamentary committees, UK and devolved governments, and NGOs.

When looking across the wealth of data and evidence gathered, in order to select the key issues to include in this report, we used the following criteria:

- the degree to which there has been change over time. Change may be positive or negative; and, in addition, the absence of change was a criterion where major change was needed or expected
- the proportion of the specific population group affected by the issue. This allows us to take account of issues that affect a substantial proportion of both large and small groups, and
- the scale of the impact on life chances.

Although we have posed a simple question, Is Britain fairer?, we recognise that the answer is far from simple. The reader will find that Britain has become fairer in many areas. We should be proud of and celebrate these advances. If we do not recognise the positives, we run the risk of feeding an untrue and excessively negative narrative that suggests everywhere you look we are becoming more divided and less fair as a nation.

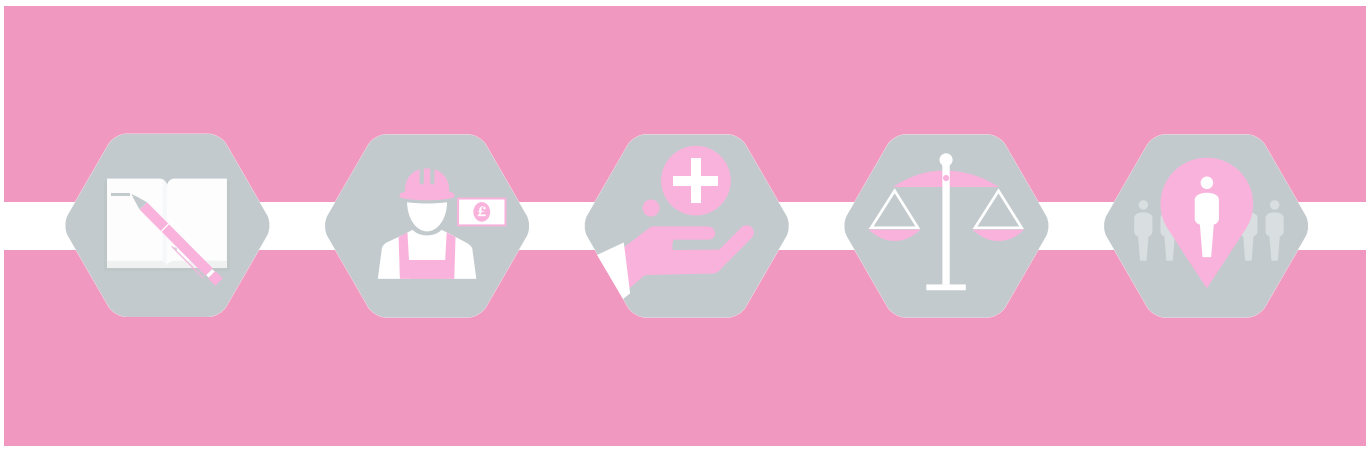
Equally, we must recognise those areas where we have gone backwards or have failed to address stubborn inequalities that have been with us for too long.

Equality and human rights are for everyone and our findings reflect this. All readers will find issues that affect them in the areas for improvement that we identify in these pages.

Whether you are a young woman, a middle-aged man, a member of the Islamic faith, a transgender person, a person with a learning disability, a White schoolboy, or a family detained in an immigration removal centre, there are very real issues of equality and human rights that are affecting you today.

Is Britain fairer? Read on and reach your own view. Can Britain be fairer still? Yes – there is no room for complacency.

Chapter 2
Legal framework



This chapter summarises the most relevant aspects of the current equality and human rights legal framework within Great Britain:

- the HRA and legislation across the three countries, which incorporate into domestic law the rights enshrined in the ECHR
- international human rights treaties signed and ratified by the UK, and
- the Equality Act 2010.

2.1 Human rights

Human Rights Act 1998

Under the HRA, it is unlawful for all public bodies and other bodies carrying out public functions as defined under the Act to act in a way that is incompatible with ECHR rights. This obligation is both negative (that is, not to breach the rights) and in certain circumstances positive (that is, to take steps to guarantee the rights). The HRA does not create any new rights that are not in the ECHR.

There are three types of ECHR rights:

- **Absolute rights** – for example, the right to life, and protection from torture and inhuman and degrading treatment. The State cannot breach these rights in any circumstances.
- **Limited rights** – for example, the right to liberty and security of person, and to a fair trial. These may only be limited under the circumstances set out in the ECHR Article defining the right.
- **Qualified rights** – for example, respect for private and family life, freedom of assembly and association, and freedom to manifest thoughts, conscience and religion. These require a balance to be made between the rights of the individual and the needs and rights of others, including wider society or the State. They can be interfered with under specific circumstances set out in each Article, which include where:
  - there is a legal basis for this interference, which people can find out about and understand
  - there is a legitimate aim for the interference, and
  - the interference is necessary in a democratic society. There must be a pressing social need for the interference

and it must be proportionate (that is, it must be no greater than is necessary to meet this social need).

Article 14 of the ECHR provides the right for people to be **free from discrimination** in enjoying their human rights under the Convention. However:

- Article 14 is not a free-standing right – anyone wishing to rely on Article 14 must establish that the matter falls within the ambit of another Convention right, and
- discrimination does not breach another Convention right if it can be justified as a proportionate means of achieving a legitimate aim.

As part of the approach it takes to interpreting the ECHR in particular cases, the European Court of Human Rights has developed and applied the principle of subsidiarity, recognising that national bodies are sometimes better placed to understand domestic circumstances and requirements. For this purpose it has occasionally used the doctrine of the 'margin of appreciation':

- this provides some flexibility for states in how they safeguard certain Convention rights at a national level, and
- it must, however, be applied consistently with a minimum level of human rights protection provided under Convention rights.

International human rights instruments

Relevant instruments signed and ratified by the UK include the:

- International Covenant on Civil and Political Rights
- United Nations (UN) Convention on the Rights of Persons with Disabilities
- UN Convention on the Rights of the Child (CRC)
- Convention on the Elimination of Discrimination against Women
- International Convention on the Elimination of all forms of Racial Discrimination
- International Covenant on Economic, Social and Cultural Rights, and
- Convention against Torture.

These are not legally binding in domestic law in the way that the ECHR is through the HRA. Because they have not been incorporated into domestic law, they do not create free-standing individual rights which serve as a cause of action in legal proceedings. They can however be considered by domestic courts and the European Court of Human Rights when interpreting other relevant applicable rights, and the UK is under an obligation to implement them.

Wales and Scotland

The Scotland Act 1998 stipulates that:

- a provision of an Act of the Scottish Parliament is not law so far as it is incompatible with ECHR rights, and
- a member of the Scottish Government has no power to make any subordinate legislation or to carry out any other act, so far as the legislation or act is incompatible with ECHR rights.

The Children and Young People (Scotland) Act (2014) also places a duty on Scottish Ministers to keep under consideration the requirements of the CRC.

The Government of Wales Act 2006 stipulates that:

- a provision of an Act of the Assembly is outside the Assembly's legislative competence if it is incompatible with ECHR rights, and
- Welsh Ministers cannot act incompatibly with these rights.

The Rights of Children and Young Persons (Wales) Measure (2011) provides a statutory duty for Welsh Ministers to have due regard to Part 1 of the CRC.

2.2 Equality Act 2010

The Equality Act 2010 prohibits unlawful discrimination, harassment and victimisation on the basis of what are called 'protected characteristics' in a wide variety of fields, including employment, education, the exercise of public functions, the provision of services and associations.

The nine 'protected characteristics' are:

- age
- disability
- gender reassignment
- marriage and civil partnership
- pregnancy and maternity
- race
- religion and belief
- sex
- sexual orientation

Prohibited conduct takes a number of forms, although not all are relevant to all protected characteristics. Prohibited conduct includes the following:

- Direct discrimination – less favourable treatment of a person, because of a protected characteristic, compared with others in the same circumstances.
- Indirect discrimination – where a policy, practice or criterion is applied to everyone (or would be), but in fact puts (or would put) people sharing a protected characteristic at a particular disadvantage when compared with others who do not. Indirect discrimination can be lawful if objectively justified as a proportionate means of achieving a legitimate aim.
- Separate forms of discrimination specifically relating to disabled people, pregnancy and maternity and gender reassignment.
- Harassment – unwanted conduct related to a protected characteristic that has the purpose or effect of violating a person's dignity, or creating an intimidating, hostile, degrading, humiliating or offensive environment for that person.
- Victimisation – subjecting someone to a detriment because they have, in good faith, carried out a protected act, such as:
  - making an allegation of discrimination
  - bringing proceedings under the Act
  - giving evidence or information in relation to such proceedings, or
  - doing anything else in connection with the Act.

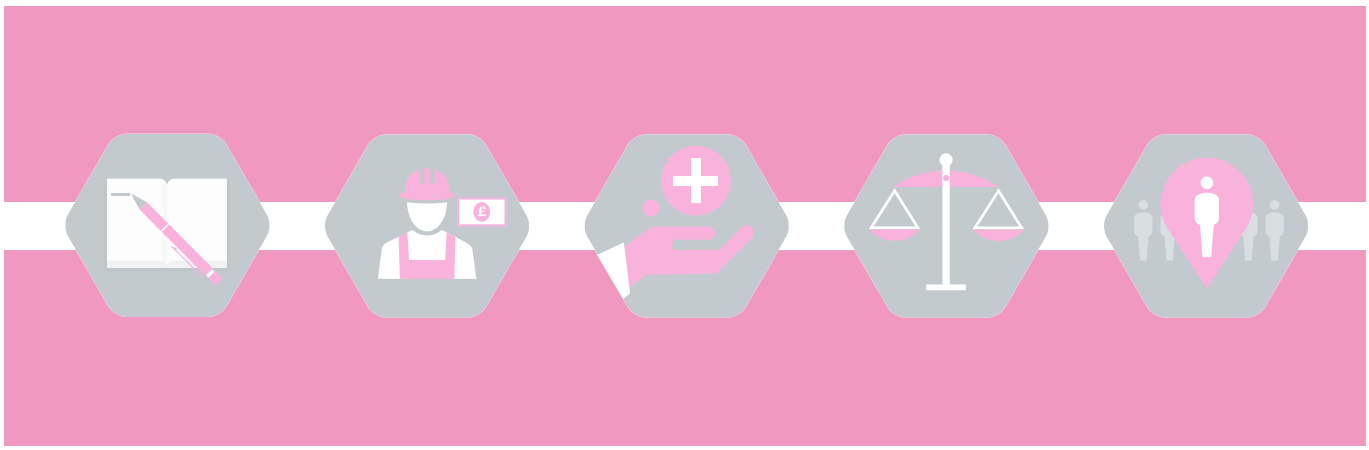
The Equality Act 2010 permits proportionate and lawful positive action measures which aim to overcome disadvantage connected to a particular protected characteristic.

The Act's public sector equality duty requires public authorities to have 'due regard' to the need to:

- eliminate discrimination, harassment and victimisation
- advance equality of opportunity, and
- foster good relations.

The duty consists of a general equality duty, supported by specific duties for certain public authorities. The specific duties are different for England, Scotland and Wales (with England having the least detailed duties).

Chapter 3
Context



We cannot look at changes in equality and human rights in Great Britain without understanding the context in which these changes took place. The economic and demographic trends over the period, and the economic policies adopted by the UK, Welsh and Scottish Governments, are fundamental to this. This chapter looks at these issues.

The most significant economic event of the review period was the recession and the subsequent recovery. It shaped the political debate with stark policy choices around the approach to 'austerity'. It is not our place to reach a view on which of the policy responses was most appropriate. The correct place for that judgement to be made is at the ballot box. However, it is important that we recognise the policy choices that were adopted since this sets the context in which spending decisions (the impact of which we comment on throughout this report) must be considered.

In 2008, the UK experienced a major and deep economic downturn (Office for National Statistics (ONS, 2015h)):

- The UK economy shrank by 2.3% in the final quarter of 2008, during a recession that lasted around a year (from the second quarter of 2008 until the second quarter of 2009).
- Growth resumed towards the end of 2009, but the recovery was protracted and interrupted by brief periods of decline in 2012.

The UK has since seen sustained growth into 2015. ONS (2014d) data indicates that the timing of the decline and recovery was slightly different in each of the home countries:

- Wales saw the most severe initial decline.
- Scotland went into recession slightly later.
- After the recession, England recovered more strongly than Wales or Scotland.

The impact of this downturn was a substantial increase in the budget deficit and public sector debt. In 2010, the new Coalition Government[5] made its policy priority the elimination of the deficit to enable sustainable, private-sector led growth, and set (HM Treasury, 2010):

- a fiscal mandate to achieve a balanced (cyclically adjusted) current budget over five-year periods – in this case, by 2015–16, and

[5] The Coalition Government was composed of members of both the Conservative Party and the Liberal Democrats.

- a further target to have the public sector net debt begin falling as a share of national income between 2014–15 and 2015–16.

These decisions meant a funding gap that could only be closed through spending cuts, taxation or growth. The UK Government agreed to close this gap with 77% to come from a reduction in spending (while aiming to preserve growth-enhancing capital spending), and 23% to come from tax increases by 2015–16 (HM Treasury, 2010). This reduction in spending meant that the Scottish and Welsh Governments also faced reduced resources.

To achieve its spending reduction targets, the UK Government set itself the additional challenge of protecting spending on health, schools and international development. Since health, education and social security made up around a third of total government spending, by giving relative protection to two of these areas the inevitable consequence was the need for more cuts in non-protected areas. Spending on health was indeed protected in real terms. The non-schools element of the Department for Education (DfE) budget decreased slightly in real terms, although spending on schools remained stable over the period (Razzu and Fernandez, 2015).

The Scottish Government and Welsh Government budgets are tied to the level of UK government spending by the Barnett formula, and the UK government fiscal contraction meant that adjustments were made to both budgets in accordance with this formula. Both governments also pledged to protect key public services such as health. An assessment of high-level spending shows that spending on health was, indeed, protected in Scotland and Wales (Razzu and Fernandez, 2015).

Employment also fell in the recession but recovered more quickly than Gross Domestic Product (GDP) (Razzu and Fernandez, 2015).

Chapter 5 'Work, income and the economy' looks at how changes in the rate and type of employment affected different people.

This report focuses on change at national (Great Britain) and individual country levels (England, Scotland and Wales). However, we recognise that there is much variation at regional level within countries, and between urban and rural areas. Our data analysis has not allowed us to look at these differences, but it is important to acknowledge their significance.

In addition to these economic trends and policy responses, we also need to be mindful of demographic change over this period:

- Great Britain's population is still ageing – the median age in 2014 reached 40 years old for the first time (ONS, 2015i).
- The population increased by an estimated 2.7 million between 2008 and 2014 (ONS, 2015a):
  - net migration from outside the UK accounted for around half this figure (see table overleaf), and
  - immigration was mainly for work or study, with the average age of immigrants on arrival being 30 years old or under (Cooper *et al.*, 2014).
- The proportion of the population that identify themselves as White declined in England and Wales from 91% in 2001 to 86% in 2011 (ONS, 2015j). In Scotland, the figure fell from 98% to 96% (Scottish Government, 2014e).
- More people described themselves as having no religion (ONS, 2012; National Records of Scotland, 2013).
- The number of marriages increased, and the number of divorces decreased (ONS, 2014e; National Records of Scotland, 2013).

Table 1: Components of population change from 2008 to 2014

Country	Estimated population mid-2008	Births minus deaths	Internal migration net	International migration net	Other	Estimated population mid-2014
Great Britain	60,044,620	1,344,427	5,325	1,315,353	46,529	62,756,254
England	51,815,853	1,298,042	–35,438	1,202,646	35,515	54,316,618
Wales	3,025,867	23,153	9,972	22,507	10,537	3,092,036
Scotland	5,202,900	23,232	30,791	90,200	477	5,347,600

Source: ONS (2015a). Note: Changes between 2008 and 2014 computed from associated dataset.

These demographic trends present significant challenges and opportunities:

- We are an ageing population, placing greater demands on our health and care systems.
- We are a growing population, placing greater demands on public services and infrastructure, while also providing an expanding workforce to contribute to funding these services.
- At the same time, we have had to manage within spending constraints that have seen real-term reductions in all but three areas (health, schools and international development). Indeed, even protected areas such as health have endured unprecedented funding pressures as increases in demand have outstripped real-term increases in expenditure.

The chapters that follow should be read within this demographic and economic context.

Chapter 4
Education and learning

This chapter summarises key findings that concern human rights and equality taken from the 'Education' evidence paper, which is available on our website. Education and learning is a policy area that is devolved to Wales and Scotland.

This chapter discusses: educational attainment; outcomes for particularly vulnerable people; exclusion; bullying; post-16 participation in education, employment and training; further education and lifelong learning; and higher education.

The chapter highlights a number of areas of progress over the review period, including:

- Educational attainment in schools improved in Great Britain.
- In England, the attainment gap between White pupils and Pakistani/Bangladeshi and African/Caribbean/Black pupils narrowed.
- In England, more children in the care system achieved at least five A*–C General Certificates of Secondary Education (GCSEs) (or similar).
- Educational outcomes were good in most secure training centres and provision was found to be more successful than what most of these children and young people have experienced in the community.
- Participation in education and training rose, leading to a fall in the percentage of 16–18 year olds not in education, employment or training (NEET).
- The percentages of men and women with no qualifications (of any kind) in England, Wales and Scotland fell.

A number of serious challenges are however also highlighted, including:

- The size of the improvement differs for individuals with particular protected characteristics, and attainment gaps persist.
- Gypsy and Traveller pupils continued to have the lowest educational attainment rates.
- Across Great Britain, children from poorer backgrounds performed less well than their peers. This was especially true for White pupils, particularly boys.
- The performance of children with SEN in England and Wales improved, but the gap between these children and those without SEN increased. In Scotland, the attainment gap between children with and without

additional support needs (ASN: a broader measure than SEN) narrowed, though this will in part reflect changes in categorisation over the period.

- In Wales, the attainment of children in the care system was well below that of other pupils. In Scotland, the gap narrowed but remained large.
- Exclusion rates fell in England, Wales and Scotland but remained high for some groups.
- Bullying for some children with particular characteristics – for example, disabled children and LGB children – remained a problem and had negative impacts on engagement and participation in education.
- Higher percentages of disabled young people in Britain were NEET compared with non-disabled people, though the gap narrowed.
- In England and Scotland, women were more likely to have no qualifications than men, in contrast with the situation for higher education, where women more than closed the gap with men.
- While more Black pupils in England went on to study at a higher education institution, fewer went on to higher-ranked institutions compared with White pupils.

4.1 Educational attainment for children and young people

The main measures throughout this section are based on educational attainment at secondary school at age 15/16:[6,7]

- England: the percentage of pupils in state-funded schools achieving at least five A*–C GCSEs (or equivalent), including English and mathematics. For all pupils, this rate increased from 50.7% in 2008/09 to 60.6% in 2012/13.[8]
- Wales: the percentage of pupils in local authority maintained schools achieving at least five A*–C GCSEs (or equivalent), including English or Welsh first language and mathematics. For all pupils, this rate increased from 47.2% in 2009 to 52.7% in 2013.
- Scotland: the percentage of S4 pupils achieving at least five Awards at Scottish Credit and Qualifications Framework (SCQF) Level 5 or better.[9] For all pupils, this rate increased from 36.1% in 2009/10 to 39.4% in 2012/13. For some protected characteristics, educational attainment was analysed using average tariff scores of S4 pupils.

Within a context of improvement for all groups, some attainment gaps persisted and even widened, while others narrowed:

- In schools in England, girls improved at a greater rate than boys, widening the

[6] Unless otherwise stated, the figures reported here, on the educational attainment of school age children and young people, are from analysis specifically for the *Is Britain Fairer?* review using pupil attainment data from the Department for Education, Welsh Government and Scottish Government. See data table CE1.5.

[7] Owing to differences in education systems, it is not possible to compare these statistics on attainment across countries.

[8] GCSEs are the main qualifications pursued by 14-16 year olds in England and Wales, during Key Stage 4 of the National Curriculum. Ordinarily, pupils will sit exams at the end of their fifth year of secondary schooling (aged 15/16).

[9] S4 is the fourth year of secondary schooling in Scotland and the last year of compulsory schooling. Prior to changes in the Scottish curriculum (beginning in 2013/14), these pupils worked towards Standard Grade qualifications. For the purpose of comparison over time, the analysis in *Is Britain Fairer?* only considers attainment under this previous system.

attainment gap between the two at age 16. The percentage of girls meeting the above thresholds increased from 54.4% in 2008/09 to 65.7% in 2012/13; whereas, for boys, the increase was from 47.1% to 55.6%. In contrast, in Wales and Scotland the attainment gaps appeared unchanged, owing to similar improvements by girls and boys at age 16. Girls in Wales improved from 51.3% in 2009 to 57% in 2013, while for boys the increase went from 43.3% to 48.7%. On the basis of the average tariff scores of S4 pupils, girls improved from 189 points in 2009/10 to 200 points in 2012/13, while boys improved from 173 points to 183 points.

- In England, by ethnicity, a notable positive change was the decrease in the attainment gap between White pupils (60.2% in 2012/13) and Pakistani/Bangladeshi and African/Caribbean/Black pupils (58.1% in 2012/13). This resulted from the latter two groups improving at a greater rate, closing some of the gap with White pupils. Attainment gaps by ethnicity in Wales were unchanged between 2009 and 2013. In Scotland between 2009/10 and 2012/13, there was an increase in the average tariff scores for Chinese (plus 25 points) and Pakistani (plus 20 points) S4 pupils, and they remained ahead of White pupils.[10]
- There was some improvement by Gypsy and Traveller children in England between 2008/09 and 2012/13. However, these pupils continued to have the lowest attainment levels of any ethnicity, and the gap with other White children widened as the latter saw larger improvements.

While more children from socioeconomically disadvantaged backgrounds met the attainment thresholds described above, these children continued to perform less well compared with their peers. Indeed, it is when we include socioeconomic measures that some of the most striking gaps in attainment emerge:

- In England, although the gap narrowed slightly between 2008/09 and 2012/13, children eligible for free school meals (FSM) were less likely to have achieved the threshold compared with pupils not eligible for FSM in 2012/13 (37.9% compared with 64.6%) (DfE, 2014b).[11]
- Chinese pupils in England were consistently high achievers in 2012/13, regardless of FSM eligibility: 76.8% of FSM pupils achieved the GCSE threshold compared with 78.2% of non-FSM pupils. For Asian pupils, the percentages were 52.8% and 67.4%; and for Black pupils, the percentages were 48.2% and 62.5%. The attainment gap for Mixed pupils was somewhat wider, with 43.9% of FSM pupils and 67.5% of non-FSM pupils achieving the threshold (DfE, 2014b).
- The socioeconomic attainment gap was greatest for White boys. In England and Wales, by broad ethnic group, White FSM boys continued to have the lowest educational attainment in their respective countries at age 16 in 2013. In 2012/13, just 28.3% of White FSM boys achieved the GCSE threshold in England, compared with 59.1% of White non-FSM boys. For White FSM and non-FSM girls, the rates were 37.1% and 69.5% respectively (DfE, 2014b). This was also true in

[10] Changes in the definition of White groups in Scotland, to conform to the population census, preclude comparisons of the rate of improvement.

[11] Eligibility for FSM is a common and readily available proxy for low income or disadvantage. It is, however, somewhat narrow because children lose their entitlement once their parents are eligible for working tax credits. Royston *et al.* (2012) state that around 700,000 school age children in England are from poorer backgrounds but are not entitled to FSM.

Scotland for White Scottish children living in the most deprived 20% of areas (Scottish Government, 2015b).

The pupil premium (England only)

The previous government's flagship policy in schools to address the socioeconomic attainment gap in England was the introduction of the pupil premium, which provides additional funds to schools for each child from a disadvantaged background. Eligibility is based on whether a pupil has been registered for FSM at any point in the previous six years, has been looked after for one day or more, or has left care through adoption, a special guardianship order or a child arrangements order. The pupil premium provides more funds per pupil to primary schools than secondary schools; and higher amounts throughout for children in the care system (DfE, 2015a).

Schools' use of pupil premium funds is being increasingly scrutinised and the DfE implemented the Commission's recommendation to disaggregate take-up by protected characteristics as part of the monitoring process. Schools are also required to publish full details of their pupil premium funding, including use and impact, and the outcomes for disadvantaged pupils are published annually in performance tables.

Ofsted's inspection framework now includes consideration of the attainment and progress of disadvantaged pupils eligible for the pupil premium (DfE, 2015b). Ofsted's (2014) most recent report on the pupil premium suggested that school leaders were spending pupil premium funding more effectively.

4.2 Vulnerable children

All three countries introduced domestic legislation to provide greater protection to vulnerable children, including the Children and Families Act 2014 (England, partially extended to Wales) and the Education (Additional Support for Learning) (Scotland) Act 2009.

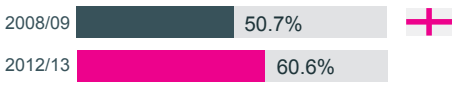
Special educational needs (England and Wales)

In England and Wales, a child or young person has SEN if he or she has learning difficulties or disabilities that make it harder for him or her to learn than most other children and young people of about the same age. While the performance of children with SEN improved, the attainment gap between them and children without SEN widened:

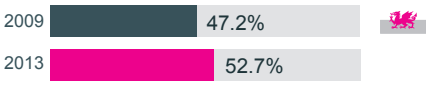
- In England, the performance of both groups improved compared with 2008/09 – 23.4% of children with SEN achieved five A*–C GCSEs in 2012/13, compared with 70.4% of children without SEN. However, the gap increased because the improvement for children without SEN was greater than for children with SEN.
- In Wales in 2013, children with SEN were less likely to achieve at least five A*–C GCSEs (or equivalent), including English or Welsh first language and mathematics, compared with children without SEN (16.8% compared with 63.2%). There was a wider gap between the two groups in 2013 compared with 2009, owing to a smaller increase in attainment levels among children with SEN compared with children without SEN.

