# Equality Impact Assessment on:

# Glasgow's Community Plan

**October 2017**

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# 1. Glasgow Community Planning Partnership Community Plan

This paper sets out the process, main findings and recommendations from the Equality Impact Assessment of Glasgow's Community Plan. The work was carried out in two stages:

- A screening of the draft plan prior to the consultation on the Community Plan, this included comments from the Community Planning Partnership Equalities Working Group (community planning partners and representatives from equality organisations)
- A full EQIA carried out at the end of the consultation period. This incorporated equalities related comments received as part of the consultation period and the responses received by engagement with equality groups in the city including the Glasgow Equality Forum, Glasgow Disability Alliance, CRER, LGBT Health and Wellbeing and from Wise Women.

The lead reviewer was the Principal Officer for Equalities based in the Community Planning Support Team, with support from colleagues in Glasgow City Council and Glasgow Health and Social Care Partnership (GHSCP).

*a)    Outcome focus and supporting activities of the Plan*

➢ The Community Empowerment (Scotland) Act 2015 makes a number of changes to the way in which community planning will be delivered in the future.  It specifically names partners that will participate in community planning, some of whom have not previously been involved.  It places a statutory duty on a number of partners to ensure the effective delivery of community planning.

➢ Furthermore, the Act requires the development of a Local Outcome Improvement Plan (now known as Glasgow's Community Plan) for the CPP area by October 2017 as well as the identification of specific geographies that will require targeted support.  Improved services will be delivered in these areas guided by a Locality Plan.

A draft **Community Plan** was prepared for consultation with Glasgow's Communities during July – August 2017. The Community Plan is a high level document and complements partnership activity already taking place in the city. The plan sets out 3 focus areas and 2 priority areas. These are described in more detail in part 3 of this paper: assessment and differential impacts.

 There is a statutory obligation to meet the Public Sector Equality Duty (PSED) in the Equality Act (2010) and the corresponding supplementary 'Specific Duties' contained within the Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012.   The legislation imposes duties on all Scottish Local Authorities and other Public Sector organisations, with the express purpose of enabling the better performance of the PSED contained in s149 (1) of the Equality Act 2010. This requires Local Authorities and most of the Community Planning partners to be proactive in promoting equality, eliminating unlawful conduct and fostering good relations.

The legislation requires that people are not discriminated against, harassed or victimised on the grounds of:

| | |
|---|---|
| age | race |
| disability | religion or belief (including lack of belief) |
| gender reassignment | sex |
| marriage and civil partnership | sexual orientation |
| pregnancy and maternity | |

These are called **'protected characteristics'.** In exercising its functions, a Local Authority and other public bodies, must advance equality of opportunity between those who share a relevant protected characteristic and those who do not.

EQIA is one way to ensure public policies meet these legal requirements. Assessing the likely impact of our plans and services also makes good business sense for the Council and Community Planning Partners, as it is important in developing any proposal to understand the needs of different population groups.

In order to respond to the requirements of the Public Sector Equality Duty, the plan and the future Community Action Plan should seek to consider the impact of any changes on Protected Characteristic Group's within Glasgow. In addition, any community engagement strategy needs to demonstrate how it targets people with a protected characteristic.

In addition, the Community Plan & Action Plan, within the scope of the priority areas and focus areas should set out ways to tackle inequalities that exist within the city.

## 2. Gathering Evidence & Stakeholder Engagement

This section details some of the key evidence considered when developing the Plan and in particular when looking at the Plan in relation to impacts on communities of interest where protected characteristics already exert influence on members of those communities and their ability to access services and engage in the public and local sphere.

| Please name any research, data, consultation or studies referred to for this assessment: | Please state if this reference refers to one or more of the protected characteristics. | Do you intend to set up your own consultation? If so, please list the main issues that you wish to address if the consultation is planned; or if consultation has been completed, please note the outcome(s) of consultation. |
|---|---|---|
| **Hard to Reach, Easy to Ignore published by Heriot-Watt University, supported by the EHRC (2012)** | All. | There may be the requirement or further consultation in respect to: engagement of equality groups in the ongoing development of both the Locality Plans and the Community Action Plan. |
| **Hard to Reach 2 - Update published by University of Stirling, supported by EHRC (2015)** | All. | As above. |
| **GCC Mapping of Refugee/Asylum Seekers and BME Population (2015)** | BME population (with particular reference to the Refugee & Asylum Seeker population). | Further consultation will take place with the Refugee/Asylum Seeker population to follow up on key actions from the New Scots Integration Strategy, which is currently being refreshed and due for publication in December 2017. |
| **Population data for Glasgow: via Glasgow Centre for Population Health & GCC Census analysis** | All. | No, this is formal data collection based on Census and other similar data. |
| **Reports to the CPP on Thriving Places Activity.** | Refers to all community engagement and development work in the most deprived areas. | Ongoing consultation with communities will be a feature of the Locality Plans – this will include engagement with people with protected characteristic(s). |
| **The BME Health and Wellbeing Survey for Glasgow 2017** | BME – including new migrants, refugees and asylum seekers as well as more settled BME residents. | Targeted survey of five ethnic groups within Glasgow. The findings will form part of the development of the Community Action Plan. |