England
Scotland
Wales

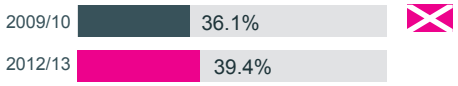
Attainment levels in Britain have gone up:



Percentage of pupils in state-funded schools achieving at least 5 A*–C GCSEs (or equivalent), including English and mathematics



Percentage of pupils in local authority maintained schools achieving at least 5 A*–C GCSEs (or equivalent), including English or Welsh first language and mathematics



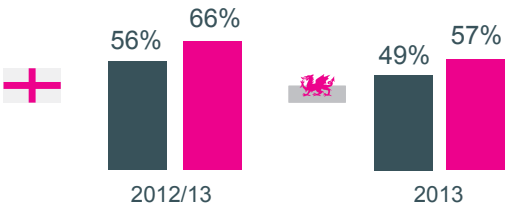
Percentage of S4 pupils achieving at least 5 Awards at SCQF Level 5 or better

NOTE

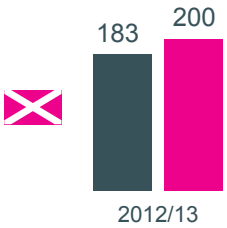
Due to differences in education systems, these statistics are not comparable across countries

However, there are some gaps in attainment between different groups. Girls continue to do better than boys

Those achieving at least 5 A*–Cs in GCSEs (or equivalent), including English or Welsh first language and mathematics



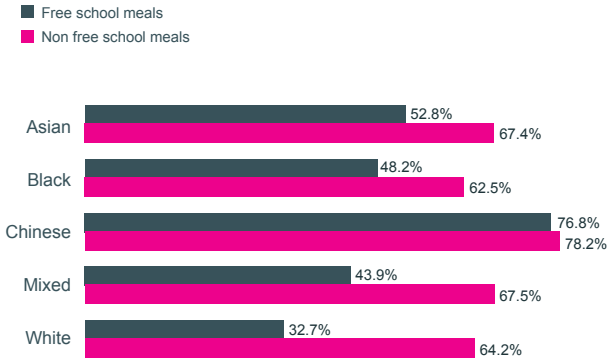
Average tariff score of S4 pupils



Boys
Girls

Chinese pupils in England are consistently high achievers

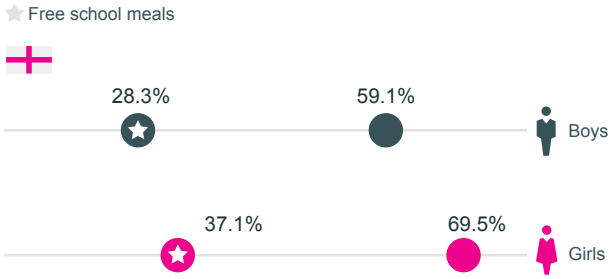
Percentage of pupils in state-funded schools in England achieving at least 5 A*–C GCSEs (or equivalent), including English and mathematics



The biggest gaps are among White pupils

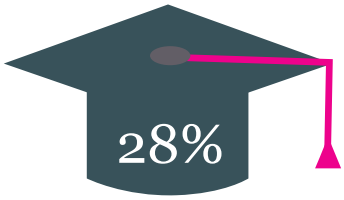
White boys who get free school meals have the lowest attainment levels

Percentage of pupils in state-funded schools in England achieving at least 5 A*–C GCSEs (or equivalent), including English and mathematics



More and more people in Great Britain have university degrees

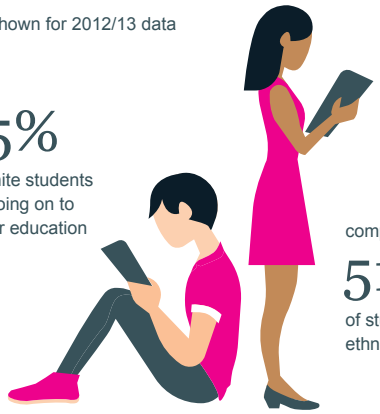
By 2013, 28% of those aged 25–64 had a degree-level qualification compared with 21% in 2008



But there are still gaps in higher education participation in England

Figures shown for 2012/13 data

45%
of White students are going on to higher education



compared with

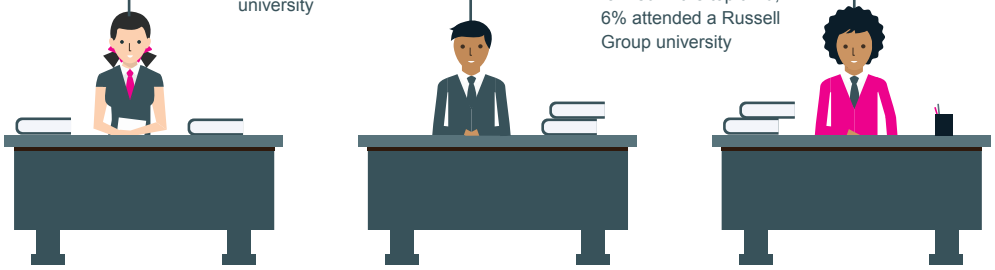
51–65%
of students from ethnic minorities

15%
of White students entered a higher education institution in the top third

20%
of Asian students entered a higher education institution in the top third; 12% attended a Russell Group university

Whereas, despite their overall high participation in higher education...

13%
of Black students attended an institution ranked in the top third; 6% attended a Russell Group university

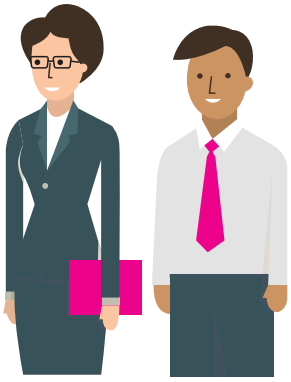


Girls continue to do better than boys at school and women are now more likely than men to have a degree in Great Britain

However, gaps persist in the workplace

Women are more likely to have a degree

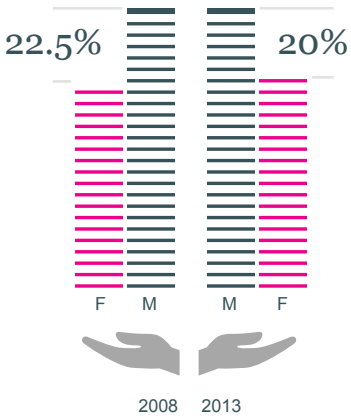
28.4% of women have a degree-level qualification compared with 27.7% of men



But men still occupy more senior positions

Men are twice as likely as women to be a manager, director or senior official

The gender pay gap has decreased



Using the evidence that we have gathered, there are areas where Britain has improved and got fairer, and areas where it has got worse. Improvements need to be made across the board to really aim for a fairer Britain.

All references available at: **www.equalityhumanrights.com/isbritainfairer/education**

While the performance of children with SEN improved, the attainment gap between them and children without SEN widened.

Additional support needs (Scotland)

In Scotland, the gap narrowed between pupils with ASN (a broader classification than SEN) and those without:

- S4 pupils with ASN had a lower average tariff score (136 points) compared with pupils without ASN (203 points). Compared with 2009/10, the average tariff score increased for both groups, but a larger increase for pupils with ASN (plus 36 points compared with plus 16 points) resulted in a smaller attainment gap in Scotland in 2012/13 compared with 2009/10.
- Between 2009/10 and 2012/13, however, improvements were made in recording, including an expansion of the criteria for ASN. At least some of the decrease in the size of the gap is likely to have arisen from a change in the composition of the ASN and non-ASN groups.

Children in the care system

Children in the care system in England are eligible for larger amounts of pupil premium funds than other pupils. These children are now supported by a 'Virtual School Head' (VSH) to promote their attainment in each local authority. The VSH also manages these children's pupil premium funds. Children in the care system in Scotland are classified as having ASN.

Children in the care system in England and Scotland have seen improvements in attainment over the review period but their performance remained well below that of other pupils:[12]

- In England, whereas in 2008 10.2% of children in the care system achieved at least five A*–C GCSEs (or equivalent), including English and mathematics, this rose to 15.5% in 2013. This compares with 60.6% for the population as a whole.
- In Wales, by the end of Key Stage 4, just 17% of children in the care system achieved the expected outcome of the Level 2 threshold, including A*–C GCSE grades in English or Welsh first language and mathematics, in 2014. This compared with 55% for the population as a whole. Note that this measure is not comparable to the statistics on GCSE attainment above (Welsh Government, 2015a).
- In Scotland in 2010/11, the average tariff score for school leavers who were children in the care system was 79 points. In 2012/13 this rose to 116 points, narrowing the attainment gap between them and other pupils (who scored 385 and 407 points respectively). Children in the care system did, however, tend to leave school at a younger age.

Children and young people in custody

Regulators reported positively about the education offered to children and young

[12] Unless otherwise stated, the figures reported here, on the attainment of looked after children, are from analysis specifically for the *Is Britain Fairer?* review using data from the Department for Education and Scottish Government. See data table CE2.3.

people in custody in England and Wales, and their participation in education rose.

- In 2009, 73% of 15–18 year old males in young offender institutions were participating in education, rising to 79% in 2012/13.[13] Participation in other activities while in custody tended to be much lower in 2012/13, ranging from 18% to 28%, depending on the activity (employment, vocational/skills training, offending behaviour programmes) (Kennedy, 2013).
- HM Chief Inspector of Prisons for England and Wales (2015a) found that educational outcomes in 2014–15 were good in most secure training centres and that existing provision was more successful than most of these children had experienced in the community.

There is no comparable data for Scotland.

4.3 Exclusions from school

Exclusion rates fell in England, Scotland and Wales. The size of the reduction varied greatly by protected characteristic, and children aged 11–15, those from some ethnic minorities and those with SEN/ASN remained most affected by exclusion:[14]

- By age group, the most substantial reduction in the exclusion rate was among those aged 11–15. But this rate remained far above those for other age groups (82.8 exclusions per 1,000 pupils for pupils aged 11–15 in 2012/13, compared with 11.3 or less for pupils of all other ages).
- The rates of exclusion cases in England for Mixed ethnicity and African/Caribbean/Black children were higher than for White children. In Scotland, the exclusion rates for ethnic minority pupils were lower than for White pupils. The very highest exclusion rates in Scotland in 2010/11 were for Gypsy Travellers and Other Travellers (57–175 exclusions per 1,000 pupils) (Scottish Government, 2012). However, more recent publications do not provide statistics at this level of detail.
- While the exclusion rate for children with SEN in England fell by more than it did for those without SEN between 2008/09 and 2012/13, the gap remained wide – in 2012/13, children with SEN continued to be much more likely to be excluded (116.2 compared with 17.0 exclusions per 1,000 pupils).
- The gap increased in Wales over that period and also remained wide (in 2012/13 the exclusion rate for children with SEN was 96.5 per 1,000 pupils, compared with 20.1 for those without).
- In Scotland, the gap narrowed between 2009/10 and 2012/13 – there was a larger decrease for children with ASN (by 84.8 per 1,000) compared with those with no identified ASN (by 14.8 per 1,000). (As with changes in attainment by ASN and non-ASN pupils, some of this decrease in the size of the gap likely reflects improvements in recording and the expansion of the criteria for ASN.)

[13] The figures reported here, on participation in education or training by children and young people in custody, are from analysis specifically for the *Is Britain Fairer?* review using data from HM Inspectorate of Prisons and the Youth Justice Board. See data table CE2.8.

[14] Unless otherwise stated, the figures reported here, on exclusions from school, are from analysis specifically for the *Is Britain Fairer?* review using data from the Department for Education, Welsh Government and Scottish Government. See data table CE2.10.

4.4 Bullying

Bullying can act as an impediment to accessing education and have negative effects on the private life of the victim. The UN Committee on the Rights of the Child (2008) expressed concern that bullying was a widespread problem in the UK and could hinder children's attendance at school and their potential for successful learning. Research by Gutman and Vorhaus (2012) found that children who were bullied tended to be less engaged at primary school, with a lack of positive friendships leading to less engagement at secondary school. This was also found to be associated with lower academic achievement, both in the current year but also in later years.

Disabled and LGB young people were particularly affected by bullying:

- Surveys by organisations (for example, Ditch the Label (2015) and Stonewall (Guasp, 2012; Jones and Guasp, 2014)) and longitudinal studies (for example, the *Longitudinal Study of Young People in England* (Baker *et al.*, 2014)) indicated that disabled and LGB young people were among those more likely to experience bullying in school.
- Stonewall Scotland (2014) survey results showed that close to nine in 10 secondary school teachers said that pupils at their school were bullied, harassed or called names for being (or being suspected of being) LGB.
- The survey data on Scottish pupils indicated that just over half of LGB young people experienced bullying in school (Stonewall Scotland, 2012).

4.5 Post-16 participation in education, employment or training

Participation in education and training among young people improved between 2008 and 2013. The availability of opportunities for further learning was generally higher for young people, as was the availability of financial support:

- In England, eligible young people can receive financial support for learning through the 16 to 19 Bursary Fund. In Wales and Scotland, support is available to students from low-income families in the form of Education Maintenance Allowances. Participation in post-16 education and training in Great Britain rose, leading to a fall in the percentage of 16–18 year olds who were NEET from 10% in 2008 to 8.3% in 2013.[15]
- In England in 2013, 18 year olds were over twice as likely as 16 or 17 year olds to be recorded as NEET (13.3% compared with 6.4% and 5.4% respectively). Compared with 2008, the largest fall was for 17 year olds. The 2013/14 academic year was the first year of the UK Government's raising the participation age policy, which may help to explain the fall in the NEET rate for 17 year olds.
- No changes were found in the percentage of 16, 17 and 18 year olds who were NEET in Wales or Scotland between 2008 and 2013.

[15] The figures reported here, on NEET rates, are from analysis specifically for the *Is Britain Fairer?* review using data from the Labour Force Survey. This analysis differs from other publications and is thus not directly comparable to other published statistics. The analysis here reports rates for 16–18 year olds on the basis of actual (rather than academic) age, by calendar year. See data table CE1.7.

Participation in education and training among young people improved between 2008 and 2013.

Disabled young people in 2013 were more likely to be NEET, though the gap had narrowed compared with 2008. In 2013:

- in Great Britain, 12.7% of disabled young people were NEET, compared with 6.8% of non-disabled young people, and
- the percentages in England were 13.2% and 6.6%, and in Scotland 15% and 7.8%, for disabled and non-disabled young people respectively. Sample sizes in Wales were too small to make any robust statistical judgements.

4.6 Access to further education and lifelong learning

The proportion of adults with no qualifications fell in Britain. Although some gaps narrowed, women, disabled people and some ethnic minorities were more likely to have no qualifications:[16]

- In Great Britain in 2013, 33.5% of people aged 25–64 had gained a qualification in the last 12 months, or participated in other formal or informal learning activities in the last three months. The percentages of men and women with no qualifications of any kind in England, Wales and Scotland fell between 2008 and 2013.
- The decrease in the percentage of women with no qualifications since 2008 was larger than for men in both England and Scotland, but it remained the case that women were more likely to have no qualifications than men in these two countries in 2013 (the rates for men and women in Wales were similar in 2013). This contrasted with higher education qualifications, where women had more than closed the gap with men (see Section 4.7).
- In England, the percentage of disabled people with no qualifications in 2013 was 20.2%, compared with 7.1% of non-disabled people. In Wales in 2013, 21.1% of disabled people had no qualifications, compared with 7.8% for non-disabled people. In Scotland in 2013, the rates were 24.3% and 7.6% respectively.
- In Great Britain, White people were less likely to have no qualifications (9.4%) than Pakistani/Bangladeshi people (23%) and 'Other' ethnic groups. (13.2%) in 2013. For most ethnic minorities the proportion with no qualifications was lower in 2013 than in 2008. The gap between White and Pakistani/Bangladeshi people narrowed over the period, with the latter seeing a larger decrease in the percentage of people with no qualifications.

As well as being more likely to have no qualifications, disabled people were less likely to have participated in learning activities and to have accessed the internet:

- Disabled people were less likely to have participated in other formal or informal learning activities in the last three months (21.8% compared with 37.4% of non-

[16] The figures reported here, on people with no qualifications and on people gaining a qualification or participating in formal or informal learning, are from analysis specifically for the *Is Britain Fairer?* review using data from the Labour Force Survey. See data tables EE2.1 and EE3.1.

disabled people in Great Britain as a whole in 2013). The gaps were relatively wider in Wales and in Scotland, at around 21% for disabled people and 39% for non-disabled people respectively in both countries.

- Disabled people were less likely than non-disabled people to have accessed the internet within the past three months in 2013. In England and Scotland, over 60% of disabled people had accessed the internet by this measure, compared with almost 90% of non-disabled people. In Wales, the figures were 47% of disabled people compared with 86% of non-disabled people.[17]

4.7 Access to higher education

The proportion of people aged 25–64 with a degree-level qualification increased in Britain, from 21.4% in 2008 to 28.1% in 2013,[18] but there was a higher increase among women than men:

- In 2008, men were more likely to have a degree than women (22.3% of men compared with 20.5% of women). By 2013, women had overtaken men, with 27.7% of men holding a degree compared with 28.4% of women.

All ethnicities saw an increase in the proportion with a degree-level qualification. Moreover, in 2012/13, more school leavers from ethnic minorities went on to study at a higher education institution than White school leavers (51–65% compared with 45% respectively). However, some ethnic minorities were less likely than pupils from other ethnicities to study at a higher-ranked institution:

- Just over 13% of Black pupils, compared with 15% of White and 19–20% of Mixed and Asian pupils, went to a university ranked in the top third.[19]
- Just 6% of Black pupils, compared with 11% of White and 12% of Mixed and Asian pupils, went to a Russell Group university (including Oxford/Cambridge) (DfE, 2015c).

Disabled people were less likely than those without a disability to have a degree-level qualification, and the gap between the two groups widened.

According to UCAS (2014), 2014 saw the largest recorded increase in university entry rates among young people living in the most disadvantaged 20% of areas, narrowing the gap with those from more advantaged areas. Concerns remained, however, that higher tuition fees might curb university participation among prospective students from disadvantaged backgrounds. There is no similar data for Wales or Scotland to make such comparisons for these countries.

[17] The figures reported here, on internet usage, are from analysis specifically for the *Is Britain Fairer?* review using data from the ONS Opinions and Lifestyle Survey (formerly the ONS Opinions Survey). See data table EE4.1.

[18] The figures reported here, on degree-level qualifications, are from analysis specifically for the *Is Britain Fairer?* review using data from the Labour Force Survey. See data table EE2.2.

[19] 'Top third' universities are identified as those in the top third on the basis of entry requirements (UCAS tariff scores) in 2011/12. See DfE (2015c) for further details.

Chapter 5
Work, income and the economy

This chapter summarises key findings that concern human rights and equality taken from the evidence papers 'Productive and valued activities' and 'Standard of living', which are available on our website.

This chapter discusses forced labour and trafficking, employment and unemployment, pay, housing, poverty and childcare.

The chapter highlights a number of areas of progress over the review period, including:

- There was increasing recognition of the human rights violations that arise as a result of trafficking, forced labour, servitude and exploitation.
- Despite the recession, over 70% of working age adults remained in employment in all three countries in 2013.
- Fewer adults and children were living in relative poverty in 2012/13 compared with 2007/08.
- The gender gap in employment and pay rates narrowed.
- A voluntary target for the FTSE 100 of 25% female board representation was met.
- In England, fewer adults and children lived in substandard accommodation.
- Homelessness in Wales and Scotland fell.

A number of serious challenges are however also highlighted, including:

- Reported trafficking rose in Britain. The proportion of victims who were UK nationals increased.
- Women and some ethnic minorities remained under-represented in both executive and non-executive directorships.
- The percentage of people living in material deprivation increased over the period.
- The overall employment rate in Great Britain in 2013 was lower than in 2008. Men were more likely to be unemployed than women, but women were more likely to be in part-time work. The numbers of women in part-time work who wanted to be in full-time work increased.
- 16–24 year olds had the lowest employment rates. The employment gap between the oldest and the youngest age groups increased.
- Unemployment rates increased more for disabled people compared with non-disabled people. Muslims experienced the

highest unemployment rates and lowest employment rates of any religious group.

- Unemployment rates were significantly higher for every ethnic minority group when compared with the White ethnic group. Pakistani/Bangladeshi women were less than half as likely to be employed compared with average female employment rates.
- All age groups below the age of 55 experienced significant reductions in average hourly pay between 2008 and 2013. The biggest declines were in the younger age groups.
- There were persistent gender pay gaps among graduates. Employment and benefit premiums for training and qualifications among graduates were higher for men than for women.
- Some ethnic minority people, Muslims and disabled people experienced greater declines in average pay.
- Poverty rates were higher for children in households headed by someone from an ethnic minority, compared with households headed by a White person.
- Material deprivation for disabled people above the poverty level increased. The gap between disabled and non-disabled people of working age widened.

5.1 Forced labour, modern slavery and human trafficking

Over recent years, there has been an increasing recognition of the human rights violations that arise as a result of trafficking, forced labour, servitude and exploitation.

Forced labour constitutes 'all work or service which is exacted from any person under threat of penalty and for which the person has not offered himself voluntarily' (Article 2 of the Forced Labour Convention, 1930) and is prohibited under Article 4 of the HRA. Recent government initiatives such as the Modern Slavery Strategy (2014), the Modern Slavery Act 2015 and the Home Office 'Review of the National Referral Mechanism for Victims of Human Trafficking' (2014) are broadly seen as positive progress. They provide improved legal protection for actual and potential victims of modern slavery and trafficking.

Current statistics cannot show the full scale and extent of all forms of forced labour, trafficking, slavery and servitude. Until recent changes take effect, reporting under the National Referral Mechanism only includes data on reported trafficking, which nonetheless shows trafficking to be an ongoing cause for concern:

- In Great Britain, there was a growth in reported trafficking from 1,171 people in 2012 to 2,295 in 2014.[20]
- UK nationals were victims of trafficking within the country (up to 6% of all reported victims in 2014 were UK nationals, up from fewer than 3% in 2012) (Serious Organised Crime Agency and UK Human Trafficking Centre, 2012; National Crime Agency, 2015).
- British children represented nearly 11% of all reported victims of trafficking of young people and children (National Crime Agency, 2015).

Areas of concern and gaps in human rights protection for victims of trafficking and forced labour remained. These included missed opportunities to prosecute all those involved in human trafficking, a lack of defence from prosecution for victims vulnerable to slavery, an Anti-Slavery Commissioner role that requires further strengthening, and trafficked

[20] The figures reported here, on adults, children and young people trafficked for domestic servitude and other forms of exploitation, are from analysis specifically for the *Is Britain Fairer?* review using data from the National Crime Agency. See data table CG4.1.

overseas domestic workers only being able to change employers where they can prove they have been a victim of slavery or trafficking.

5.2 Employment and unemployment

Despite the recession, over 70% of working age adults still remained in employment in all three countries in 2013.[21] The overall employment rate in Great Britain in 2013 was lower than in 2008, but has since continued to rise above pre-recession levels.[22] The unemployment rate was nearly a third higher, only just recovering to 2008 levels in early 2015.[23] Within this overall rate there were a number of differentials by protected characteristic.[24] (Self-employment is discussed separately, below.)

Differences by gender

Women were less likely than men to be employed and less likely to be in senior positions. They were more likely to work part-time.

Women were over-represented in part-time work – around 13% of male employment was part time in 2013, compared with 43% for female employment (ONS, 2015b).

Employment rates among women were lower than among men across all three countries, in both 2008 and 2013. The gap between them narrowed, but mainly due to a significant reduction in the male employment rate. Men were more likely to be unemployed (7.3%) than women (6.7%).[25]

In 2013, in all three countries men were still significantly more likely (almost twice as likely across Great Britain) to be in manager, director or senior official occupations than women.[26]

A voluntary target for the FTSE 100 of 25% female board representation was met in 2015, but women remained under-represented in both executive and non-executive directorships, especially at executive level and outside FTSE 100 companies (Vinnicombe *et al.*, 2014; BIS, 2015a).

Differences by age

Age employment gaps widened. Younger people were less likely to be employed and had the highest increase in unemployment:

- The employment gap between the oldest and the youngest age groups increased, mainly because 16–24 year olds had the lowest employment rates in both 2008 and 2013.

[21] More recent labour market figures show employment rates are now higher than the pre-2008 rate.

[22] Employment rate: number of people in employment as a percentage of the population (our analysis uses the working age population, aged 16–64).

[23] Unemployment rate: number of people not currently in a job as a percentage of the 'economically active population' (those who are able to work and have adequate availability to work; this does not include those not working through sickness, disability or because they are studying).

[24] Unless otherwise stated, the figures reported here, on employment and unemployment by protected characteristic, are from analysis specifically for the *Is Britain Fairer?* review using data from the Labour Force Survey. See data tables EG1.1 and EG1.2.

[25] Labour Force Survey figures from 2013, though the pattern is similar to that in 2008.

[26] The figures reported here, on occupational profiles by protected characteristic, are from analysis specifically for the *Is Britain Fairer?* review using data from APS NOMIS. See data table EG3.4.

- People aged 16–24 also had the highest unemployment rate and the highest increase in unemployment between 2008 and 2013; more than one in five of those able to work did not have a job in 2013.[27]
- Significant increases in unemployment were especially evident among those aged 16–24 in England and Scotland, and those aged 25–34 in Scotland and Wales.

Increases in young people's participation in full-time education only explain part of the falls in employment and increases in unemployment. Even accounting for this increased participation, the employment rate for young people has fallen and the unemployment rate risen over the review period (ONS, 2014c).

Apprenticeships provide in-job training and qualifications and a valuable access route to employment for younger people:

- New apprenticeships grew strongly from 2009/10 in both England and Scotland, but recently declined slightly in England (Skills Funding Agency and BIS, 2015; Skills Development Scotland, 2014; EHRC, 2013a).
- There were significant differences by gender, and ethnic minorities and disabled people appeared to have low levels of access to apprenticeships (EHRC, 2013a).
- In England, demand is outstripping supply, with concerns raised over insufficient opportunities for under-25s and the unemployed. In 2013/14, despite under-19s applying for 56% of the advertised apprenticeships they were given 27% of them, compared with over-25s who made up just 7% of applications but filled 37% of apprenticeships (Raikes, 2015).

Differences by disability

The disability employment gap widened across Britain:

- There was a significant difference between the unemployment rate of disabled and non-disabled people across Great Britain in 2013 (11.1% compared with 6.4%).
- The gap widened as the unemployment rate increased more between 2008 and 2013 for disabled people than for non-disabled people.
- Disabled people were under-represented at senior levels of both the private and public sectors (Green Park, 2014a; 2014b; 2015; NAO, 2015).

Differences by ethnicity

People from some ethnic minorities were less likely to be employed and less likely to be in senior positions. Some groups were also more affected by unemployment:

- Employment was higher in Great Britain in 2013 for White people (74.7%) than for ethnic minorities generally (59.3%). The employment rate for Pakistani/Bangladeshi people remained the lowest (48.2% in 2013), despite a significant improvement between 2008 and 2013.
- Unemployment rates were significantly higher for people from every ethnic minority when compared with White people (6.3% in 2013). The lowest unemployment rate

New apprenticeships grew strongly from 2009/10 in both England and Scotland, but recently declined slightly in England.

[27] In comparison to over 20% unemployment for young people, unemployment rates for all other age groups were below 10%, with most around or below 5%.

was among Indians (9.2%) and the highest among Pakistanis/Bangladeshis (17.3%) in 2013.

- Gender was also a factor in unemployment rates for people from different ethnicities:
  - Black men and Black women in the UK experienced some of the largest falls in full-time employment from 2006–08 to 2013 (Hills *et al.*, 2015).
  - Pakistani/Bangladeshi women were less than half as likely to be employed compared with average employment rates for all other female respondents (ONS, 2015c).
  - Further analysis of ethnic minority unemployment rates suggests there are particular gender/ethnicity/geographic patterns and concentrations of high unemployment (Vizard *et al.*, 2015; Catney and Sabater, 2015).
- Some ethnicities were under-represented at senior levels of both the private and public sectors (Green Park, 2014a; 2014b; 2015; NAO, 2015), and some ethnic minority people were significantly under-represented in manager, director and senior official occupations.[28,29]

Differences by religion

Religious minorities have significantly higher unemployment rates than those with no religion. Among the religions, Muslims have experienced the highest unemployment rates (particularly Muslim men in England), and also the lowest employment rates (especially in Scotland and Wales).

The Jewish religious group also experienced the highest fall in employment rates of any religious group between 2008 and 2013, but continued to have the lowest unemployment rate.

Changes in type of work outcomes

There was an increase in part-time work (including among those who wanted full-time jobs) and temporary employment:

- Part-time work increased between 2008 and 2013 (from approximately 7.5 million to nearly 8.2 million part-time workers) and remained heavily gendered (2.2 million male part-time workers in 2013, compared with over 6 million women) (ONS, 2015b).
- The number of part-time workers who wanted full-time jobs increased by 674,000 between 2008 and 2012. These were most likely to be the self-employed, women, the young, Asian people and disabled people (Bell and Blanchflower, 2013).
- Temporary employment increased from 1.4 million to 1.6 million employees between 2008 and 2013. In total, 40% of these employees stated that they were unable to find a permanent job in 2013 (ONS, 2015b).[30]

There were also large increases in self-employment, especially among certain groups, and the average income of the self-employed fell more than for those who were employed:

- Self-employment accounted for 44% of the net rise in employment since mid-2010. In

[28] African/Caribbean/Black (5.7%) and the Mixed ethnic group (7.2%) compared with the White ethnic group (10.7%) in 2013.

[29] The figures reported here, on occupational profiles by protected characteristic, are from analysis specifically for the *Is Britain Fairer?* review using data from APS NOMIS. See data table EG3.4.

[30] This was 25% in 2008 and 40% in 2013, but has since come down slightly, to 34% in early 2015.

total, 40% of all self-employed jobs created since mid-2010 were part time (TUC, 2014).

- Self-employment especially increased among older people (BIS, 2015b), women (ONS, 2015d; BIS, 2015) and migrant workers (Clark and Drinkwater, 2007; Nazroo and Kapadia, 2013; Brown *et al.*, 2013). Gypsy or Irish Travellers had the highest proportion of self-employed workers compared with people from any other ethnic minority (Clark, 2014).
- Workers increasingly tended to stay in self-employment (ONS, 2015d), and this included those with low, unpredictable and insecure incomes. There were substantial declines in average pay, and the median income of the self-employed fell by 22% between 2008/09 and 2012/13, more than for the employed (ONS, 2015d).

The number of employees and businesses reporting the use of zero-hours contracts (ZHCs) continued to increase (ONS, 2015e; D'Arcy, 2015a and 2015b), particularly affecting certain people:[31]

- People on ZHCs were more likely to be women and from both young and old age groups (ONS, 2015e).
- Nearly half of those on ZHCs (47%) were satisfied with having no minimum contracted hours; however, 27% still remained unhappy with these working arrangements (CIPD, 2013).
- Two in five ZHC workers lost out on statutory sick pay, and many may have missed out on statutory redundancy pay, the right to return to their job after maternity leave and protection from unfair dismissal because they did not work continuously with one employer for two years (TUC, 2013).

The Small Business, Enterprise and Employment Act 2015 included measures to restrict the abuse of approaches to flexible working arrangements, including preventing employers from using 'exclusivity clauses' – these stop individuals from working for another employer, even if the current employer is offering no work.

Discrimination at work

The statistical measure used to analyse experience of unfair treatment, harassment or bullying at work (*Fair Treatment at Work Report: Findings from the 2008 survey*) has not been updated since 2008. However, other evidence, including one-off studies, indicates that discrimination in the workplace continued to be experienced:

- by LGB people (Hoel *et al.*, 2014)
- by people with physical or psychological disabilities or long-term illness (Fevre *et al.*, 2013), and
- relating to pregnancy and maternity (Shuckburgh, 2014; Maternity Action, 2012; 2013; McVeigh, 2013). Recent research by BIS and the Commission (2015) indicates that employers' support for pregnant workers and those on maternity leave has not always translated into a positive experience for all women. Whereas 84% of employers agree that supporting pregnant workers and those on maternity leave is in

[31] ZHC definitions commonly refer to the lack of a guaranteed minimum number of hours: the Labour Force Survey definition is 'where a person is not contracted to work a set number of hours, and is only paid for the number of hours that they actually work'. The ONS Business Survey collects data from businesses on the number of 'people employed on contracts that do not guarantee a minimum number of hours'.

the interests of their organisation (mainly for staff retention purposes) and two-thirds of women felt supported during pregnancy and when they returned to work, there are issues including pregnancy discrimination and unfair dismissal during or after maternity leave (11% were either dismissed, made compulsorily redundant or treated so poorly they felt they had to leave), and there is evidence of verbal harassment, negative comments and discouragement from employers for women to attend antenatal appointments.

Despite recent significant reductions in all Employment Tribunal cases (see the section on legal aid in Chapter 7), discrimination remained a live and serious enough issue for individuals to continue to seek redress (52,062 cases in 2014) (ONS, 2015f).

Temporary employment increased from 1.4 million to 1.6 million employees between 2008 and 2013.

5.3 Pay

Pay declined in real terms for almost everyone in Great Britain between 2008 and 2013. Average hourly pay in real terms decreased by roughly 65 pence in 2013 compared with 2008 in Great Britain. Over the review period, pay was higher in England than in Scotland and Wales. The groups most affected by the decline in pay were men, younger people and people from some ethnic minorities.[32]

Young people

All age groups below the age of 55 experienced significant reductions in average hourly pay between 2008 and 2013. The biggest declines in pay were for younger people:

- a 60 pence fall to an average rate of £6.70 per hour for those aged 16 to 24, and
- a £1.40 fall to £10.60 per hour for those aged 25 to 34.

Up to 2013 there was a decline in both earnings and full-time employment for younger workers, despite them being more likely to be better qualified than previous generations (Hills *et al.*, 2015). Young people, and those with dependent children, were the most vulnerable to unstable and low paid employment (SHRC, 2012).

[32] Unless otherwise stated, the figures reported here, on pay gaps, are from analysis specifically for the *Is Britain Fairer?* review using data from the Annual Survey of Hours and Earnings, and the Labour Force Survey. See data table EG2.2.

Ethnic minorities

White workers were paid around 50 pence per hour more than the combined average for ethnic minorities, despite similar declines for both up to 2013.[33]

Between 2008 and 2013, some specific ethnic minorities had large reductions in average pay, especially the African/Caribbean/Black ethnic group (average hourly pay fell by £1.20). Other people affected included Sikhs across Great Britain, who had the largest significant reduction in average hourly pay of £1.90.

Particular concerns existed for migrant workers, who may not have been receiving the wages they should (SHRC, 2012).

Religious minorities

Muslims have experienced the lowest (and decreasing) hourly pay rates between 2008 and 2013 and, along with Sikhs, have the highest pay gaps compared with those with no religion, earning 22.5% and 19.1% less, respectively, in 2013.

Despite experiencing the highest fall in employment rates, Jewish people continued to have significantly higher pay than people of any other religion in 2013.

Disabled people

In 2013, disabled people in England were paid 90 pence per hour less, and in Scotland up to £1.20 per hour less, than non-disabled people.

Gender pay gap

The decline in the average pay for men meant that the pay gap between men and women narrowed between 2008 and 2013, from 22.5% to 20%. While average pay for men dropped by roughly £1 per hour (to £12.91), women's pay fell by 40 pence (to £10.33). The average hourly pay of women in Great Britain in 2013, therefore, remained significantly lower than that of men.

While the high incidence of low paid work[34] in the UK affected 21% of all workers (Corlett and Whittaker, 2014), it disproportionately affected women, concentrated in low-wage sectors:

- In total, 62% of workers paid below the living wage were women (Lawton and Pennycook, 2013).
- Women were also paid less than men in all age groups, and the impact of parenthood on women remained highly visible in pay gap trends (Department for Culture, Media and Sport, 2014).
- Gender pay gaps widen with age. In 2013, the gaps ranged from 3.5% for the 16–24 and 5.3% for the 22–29 age groups, to above 20% for all those aged 40 plus. For those aged 50 and over, the gaps have changed little since 2005 whereas, in younger age groups, the gaps are narrowing (Department for Culture, Media and Sport, 2014).

There were also persistent gender pay gaps among graduates. Employment and earnings premiums among graduates were lower for women than for men (Purcell *et al.*, 2012; Buscha and Urwin, 2013; Bibby *et al.*, 2014).

[33] Average hourly pay dropped by 70 pence per hour for the White ethnic group and by 60 pence per hour for all other ethnic groups between 2008 and 2013.

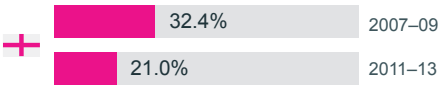
[34] Corlett and Whittaker (2014) define 'low pay' as pay that is below two-thirds of gross hourly median pay.

Is Britain Fairer? The state of equality and human rights 2015

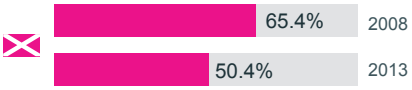
England
Scotland
Wales

Housing standards are improving

The proportion of adults living in substandard housing in England fell from 32.4% to 21%

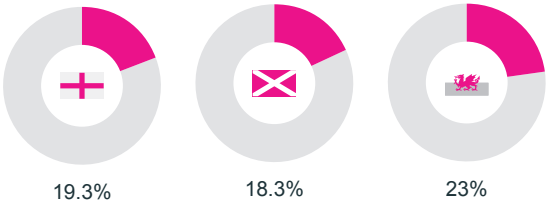


In Scotland, the number of adults living in housing that did not meet the Scottish Housing Quality Standard fell from 65.4% in 2008 to 50.4% in 2013



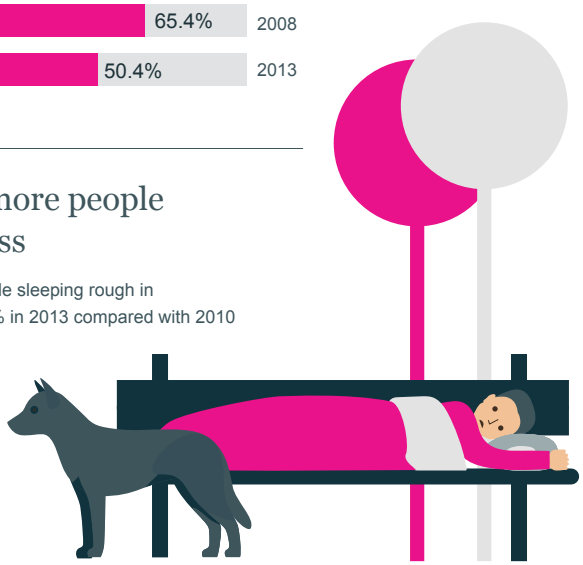
Poverty is a challenge in Britain

Poverty rates of adults in 2012/13



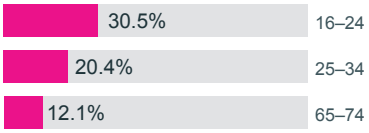
However, more people are homeless

The number of people sleeping rough in England was up 37% in 2013 compared with 2010

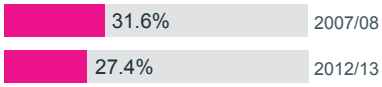


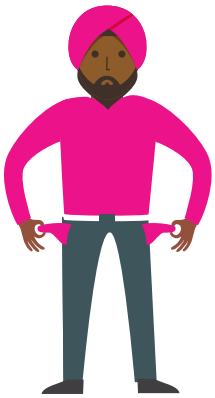
Poverty rates differ by age:

Poverty rates by age in 2012/13



Child poverty has decreased

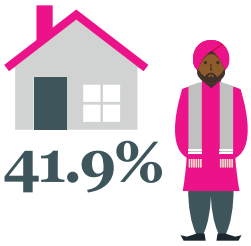


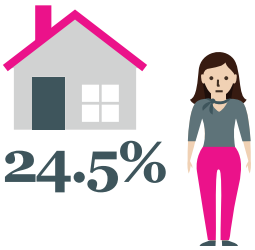


Earnings are decreasing and many people are in low-paid work

In 2013, people were paid roughly 65p less per hour in real terms than in 2008, affecting some people more than others

Poverty rates in 2013 were higher for children in households headed by someone from an ethnic minority than by someone from the White ethnic group





-£1.03
Men

-£1.20
25–34 year olds

-£1.20
African/Caribbean/ Black ethnic group

-£1.20
Religious minority groups, especially Sikhs and Muslims

The **gender pay gap** decreased due to a decline in average pay for men

2008 **22.5%**

2013 **20%**

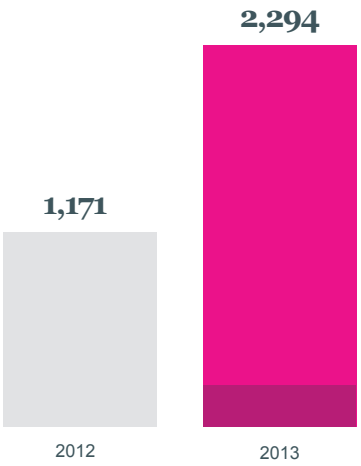
Of the 5.2m people in low-paid work,
3.2m are women

and women account for three-quarters of the 6m part-time workforce, which is particularly at risk of low pay

3 in 4 workers do not escape from low pay over a 10-year period

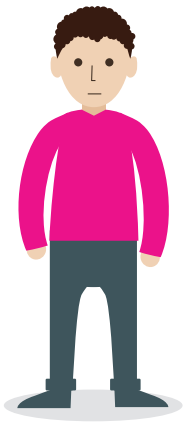
and those working part time, single parents, older workers and people with disabilities seem to find escaping from low pay especially difficult

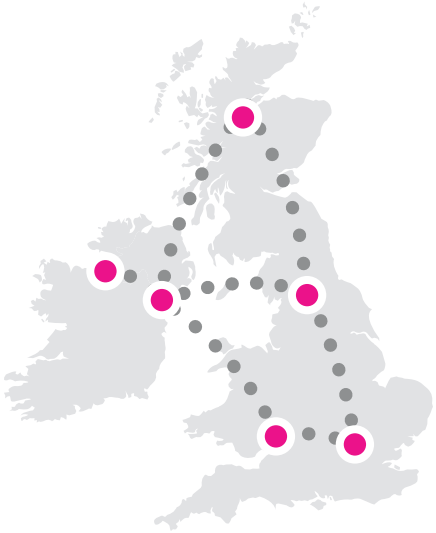
Trafficking has increased for both children and adults in the UK:



11%

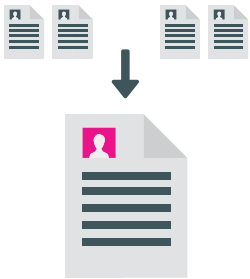
of children reported as trafficked in 2013 were UK nationals





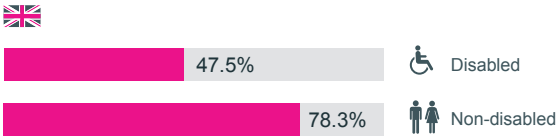
But unemployment is affecting more people

Employment for young people has reduced more than 5 percentage points in England, Scotland and Wales from 2008 to 2013



Over 1 in 5

economically active 16–24 year olds were looking for work across England, Scotland and Wales in 2013 compared with less than one in 10 for most other age groups



In 2013, the employment rate in Great Britain was 47.5% for disabled people compared with 78.3% for non-disabled people

2x

By 2013, someone from an ethnic minority group was over twice as likely to be unemployed than someone from the White ethnic group

Using the evidence that we have gathered, there are areas where Britain has improved and got fairer, and areas where it has got worse. Improvements need to be made across the board to really aim for a fairer Britain.

All references available at: **www.equalityhumanrights.com/isbritainfairer/work**

5.4 Housing

This section considers the proportion of people living in substandard housing, access to appropriate sites for Gypsies and Travellers and homelessness.

Substandard housing

While fewer people overall lived in substandard housing, it disproportionately affected people from some ethnicities:[35]

- In England, the number of adults living in substandard accommodation fell (from 32.4% in 2007/09 to 21% in 2011/13). There was also a significant decrease in the number of children living in substandard accommodation in England (from 30.9% in 2007/09 to 19.8% in 2011/13).
  - In 2011/13 a higher proportion of households headed by someone who was Black (27.9%) or Pakistani/Bangladeshi (26.3%) lived in substandard housing, compared with those households headed by someone who was White (20.5%).
- Scotland uses a separate measure for substandard housing (the Scottish Housing Quality Standard or SHQS), so data on this issue is not comparable with data for England (Scottish Government, 2014a). Analysis of the Scottish Household Survey/Scottish House Condition Survey showed that, whereas 65.4% of households in Scotland in 2008 were assessed as falling below the SHQS, in 2013 this had fallen to a little over half (50.4%). There was also a fall in the percentage of children living in accommodation that did not meet the SHQS (from 60.2% in 2008 to 43.5% in 2013).
- There is no equivalent data for Wales, which has been noted by the Chief Statistician for Wales (Welsh Government, 2014a).

Gypsy and Traveller communities

Concerns were raised (EHRC, 2011a; Scottish Parliament, 2013) about the quality and location of sites for Gypsies and Travellers. Since 2010, the number of Traveller caravans on socially-rented sites in England has remained relatively stable (DCLG, 2015). However, the number on authorised private sites has increased, while decreasing on unauthorised sites.

A much higher proportion of Traveller caravans in Wales (62%) were on socially-rented sites than in England (34%) (Welsh Government, 2015b). In Scotland, Census data indicated that, in 2011, 14% of Gypsy Travellers lived in caravans or some other mobile or temporary structure (Scottish Government, 2015a).

Homelessness

Homelessness rose in England but fell in Wales and Scotland:

- There were 60,940 households placed in temporary accommodation by local authorities in England in September 2014, the 13th quarterly increase since the end of a downward trend in 2011 (Wilson, 2015). Of these, 45,620 included dependent children and/or a pregnant woman. In addition, the number of families with dependent children placed in bed and breakfast style accommodation increased.

[35] The figures reported here, on substandard housing, are from analysis specifically for the *Is Britain Fairer?* review using data from the English Housing Survey and the Scottish Household Survey/Scottish House Condition Survey. See data tables EF1.1 and CF1.1.

- In 2015, the Homelessness Monitor report in England noted an increase in the number of people sleeping rough, up by 37% between 2010 and 2013 (Fitzpatrick *et al.*, 2015).
- Since 2011, there has been a fall in both the number of households accepted as homeless in Wales and the number of households placed in temporary accommodation (Welsh Government, 2014b).
- Between spring 2010 and autumn 2014 there was an overall reduction in the number of homelessness applications in Scotland, despite fluctuations over that time (Scottish Government, 2014b). Similarly, the total number of households in temporary accommodation in Scotland decreased, from a high of 11,254 on 31 March 2011 to 10,308 in September 2014.

Young people leaving care were recognised to be particularly vulnerable:

- The UK Government's care leaver strategy (HM Government, 2013) cites research which noted that around a quarter of those living on the streets had a background in care, and that rising demands on social housing made it increasingly difficult for young people to find suitable accommodation.
- The Children and Young People (Scotland) Act 2014 sought to provide new rights and opportunities for children and young people who have experienced care, particularly in relation to ensuring that they are involved in planning and discussions about their future.

5.5 Poverty

Poverty levels remained stable across Britain, and fell in England. Young people and people from some ethnic minorities were more likely to be living in poverty:[36]

- The percentage of households in Great Britain living on less than 60% of the median income after housing costs (AHC) – defined as living in relative poverty – remained relatively stable over recent years (Department for Work and Pensions, 2015). Between 2007/08 and 2012/13 it fell in England, but there was no statistically significant change in Wales and Scotland.
- A greater proportion of people were living in poverty in Wales (23.0%) in 2012/13 compared with England (19.3%) and Scotland (18.3%).
- The rate of older people living in poverty fell between 2007/08 and 2012/13 in Great Britain, whereas it increased for 16–24 year olds, who were more likely than all other adult age groups to be living in poverty: 30.5% of 16–24 year olds, compared with between 12.1% of those aged 65–74 and 20.4% of those aged 25–34.
- A higher proportion of people from an ethnic minority were living in poverty compared with White people, but the picture was mixed for different groups.

Child poverty

The Child Poverty Act 2010 required local authorities to assess the needs of children living in poverty in their area and to produce a child poverty strategy. The UK Government's Child Poverty Strategy for 2014–17 aimed to

[36] Unless otherwise stated, the figures reported here, on poverty, including child poverty, are from analysis specifically for the *Is Britain Fairer?* review using Households Below Average Income statistics. See data tables EF2.1 and CF2.2.

The rate of older people living in poverty fell between 2007/08 and 2012/13 in Great Britain, whereas it increased for 16–24 year olds.

tackle child poverty by helping families into work and increasing their earnings, improving living standards, and raising the educational attainment of children living in poverty.

In its first annual report, the Social Mobility and Child Poverty Commission (2013) stated that legally binding child poverty targets were likely to be missed by a considerable margin and that progress on social mobility might be undermined by high youth unemployment and falling living standards.

In 2012/13 in Great Britain:

- A total of 27.4% of children and young people aged 17 and under lived in households below 60% of contemporary median income AHC, compared with 31.6% in 2007/08.
- A greater percentage of children than adults lived in poverty in both years in all three countries.
- Poverty rates were generally higher for children aged 0–4 than for older children in each country in both years.
- Poverty rates were higher for children in households headed by someone from an ethnic minority (41.9%) compared with someone from the White ethnic group (24.5%).
- Children and young people from Pakistani/ Bangladeshi, Black or 'Other' ethnicity households had a particularly high poverty rate of between 43.2% and 49.3%.

Material deprivation

Material deprivation is a measure of what households think they can afford. Material deprivation overall increased across Britain. Within this overall increase, younger people, people from some ethnic minorities, women and disabled people were particularly affected.[37]

- In the UK, the percentage of people who could not pay unexpected expenses or found it difficult to make ends meet increased from 31% to 35% and from 45% to 49% respectively between 2009 and 2013 (Poverty and Social Exclusion, 2015).
- The proportion of people who had been in rent, mortgage, utility or hire purchase arrears for over 12 months also increased from 9% to 13% in the same period (Poverty and Social Exclusion, 2015).
- Greater increases in absolute poverty and falls in median real income and earnings were experienced more acutely by those aged 22–30 between 2007/08 and 2012/13, compared with the 31–59 age group (Belfield *et al.*, 2014).

[37] Unless otherwise stated, the figures reported here, on material deprivation, are from analysis specifically for the *Is Britain Fairer?* review using data from the Family Resources Survey. See data tables EF2.2 and CF3.2.

- In the years considered in this review, the mean deprivation score for working age adults was higher in Wales than in England and Scotland in both 2007/08 and 2012/13. For children, it was very similar in both England and Wales, and lower in Scotland. (Mean deprivation scores for working age adults and children are not comparable as they are based on different measures.)
- In Great Britain overall, there was an increase in the mean deprivation score for households with children. In 2012/13, children aged 5–10 had a higher mean deprivation score than those aged 0–4. This rate had increased since 2010/11 by 1.5 points to 11.8.
- Some ethnic minority working age people had a higher mean deprivation score in 2012/13 compared with White people, ranging from 2.0 for Pakistani/Bangladeshi people, 1.9 for Black people and 1.2 for people of 'Other' ethnicities compared with 0.9 for White people.
- Women had a higher mean deprivation score than men in both 2007/08 and 2012/13.
- There was a significant increase in the mean deprivation score for working age disabled people in Great Britain, from 1.4 in 2007/08 to 1.7 in 2012/13. The gap between them and non-disabled people widened. It should be noted that the methodology in relation to disability has changed over time. Households with a disabled child had a higher mean deprivation score than those without, although the gap between them did not change over time.

A report from the Scottish Government (2014c) considered a number of the key UK welfare system changes that have direct and indirect financial impacts on disabled people in Scotland. It concluded that such people faced a disproportionate loss of income compared with other people.

A Welsh Government report (2013) concluded that, although some protections had been put in place for disabled people through exemptions and Discretionary Housing Payments, there would be a significant impact on people in Wales. This was especially as a result of the relatively higher dependency on disability and sickness benefit compared with the rest of the UK.

Income distribution

It is worth noting that income inequality, as measured by the Gini coefficient, was not negatively affected. In fact, by this measure inequality declined slightly over the time period.[38] Similar reductions in income inequalities have been identified by measures of income distribution that look at the 90/10 ratio (the income gap between those near the top and those near the bottom of the income distributions), and the 90/50 ratio (the gap between those near the top and those around the middle income distributions). These measures do not take into account the increased inequality at the very top of the income distributions.

[38] The **Gini coefficient** (also known as the **Gini index** or **Gini ratio**) is a statistical measure of the income distribution among the population of a nation. It is the most commonly used measure of income inequality. A Gini coefficient of zero expresses perfect equality (for example, where everyone has the same income). A Gini coefficient of one expresses maximal inequality among values (for example, where only one person has all the income or consumption, and all others have none). Thus, a fall in the Gini coefficient signals a decrease in income inequality.

5.6 Access to childcare

Data for England from analysis of the Childcare and Early Years Survey of Parents indicates that there was little change between 2010 and 2012 in the proportion of parents saying that they had problems finding flexible childcare. Parents from some ethnic minorities, and of disabled children, were particularly affected by such problems:[39]

- The picture for people from different ethnic minorities was mixed: in 2012, 43.2% of parents of African/Caribbean/Black children and 34.5% of parents of Indian children had problems finding flexible childcare, compared with 24.6% of parents of White children.
- Parents with a disabled child also found it harder to find flexible childcare: 32.0%, compared with 25.7% of parents of a non-disabled child.

Other problems in accessing childcare provision include lack of availability in the early morning or overnight, inflexibility, prohibitive costs and a poorer supply of childcare provision in rural areas (Marrin and Hudson, 2014; Rutter, 2015).

[39] The figures reported here, on access to childcare in England, are from analysis specifically for the *Is Britain Fairer?* review using data from the Childcare and Early Years Survey of Parents. See data table EF3.2.

Chapter 6
Health and care

This chapter summarises key findings that concern human rights and equality taken from the evidence papers on 'Health', 'Life', 'Physical security', 'Standard of living' and 'Individual, family and social life' which are available on our website.

This chapter discusses health status, premature death (including life expectancy, infant mortality and suicides), access to healthcare (including mental health services), and quality of health and social care (including some significant quality failures in health and social care).

The chapter highlights a number of areas of progress, including:

- The gap in life expectancy between men and women narrowed in all three countries between 2007/09 and 2011/13, with the greatest decrease in Scotland.
- The infant mortality rate went down in England/Wales between 2007/08 and 2012 for White, Pakistani/Bangladeshi and African/Caribbean children.
- In England, the proportions of both men and women who currently smoke decreased between 2008 and 2012. In England and Wales, the proportions of men who exceeded lower-risk drinking guidelines also decreased.
- In Scotland during 2008–13, the overall suicide rate decreased (although the rate in Scotland remained higher than in England and Wales).
- In England and Wales, governments provided substantial funding for Improving Access to Psychological Therapies (IAPT). Scotland was the first country in the UK to introduce a target to ensure faster access to psychological therapies for patients of all ages.
- Reports from Scotland and England noted positive developments in the availability of high-quality mental health care, including units where patients were engaged in activities, thinking about recovery and focusing on the future.

A number of serious challenges are however also highlighted, including:

- Self-reported health status for some people with protected characteristics was worse (in the 2011 Census). For example, in all three countries a greater proportion of Gypsies and Travellers rated their health as bad or very bad compared with other ethnicities.

- People with serious mental illness or a learning disability and homeless men and women died earlier than the general population.
- The male suicide rate increased in England and Wales resulting in a widening of the gap between men and women. In the UK, the suicide rate of males aged 45–49 increased significantly between 2007 and 2013.
- People from more disadvantaged socioeconomic positions had worse outcomes at the end of life, including a higher proportion of hospital deaths, lower proportion of home and hospice deaths, and increased emergency department attendance in the last month of life. Evidence suggests that children with cancer who needed palliative care often did not receive it owing to lack of provision and lack of awareness and acceptance.
- Some people, for example transgender people and people from migrant communities, experienced problems accessing healthcare services.
- In England, the proportion of adults at risk of poor mental health increased and people identifying as 'gay/lesbian/bisexual/other' in England in 2012 were at greater risk of poor mental health compared with those identifying as heterosexual.
- People from the Black/African/Caribbean/Black British ethnic groups had the highest rate of contact with specialist mental health services; people from these groups, and those of Pakistani ethnicity, were more likely to have been compulsorily detained under the Mental Health Act 1983 as part of an inpatient stay in a mental health unit.
- There were some serious concerns about access to mental health services for children and young people.
- The number of people in England with health problems requiring both health and social care increased (a trend that is likely to continue).
- People with learning disabilities and/or autism were placed in inappropriate settings for too long and a long distance from family and home owing to a lack of good-quality alternatives in the local community.
- The care of prisoners with mental health needs was inconsistent across different prison establishments.
- Legal safeguards provided by the HRA to prevent inhuman or degrading treatment were not as widely used as they should have been.

6.1 Health status

Bad health particularly affected women, disabled people, those in 'Routine' occupations or who had never worked, Gypsies and Travellers, and homeless people:[40]

- A higher proportion of women than men in England reported having bad or very bad health in both 2008 and 2012, but there were no differences by gender in Wales in either 2009 or 2012. The proportion of women in Scotland who reported bad or very bad health increased between 2008 and 2012.
- In England, the proportion of disabled people who reported bad or very bad health increased between 2008 and 2012, whereas there was a reduction for non-disabled people. In Wales, the proportion of disabled people who reported bad or very bad health decreased between 2009 and 2012. There was no change in Scotland.

[40] Unless otherwise stated, the figures reported here, on poor self-reported health, are from analysis specifically for the *Is Britain Fairer?* review using data from the Health Survey for England, Welsh Health Survey and Scottish Health Survey. See data table EB2.1.

- Lower proportions of people with 'Higher managerial, administrative and professional' occupations reported bad health, as compared with other occupations, in all three countries. Those in 'Routine' occupations or who had never worked reported the highest levels of bad or very bad health.
- Bad health also particularly affected Gypsies and Travellers:
  - In all three countries, a greater proportion of Gypsies and Travellers rated their health as bad or very bad compared with people from other ethnicities (ONS, 2014b; Scottish Government, 2014e).
  - An ONS report noted that, while the variability in general health among people from different ethnic minorities could sometimes be explained by their differing age structures (that is, an older age profile), this was not the case for Gypsies and Travellers (ONS, 2014b).
  - Gypsies and Travellers were known to have low child immunisation levels, higher prevalence of anxiety and depression, chronic cough or bronchitis (even after smoking is taken into account), asthma, chest pain and diabetes, as compared with the general population (DCLG, 2012).
- Evidence from England showed the health problems of homeless people to be considerable, including physical trauma, skin problems, respiratory illness, mental ill health, infections and drug/alcohol dependence (DH, 2010). Reported incidents of physical ill health, depression and substance misuse were higher among those sleeping rough or living in precarious accommodation (Homeless Link, 2014).

6.2 Premature death

Life expectancy

Overall life expectancy rose and the gender gap narrowed.[41] However, some people, such as those with learning disabilities and serious mental illness, Gypsies and Travellers, and homeless people had lower life expectancy rates than the general population:

- Life expectancy was highest in England and lowest in Scotland (a difference in life expectancy at birth in 2011/13 of 2.4 years for men and 2.1 years for women).
- Men experienced a greater increase in life expectancy than women. The gap in life expectancy between men and women narrowed in all three countries between 2007/09 and 2011/13, with the greatest decrease in Scotland.
- White people are estimated to have among the highest life expectancies in England (Rees and Wohland, 2008). However, the life expectancy of Gypsies and Travellers is lower, and below that of other ethnicities (DCLG, 2012).
- People with serious mental illness have substantially lower life expectancies compared with the general population, with reductions in life expectancy of 7–24 years (Chesney *et al.*, 2014). In 2012, people with a learning disability had a median life expectancy of 58 years (Public Health England, 2014), compared with life expectancies of closer to 80 (or more) for the general population.
- The mean age of death for homeless men and women was around 26 and 37 years lower than for the general population of men and women respectively (Crisis, 2011a).

[41] Unless otherwise stated, the figures reported here, on life expectancy, are from the ONS National Life Tables. See data tables EA1.1(a–d).

Infant mortality

Infant mortality particularly affected some ethnic minority people, mothers of different ages and socioeconomic groups:[42]

- The infant mortality rate went down in England/Wales[43] between 2007/08 and 2012 for White, Pakistani/Bangladeshi and African/Caribbean groups.
- In Scotland, South Asian people and people from 'Other' ethnicities were disproportionately affected by foetal and infant deaths in 2012.
- In England/Wales (in both 2008 and 2013) and Scotland (2008–12), the infant mortality rate was higher for mothers aged below 20 years old than for other age groups. The second highest rate was among mothers aged 40 and over.
- In England/Wales in 2011 and 2013, infant mortality rates were highest for the 'Routine, never worked and long-term unemployed' socioeconomic group; this was also the case for mothers in the most deprived areas in Scotland in 2012.

Lifestyle factors

The key drivers of ill health and premature death included smoking, excessive alcohol consumption and being overweight or obese. These saw some decreases, but men and disabled people remained particularly affected:[44]

- In England, the proportions of both men and women who currently smoke decreased between 2008 and 2012.
- In England and Wales, the proportions of men who exceeded lower-risk drinking guidelines decreased between 2008 (2009 in Wales) and 2012; there was a decrease for women in England and Scotland between 2008 and 2012.
- The percentages of overweight or obese individuals were higher among men and disabled people in all three countries.

Suicide

During the review period Scotland, Wales and England all had tailored national action plans for the prevention of suicide: the Welsh Government's 'Talk to Me' (now updated to 'Talk to Me 2'); the Scottish Government's Suicide Prevention Strategy (2013–16); and 'Preventing suicide in England', led by the Department of Health (DH).

Suicide rates increased in England and Wales, but decreased in Scotland (although its suicide rate remained the highest in Britain). The gap between men and women widened in the UK as a whole, with middle-aged men having the highest suicide rates:[45]

- Between 2008 and 2013, the overall suicide rate increased slightly in England (from 10.0 per 100,000 inhabitants to 10.7) and to a greater extent in Wales (from 10.7 to 15.6 per 100,000 – most visibly among the 35–64 age groups).

[42] The figures reported here, on infant mortality in England and Wales, are from analysis specifically for the *Is Britain Fairer?* review using data from Child Mortality Statistics and Gestation-specific Infant Mortality publications by the ONS. See data table CA1.1. Figures for Scotland have been derived from Healthcare Improvement Scotland (2014).

[43] The term England/Wales indicates that countries were measured together in the statistical analysis.

[44] The figures reported here, on healthy lifestyles, are from analysis specifically for the *Is Britain Fairer?* review using data from the Health Survey for England, Welsh Health Survey and Scottish Health Survey. See data tables EB4.1(a,b,e).

[45] Unless otherwise stated, the figures reported here, on suicide rates, are from analysis specifically for the *Is Britain Fairer?* review using data from the ONS and the National Records of Scotland. See data table EA3.3.

- The male suicide rate increased in both countries resulting in a widening of the gap between males and females in Wales and England.
- In Scotland during 2008–13, the overall suicide rate decreased from 19.1 per 100,000 inhabitants to 16.6, with rates for both males and females decreasing, although Scotland's suicide rate remained the highest among the three countries.
- In the UK, the suicide rate of males aged 45–49 increased significantly between 2007 and 2013 from 19.4 to 26.8 deaths per 100,000 population, while that of the overall population (counting both men and women) increased from 10.6 to 11.9 per 100,000 over the same period (ONS, 2015k).

The National Confidential Inquiry into Suicide and Homicide by People with Mental Illness (NCISH, 2014) highlighted the continued high risk of suicide by patients with mental health issues, within 12 months of mental health service contact. Patients at particularly high risk were those who were recently discharged from hospital (especially in the first one or two weeks) and those who were under crisis resolution and home treatment who were also living alone.

People with serious mental illness have substantially lower life expectancies compared with the general population.

6.3 Access to healthcare

Evidence suggests that some groups such as Gypsies and Travellers, transgender people and migrant communities can experience problems accessing healthcare services.

In each of the three countries, steps were taken to improve access to services and health outcomes for marginalised people. For example NHS England, on behalf of the wider healthcare system, leads on the NHS Equality and Diversity Council (EDC), chaired by the Chief Executive of NHS England. The EDC introduced the Equality Delivery System (now known as EDS2) to enable NHS organisations to review and improve their performance for people with characteristics protected by the Equality Act 2010, including those regarded as vulnerable. From April 2015, EDS2 implementation by NHS provider organisations became mandatory under the terms of the NHS standard contract.

Gypsies and Travellers

Many Gypsies and Travellers remained unregistered with GPs (RCGP, 2013). In Scotland, some GP practices refused to register Gypsy Travellers on the grounds that they had no fixed address or photographic ID, or could not guarantee that they would stay in the area for at least three months (Scottish Parliament, 2012).

The Welsh Government set out measures to improve the delivery of healthcare for Gypsies and Travellers (Welsh Government, 2011). In Scotland a range of approaches were being employed by health boards to improve services for Gypsy Travellers, including outreach initiatives and health visits to sites,

and linking patients directly to GP practices and dentists (Scottish Parliament, 2012).

Transgender people

Transgender people experienced a range of barriers in accessing NHS gender reassignment services, resulting from a lack of knowledge on the part of GPs on referring patients to gender identity services or, at worst, GPs allegedly being obstructive and discriminatory (Bishop, 2013; Kirk-Robinson, no date).

Little formal evidence is available about access to healthcare services for transgender children and young people.

Migrant communities

Concerns were raised that confusion over eligibility to access healthcare in England meant that migrants with complex immigration histories, and/or those who entered the UK prior to the introduction of the new rules, could be unfairly refused access to free healthcare, regardless of how long they had lived in the UK (Grove-White, 2014).

The Children's Society (2015) stated that charging undocumented migrant children for secondary healthcare threatened the health and wellbeing of the child, posed risks to public health, and prevented health professionals from identifying child protection and safeguarding concerns.

In Wales, the Welsh Government introduced regulations in 2009 to allow refused asylum seekers to access free healthcare (Welsh Government, 2009b). Scotland has its own NHS Charges to Overseas Visitors Regulations and has not adopted England's position whereby only those asylum seekers who have yet to have their application for asylum determined are entitled to free hospital treatment.

Access to end of life and palliative care

End of life care helps those with advanced, progressive or incurable illness to live as well as possible until they die. There was evidence of inequality in outcomes at the end of life for people sharing particular characteristics:

- People from more disadvantaged socioeconomic positions had worse outcomes at the end of life including a higher proportion of hospital deaths, lower proportion of home and hospice deaths, and increased emergency department attendance in the last month of life (Gomes and Higginson, 2006; Henson *et al.*, 2015; Gao *et al.*, 2014).
- A study using records from all deaths in England between 2001 and 2010 showed that overall a larger proportion of men died at home and in hospital compared with women, while a larger proportion of women died in care homes (Gao *et al.*, 2014).
- Although dying at home became less likely with increasing age across the period 1984–2010, age-based inequality narrowed over time (Gao *et al.*, 2014).
- Evidence suggests that children with cancer who needed palliative care often did not receive it owing to lack of provision and lack of awareness and acceptance (Fraser *et al.*, 2011).
- A recent review of UK-based literature found that studies reported lower access to palliative and end of life care services for ethnic minorities when compared with White British people. There was also concern that the Christian origins of the hospice movement may have led to some

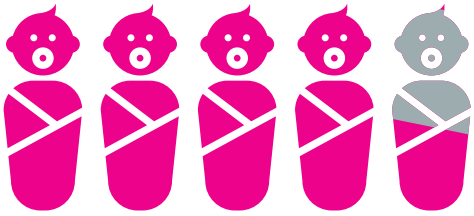
1 Life expectancy has increased across the population
However, there are still gaps

Life expectancy is lower for:

- Men than women
- People living in deprived areas than those in more affluent areas
- People with serious mental health problems than those without
- People with learning disabilities than those without
- Members of the Gypsy and Traveller communities than others
- Homeless people than others

2 And improvements have been seen in health and the care that is received

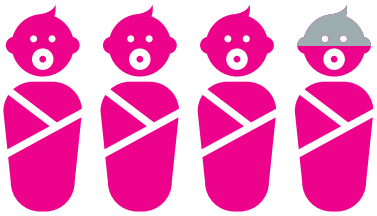
Infant mortality has decreased



4.6

2008

Per 1,000 live births



3.8

2013

There was no overall change in England (between 2008 and 2012) or Wales (between 2009 and 2012) in the proportion of adults who reported bad or very bad health. There was an increase in Scotland (between 2008 and 2012)

Across Britain, less than a third of disabled people reported bad or very bad health – however, this has increased in England but decreased in Wales

The proportion of adults who smoke has decreased in England (2008–2012) and Wales (2009–2012), but not in Scotland (2008–2012)

There was a decrease in the proportion of men who exceeded lower risk drinking guidelines in England and Wales and a decrease for women in England and Scotland

There were improvements to end of life care

3 However, there was evidence of inequality in outcomes at the end of life for some groups

People from more disadvantaged socioeconomic groups had worse outcomes at the end of life

Between 2001 and 2010 a larger proportion of men died in hospital than women

Evidence suggests that children often did not receive palliative care owing to lack of provision, awareness or acceptance

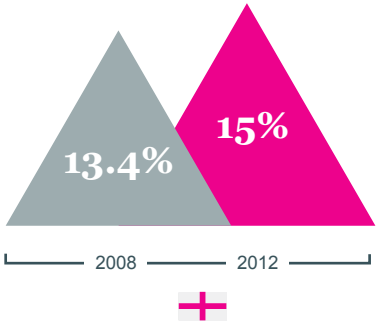
Ethnic minorities reported having lower access to end of life care services compared with White British people

4 More adults in England were at risk of poor mental health in 2012

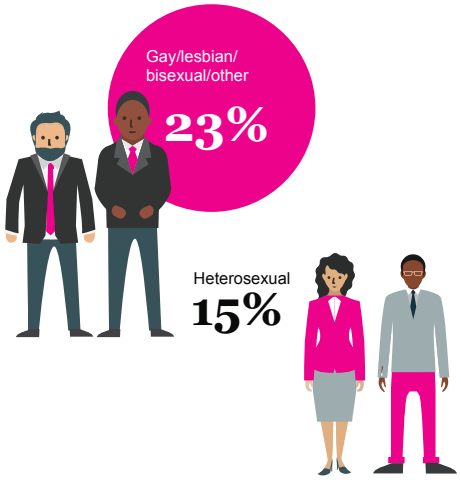
1 in 6

women were at risk of poor mental health in England and Scotland compared with 1 in 8 men

Increase in proportion of people at risk of poor mental health



People from the Black/African/Caribbean/Black British ethnic group had the highest rate of contact with specialist mental health services and were more likely to have spent time in mental health units



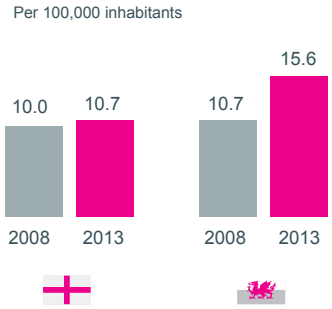
A higher proportion of gay/lesbian/bisexual/other adults in England (2012) were at risk of poor mental health, compared with heterosexual adults

5 Suicide

The overall suicide rate slightly increased between 2008 and 2013 in England and to a greater extent in Wales

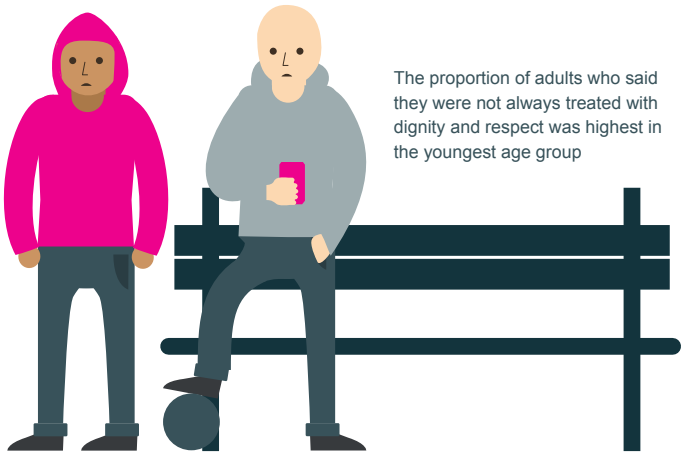
In Scotland, the overall rate decreased but remained the highest among the three countries

In the UK, the rate for males aged 45–49 increased significantly between 2007 and 2013



6 With access to services posing a challenge for some

54.4% of disabled older people in England did not receive practical support that met their needs, compared with 9.2% of non-disabled older people



The proportion of adults who said they were not always treated with dignity and respect was highest in the youngest age group

Using the evidence that we have gathered, there are areas where Britain has improved and got fairer, and areas where it has got worse. Improvements need to be made across the board to really aim for a fairer Britain.

All references available at: **www.equalityhumanrights.com/isbritainfairer/healthcare**

incompatibility within hospice care and palliative care more broadly in relation to other religions (Calanzani *et al.*, 2013).

- Specific challenges were faced by lesbian, gay, bisexual and transgender (LGBT) people, owing to a lack of recognition of their relationships by other family members and healthcare professionals (Bristowe, Marshall and Harding, 2015).

Access to mental health care

Risk of poor mental health rose in England with some ethnic minorities, LGB people, and disabled people particularly at risk:[46]

- In England, the proportion of adults at risk of poor mental health increased from 13.4% in 2008 to 15.0% in 2012.
- The gap between disabled and non-disabled people in England widened between 2008 and 2012. (However, a number of disabled people would have classified themselves as such owing to a mental health condition.)
- Among ethnic minority respondents in England, the highest proportions of people at risk of poor mental health in 2012 were among Pakistani/Bangladeshi and African/Caribbean/Black respondents (22.9% and 19.9% respectively). The higher rate among Pakistani/Bangladeshi people was primarily among women (Vizard and Obolenskaya, 2015). There was an increase in the risk of poor mental health among White women between 2008 and 2012 (Vizard and Obolenskaya, 2015).
- People identifying as 'gay/lesbian/bisexual/other' in England in 2012 were at greater risk of poor mental health compared with those identifying as heterosexual.

Although the types of people at risk of poor mental health were broadly similar for Wales and Scotland, the proportions of people affected did not see the same level of increases as in England. However, there was an increase in Scotland in the proportion of adults aged 25–34 at risk of poor mental health and in Wales among those aged 35–44. (Scotland also had the highest suicide rate among the three countries – see above.)

Mental health problems accounted for 23% of the total 'burden of disease' in the UK (DH, 2011) but only a quarter of all those with mental ill health received treatment, compared with the vast majority of those with physical health problems (Centre for Economic Performance, 2012). The Health and Social Care Act 2012 introduced a principle of 'parity of esteem' in England, whereby mental health must be given equal priority to physical health.

The Mental Health Act 1983 and Mental Health (Care and Treatment) (Scotland) Act 2003 give police the power to detain people for up to 72 hours if they appear to have a mental illness and be in need of care.

In England, there has been an increase in the rate of involuntary admissions for mental illness over the period 1988 to 2008 which appears to be associated with a decrease in provision of mental illness beds in the NHS (Keown *et al.*, 2011).

- Mental health inpatient provision decreased by 10% in the four years between December 2010 and December 2014, falling to 21,446 (NHS England, 2015).
- The number of formal detentions in NHS and independent hospitals increased from 46,600 in 2009/10 to 53,176 in 2013/14 (HSCIC, 2014b).

[46] Unless otherwise stated, the figures reported here, on poor mental health, are from analysis specifically for the *Is Britain Fairer?* review using data from the Health Survey for England, Welsh Health Survey and Scottish Health Survey. See data table EB1.2.

- Of people with an inpatient stay in a mental health unit in 2013/14, over a third were compulsorily detained under the Mental Health Act 1983 (HSCIC, 2014a).

The reduction in inpatient bed numbers resulted, at least in part, from policies to introduce a more community-based model of services (Keown *et al.*, 2011).

The Commission on Acute Adult Psychiatric Care in England noted that Trusts that focus on improving the overall acute care pathway had fewer difficulties with their acute care bed base (CAAPC, 2015). It also suggested that investment in community services, both as an alternative to and following acute admissions, was needed.

In England and Wales, governments have provided substantial funding for Improving IAPT. Scotland was the first nation in the UK to introduce a target to ensure faster access to psychological therapies for patients of all ages (Scottish Government, 2014g). There were annual increases in the numbers of people treated under the IAPT programmes, and improvements in levels of anxiety and depression. There was, however, considerable variation between areas, with long waiting times for treatment in some places (HSCIC, 2014c; Pulse, 2013).

Data on contact with mental health services in England showed some differences by ethnicity (HSCIC, 2014a):

- 4.4% of Black/African/Caribbean/Black British adults had contact with NHS-funded specialist mental health services in 2013/14; for the Mixed/multiple ethnic group the rate was 3.3% and for the Asian/Asian British population it was 2.9%, compared with 3.5% for White adults.
- Among Black or Black British people with an inpatient stay in a mental health unit in 2013/14, 48.8% were compulsorily detained under the Mental Health Act 1983 (including 50.6% of people of African ethnicity).
- For people of Asian or Asian British ethnicity, the percentage with an inpatient stay in a mental health unit in 2013/14 who were compulsorily detained under the Mental Health Act 1983 was 45.8% (49.4% for people of Pakistani ethnicity). Among White people, the figure was 33% (with the highest rate, 40.4%, being for those of 'Other White' ethnicity).

The use of police custody-based 'places of safety' for people with mental health problems decreased in England by 24% between 2012/13 and 2013/14, while the use of hospital-based 'place of safety' orders increased by 21% (HSCIC, 2014b).

In England, Wales and Scotland there were no changes in the proportions of children and young people at risk of poor mental health between 2008 (2009 in Wales) and 2012. In 2012, these proportions were in the range of 5% to 10% of all young people aged 13 to 15.[47] However, children and young people with mental health conditions have sometimes experienced high referral thresholds or long waiting times for specialist services, and have in some cases been admitted to hospitals a long way from home (House of Commons Health Committee, 2014). As a result, the UK Government stated that it was making improvements to child and adolescent mental

[47] The figures reported here, on children and young people reporting poor mental health, are from analysis specifically for the *Is Britain Fairer?* review using data from the Health Survey for England, the Scottish Health Survey and the Welsh Health Survey. See data table CB1.2.

health services (CAMHS) and improving access to therapies for children (HM Government, 2014b).

In Scotland from March 2013 the Government introduced a target of a maximum 26-week wait from referral to treatment for specialist CAMHS, reducing to 18 weeks from December 2014 (Information Services Division Scotland, 2015). An Inquiry by the Children, Young People and Education Committee in Wales in 2014 (National Assembly for Wales, 2014) supported many of the concerns raised in relation to CAMHS. As a result, the Welsh Government announced a £7.6 million annual investment in CAMHS from 2015–16 to improve provision and support service change (Welsh Government, 2015c).

6.4 Quality of health and social care

Integration between health and social care

The number of people in England with health problems requiring both health and social care increased. In the next 20 years there are likely to be more people with 'complex health needs' (more than one health problem) who require a combination of health and social care services. For example, the percentage of people over 85 will double (DH, 2015).

In England, Wales and Scotland, legislative and organisational changes included a focus on reducing health inequalities and the greater integration of health and social care:

- A range of initiatives were developed in England with the aim of closer coordination or integration of health and social care services, as set out in the NHS *Five Year Forward View*.
- In Wales, local authorities and health boards are required to work together to develop Health, Social Care and Wellbeing Strategies in their areas to address the full range of issues affecting health and wellbeing, including tackling health inequalities (NHS Wales, 2003).
- The Public Bodies (Joint Working) (Scotland) Act was passed by the Scottish Parliament in February 2014 and put in place the framework for integrating adult health and social care in Scotland, with statutory partners deciding locally whether to include children's health and social care services and criminal justice social work services in their integrated arrangements. With full integration due in 2016, all parts of the country are establishing Integration Joint Boards (Scottish Government, 2014f).

Vulnerable groups

Learning disabilities

The Care Quality Commission (CQC), the health and social care regulator in England, consistently reported that inpatient treatment services for adults and children with learning disabilities admitted and retained people for too long, and often too far away from their family homes. The CQC recommended that Clinical Commissioning Groups, the NHS and local authorities work more closely together to deliver person-centred services at the local level for adults and children with learning disabilities and/or autism (CQC, 2012).

However, despite pledges by DH and its partners to improve the situation, a review into the issue in 2014 (Transforming Care and Commissioning Steering Group, 2014; House of Commons Committee of Public Accounts, 2015) found that people with learning disabilities and/or autism had been, and continued to be, placed in inappropriate settings for too long and a long distance from family and home due to a lack of good-quality alternatives in the local community.

Systematic mistreatment and abuse of adult patients with learning disabilities were uncovered in the Winterbourne View Hospital Serious Case Review (Flynn, 2012). Winterbourne View was a CQC-registered private facility providing healthcare and support for adults with learning difficulties, complex needs and challenging behaviour.

Key allegations included the:

- systematic mistreatment of patients by staff
- abusive treatment of patients by staff
- dangerous and illegal methods of restraint
- needless suffering of patients
- use of water-based punishment, and
- transgression of professional boundaries.

End of life care helps those with advanced, progressive or incurable illness to live as well as possible until they die.

Winterbourne View Hospital was closed and some staff members prosecuted and convicted.

Mental health

Reports from Scotland and England noted positive developments in the availability of high-quality mental health care, including units where patients were engaged in activities, thinking about recovery and focusing on the future. However, some concerns were expressed about variations in the quality of mental health services:

- The use of overly restrictive practices, lack of therapeutic activities and the use of control and restraint (Schizophrenia Commission, 2012; NHS Quality Improvement Scotland, 2010).
- In England, concerns have been raised about the inappropriate use of blanket rules (such as access to the internet, outside areas and rigid visiting times) and inadequate regard for patients' privacy (CQC, 2013; 2014a). The CQC specifically criticised 'controlling practices that only seem to serve the hospital's needs' as infringing patients' human rights, particularly the right to dignity (CQC, 2013, p. 33).

In England, Wales and Scotland, steps were taken to improve access to services and health outcomes for marginalised people.

HM Chief Inspector of Prisons (HMCIP) for England and Wales stated in its *Annual Report 2013–14* that the care of prisoners with mental health needs was inconsistent across different prison establishments.

Speaking generally about prisoner peer support, HMCIP stated that although peer-based support schemes, such as the Listener scheme, were available, access was limited in some prisons and many prisoner peer supporters lacked oversight, sufficient training or support from staff (HMCIP, 2014).

Concerns regarding Deprivation of Liberty Safeguards, under which people can be detained in health and social care settings for treatment, the operation of the Mental Health Act 1983, and the use of restraint in health and social care settings are discussed in Chapter 7 ('Justice, security and the right to life').

Concerns were expressed during the consultation process for the revised code of practice of the Mental Health Act 1983 about the vulnerability of women in mental health wards when single-sex accommodation was not available (DH, 2014a). The DH draft code of practice states that there should be separate facilities for men and women and that female inpatients should not be placed in mixed-gender environments because of the increased risk of sexual and physical abuse and because of the risk of trauma for women who have previous experience of sexual abuse (DH, 2014b, p. 51). In Scotland, although an end to mixed-gender wards was announced in 2005, the practice still continues in A&E and intensive care (Scottish Government, 2011).

Older people and people with dementia

An overview of trends in social care in England during the previous Parliament (2010–15), by Burchardt *et al.* (2015), projects that spending on social care fell by 13.4% over the period. Older people were particularly affected – overall, fewer older people were in receipt of social care at a time of growing demand:

- Despite an increase of 10.1% between 2009/10 and 2013/14 in the population aged 65 and over, spending on older people fell faster than for adult social care as a whole (by 17.4% between 2009/10 and 2013/14).
- Although data is not directly comparable across the three countries, it indicates that, between 2009–10 and 2012–13, total gross expenditure on adult social care decreased by 5.5% in England. This compares with falls of 2.1% in Wales and 3.4% in Scotland.
- In England in 2012, 28.3% of older people did not receive practical support that met their needs:[48]
  - those aged 75 plus were far more likely to be in this situation than those aged 65–74

[48] The figures reported here, on practical support for older people to meet their needs, are from analysis specifically for the *Is Britain Fairer?* review using data from the Health Survey for England. See data table EF3.1.

  - over half of disabled older people did not get the support they needed. This compares with fewer than one in 10 non-disabled people, and
  - a higher proportion of women than men reported that they did not receive the support they needed.

A number of inquiries and reviews have found serious shortcomings in the care and treatment of some older people, with key risk groups including people with dementia. The Commission's Inquiry into Older People and Human Rights in Homecare (EHRC, 2011b) identified areas of concern in England in the treatment of some older people and significant shortcomings in the way that local authorities commissioned care. The Inquiry found:

- Legal safeguards provided by the HRA to prevent inhuman or degrading treatment were not as widely used as they should be.
- Neglect and ill-treatment identified included: older people not being given adequate support to eat and drink (in particular those with dementia); neglect due to tasks in the care package not being carried out, often caused by lack of time; financial and physical abuse; and chronic disregard for privacy and dignity.
- A significant legal loophole which meant that the majority of older people who received care at home – that is, if they paid for all or part of it themselves or if it was delivered by a private or voluntary sector organisation – were not protected by the Act. The Care Act 2014 closed the loophole for people receiving publicly commissioned homecare from private and third sector providers.

The Orchid View Serious Case Review (West Sussex Adults Safeguarding Board, 2014) followed an anonymous alert to the police, the arrest of staff members at a CQC-registered nursing home for older people with dementia and an inquest in October 2013, which found that five people had died from natural causes attributed to neglect. The Review noted that the quality, governance and financial monitoring of independent organisations needed to be strengthened.

The Mid Staffordshire NHS Foundation Trust Public Inquiry (2013; known as the Francis Report) found that elderly and vulnerable patients were not treated with dignity or respect, basic standards of care were not observed, and the system of checks and balances that should have prevented such outcomes failed.

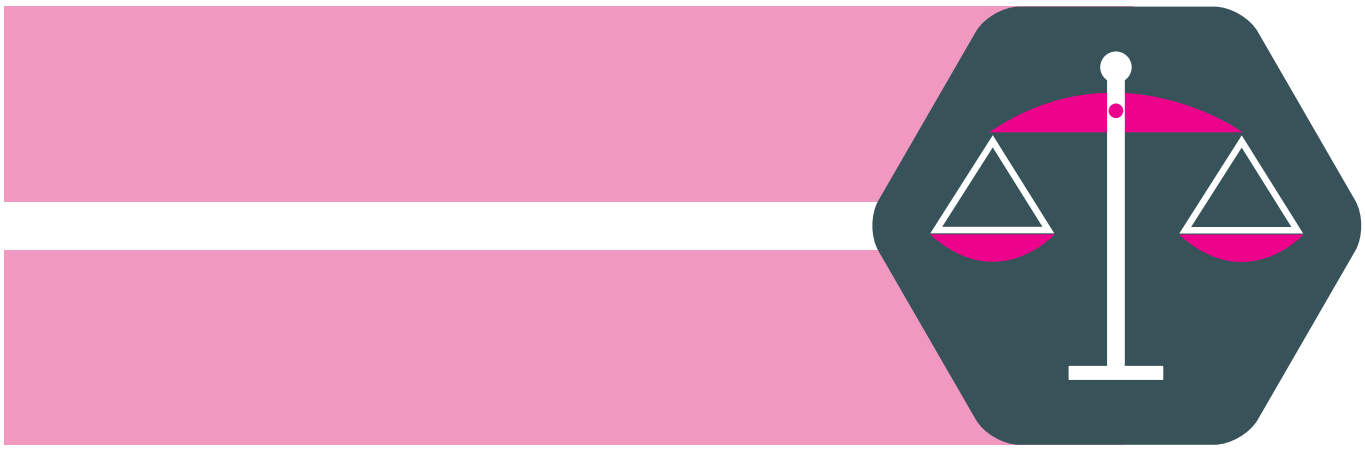
The Francis Report put forward 290 recommendations with the following aims (Mid Staffordshire NHS Foundation Trust, 2013, p. 10), to:

- 'foster a common culture shared by all in the service of putting the patient first'
- 'develop a set of fundamental standards, easily understood and accepted by patients, the public and healthcare staff'
- 'ensure openness, transparency and candour throughout the system about matters of concern', and
- 'make all those who provide care for patients – individuals and organisations – properly accountable for what they do'.

Adult safeguarding duty

The Care Act 2014 introduced an adult safeguarding duty in England along with measures intended to improve standards of care. The Act also addresses the recommendations of the Francis Report relating to increased transparency and openness. An adult safeguarding duty has also been introduced in Wales by the Social Services and Well-being (Wales) Act 2014. Such a duty was already in place in Scotland, introduced under the Adult Support and Protection (Scotland) Act 2007.

Chapter 7
Justice, security and the right to life



This chapter summarises key findings that concern human rights and equality taken from the evidence papers on 'Life', 'Physical security' and 'Legal security', which are available on our website.

The chapter discusses crime (including homicide, violent crime,hate crime, sexual exploitation and abuse), fairness in the justice system, and detention and custody.

The chapter highlights a number of areas of progress over the review period, including:

- A fall in the figures for several serious crimes affecting personal safety and the right to life across, or in parts of, Britain.
- A number of significant legislative reforms and policy initiatives, including:
  - an increase in the volume of referrals from the police of 'honour-based' violence-related offences for prosecution
  - increased legal protection of 17 year olds in police custody and increases in the number of applications for Deprivation of Liberty Safeguards
  - strengthened procedural obligation to investigate any deaths for which the State may have a degree of responsibility, and
  - international human rights standards which have been set for the treatment of women prisoners, and incorporated into the regulatory inspection framework.

A number of serious challenges are, however, also highlighted, including:

- Rising incidence of Islamophobic and anti-Semitic hate crime.
- Serious issues in relation to child sexual abuse and exploitation in England and Wales.
- Flaws in the police response to domestic abuse and in the use of stop and search powers.
- Serious flaws in the care of vulnerable patients such as those with learning disabilities, older people and patients with dementia were highlighted in a number of reports. These reports also found some cases of abuse of such patients.
- The potential impact of the legal aid reforms in England and Wales on the access of vulnerable individuals to civil and family justice.

- Serious concerns expressed by regulators about the operation of safeguards to protect people from being unlawfully deprived of their liberty across Britain; and the use of restraint affecting detained individuals in health, care and detention settings.
- An announcement by the Home Secretary of an independent review of deaths and serious incidents in police custody in England and Wales. There have been 133 deaths during or following police custody in England and Wales between 2007/08 and 2014/15, and 444 apparent suicides following police custody.
- Concerns voiced by regulators about overcrowding in prisons across Britain, and about rising violence in some men's prisons in England and Wales.
- Concerns about the treatment of children and torture victims subject to immigration controls, and the lack of an immigration detention time limit in the UK, in contrast to other European Union countries.

7.1 Crime

Homicide

Homicide is the killing of one person by another. In England and Wales it includes murder, manslaughter (including corporate manslaughter) and infanticide; and in Scotland all crimes of murder and culpable homicide. Offences currently recorded as homicides have decreased in England/Wales and Scotland. This is particularly the case in Scotland (from 22.0 cases per million in 2008/09 to 13.4 cases per million in 2013/14), where the homicide rate is higher than in England/Wales (where it dropped from 13.3 homicides per million to 10.4 per million).[49]

In Scotland, the downward trend in homicides was evident for men aged 16–30 and 31–50, and in England/Wales among 16–29 year olds. Between 2008/09 and 2013/14, the homicide rate in England/Wales fell by more for Black adults and people from 'Other' ethnicities, compared with White people.

Across all three countries there was a higher proportion of male than female homicide victims. In England/Wales, while higher numbers of men than women were killed by friends/acquaintances or a stranger, higher numbers of women than men were killed by a partner or ex-partner (ONS, 2015l).

In England/Wales, 46 children and young people aged under 16 were victims of homicide in 2013/14 (ONS, 2015l). The homicide rate remained higher for ethnic minority children aged under 16.[50]

Comparisons by age and gender in England/Wales suggest that homicide rates per million population were notably high for male and female infants aged under 1. That is, 24.7 and 23.1 homicides per million in 2013/14 (though both figures are based on relatively small case counts) compared with 12.2 for males and 6.3 for females for the whole population (ONS, 2015g).

[49] Unless otherwise stated, the figures reported here, on homicide rates, are from analysis specifically for *Is Britain Fairer?* using data from the Home Office Homicide Index, Scottish Government homicide records and ONS population estimates. See data table EA2.1.

[50] Rates were calculated by the Commission from Home Office Homicide Index data and ONS population estimates. See data table CA2.1 EW.

Violent crime

Adults (16 plus)

Data from the Crime Survey for England and Wales (CSEW) shows that the percentage of adults who reported that they had been a victim of violent crime fell in England from 3.5% in 2008/09 to 2.7% in 2012/13. The figure for Wales remained stable (2.3% and 2.6%).[51] The proportion of adult respondents in Scotland who stated that they had been a victim of violent crime fell between 2008/09 and 2012/13 (4.1% to 3.1% – although Scotland still had the highest adult violent crime rate in Britain).[52]

Some adults remained more likely to experience violent crime than others.[53] In 2012/13, adults aged 16–24 in England and Scotland, and aged 16–34 in Wales, were most likely to have experienced violent crime.

In England and Wales, men aged 16–24 were most likely to experience violent crime. While men in all three countries remained more likely to experience violent crime than women, the size of the gender gap decreased over this period in England, with the figure for men falling. In Wales and Scotland, the size of the gap remained the same. The size of the gap in England between gay/lesbian/bisexual/other and heterosexual victims remained unchanged over this period.[54]

In England, those with no religion, Christians and Jewish people saw a decrease in the percentage of adults who reported that they had been a victim of violent crime. There was no significant change for Buddhists, Hindus, Muslims or Sikhs; however, there was an increase in the percentage of respondents with 'Other religion'.

There was no difference in 2012/13 in England in the percentage of ethnic minority respondents who reported being a victim of violent crime compared with White respondents.[55]

There was no difference in 2012/13 in the percentage of disabled and non-disabled adults reporting being a victim of violent crime. The percentage of non-disabled adults who said they had been a victim of violent crime decreased between 2008/09 and 2012/13.

Hate crime

Two different types of information on hate crime are discussed here. The first is information from crime survey data which reflects self-reported experiences of crime. The second is government-collected data on the number of crimes recorded by the police and the number of prosecutions that result in convictions.

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[51] The figures reported here, on victims of violent crime in England and Wales, are from analysis specifically for the *Is Britain Fairer?* review using data from the Crime Survey for England and Wales. See data table EC1.1 (E, W).

[52] The figures reported here, on victims of violent crime in Scotland, are from analysis specifically for the *Is Britain Fairer?* review using data from the Scottish Crime and Justice Survey. See data table EC1.1 (S).

[53] Note that there were no statistically significant findings for disability, sexual identity, ethnic minorities or religious minorities for Wales and Scotland.

[54] In Wales in 2008/09 there was no difference in the percentage of gay/lesbian/bisexual/other and heterosexual/straight respondents reporting being a victim of violent crime. Sample sizes in 2012/13 were too small to permit statistical analysis.

[55] For Wales in 2008/09 and 2012/13, sample sizes for ethnic minority respondents were too small to allow comparisons with White respondents. Between 2008/09 and 2012/13, there was no change in the percentage of White respondents who reported being a victim of violent crime.

Over the review period, the total number of hate crimes recorded by the police in England and Wales fell.[56] Figures drawn from the CSEW[57] show a small but significant fall in the proportion of adults reporting that they had experienced a hate-motivated personal crime between 2008/09 and 2012/13.[58]

While the number of hate crimes recorded by the police in England/Wales showed an overall fall over the review period, there were variations in individual categories of hate crime. While the number of race-motivated hate crimes fell, there were increases in the numbers of hate crimes motivated by religion, disability and transgender.

In Scotland, however, the number of disability- and sexual orientation-motivated hate crimes reported to the Crown Office and Procurator Fiscal Service by the police and other reporting agencies rose between 2010/11 and 2013.[59] In England/Wales and Scotland, race continued to be the most commonly identified motivation for hate crimes recorded by the police. Convictions for hate crime rose in England/Wales and Scotland during this period.[60]

Analysis of Crime Survey data on the percentage of respondents who reported experiencing racially motivated hate crime in England shows that criminal incidents against children and young people aged 10–15 motivated by the child's skin colour or racial background decreased between 2009/10 and 2012/13;[61] and that Black adults were most affected in 2012/13 by racially motivated hate crime.

A rise in Islamophobic and anti-Semitic hate crimes has been associated with events such as the killing of Fusilier Lee Rigby in London in 2013 (Creese and Lader, 2014), and fighting between Hamas and Israel in 2014 (Board of Deputies of British Jews, 2014). The UK Government's 2014 report on delivering the 'Challenge it, Report it, Stop it' hate crime action plan identified anti-Muslim hatred as an emerging challenge, and outlined the launch

[56] Unless otherwise stated, the figures for England and Wales reported here, on police-recorded hate crime, are from analysis specifically for the *Is Britain Fairer?* review using data supplied to the Home Office by the territorial police forces of England and Wales, and the British Transport Police. See data table ED1.3.

Note that, in 2014, the UK Statistics Authority found that the underlying data on crimes recorded by the police in England and Wales may not be reliable. As such, these police-recorded crime figures should be treated with caution. Police-recorded data collected prior to 2011/12 is not directly comparable and this difference should be interpreted with caution.

[57] The Crime Survey for England and Wales asks questions about seven categories of 'hate-motivated personal crime': five centrally monitored strands of race-, disability-, sexual orientation-, gender identity- and religiously motivated hate crime; and two additional strands of age- and sex-motivated crime are captured. Sex-motivated hate crime is not discussed in this report. Crime survey data on hate crimes in Wales and Scotland individually is not available so no change over time analysis was conducted.

[58] Unless otherwise stated, the figures for England and Wales reported here, on self-reported hate crime, are from analysis specifically for the *Is Britain Fairer?* review using data from the Crime Survey for England and Wales. These figures report the percentage of respondents who said that they had experienced hate crime. See data table GL2.2c.

[59] The figures for Scotland reported here, on police-recorded hate crime, are from analysis specifically for the *Is Britain Fairer?* review using data from the Crime Office and Procurator Fiscal Service. See data table ED1.3.

[60] The figures reported here, on convictions for hate crime, are from analysis specifically for the *Is Britain Fairer?* review using data from the Crown Prosecution Service and the Scottish Government. See data table ED1.3.

[61] The figures reported here, on self-reported incidents of racially motived hate crime against children and young people in England and Wales, are from analysis specifically for the *Is Britain Fairer?* review using data from the Crime Survey for England and Wales. See data table CC3.1a.

Adults aged 16–24 in England, Scotland and Wales in 2012/13 were most affected by violent crime.

of Tell MAMA, a third party reporting service to record incidents and support victims of anti-Muslim hatred (HM Government, 2014c). A 2014 report by the Department for Communities and Local Government (DCLG) reflected on the UK Government's progress in improving reporting and prosecution of anti-Semitic hate crime (DCLG, 2014).

The Commission research report *LGB&T Hate Crime Reporting: Identifying barriers and solutions* (Chakraborti and Hardy, 2015) highlighted the discrepancy between the number of LGBT hate crimes recorded by the police in 2013 and the larger number measured by the CSEW over the same period, suggesting that a number of hate crimes go unreported every year. The paper also presented findings from a research project conducted with 50 people from LGBT communities in Leicester and Leicestershire in 2014/15, which identified a number of factors that influenced those victims' decisions to report incidents to the police, including concerns about wasting police time and about being 'outed', and lack of confidence that reporting would yield a successful outcome (Chakraborti and Hardy, 2015).

A study found that 73% of transgender respondents had experienced harassment in public spaces (including comments, threatening behaviour, physical abuse, verbal abuse or sexual abuse) with 10% having been victims of threatening behaviour in public spaces (Whittle *et al.*, 2007, pp. 16 and 53).

Disability-motivated crime has been the subject of a Commission inquiry *Hidden in Plain Sight* (2011c) – and subsequent *Manifesto for Change* (2012). *Hidden in Plain Sight* identified a fear among disabled people that the police or other authorities would not believe them if they reported harassment, highlighting a risk of under-reporting of disability hate crime.

Sexual violence

This section covers any sexual assaults including attempts. While in England there was no statistically significant change in the reported prevalence of sexual violence, the percentage of Scottish Crime and Justice Survey (SCJS) respondents in Scotland aged 16 and over who stated that they had been a victim of sexual violence over the past year fell (from 1.6% in 2008/09 to 1.0% in 2012/13).[62] In both England and Scotland, young people aged 16–24 and women were disproportionately affected by sexual violence compared with older people and men respectively. In England, disabled people and gay/lesbian/bisexual/other people were also disproportionately affected.[63]

[62] The figures reported here, on sexual violence, are from analysis specifically for the *Is Britain Fairer?* review of data from the Crime Survey for England and Wales and the Scottish Crime and Justice Survey. See data table EC1.3c.

[63] No data is presented for Wales, as the number of respondents reporting sexual violence was very low in these years.

The number of rapes or attempted rapes recorded by the police increased across England/Wales and Scotland.[64] Over the review period, there was an increase in the number of convictions across all three countries for rape or attempted rape.[65]

Over recent years there have been a series of initiatives to address sexual violence:

- The Stern Review in 2010 made a number of recommendations to police and prosecution services on how to improve the implementation of existing rape policies in England and Wales. In 2014, the Government developed a 'Violence against women and girls action plan' (HM Government, 2014d).
- The expansion of Sexual Assault Referral Centres (SARC), which provide forensic medical examinations for complainants of sexual assault, with 41 existing across England, Scotland and Wales.[66]
- Welsh Government action to improve the public sector response to sexual violence included the Violence Against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015 to improve the public sector response, building on its six-year strategy 'The Right to be Safe' for tackling all forms of violence against women and domestic abuse in Wales.
- The Scottish Government's 'Equally Safe' Strategy (2014h) involved government, police and health bodies partnering with organisations such as Scottish Women's Aid and Rape Crisis Scotland.

Domestic violence

In England, the proportion of White respondents who reported being a victim of any domestic violence (physical violence, sexual violence or threats, all perpetrators) remained unchanged between 2008/09 and 2012/13. The rate of domestic violence among ethnic minority respondents fell during this period. LGB respondents, those aged 16–24, disabled respondents and women were disproportionately affected compared with others.[67] Analysis shows that those at particularly high risk include: women aged 16–19, White women, disabled women, and women in low-income households (less than £10,000) (ONS, 2014f).

In Scotland, the percentage of adults aged 16 and over who reported being victims of partner violence decreased between 2008/09 and 2012/13. Across both years a higher proportion of 16–24 year olds reported being victims of partner violence compared with most older respondents.[68]

[64] However, as explained above, police-recorded statistics for England/Wales need to be treated with caution.

[65] The figures reported here, on convictions for rape, are from analysis specifically for the *Is Britain Fairer?* review using data from the Ministry of Justice and Scottish Government. See data table ED1.1.

[66] Of which there were 34 in England, six in Wales and one in Scotland (The Survivors Trust, no date).

[67] The figures reported here, on self-reported domestic abuse in England, are from analysis specifically for the *Is Britain Fairer?* review using data from the Crime Survey for England and Wales. No analysis was produced for Wales, owing to small numbers of respondents. See data table EC1.4 (E).

[68] The figures reported here, on self-reported domestic abuse in Scotland, are from analysis specifically for the *Is Britain Fairer?* review using data from the SCJS. See data table EC1.4 (S).

The number of domestic abuse incidents recorded by the police in England/Wales between 2008/09 and 2013/14, and between 2008/09 and 2012/13 in Scotland, increased.[69]

The number of convictions for domestic abuse also increased between 2008/09 and 2013/14 across Britain.[70] In England and Wales, the volume of referrals from the police of 'honour-based' violence-related offences for prosecution rose slightly between 2012–13 and 2013–14, from 230 to 240, and the number of unsuccessful outcomes owing to victim issues fell (CPS, 2014).

Relevant legislative action in this area across the last five years has included:

- New provisions to tackle female genital mutilation (FGM) in the Serious Crime Act 2015 (across Britain).
- The criminalisation of forced marriage in the Anti-Social Behaviour, Crime and Policing Act 2014 (across Britain).[71]
- The Scottish Government's *Safer lives* approach (2009) and the *Equally Safe* strategy (2014h) aim to involve various partner bodies to tackle violence against women.
- The creation in the Serious Crime Act 2015 of a new offence of repeatedly engaging in controlling or coercive behaviour in an intimate or family relationship (England and Wales, not yet in force).
- The creation in the Protection of Freedoms Act 2012 of a new offence of stalking involving fear of violence or serious alarm or distress (England and Wales).

In 2013, an inspection of the police response to domestic abuse concluded that, while domestic abuse is a priority on paper, in most forces this is not translating into operational reality (HMIC, 2014).

The UK has not ratified the Istanbul Convention on preventing and combating violence against women and domestic violence.

Child sexual abuse and exploitation

A number of high profile independent inquiries have highlighted serious issues in relation to child sexual abuse and exploitation in England and Wales. These include:

- The Jay inquiry into child sexual exploitation in Rotherham (Jay, 2014), and the Serious Case Review into child sexual exploitation in Oxfordshire, concerning the grooming and abuse of vulnerable girls (Bedford, 2015).
- Phase One of Operation Pallial (still ongoing), which resulted in the collection of significant evidence of systemic and serious sexual abuse of children while in care at 18 North Wales care homes between 1963 and 1992 (Director General of the National Crime Agency, 2013).
- The Public Inquiry into Historical Child Abuse in Scotland, announced in May 2015, which will consider the extent to which institutions with legal responsibility for the care of children failed in their duty to protect children from abuse, in particular to identify any systemic failures; and will make recommendations (Scottish Parliament, 2015).

[69] The figures reported here, on police-recorded domestic abuse, are from analysis specifically for the *Is Britain Fairer?* review of ONS Crime Statistics and data from Scottish Government Domestic Abuse Recorded by the Police in Scotland. See data table ED1.2.

[70] Unless otherwise stated, the figures reported here, on convictions for domestic abuse, are from analysis specifically for the *Is Britain Fairer?* review of data from the CPS Violence Against Women and Girls Crime Report and from Scottish Government Criminal Proceedings in Scotland. See data table ED1.2.

[71] Forced marriage is discussed further in Chapter 8 ('The individual and society').

Alongside the Government's *Tackling Child Sexual Exploitation* action report (HM Government, 2015a), a statutory Independent Inquiry into Child Sexual Abuse in England and Wales, chaired by the Hon. Justice Lowell Goddard DNZM, opened in July 2015. It will investigate whether public bodies and other non-state institutions have taken seriously their duty to protect children from sexual abuse in England and Wales, and will make practical recommendations.

Furthermore, the National Group on Sexual Violence against Children and Vulnerable People was formed by the Government to shape the Government's response to all forms of sexual violence (HM Government, 2015b).

7.2 Fairness in the justice system

People's confidence in the criminal justice system shows a mixed picture. Despite efforts, flaws in the use of stop and search by the police persist, while there are concerns that recent legal aid reforms could have an impact on access to justice for various groups in society.

Public confidence and stop and search

Public confidence that the criminal justice system in England and Wales meets the needs of victims of crime rose in England between 2008/09 and 2012/13, from 47.2% to 49.5%. Confidence that the Scottish criminal justice system provides an appropriately high standard of service for victims also increased between those two periods, from 38.1% to 51.8%. Young people aged 16–24, non-disabled respondents and ethnic minority respondents were more likely to feel confident about this compared with older, disabled and White respondents.[72]

In England, public confidence that the rights of those accused of an offence were respected and that they were treated fairly by the criminal justice system, fell during the same period (70.5% to 68.2%). In Scotland, public confidence that the Scottish criminal justice system serves all communities equally and fairly rose significantly (53.9% to 64.1%).

Concerns about flaws in the use of police stop and search powers persist:[73]

- In 2010/11, 16–24 year olds and men continued to be most likely to report having been stopped and searched by the police in England. Black and 'Asian or Other' respondents were also disproportionately affected. No significant differences were found between people from different ethnicities in Scotland, although the sample sizes for some groups were quite small.
- The Commission's 2010 review of the use of stop and search powers in England and Wales identified flaws in the police's approach to stop and search (EHRC, 2010). The 2013 follow-up report *Stop and Think Again* identified key steps taken to reduce race disproportionality in stop and search and/or overall usage of the power (EHRC, 2013b).

[72] Unless otherwise stated, the figures reported here, on public confidence in the criminal justice system, are from analysis specifically for the *Is Britain Fairer?* review using data from the Crime Survey for England and Wales and the Scottish Crime and Justice Survey. See data table ED2.2.

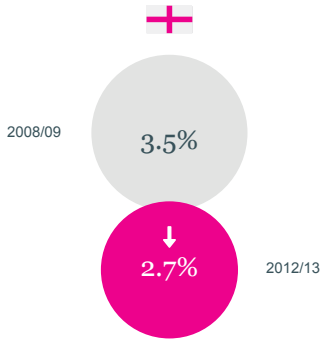
[73] Unless otherwise stated, the figures reported here, on individuals who were stopped and searched, are from analysis specifically for the *Is Britain Fairer?* review using data from the Crime Survey for England and Wales and the Scottish Crime and Justice Survey. Sample sizes for Wales were too small to permit statistical analysis. See data table ED2.1.

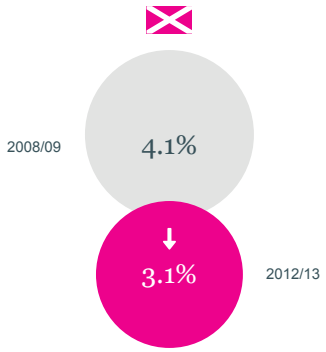
England
Scotland
Wales

Improvements

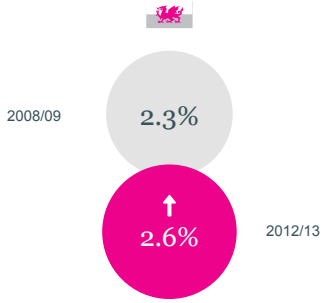
Self-reported violent crime

has decreased in England and Scotland



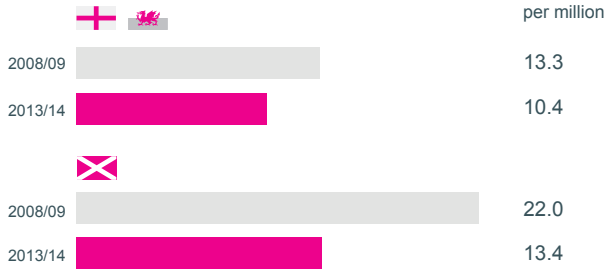


but increased in Wales



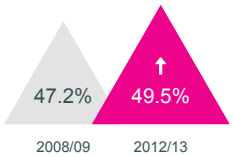
Homicide rates

for victims aged 16 and over have decreased

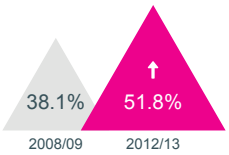


Fairness in the criminal justice system

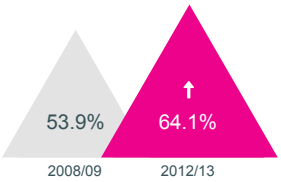
Agree that the criminal justice system meets the needs of victims



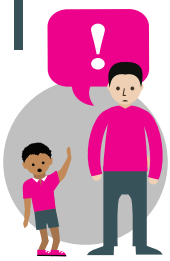
Agree that the Scottish criminal justice system provides an appropriately high standard of service for victims of crime



Agree that the Scottish criminal justice system serves all communities of Scotland equally and fairly



No improvements



This is now the subject of a statutory independent inquiry

A number of high-profile independent inquiries have highlighted serious issues in relation to child sexual abuse and exploitation in England and Wales, in terms of its prevention and the investigation of victims' allegations

Conditions of detention

Police custody

In England and Wales, there have been

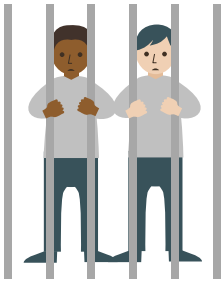
133 deaths

during or following police custody between 2007/08 and 2014/15

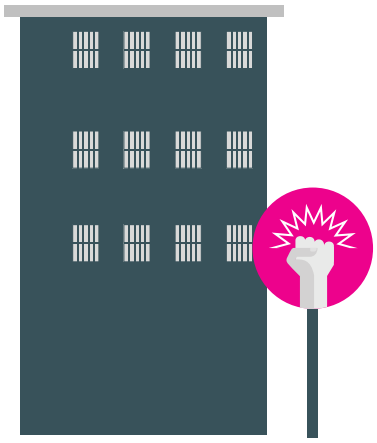
In England and Wales, there have been

444 apparent suicides

following police custody between 2007/08 and 2014/15



Prisons



Men's prisons have become less safe over the past 5 years. There were

16,196

assault incidents

between 2010 and 2015

The number of serious assaults has risen by more than half (55% rise) over the past 5 years

Prisoners aged 40–59

and White prisoners, were more likely to take their own lives

Health and social care

Several inquiries have found evidence of

abuse and neglect

for residents in care homes, especially for older people

Immigration detention

The UK is the only country in the European Union

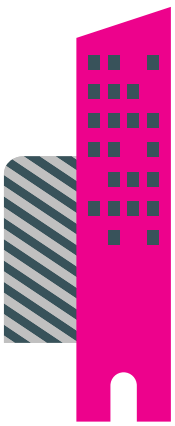
without a time limit on how long it can detain people

subject to immigration controls

Children and young people in custody

The treatment of 17 year olds in police custody has been brought into line with international human rights standards, but

the minimum age of criminal responsibility remains below these standards



Using the evidence that we have gathered, there are areas where Britain has improved and got fairer, and areas where it has got worse. Improvements need to be made across the board to really aim for a fairer Britain.

All references available at: **www.equalityhumanrights.com/isbritainfairer/justice**

While domestic abuse is a priority on paper, in most forces this is not translating into operational reality.

- A 2013 review by Her Majesty's Inspectorate of Constabulary (HMIC) concluded that there was little understanding of how stop and search powers in England and Wales should be used effectively and fairly to cut crime (HMIC, 2013).
- In England and Wales, a Best Use of Stop and Search Scheme and a revised Code of Practice were announced in 2014 (Home Office and College of Policing, 2014; Home Office 2014a), and in March 2015 a follow-up report found progress in implementing the recommendations to be disappointing (HMIC, 2015).
- In March 2015, Her Majesty's Inspectorate of Constabulary in Scotland (HMICS, 2015) published a review of the use of stop and search, and in 2014 Police Scotland amended its policy in order to end its use on children aged under 12 (Police Scotland, 2015). In July 2015, the Scottish Human Rights Commission (SHRC) highlighted, in its report to the UN Human Rights Committee on the UK's implementation of the International Covenant on Civil and Political Rights, its concern that unlawful stop and search was continuing to take place on the streets of Scotland.

Legal aid

Concerns have been expressed about the potential impact on access to civil justice of the Legal Aid, Sentencing and Punishment of Offenders Act 2012 (LASPO), which took effect in England and Wales in April 2013. The recent legal aid reforms have:

- excluded from scope the majority of housing, debt, welfare benefits, employment, immigration and clinical negligence matters (Anthony and Crilly, 2015)
- made legal aid in private family law cases available only where there is evidence of domestic violence or child protection issues (Legal Aid Agency, 2014), and
- made a telephone gateway service (called Civil Legal Advice) mandatory as the first port of call for legal advice on discrimination, debt and special educational needs.

The Government's equality impact assessment of LASPO assessed the risk of reforms having a greater impact on some people sharing particular protected characteristics (for example, women may be more likely to be affected by the exclusion of the majority of housing and debt matters) and considered whether mitigating actions might be possible (Ministry of Justice, 2011).

Concerns were raised by the Commission and others about the accessibility of the telephone advice gateway for some disabled people such as people with hearing and/or speech impairments, people with learning disabilities and people with mental health conditions (EHRC, 2012; Hickman *et al.*, 2015). In response, the Government made assurances that some clients needing face-to-face advice would not be required to use the telephone gateway (Ministry of Justice, 2014a).

The implementation of LASPO has coincided with an overall reduction in the funding of the advice sector during this period. From July 2013, a two-tier fee was introduced

for claims made to employment tribunals or the Employment Appeals Tribunal, with discrimination claims attracting the higher level of payment (HM Courts and Tribunals Service, 2013):

- Between January and March 2014, employment tribunals received 10,967 applications, a drop of 81% compared with the same period the previous year (Ministry of Justice, 2014b).

The Government made a commitment in 2012 to undertake a post-implementation review three to five years later, that is in 2016 and 2018.

7.3 Detention and custody

This section considers the evidence on deprivation of liberty in the settings of prisons, police custody, health and care, and immigration detention, as well as on the use of restraint.

Prisons

Suicide prevention is one of the most challenging tasks of prison management and all three countries have extensive safeguarding and prevention systems in place. Nevertheless:

- There were 88 self-inflicted deaths in prisons in England/Wales in 2014, the highest number of deaths since 2007.[74]
- The self-inflicted death rate per 1,000 prisoners in England/Wales increased significantly between 2008 & 2009 (0.7 per 1,000 prisoners) and 2013 & 2014 (0.9 per 1,000 prisoners).[75] Prisoners aged 40–59, and White prisoners, were more likely to take their own lives.
- The Scottish Prison Service (2015) recorded 4 suicide/overdose deaths in prison custody in 2008/09, 7 in 2009/10, 12 in 2010/11, 7 in 2011/12, 5 in 2012/13 and 3 in 2013/14 (figures correct as of 10 June 2015).

The independent Harris Review (2015) into self-inflicted deaths in custody of 18–24 year olds examined the lives of 87 young people who died in custody, and the evidence about the range of vulnerabilities that apply to young people in custody. It made a series of recommendations for improvement.

The Chief Inspector of Prisons for Scotland reported in 2014 that Scottish prisons were, broadly speaking, safe places. Concern has been expressed, however, by regulators about safety in English and Welsh prisons. The 2014/15 annual report from HM Chief Inspector of Prisons for England and Wales (HMCIP) (2015a) stated that men's prisons of all types, in both the public and private sectors, had become less safe over the past five years:

- Assault incidents had risen between 2010 and 2015 by 13%, to 16,196 in total for both men and women, and the increase had accelerated.
- The number of serious assaults had risen by more than a half (55% rise) over the past five years.

[74] The figure of 88 self-inflicted deaths is an upward revision from the figure reported by the Ministry of Justice (2015). This figure was provided in correspondence between the Ministry of Justice and the Commission.

[75] Unless otherwise stated, the figures reported here, on self-inflicted deaths in prisons in England and Wales, are from analysis specifically for the *Is Britain Fairer?* review using data from the Ministry of Justice. The figures have been combined into two-year periods (2008 & 2009 and 2013 & 2014) to improve the precision of the estimates of the change over time analysis. See data table EA4.2 (EW).

The UN Committee against Torture also highlighted concerns in 2013 regarding the level of prisoner violence.

The ongoing issue of overcrowding in prisons across Britain – which can affect whether the activities, staff and other resources are available to keep prisoners purposefully occupied – has also been highlighted:

- In 2013, the UN Committee against Torture highlighted concerns regarding increases in the prison population and the impact of this on overcrowding.
- The Chief Inspectors of Prisons for England and Wales and for Scotland both reported, in 2015 and 2014 respectively, that overcrowding continued to be a significant problem in prisons.

The Chief Inspector for England and Wales also expressed concern about the ability of prisons to meet the needs of certain groups of prisoners, reporting that:

- Many prisons were ill-equipped to meet the needs of the sharply rising number of older prisoners, including those who were frail and disabled (HMCIP, 2015a, p. 12).
- Prisons were failing to identify the needs of prisoners with learning disabilities (HM Inspectorate of Probation, 2015, pp. 46–7).
- While the gap between the incarceration rates of people from African/Caribbean/Black and White ethnic groups had narrowed over the past five years,[76] prisoners from ethnic minority groups and Muslim prisoners continued to report a poorer experience (HMCIP, 2015a).

In 2013, the Committee Against Torture urged the UK to be in line with the United Nations Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders (the Bangkok Rules). The Strategic Objectives for Female Offenders (Ministry of Justice, 2013) and HMIP's Expectations (2012) standards work towards implementing the Bangkok Rules.

Police custody

The Home Secretary announced in July 2015 an independent review of deaths and serious incidents in police custody in England and Wales, after the Independent Police Complaints Commission (IPCC, 2015) reported that in the previous year there had been:

- 17 deaths in or following police custody (133 between 2007/08 and 2014/15), and
- 69 apparent suicides following police custody[77] (444 between 2007/08 and 2014/15).

Police Scotland reported four non-natural deaths[78] in police custodial settings in 2010, three in 2011 and none in 2012. All victims were male. There have been a further six deaths in 2013 and two in 2014, but Fatal Accident Inquiries have not been concluded (as of 14 July 2015).[79]

[76] The figures reported here, on incarceration rates, are from analysis specifically for the *Is Britain Fairer?* review using data from the Ministry of Justice and the Scottish Government. See data table ED3.1.

[77] Apparent suicides that occur within two days of release from police custody. This also includes apparent suicides that occur beyond two days of release from custody where the period spent in custody may be relevant to the subsequent death.

[78] Deaths from non-natural causes include, for instance, homicides, suicides and accidents.

[79] These updated figures were provided to the Commission by Police Scotland in correspondence dated 14 July 2015.

The legislative framework offering legal protection to young people in custody has been strengthened:

- In order to be in line with the CRC, Parliament passed the Criminal Justice and Courts Act 2015, to make the treatment of 17 year olds detained in police custody following charge consistent with that of children.
- The age of criminal prosecution has been raised to 12 years in Scotland by the Criminal Justice and Licensing (Scotland) Act 2010.
- The Committee Against Torture has, however, urged the UK to raise the minimum age of criminal responsibility, which in all three countries is below the standard of 12 years set by the Committee on the Rights of the Child (UNCAT, 2013, paragraph 27).

Health and care

Serious concerns were expressed by regulators about the operation of the safeguards around detention in health and care settings across Britain.

Deprivation of Liberty Safeguards aim to protect people in care homes or hospitals in England or Wales from being deprived of their liberty unless it is in their best interests to protect them from harm, or to provide treatment, and there is no other less restrictive alternative. The CQC (2014) reported that the number of applications for Deprivation of Liberty Safeguards had increased every year since their introduction in 2009. In Scotland, the Adults with Incapacity (Scotland) Act 2000 provides a framework for safeguarding the welfare of patients who lack capacity due to mental illness, learning disability or a related condition.

The Select Committee on the Mental Capacity Act 2005 (2014) found that the provisions for Deprivation of Liberty Safeguards were often ignored, leaving many people at heightened risk of abuse. The CQC (2014b) highlighted that two-thirds of care homes and hospitals making such applications were failing to notify the CQC as statutorily required. The 2014 Supreme Court ruling in the Cheshire West case widened the scope of service users who will now be subject to a deprivation of liberty (P (by his litigation friend the Official Solicitor) (Appellant) v Cheshire West and Chester Council and another (Respondents) P and Q (by their litigation friend, the Official Solicitor) (Appellants) v Surrey County Council (Respondent)).

In Scotland, concerns were raised that in relation to people who needed their physical health safeguarded as a consequence of dementia or other cognitive impairment, they were being confined to hospital wards without any underlying legal process (Scottish Law Commission, 2014). Furthermore, some people in residential facilities were subject to considerable restriction in their daily lives. The Scottish Law Commission (2014) therefore called for an authorisation process and proposed some reforms.

Procedural safeguards relating to the deaths of patients detained under the Mental Health Act 1983 continued to be cause for concern.

In Scotland, non-natural deaths of patients detained under the Mental Health (Care and Treatment) (Scotland) Act 2003 are likely to be referred to the Procurator Fiscal, and in some cases the Mental Welfare Commission Scotland may formally investigate (and must be notified of all deaths by suicide). There is no independent body in England and Wales to investigate the non-natural deaths of detained patients. These investigations are

Serious concerns were expressed by regulators about the operation of the safeguards around detention in health and care settings across Britain.

the responsibility of the hospital trust that was responsible for the patient at the time of the death.

In health and social care settings the measures to strengthen legal protections around detention include:

- Increased protections for vulnerable adults introduced through the Care Act 2014 and the Social Services and Well-being (Wales) Act 2014 (discussed in Chapter 6).
- Improved procedural safeguards relating to the investigation of the deaths of individuals subject to treatment under a Deprivation of Liberty authorisation under the Mental Capacity Act 2005 (see below) – the Chief Coroner (2014) has issued guidance that a coroner investigation must be held into their deaths.

Immigration detention

Immigration controls remain the responsibility of the UK Government and so there is a UK-wide approach. The UK continues to be the only European Union member without a time limit on how long it can detain people subject to immigration controls.[80] People are detained in the UK for months and even years, in contrast to the 6–12 month time limit set under European Union rules (the UK has exercised its right to opt out of these).

Particular concern was expressed by regulators about the treatment of children and possible torture victims. The Chief Inspector for Prisons in England and Wales (HMCIP, 2015a) noted that inspectors had found inadequate casework which meant that possible torture victims and children were detained, contrary to policy. Further, in some cases the processes for determining age were inadequate or incorrectly applied.

There were seven natural and two non-natural deaths in immigration detention between 2009 and 2013.[81] A well-known case is the death of Jimmy Mubenga who was unlawfully killed while being forcibly removed on an aeroplane to Angola, under the escort of three Detainee Custody Officers (DCOs) employed by private contractor G4 Security in October 2010.

The number of self-harm incidents requiring medical attention in immigration removal centres increased between 2011 and 2014, from 158 to 353.[82]

[80] Immigration Removal Centres (IRCs) are used to detain individuals to establish their identity or pending their removal where they have been refused leave to enter the UK at the border. Detained individuals also include those who have no valid leave to remain in the UK, those who are considered to pose a risk of absconding and would fail to comply with any conditions attached to the grant of temporary admission or release, and those whose release into the community would not be for the public good. The latter include time-served foreign national prisoners. IRCs are also used to hold some foreign nationals awaiting decisions on their asylum claims in the 'detained fast track'. The detained fast track was suspended on 2 July 2015.

[81] These updated figures were provided to the Commission by the Home Office.

[82] The 2011 figures were released by the Home Office and Immigration Enforcement (2014) in response to Freedom of Information requests. The 2014 figures were published by No-Deportations (2015).

Measures have been adopted to increase the legal protection of children and pregnant women within immigration detention:

- The UK Coalition Government announced in 2010 that it was committed to ending the detention of children for immigration purposes (Home Office, 2010). Families with children under the age of 18 may be held for limited periods up to one week in pre-departure accommodation, where they fail to comply with all other avenues to leave.
- The Government made changes enabling families with children to be referred to pre-departure accommodation, and set up an independent family returns panel to advise on methods of deportation.
- A judge granted an interim injunction prohibiting the use of force against children and pregnant women during immigration removal, except when necessary for the prevention of harm towards themselves or others (*R (Chen) v Secretary of State for the Home Department, High Court*).

Use of restraint

Serious issues of concern remained regarding the use of restraint affecting detained individuals in health, care and detention settings.

Regulators raised these issues in relation to patients detained for treatment across Britain. The 2014 CQC monitoring report on the operation of the Deprivation of Liberty Safeguards (DoLS) in England in 2012/13 expressed concern that some people might be subject to restraint without the full protection of the law (CQC, 2014b).

In Scotland, a report of the Mental Welfare Commission for Scotland (2012, p. 12) found that some individuals were restrained and prevented from leaving hospital 'without proper recording and notification' of nurses' detention powers.

Allegations of continued and harmful use of restraint and other systematically abusive methods of treatment of adults with learning difficulties, complex needs and challenging behaviour were at the heart of the Winterbourne View Hospital Serious Case Review (Flynn, 2012 – discussed in Chapter 6).

Regulators highlighted the use of restraint in both adult and child custody establishments. HMCIP in England and Wales' annual report for 2014–15 expressed concern at an increase in the use of restraint, including 'pain compliance' techniques, in three child custody establishments inspected in 2014–15 (HMCIP, 2015a). The Joint Committee on Human Rights in 2009 expressed strong concerns about whether the use of such techniques against young people in detention was compatible with the UN CRC (JCHR, 2009).

In his Annual Report for 2013–14, HMCIP found that, although the use of force against prisoners should always be a last resort, in some (male) prisons management supervision of the use of force was poor and, in some incidents, officers did not make an attempt to de-escalate the violence (HMCIP, 2014).

Regulators also expressed concern about immigration detention centres and overseas escorts:

- The HMCIP 2013–14 report highlighted the routine handcuffing of detainees in immigration detention without an assessment of their risk, including during hospital treatment; and inconsistent provision of written justification for its use. HMCIP's inspection of overseas escorts also highlighted that some security measures were disproportionate during some stages of the removal and that accredited restraint techniques had not been developed for use on aircraft.
- In 2012, the Home Office commissioned the National Offender Management Service to develop a bespoke training package for both overseas and in-country escorts, resulting in the Home Office Manual for Escorting Safely in 2014.
- The Home Office (2014b) also published operational guidance on risk assessments for escorted moves and escort contractors.
- In Scotland, an announced visit to Dungavel House Immigration Removal Centre (HMCIP, 2015b) reported that it was a 'safe place' (p. 5) but that 'detainees were routinely handcuffed for outside appointments, regardless of individual risk' and that 'some detainees were held [in the separation unit] for long periods' (p. 13).

Chapter 8
The individual and society

This chapter summarises key findings that concern human rights and equality taken from the evidence papers on 'Individual, family and social life', 'Identity, expression and self-respect' and 'Participation, influence and voice', which are available on our website.

The chapter is split into two sections covering personal, family and social life, and political participation.

The chapter highlights a number of areas of progress over the review period, including:

- The introduction of equal marriage legislation across Britain.
- The continued rise in public acceptance of LGB lifestyles across Britain, and evidence of decreased stigma around mental health in England and Wales.
- Clarification by case law of the capacity of people with learning disabilities to make their own decisions about relationships, and the freedom of individuals to express their religion or belief.
- A number of important changes to the legal framework:
  - New duties and responsibilities were given to local authorities in England about the care and support of adults, and there was new legislation across Britain extending the support available to young people leaving the care system.
  - New criminal offences were created relating to forced marriage (across Britain), emotional and financial domestic abuse, and controlling or coercive behaviour (both England and Wales).
  - The Information Commissioner's powers to regulate the Data Protection Act 1998 were strengthened.
  - Legislation was introduced to encourage participation in civic society across Britain.
- Greater diversity in the UK Parliament following the 2015 general election, though the gender balance remains better in the Scottish Parliament and National Assembly for Wales.
- In Scotland, political participation (including of young people) and the proportion of people perceiving that they can influence local decisions have increased.

Some important challenges remain, including:

- Public unease increased about the use of personal data by organisations, after a number of cases of loss/misuse.
- Placements far from home allocated to people with learning disabilities, children in custody and children in care, and reductions in public transport, all affected people's access to their social networks.
- Bias/hostility continued to be experienced by disabled people, Gypsy, Roma and Travellers, LGB people, transgender people and ethnic minorities.
- The political under-representation of young people, women and people from some ethnic minority groups persisted.
- Young people and those from some ethnic minorities continued to be less likely to be politically active. Compared with those in the managerial and professional groups, all other sub-groups were also less politically active.
- The blanket ban on prisoners voting remained in place, despite the European Court of Human Rights finding it in violation of Convention rights and requiring the UK Government to legislate to remedy the violation.
- There were outstanding concerns about covert police operations and intrusive surveillance of protests.
- Disabled people, some ethnic minorities and people aged over 75 were less likely to perceive that they could influence local decisions.

8.1 Personal, family and social life

The legal framework governing people's freedom to form and maintain relationships of their own choosing has been significantly strengthened and clarified but public concern about organisations' use of their personal data has increased. The support of family, friends, neighbours and others was increasingly seen as key to building resilient communities whereas stigma towards certain groups remained of concern.

Freedom to choose relationships

The rights of individuals to marry and to maintain and form relationships of their own choosing were significantly extended by new legislation and by case law:

- The Marriage (Same Sex Couples) Act 2013, and the Marriage and Civil Partnership (Scotland) Act 2014:
  - extended marriage to same-sex couples
  - enabled those who were already civil partners to convert their partnership into a marriage if they wished to do so, although civil partnerships presently remain open only to same-sex and not to opposite sex couples, and
  - enabled transgender people who were married or in civil partnerships to change their legal gender without first ending their marriage or dissolving their partnership.
- In *NHS Trust v P and Anor* the Court of Protection refused doctors permission to perform an abortion on a pregnant woman with severe learning difficulties who lived with her mother. The Court observed that

people with learning disabilities 'may very well retain capacity to make decisions about how they conduct their lives'; for example, regarding choice of partner, extent of sexual activity and decisions about marriage or civil partnership, as well as medical care.

- The freedom to choose a marital relationship has been further protected across Great Britain by the introduction of the Forced Marriage etc. (Protection and Jurisdiction) (Scotland) Act 2011 and by the criminalisation of forced marriage, in the Anti-Social Behaviour, Crime and Policing Act 2014.

There are no reliable estimates currently of the prevalence of forced marriage. The Forced Marriage Unit provided support in relation to 1,267 cases of a possible forced marriage in the UK in 2014 (Forced Marriage Unit, 2015). One in five cases involved victims aged 17 or under. Just over one in five were male. Eight of the 1,267 victims identified as LGBT and 135 had a disability. The cases involved 88 different countries but most involved Pakistan, India, Bangladesh and Afghanistan. However, 23% of cases were domestic and had no overseas element.[83]

Freedom to practise religion or belief

Case law provided clarification on the rights around the expression of religion or belief, and that restrictions on religious freedom can be proportionate where they prevent interference with the rights and freedoms of others:

- The European Court of Human Rights' *Eweida* judgment, in which an Article 9 claim was made by an employee against British Airways, broadened the definition of what constitutes a manifestation of religion, so that manifestations which are not necessarily mandatory to a religion, but are sufficiently closely and directly linked to that religion (for example, Christians wearing a cross), may only be limited where there is a legitimate and proportionate reason to do so (Edge and Vickers, 2015).
- The *Eweida* judgment was also significant in that it clarified whether or not a limitation on religious freedom has to be shown to impact on a wider group of people than the individual making the complaint. The European Court of Human Rights made it clear that it is not necessary to show such 'group disadvantage' in order to bring a claim under Article 9. How this will impact on claims under the Equality Act 2010 remains unclear.
- The Supreme Court refused the appeal in *Bull and Bull v Hall and Preddy* on the grounds that the refusal of bed and breakfast services on religious grounds interfered with the freedom to be free from sexual orientation discrimination.

Privacy of personal information

Public concern about the privacy of personal data increased after a number of incidents of data loss/misuse, and regulatory powers in this regard were strengthened:

- The Information Commissioner's Office annual survey found that nearly two-thirds of the public in 2014 felt that they no longer have control over the way their information is collected and processed by organisations (Information Commissioner's Office, 2014).

[83] The Forced Marriage Unit's definition of 'victim' in this context is people thought to be at potential risk of future forced marriage, those currently going through a forced marriage and those who have already been forced to marry.

- The powers of the Information Commissioner to regulate the Data Protection Act 1998 were strengthened. The Commissioner now has the authority to issue fines of up to £500,000 for serious cases of loss or misuse of personal data.
- The powers to take enforcement action for serious cases of loss or misuse of personal data were used 133 times between July 2012 and July 2015, suggesting that lessons relating to data protection safeguards were still not being learned by organisations (Information Commissioner's Office website, no date). Some cases involved serious breaches by public sector organisations affecting a small number of people, while others involved IT security failings affecting a much larger number.

There was widespread agreement that the legal framework remained in need of significant reform. This comprises the Regulation of Investigatory Powers Act 2000, Regulation of Investigatory Powers (Scotland) Act 2000 and Data Retention and Investigatory Powers Act 2014 governing the powers of public bodies to carry out surveillance and investigation, including the interception of communications:

- As we reported in 2012, the legislative framework is too complex and piecemeal and does not address adequately developments in technology, so that distinctions between content/communications data and internal/external communications are unclear (EHRC, 2012).
- Legal cases alleging non-compliance with the European Convention on Human Rights in relation to data collection and surveillance practices are currently being brought before the European Court of Human Rights and the legal position remains uncertain pending judgment in these cases.

Availability of support

Having the support of family, friends, neighbours and others in the community was increasingly seen as key to building resilient communities and promoting the health and wellbeing of individuals (Mind and the Mental Health Foundation, 2013). The Care Act 2014 placed new duties on local authorities in England to promote this. (The Act is discussed in Chapter 6.)

National data on access to support networks in local areas is available only for Scotland:

- Overall, the proportion of people reporting support from family, friends and neighbours in their neighbourhood increased in 2013, compared with 2007–08.
- Some people, however, reported lower levels of support than others, for example people aged 16–24 compared with older age groups, people with a minority religion compared with those with no religion, and people from ethnic minorities compared with White people.[84]

Over a quarter (28%) of disabled people responding to a survey carried out on behalf of Scope in 2012 identified that their social and community lives were challenging for them (Copestake *et al.*, 2014).

Public and community transport can be a key facilitator of contact with family and friends, particularly for those in rural areas. Reductions in and alterations to public/community transport potentially isolate

[84] The figures reported here, on the amount of support available in respondents' neighbourhoods in Scotland, are from analysis specifically for the *Is Britain Fairer?* review using data from the Scottish Household Survey. See data table EH1.1b (S).

individuals in communities where no other means of transport is available, and/or who cannot afford other means of transport:

- Local authorities cut or withdrew 2,000 bus routes in England, and 179 in Wales, since 2009 (Campaign for Better Transport, 2014).
- Funding challenges for community transport in Scotland were also noted by the Infrastructure and Capital Investment Committee (2013).
- The UK Independent Mechanism (2014) reported that disabled people continued to experience significant barriers in accessing transport.

Strong and supportive family links are widely considered to be important factors in reducing reoffending. Inspectorates reported that most prisons in Britain provide reasonable support to help facilitate the maintenance of such links. Some children in custody were, however, placed far from family and friends:

- HM Inspectorate of Prisons expressed concern that the closure of children and young people's establishments led to 24% of children being held 50–100 miles from their home area, with only 38% saying they had one or more visits a week from family and friends (Summerfield, 2011, pp. 18 and 66).
- Around one in seven women and one in 10 young people in custody in England and Wales were held over 100 miles away from home owing to lack of facilities (Summerfield, 2011, p. 18; Robinson, 2013, p. 10).

Concerns were also expressed regarding children in the care system being allocated to placements far from home. (The placement of adults and children with learning disabilities far from home is discussed in Chapter 6.)

- A 2012 parliamentary inquiry into missing children in England recommended that urgent action be taken to reduce the number of children in the care system being placed outside their own local authority, highlighting that 'many older children with complex needs were placed in poor quality and unsuitable care placements, and often a long way from home, family and friends' (APPG for Runaway Children and Adults and the APPG for Looked After Children and Care Leavers, 2012). As discussed in Chapter 7, such children have been found to be at risk of child sexual exploitation.
- 2013 figures show that 16% of the 68,100 looked after children in England were living more than 20 miles from home (DfE, 2014a).
- Ofsted (2015) reported a continued over-reliance among some local authorities on out-of-area placements for the year 2013–14.

New legislation and guidance aimed at improving the support available to children in the care system, and when leaving care, included the following:

- The Children's Homes (England) Regulations 2015 highlighted the importance of children being helped to build and maintain positive relationships with others.
- The Children and Families Act 2014 and the Social Services and Well-being (Wales) Act 2014 enabled young people in foster care placements in England and Wales to continue living with their foster family until the age of 21 if they wish.
- Under the Children and Young People (Scotland) Act 2014 care leavers were given the right to stay in care in all settings until the age of 21, and to access support until the age of 26.

Freedom from stigma

Stigma includes experiences such as name-calling, ridicule and regular hurtful criticism that have a cumulative effect, and feeling humiliated or ashamed as a result of the attitude and behaviour of others. It is closely related to hate crime (see Chapter 7) and to homophobic bullying in schools (see Chapter 4).

Gaps in robust evidence relating to some specific aspects of stigma remain and the discontinuation of the Citizenship Survey (in 2011) and the Tell Us Survey (in 2010) significantly limited the national data available. For the most part, the evidence showing experiences of stigmatising treatment is drawn from one-off and/or smaller-scale, non-representative studies that are indicative only.

Public acceptance of LGB people in Britain has shifted dramatically over the last 30 years and this trend continued over the review period:

- The British Social Attitudes Survey demonstrates that the proportion of people who agreed with the statement that 'same-sex relations are always wrong' more than halved between 1987 and 2012 (from 64% to 22%) (NatCen, 2013).
- However, an EU-wide comparative survey of LGBT people carried out in 2012 by the EU Agency for Fundamental Rights (FRA) found that half of respondents (47%) in Britain had felt personally discriminated against or harassed because of their sexual orientation in the 12 months prior to the survey. Two-thirds of transgender people (65%) in the British sample also reported discrimination or harassment, the highest proportion out of all the countries included in the survey (FRA, 2014).

National anti-stigma campaigns were carried out to promote more positive attitudes towards mental health in England, Scotland and Wales. There is evidence of some decrease in stigma around mental health in England and Wales:

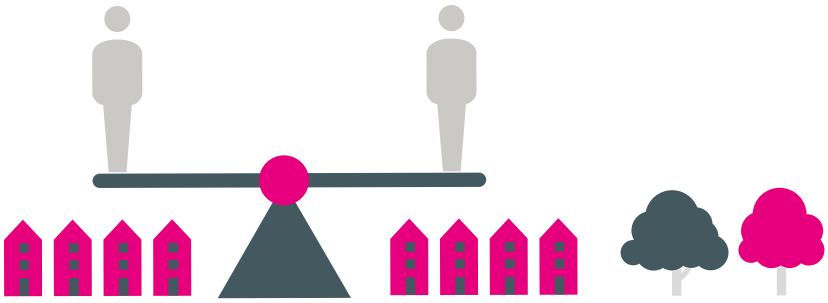
- The proportion of people responding to the annual TNS Omnibus survey who agreed with the statement that they would 'not want to live next door to someone who has been mentally ill' fell between 2008 and 2013 (from 12% to 8%) (TNS BMRB, 2014, pp. 3 and 9).
- The proportion of people saying they would feel uncomfortable talking to an employer about their mental health did not, however, change a great deal (standing at 49% in 2013) (TNS BMRB, 2014, p. 9).

Public attitudes in Scotland to mental health saw little change over the last decade:

- The Scottish Social Attitudes Survey 2013 showed that almost half of Scottish respondents 'wouldn't want people knowing' if they were suffering from a mental health problem. This figure ranged from 41% to 50% since 2002 but with no consistent pattern over that time period (Reid, Hinchliffe and Waterton, 2014, p. 4).

Evidence suggests that the 2012 Paralympic Games did not improve attitudes towards disabled people and that many continued to experience both unconscious bias and open hostility:

- A 2013 survey of 2,000 people with a disability carried out by OPM and Ipsos MORI (2014) on behalf of Scope found that while one in 10 respondents felt that attitudes towards them had improved since the Paralympics, about one in five felt that attitudes had got worse.



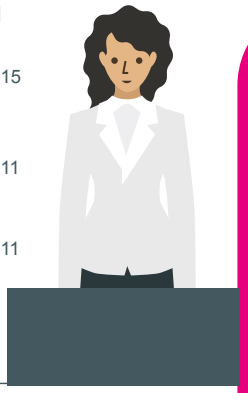
Great Britain
England
Scotland
Wales

1

Representation within national parliaments and assemblies is generally seeing improvements

Proportion of female Members:

Great Britain	29.4%	2015
	(increase from 21.8% in 2010)	
Wales	41.7%	2011
Scotland	34.9%	2011



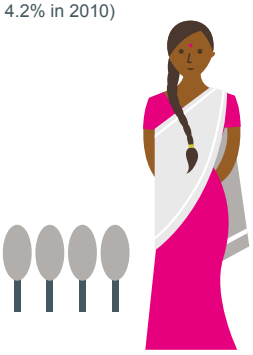
In the 2015 UK Parliament:

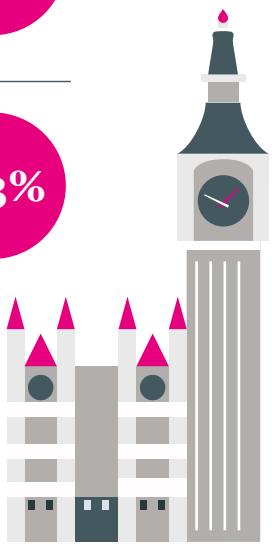
The number of openly LGB MPs (32) is reported to be the highest ever

32

6.3% of MPs are from ethnic minorities (increase from 4.2% in 2010)

6.3%





2

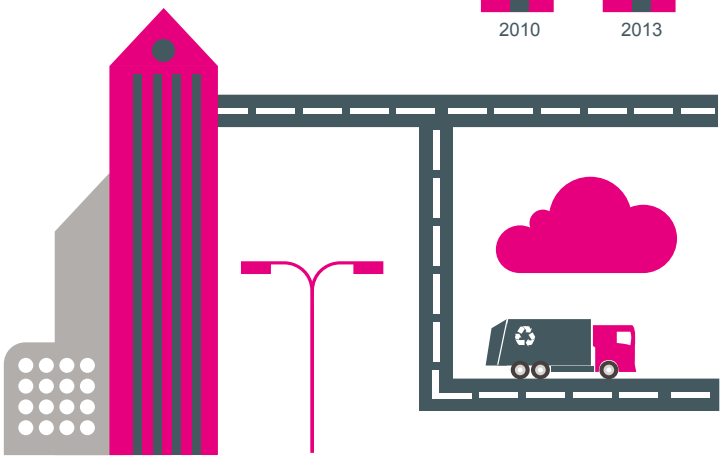
Britain is increasingly at ease with its diversity

The country has good protection for individual rights and this has been strengthened by new legislation allowing same-sex marriage

The proportion of British people who believe that 'same-sex relations are always wrong' has decreased:

1987	64%
2012	22%

Public attitudes towards mental health have slightly improved: in England and Wales, the proportion who would 'not want to live next to someone who has been mentally ill' fell from 12% (2008) to 8% (2013)



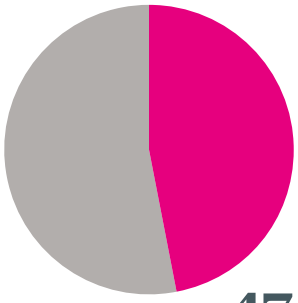
3 ...but some people experience harassment, discrimination and abuse

7.2% of all adults in Wales reported experiencing discrimination, harassment or abuse for any reason in the previous 12 months

19.5% of people from ethnic minority groups in Wales reported this, compared with 6.8% of people from the White ethnic group

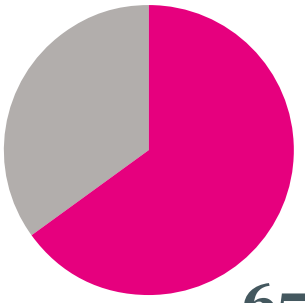
20.8% of people from religious minority groups in Wales reported this, compared with 8.2% of those with no religion

Discrimination and harassment



47.3%

of lesbian, gay and bisexual people responding to an EU-wide survey reported that they had felt personally discriminated against or harassed because of their sexual orientation in the previous 12 months



65%

of transgender people reported the same on the basis of being perceived as transgender

Forced marriage

The Forced Marriage Unit (FMU) provided support in relation to

1,267

cases of a possible forced marriage in the UK in 2014

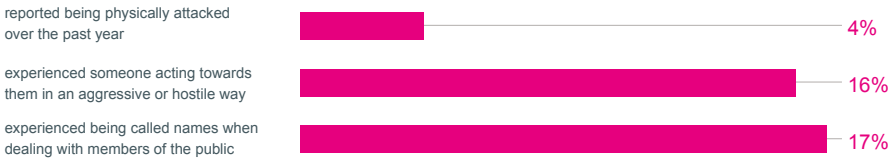
1 in 5 victims were 17 and under

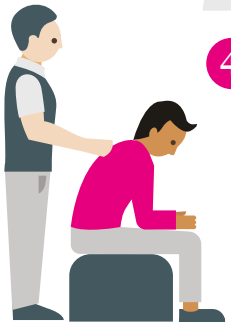
1 in 5 victims were male

88 countries

The cases involved 88 different countries; however, 23% of cases were domestic

Attitudes towards disabled people (2013):



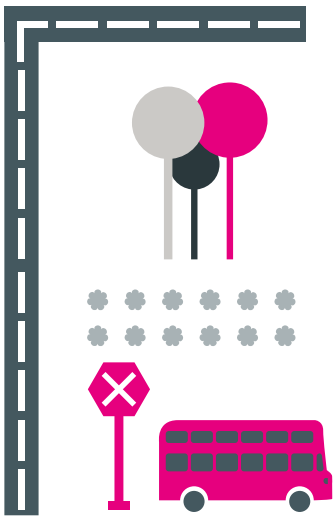


4 ...and might not receive the support they need

Around 1 in 7 women, and 1 in 10 young people, in custody in England and Wales are held over 100 miles away from home (2013 data)

Only 39% of children

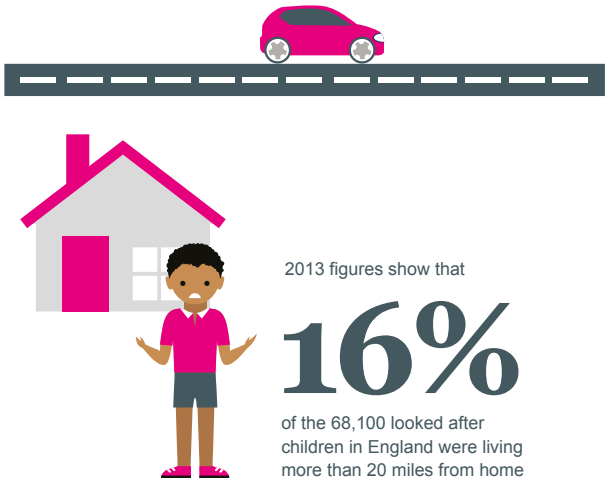
in custody had one or more visits a week from family and friends



Increased risk of isolation, particularly in rural areas, as local authorities

have altered or withdrawn 2,000 bus routes

in England since 2010 and 179 in Wales since 2011



2013 figures show that

16%

of the 68,100 looked after children in England were living more than 20 miles from home

Using the evidence that we have gathered, there are areas where Britain has improved and got fairer, and areas where it has got worse. Improvements need to be made across the board to really aim for a fairer Britain.

All references available at: **www.equalityhumanrights.com/isbritainfairer/society**

Public and community transport can be a key facilitator of contact with family and friends.

- 4% of respondents reported being physically attacked over the past year; 16% experiencing someone acting to them in an aggressive or hostile way; and 17% being called names when dealing with members of the public (OPM and Ipsos MORI, 2014).

In England, younger people from ethnic minorities were more likely to report experiencing harassment on the basis of skin colour, race or religion:[85]

- Evidence from the 2010–11 Citizenship Survey shows that 3.2% of the population in England had experienced harassment on the grounds of skin colour, ethnic origin or religion in the previous two years.
- Ethnic minorities (ranging from 9.3% of African/Caribbean/Black people to 16.7% of Indian people) were more likely to report it than White respondents (2.1%), and it was particularly high among younger people from an ethnic minority aged 16–24 (17%).

In Wales, young people, people from ethnic minorities and minority religions and disabled people were more likely, compared with people with other protected characteristics, to report discrimination, harassment or abuse for any reason in the previous 12 months:[86]

- Evidence from the 2013–14 National Survey for Wales showed that 7.2% of adults aged 16 and over reported having experienced this.
- People from ethnic minorities were almost three times as likely as White people to report this (19.5% compared with 6.8%).
- Those with a minority religion were more likely to report this compared with those with no religion (20.8% compared with 8.2%).
- Younger people were more likely than older people to report this (10% of 16–24 year olds, compared with 7.0% of 55–64 year olds and 4.7% of 65–74 year olds).
- Disabled people were more likely to report this than non-disabled people (9.8% compared with 6.3%).

In Scotland, LGB people, ethnic minorities, and those identifying as having a religion other than Christianity were more likely, compared with others, to report harassment:

- Evidence from the 2013 Scottish Household Survey showed that 6% of adults had experienced harassment in the last three years.
- LGB people were more likely to experience harassment than heterosexual/straight people (17% compared with 6%).
- People with 'another religion' were more likely to report this (14%) than those identifying as having no religion (6%), Church of Scotland (4%), Roman Catholic (7%) and 'Other Christian' (6%).

[85] The figures reported here, on self-reported experience of discrimination, harassment or abuse in England, are from analysis specifically for the *Is Britain Fairer?* review using data from the Citizenship Survey. See data table EI5.1.

[86] The figures reported here, on self-reported experience of discrimination, harassment or abuse in Wales, are from analysis specifically for the *Is Britain Fairer?* review using data from the National Survey for Wales. See data table EI5.1 (W).

- Ethnic minorities were more likely than White people to report it (14% compared with 5%) (Scottish Government, 2014d, Table 4.18).

Stigma towards Gypsies, Roma and Travellers in Britain remained an issue of concern:

- Evidence from the Spring 2014 Global Attitudes Survey suggested that half of Britons had an unfavourable view of Gypsies or Roma people (Pew Research Center, 2014).
- The European Commission concluded in 2013 that the UK had failed to make progress on four of the steps aimed at fighting discrimination set out in its 2011 Framework for National Roma Integration Strategies (European Commission, 2013).

Concerns were also expressed at press attitudes towards some minorities:

- The Leveson Inquiry in 2012 criticised the press reporting on immigration, transgender people and religious minorities as often sensational and unbalanced (Leveson, 2012).
- The rhetoric of some British politicians and press about immigrants was criticised by the Council of Europe Human Rights Commissioner, and by the UN High Commissioner for Human Rights (Travis and Malik, 2013).

8.2 Political and civil participation

The diversity of our elected representatives is generally improving, although slowly, while levels of political and civil participation show a mixed picture.

Formal political participation

Elected representatives

The numbers of women, LGB and ethnic minority MPs in the UK Parliament increased in 2015, but the gender balance was not as good as in the Scottish Parliament and National Assembly for Wales, and younger people continued to be under-represented:

- 29.4% of MPs elected to the UK Parliament in 2015 were women, compared with 22% in 2010 (Cracknell and Keen, 2014; UK Parliament, 2015).
- Women comprised 42% of Welsh Assembly Members (AMs) and 35% of Members of the Scottish Parliament (MSPs) elected in 2011 (Herbert *et al.*, 2011; Brooks and ap Gareth, 2013). In 2007, 47% of AMs and 33% of MSPs were women.
- The number of openly LGB MPs (32 – around 5%) elected to the UK Parliament in 2015 was reported to be the highest ever (Reynolds, 2015).
- The proportion of MPs from ethnic minorities in the UK Parliament rose to 6.3% (compared with 4.2% in 2010) (Wood and Cracknell, 2014; UK Parliament, 2015).
- While the 2015 Westminster intake included a 20 year old (the youngest MP elected since 1667), the average age of MPs – 50 years – remained unchanged compared with 2010 (UK Parliament, 2015).

Stigma towards Gypsies, Roma and Travellers in Britain remained an issue of concern.

Younger people, women and ethnic minorities continued to be under-represented at local level across Britain:

- Surveys of local councillors in England between 2008 and 2013 showed a decrease in the representation of younger people at local level. Little or no progress was made in relation to ethnic and gender imbalance (Kettlewell and Phillips, 2014).
- In Scotland and Wales, local councillors were overwhelmingly White, male and older (Broomfield, 2013; Improvement Service, 2013).

The provision in the Equality Act 2010 requiring political parties to report on the protected characteristics of election candidates was not implemented.

Voting

A 2011 Electoral Commission study concluded that around 15% of people who were eligible to vote had not registered (about 7.5 million people). The study found that:

- electoral registration tended to increase with age (with those most likely to register being those aged 65 and over), and with length of time resident at a property
- people from White or Asian ethnicities were more likely to register than people from other ethnicities, and
- semi and unskilled manual workers, state pensioners, casual or lowest grade workers, those unemployed with state benefits only, and those living in the private rented sector were less likely to register to vote.

Concerns were expressed about the potential impact on some people of the introduction of Individual Electoral Registration (IER). Under the IER system voters have to be registered individually and provide identification in order to be registered. The potentially disproportionate impact of IER on young people, people from mobile populations (such as Gypsies and Travellers) and disabled people was highlighted (White, 2015).

Voter turnout in the 2015 general election was higher in Scotland than in the UK overall:

- While voter turnout in the 2015 UK general election increased slightly compared with 2010 (rising from 65% to 66%), there was a higher turnout (71%) in 2015 in Scotland.
- The 2014 referendum on Scottish independence had a considerably higher turnout (84.6%) than recent general elections.

Evidence suggests that Scottish young people were more likely to vote than people in the rest of Britain:

- A study conducted shortly before the election found that respondents in Scotland across all ages, but particularly younger people, were more likely to vote than in England and Wales (Paterson *et al.*, 2015).
- A study on the political attitudes of 16–17 year olds found that: 67% of respondents in Scotland would have voted in the 2015 general election if they had been given the opportunity, compared with 39% in the rest of the UK; and that 66% of this age group in Scotland felt they should have the right to vote, compared with 50% in the rest of the UK (Eichhorn *et al.*, 2015).

The 2014 referendum was the first (and at the time of writing only) national election in the UK in which young people aged 16 and 17 could vote. The Scottish Elections (Reduction of Voting Age) Act 2015 extended voting rights to 16 and 17 year olds in Scottish elections, from 2016.

The ban in the UK on prisoners voting remained in place despite the European Court of Human Rights finding it in violation of Convention rights, and requiring the UK Government to legislate to remedy the violation. The ban applies to all convicted prisoners and is indiscriminate. As such, it was judged by the Court to violate Article 3, Protocol 1 of the European Convention on Human Rights, falling outside any acceptable 'margin of appreciation' allowing individual states to apply Convention rights differently within their jurisdictions.

Other political activity

Levels of participation in political activity increased in Scotland but fell in England:

- Paterson *et al.* (2015) found that a higher proportion of people in Scotland (63%) had taken part in specified political activities than in Wales (59%) and England (56%).
- Analysis of the Scottish Social Attitudes Survey found that 60.9% of respondents in Scotland in 2013 said that they had carried out one of the political activities asked about in the last few years, a rise from 54.4% in 2009.
- Although not directly comparable, the proportion of people in England saying that they had been involved in political activity over the last year fell between 2007/08 and 2013/14 (from 39.1% to 30.1%), according to analysis of the Citizenship Survey and the Community Life Survey.

Young people and ethnic minorities in both England and Scotland were less likely to be politically active than older people and White people:

- Scottish Social Attitudes Survey respondents in the youngest age group reported lower participation levels than those who were older, and ethnic minorities lower levels than White respondents.
- The Citizenship Survey and the Community Life Survey showed that in England young people aged 16–24 were less likely to participate in political activity than all other respondents with the exception of those aged 75 and over.
- It also showed that a higher proportion of White people than those from the Black, Indian and 'Other' ethnic minorities, and of LGB people than heterosexual people, participated in political activity.

Police policy in England and Wales regarding the policing of peaceful assembly and protest was changed:

- Since 2010 it has encouraged a presumption in favour of facilitating peaceful protest, complemented by a police curriculum on public order training and guidelines seeking to ensure compliance with human rights standards (EHRC, 2012; UNHRC, 2013a).
- The Joint Committee on Human Rights (2011) drew attention in 2011 to concerns about what constitutes 'reasonable force'. The police have since issued guidance and training to govern the use of force in England and Wales.

Concerns were expressed, however, around issues such as covert police operations and the intrusive surveillance of protests:

- HMIC commented in 2012 on the intrusive surveillance of peaceful protesters.

- Following a trade union march in 2013, the police took photos and recorded the data of protesters, which the English court held to be a breach of their Article 8 rights in *Mengesha v Commissioner of Police of the Metropolis* [2013] EWHC 1695 (Admin).

The UK Government has indicated that it will ensure the police have a definition of 'domestic extremism' that gives them the clarity required to do their job effectively (UNHRC, 2013b). A statutory inquiry into undercover policing in England and Wales is currently under way, which will include the examination of undercover police operations and their effect upon individuals in particular and the public in general (Home Office, 2015).

Civil participation

Legislation was introduced across Britain to encourage community participation and 'civil society':

- The Localism Act 2011, covering England and Wales.
- The Community Empowerment (Scotland) Act 2015.

The proportion of people perceiving that they were able to influence local decisions increased in Scotland but, although not directly comparable, fell in England according to analysis of the surveys mentioned in the previous section.

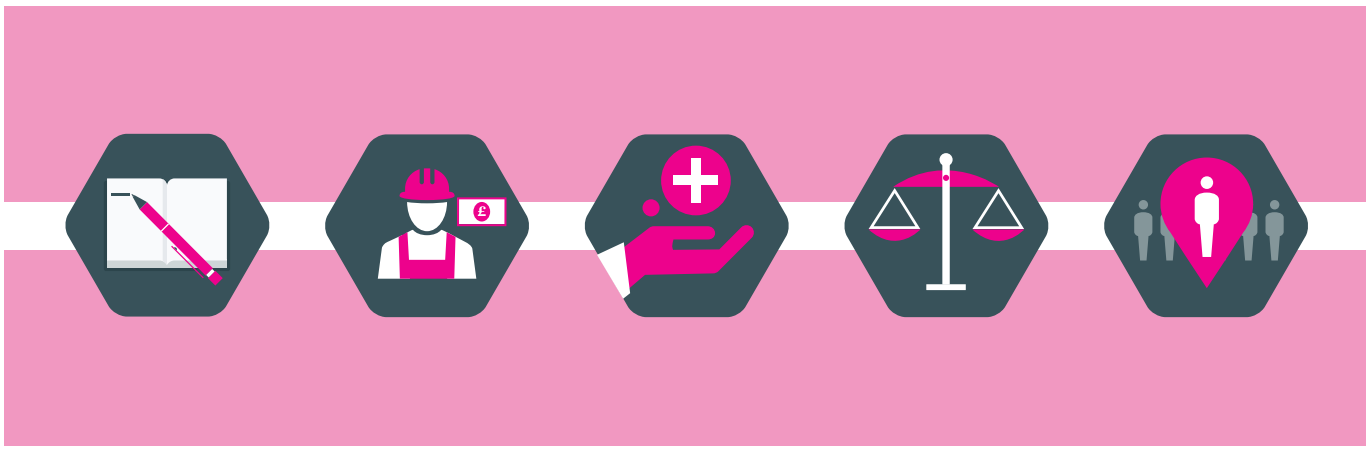
There were important differences in perceived influence on decisions in relation to some protected characteristics:

- The same surveys as above, and including the National Survey of Wales, showed that disabled people in Scotland, England and Wales were consistently less likely than those who were not disabled to perceive that they had influence over local decisions.
- Some gaps in England relating to age, ethnicity and sexual orientation widened over time:
  - the fall in perceived influence was significant among those aged 75 and over, and among people of Indian, White and 'Other' ethnicities, and
  - LGB respondents were considerably more likely than heterosexual respondents to feel they had influence over decisions.

Between 2007/08 and 2013/14 there was little overall change in both England and Scotland in the proportion of people reporting being active within local groups. In Scotland, there was a significant increase in the proportion of those aged 75 and over who were active locally.

The Office of the Children's Commissioner in England (2014) and the Children's Commissioner for Wales (2014) and Scotland (2015) worked with children and young people to encourage their civic and political participation. The UK Government's 2014 submission to the CRC provided many examples of ways in which the UK Government and the governments of Scotland and Wales encouraged the participation of children through a range of projects, consultations and forums (HM Government, 2014b).

Chapter 9
Most significant areas requiring improvement



While progress was made in a number of areas, more needs to be done to make Britain a fairer society. This chapter summarises eight key challenges identified by our analysis in this report and in the underlying evidence papers. These challenges are for statutory bodies and others with an interest in these areas, and will require concerted and joint efforts over the coming years in order to address them. (The order below does not indicate any level of priority.)

Key challenges

Over the coming years, it is important that Britain takes the following steps:

1. Improve the evidence and the ability to assess how fair society is

More **comprehensive and better quality evidence** is needed to enable us to assess how fair we are as a society:

- Public bodies are gathering less detailed information through both surveys and administrative data. The full extent of the information lost, and the consequences of this, need to be better understood so that strategies may be developed to address the most critical losses.
- More intersectional analysis is also needed to enable a more sophisticated assessment to be made of the key areas of disadvantage.
- The nature of the disadvantages faced by some vulnerable people (for example, the fast-growing numbers of people in their 80s/90s, transgender people, Gypsies and Travellers, and children and young people affected by abuse and exploitation) risks rendering them 'invisible'. Greater effort is needed to identify the scale and nature of the issues affecting people with these and other characteristics.

While being mindful of some of the shortcomings in available evidence and the need to address this, we believe the following seven areas are in particular need of attention.

2. Raise standards and close attainment gaps in education

Within an overall picture of improvement, some **attainment gaps** remained persistent and in some cases widened:

- **Gender:** boys continued to fall behind girls at the end of school. The gap widened in England and was unchanged in Scotland and Wales. Women pulled ahead in terms of degree-level qualifications.
- **Socioeconomic status:** children from low-income backgrounds in England, Scotland and Wales continued to perform less well than other children. This was particularly the case for White boys from low-income families, where the gap widened.
- **Ethnicity:** Gypsy and Traveller children in England continued to have the lowest attainment levels, and the gap between them and other White children widened as the latter saw larger improvements.
- **Disability:** the gap in attainment between children with special educational needs and those without widened in England and Wales.

3. Encourage fair recruitment, development and reward in **employment**

Young people are set to be better qualified than in previous generations but, despite this, experienced considerable disadvantage in the labour market:

- People aged 16–24 had the highest unemployment rate and experienced the highest increase in unemployment.
- The employment gap between young people and older people widened in this period.[87]
- Young people (16–24) experienced a 60 pence per hour decline in pay and the pay gap between the youngest and some older people increased.

The strong educational performance of **girls and young women** did not translate into rewards in the workplace:

- Women's employment continued to be concentrated in low-wage sectors.
- While the gender pay gap narrowed, this was owing to men's average pay declining more than women's, and average male pay continued to be greater than average female pay.

People from certain **ethnicities and religions** continue to experience worsening labour market disadvantage:

- African/Caribbean/Black people saw the largest declines in pay and income.
- Pakistani/Bangladeshi women were less than half as likely to be employed compared with average employment rates for other women.
- Muslims have the highest unemployment rates, the lowest employment rates and the lowest and decreasing hourly pay rates.

There remains a lack of diversity in senior and managerial occupations (in terms of gender and ethnicity) across all three countries, particularly in Scotland and Wales, and at board level in both the public and private sector. There is some evidence from the public sector of a lack of diversity in terms of disability at senior levels.

Disabled people were also disadvantaged in the labour market:

- Disabled people experienced pay gaps and employment gaps across Britain.
- The disability pay gap was highest in Scotland.

[87] Increases in young people's participation in full-time education only explain part of the falls in employment and increases in unemployment. Even accounting for this increased participation, the employment rate for young people has fallen and the unemployment rate risen over the review period.

- The disability employment gap was highest in Wales and Scotland.

Apprenticeships are intended to be a valuable route into employment. However, evidence suggests inequality of opportunity, especially by age, ethnicity and disability, as well as gender segregation in apprenticeship type.

4. Support improved **living conditions** in cohesive communities

Young people were particularly affected by poor living conditions:

- Young people were more likely than older people to experience poverty and poorer quality accommodation.
- Young people leaving the care system were particularly vulnerable to homelessness.
- Some children in the care system and in custody were allocated placements far from home, making it difficult for them to access friends and relatives and their local support networks. This was also a problem for some children and adults with learning disabilities and/or autism.

Disabled people also experienced disadvantage:

- While the percentage of disabled people living in poverty fell, they remained more likely to live in poverty than non-disabled people. Their level of material deprivation (the 'mean deprivation score') rose significantly.
- Older disabled people were significantly less likely than non-disabled older people to report that they were receiving the practical support they need. This was also the case for older women aged 65 and over.

Detriment related to **ethnicity** included:

- A higher proportion of Pakistani/Bangladeshi and Black adults in England lived in substandard accommodation compared with White people.
- The increase over time in material deprivation (the 'mean deprivation score') for Pakistani/Bangladeshi and Black people was relatively greater than for White people.

Access to **public and community transport** – a key means of combating social isolation for people without the opportunity/means to use other types of transport – was affected by funding cuts.

5. Encourage **democratic participation** and ensure **access to justice**

Some people with certain characteristics remained less likely to **participate in the political process**:

- Young people and people from some ethnic minorities were less likely to register to vote.
- Young people and Black, Indian and 'Other' ethnic minorities were considerably less likely to report being politically active.
- Young people, women and people from some ethnic minorities were politically under-represented both at national and local level across Britain.
- Prisoners remained subject to a blanket ban on voting in elections, in violation of Convention rights.

Policy in England and Wales on **policing peaceful assembly and protest** was changed, but outstanding concerns remained regarding covert police operations and the intrusive surveillance of protests.

Public concern about **personal data privacy** increased with a number of incidents of data loss/misuse.

Concerns were expressed about **access to criminal and civil justice** in England and Wales. More interpreters were made available in the criminal courts but there were contractual/quality concerns. The potential impact of the legal aid reforms was highlighted in relation to vulnerable people's access to justice in civil and family courts and tribunals.

6. Improve access to **mental health** services and support for those experiencing (or at risk of experiencing) poor mental health

Demands on many services increased, and some people experienced problems **accessing** them:

- The proportion of adults at risk of poor mental health in England increased, with some people particularly affected. Black/African/Caribbean/Black British people had the highest rate of contact with specialist mental health services; Black people were more likely to have been compulsorily detained under the Mental Health Act 1983 as part of an inpatient stay in a mental health unit.
- The suicide rate increased in both England and Wales (there was a fall in Scotland, although Scotland continued to have the highest suicide rate within Britain), with middle-aged men at highest risk.
- In England, the number of beds available for mental health care reduced.
- The number of people detained under the Mental Health Act 1983 rose.
- Serious concerns were expressed about access to children and adolescent mental health services.
- Care of prisoners with mental health needs was inconsistent across prisons.
- Some people, such as transgender people, Gypsies and Travellers, homeless people and migrant communities, experienced problems accessing healthcare services.

A number of disadvantages were associated with **mental health**:

- People with some forms of serious mental health conditions had shortened life expectancy.
- While there is evidence that stigmatising attitudes to mental health slightly decreased in England and Wales, there was little change in Scotland.
- People with both serious and common mental health conditions had higher unemployment rates.

7. Prevent **abuse, neglect and ill-treatment in care and detention**

There were significant flaws in the **care of vulnerable patients**, including those detained for treatment:

- Instances of severe neglect and/or abuse were highlighted in independent inquiries such as Winterbourne View and Mid Staffordshire.
- Inspectorates highlighted the inappropriate use of restraint, and insufficient respect for patient privacy and dignity, in care homes and hospitals caring for patients detained under the Mental Health Act 1983 and under Deprivation of Liberty Orders.

Deaths in detention in both justice and health and social care settings remained a concern:

- England and Wales have no independent body to investigate non-natural deaths of detained patients.
- Deaths and apparent suicides during or following police custody in England and Wales rose and are to be independently reviewed.
- An independent review of self-inflicted deaths of young people in custody made a number of recommendations for improvement.
- The rate of self-inflicted deaths of prisoners increased.

Regulators raised serious issues about conditions in **custody and detention** settings, including:

- the use of restraint within child custody establishments
- increased overcrowding in adult prisons across Britain
- rising levels of violence in some men's prisons in England and Wales, and
- problems with the immigration assessment process, potentially impacting on children and torture victims.

The UK remains the only country in the EU without a **time limit on immigration detention**.

8. Tackle targeted **harassment and abuse** of people who share particular protected characteristics

More needs to be done to prevent and combat **violence and abuse carried out against children, young people and adults**:

- A number of high profile independent inquiries have highlighted cases of child sexual abuse and exploitation in England and Wales. An independent inquiry will now investigate whether public bodies and other non-state institutions have taken seriously their duty to protect children from this kind of abuse.
- Trafficking of adults rose.
- Of the 1,267 cases of forced marriage in the UK in 2014, many involved Pakistan, India, Bangladesh and Afghanistan, although 23% of cases were domestic. One in five cases involved victims aged 17 and under and most were female.
- In both Scotland and England women were more affected by sexual violence than men.
- A national oversight and monitoring group was established to improve the police response to domestic violence.
- Disabled and LGB young people were particularly affected by bullying, according to a range of surveys and longitudinal studies.
- The UK has not ratified the Istanbul Convention on preventing and combating violence against women and domestic violence.

Hate crime remains an ongoing challenge:

- The Commission's national inquiry highlighted the serious impact of disability-related harassment on the lives of victims.
- Black people were most affected by racially motivated crimes.
- People from Mixed and Asian/'Other' ethnicities were most affected by religiously motivated hate crimes. Concerns were expressed about a rise in Islamophobic and anti-Semitic incidents.

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Glossary

Asylum seeker: A person who has left their home country as a political refugee and is seeking asylum in another country.

Civil partnership: Legal recognition of a same-sex couple's relationship. Civil partners must be treated the same as married couples. 'Marriage and civil partnership' is one of the nine protected characteristics in the Equality Act 2010.

Disability: A person has a disability if they have a physical or mental impairment which has a substantial and long-term adverse effect on that person's ability to carry out normal day-to-day activities. Sometimes people are treated as having a disability where they do not meet these criteria (for example, people with asymptomatic cancer or HIV). Disability is one of the nine protected characteristics in the Equality Act 2010.

England and Wales: Indicates that countries were measured separately in our statistical analysis.

England/Wales: Indicates that countries were measured together in our statistical analysis.

Equality: The state of being equal, especially in status, rights and opportunities.

Ethnic minority: Some sources employ the term 'non-White', meaning all ethnic groups excluding White ethnic groups as defined by the Office for National Statistics. In this report, the term has been replaced by the equivalent 'ethnic minority', in line with the Commission's editorial policy.

European Union: An association of 28 European nations formed in 1993 for the purpose of achieving political and economic integration.

Gender: The wider social roles and relationships that structure men's and women's lives. These change over time and vary between cultures. See also **Sex**.

Gender reassignment: This is the process of transitioning from one sex to another. See also **transgender**. People who are proposing to undergo, are undergoing or have undergone a process (or part of a process) to reassign their sex have the protected characteristic of gender reassignment under the Equality Act 2010.

Great Britain: England, Scotland and Wales.

Gypsy and Traveller (in Scotland, 'Gypsy Traveller') is a collective term used to describe a wide variety of cultural and ethnic groups. There are many ways in which ethnicity may be established, including language, nomadic way of life and, crucially, self-identification. Defining a person as a Gypsy or Traveller is a matter of self-ascription and does not exclude those who are living in houses. Ethnic identity is not lost when members of the communities settle, but it continues and adapts to the new circumstances. Although most Gypsies and Travellers see travelling as part of their identity, they can choose to live in different ways, including permanently 'on the road', in caravans or mobile homes, or in settled accommodation (for part or all of the year).

Human rights: Human rights are the basic rights and freedoms that belong to everyone. Ideas about human rights have evolved over many centuries, but they achieved strong international support following the Holocaust and World War II. To seek to protect future generations from a repeat of these horrors, the United Nations adopted the Universal

Declaration of Human Rights. For the first time, the Universal Declaration set out the fundamental rights and freedoms shared by all human beings.

Learning disability: A learning disability affects the way a person understands information and how they communicate. Learning disabilities can be mild, moderate or severe.

Looked after child: A child who is in the care of their local authority and either lives with his/her own family, or in an alternative care setting.

Marriage: Marriage is no longer restricted to a union between a man and a woman and now includes a marriage between two people of the same sex. See **Civil partnership**. 'Marriage and civil partnership' is collectively described as one of the nine protected characteristics in the Equality Act 2010.

Mental health: Mental health conditions affect the way a person thinks, feels and behaves. A mental health condition is considered a disability if it has a long-term effect on a person's day-to-day activity. Types of mental health conditions which can lead to a disability include depression, anxiety and bipolar disorder.

Non-governmental organisation (NGO): An organisation that is neither a part of a government nor a conventional for-profit business. Usually set up by ordinary citizens, NGOs may be funded by governments, foundations, businesses or private persons. Some avoid formal funding altogether and are run primarily by volunteers.

Pregnancy and maternity: Pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth, and is linked to maternity leave in the employment context where special protections apply. 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. Pregnancy and maternity is one of the nine protected characteristics in the Equality Act 2010.

Protected characteristics: This refers to the nine characteristics protected under the Equality Act 2010, and the grounds upon which discrimination is unlawful. The characteristics are: age; disability; gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion or belief; sex; and sexual orientation.

Race: Refers to a group of people defined by their race, colour, nationality (including citizenship), ethnic or national origins. It is one of the nine protected characteristics under the Equality Act 2010.

Religion or belief: Religion means any religion, including a reference to a lack of religion (for example, atheism). Belief includes religious and philosophical beliefs such as lack of belief (for example, atheism). Generally, a belief should affect your life choices or the way you live in order for it to be included in the definition. Religion or belief is one of the nine protected characteristics under the Equality Act 2010.

Religious minority: Some statistical sources employ the term 'non-Christian' or similar, meaning all religious groups excluding Christian groups. In this report, this term has been replaced by the equivalent 'religious minority', in line with the Commission's editorial policy.

Sex: Refers to whether a person is a man or a woman (of any age). It is one of the nine protected characteristics under the Equality Act 2010.

Sexual orientation: This is whether a person's sexual attraction is towards their own sex, the opposite sex or to both sexes. It is one of the nine protected characteristics under the Equality Act 2010.

Transgender: An umbrella term for people whose gender identity and/or gender expression differs from their birth sex. They may or may not seek to undergo gender reassignment hormonal treatment/surgery. Often used interchangeably with 'trans'. See also **Gender reassignment**.

United Kingdom: England, Northern Ireland, Scotland and Wales.

Unlawful: Not permitted by law (as distinct from illegal which means 'forbidden by law'). On occasions, unlawful and illegal may be synonymous, but unlawful is more correctly applied in relation to civil (as opposed to criminal) wrongs.

Victimisation: Subjecting a person to a detriment because they have done a protected act or there is a belief that they have done a protected act, including bringing proceedings under the Equality Act 2010; giving evidence or information in connection with proceedings under the Equality Act 2010; doing any other thing for the purposes or in connection with the Equality Act 2010; making an allegation that a person has contravened the Equality Act 2010.

Contacts

Is Britain Fairer? The state of equality and human rights 2015 is published by the Equality and Human Rights Commission. This publication is available from the Commission's website at www.equalityhumanrights.com/IsBritainFairer.

For advice, information or guidance on equality, discrimination or human rights issues, please contact the Equality Advisory and Support Service, a free and independent service.

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Questions and comments regarding this publication may be addressed to: correspondence@equalityhumanrights.com

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© 2015 Equality and Human Rights Commission
Published 30 October 2015

ISBN 978-1-4741-1983-2

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