| | | |
|---|---|---|
| **Responses from the Survey Monkey consultation on the draft Glasgow Community Plan** | All. | Comments relevant to equalities issues will be referenced in this EQIA with recommendations. |
| **Consultation response from Glasgow Disability Alliance** | Disabled people (& intersectionality with other protected characteristics). | As part of development of Action Plan and support to engage disabled people in Locality Plans. |
| **Consultation response from Glasgow Equality Forum** | All. | As part of development of Action Plan and support to engage people with protected characteristics in Locality Plans. |
| **Consultation response from LGBT Health and Wellbeing** | LGBT people. | As part of development of Action Plan and support to engage LGBT people in Locality Plans. |
| **Data extracts from Women and Equality presentation from Wise Women** | Women (and women with other protected characteristics). | As part of development of Action Plan and support to engage women in Locality Plans. |
| **Poverty & Ethnicity: Key Messages for Scotland – report by Joseph Rowntree Foundation** | BME communities. | This is an evidence base that shows how poverty is higher overall among ethnic minority groups. |
| **Our Resilient Glasgow – A City Strategy & EQIA** | All. | |
| **Poverty Leadership Panel – Strategy & EQIA** | All. | |
| **LOCAL DYNAMICS OF DIVERSITY: EVIDENCE FROM THE 2011 CENSUS Prepared by ESRC Centre on Dynamics of Ethnicity (CoDE)** | BME communities. | This is an evidence base that provides evidence on ethnic minority groups within Glasgow's communities. |

# 3. Assessments & Differential Impacts

The Glasgow Community Plan starts with a strong statement of equalities (on page 6) and highlights the partners' commitment to an equalities-led approach and some of the potential impacts faced by equalities groups: these are evidenced in more detail below.  One of the challenges we have is a lack of relevant data on some of the protected characteristics groups.  Also, given that many of the individual approaches and action plans are yet to be determined by the city wide partners and locality groups, at this stage the assessment can only outline some of the key areas of concern and interest, and flag up areas of investigation and action for the forthcoming implementation plans. These plans and the specific locality led detail and supporting actions will also be subject to the Equality Impact process.

Across many of the themes of the plan, outcomes are often poorer for those with protected characteristics, although each work area may have more impacts on specific groups; for example childcare and single parents, or the difficulties faced by disabled people on public transport.

The Glasgow Community Plan is for the whole city and for all Glaswegians, while recognising that much of the work to be done is around challenging socio-economic inequality.  For example, while there are many white, heterosexual, non-disabled people living within the most deprived areas of the city, there are disproportionate numbers of people with protected characteristics living in these neighbourhoods, which are far more diverse in 2017 than indicated by the 2011 census.  From other data sources such as the household survey and the GCC Integration Network mapping survey, we know that in the last five years there has been an increased number of Refugees & Asylum Seekers in Glasgow, and an increase in some ethnic communities; for example, GCC estimates that there are c4-5000 Roma living in the Govanhill neighbourhood, who would have been unlikely to have been recorded in the census.  At July 2017, there are c4500 asylum seekers accommodated in Glasgow city.

These are some of the findings of the Hard to Reach review (again, note that this data is for Scotland, not Glasgow, however, given that many of the most deprived wards are within Glasgow, it is useful data):

➢ 27 per cent of the population of the most deprived neighbourhoods in Scotland have a limiting long-term illness, but they make up 20 per cent of Scotland's population as a whole.
➢ Some ethnic minorities are much more likely to live in the most deprived neighbourhoods in Scotland: Africans; "other ethnic group"; Black Scottish/Other; Caribbean; White Other. There are also issues with hidden poverty in particular communities, e.g. Pollokshields has highest South Asian population but mixed nature of area means high income people affect area stats for SIMD purposes.
➢ Catholics and Muslims are much more likely to live in the most deprived neighbourhoods.
➢ Those in not good health and with a limiting long-term illness are more likely to live in the most deprived neighbourhoods.
➢ These groups would benefit disproportionately from place-based policies to alleviate poverty.
➢ 17% of those responding to successive waves of the Scottish Health Survey, classifying themselves as not heterosexual, also live in the 15% most deprived wards, making this group slightly more represented in these neighbourhoods.

- Those who have limited activity and are economically inactive are more likely to live in the most deprived neighbourhoods.
- 29 per cent of this group who describe themselves as unemployed live in the most deprived neighbourhoods, so could take advantage of place-based employability projects
- A substantial proportion of those with limited activity with other reasons for economic inactivity live in the most deprived neighbourhoods who would require support other than employability, for example those who are looking after the home or family.
- The Black and minority ethnic population of Scotland is on average younger than the White population, with a greater proportion of the population between the ages of 0-15 – recent data indicates that 25% of the 0-5 age group in Glasgow is now BME.
- Except for Asian, Asian Scottish or Asian British and Mixed or multiple ethnic group 0-15-year-olds, Black and minority ethnic 0-15-year-olds are more likely to live in the most deprived neighbourhoods so will be able to take advantage of place-based early-intervention and school-based projects.
- The African population of Scotland, no matter what individual characteristics they have, are more likely to live in the most deprived neighbourhoods, suggesting they are very limited in their housing and residential choices.

A key recommendation is that Place-based policies to tackle poverty, unemployment and other social problems therefore need to be equality-impact assessed at a national and local level to ensure they are having a positive and equal impact on all groups and promoting cohesion.

In addition, while the current Thriving Places approach to place-based regeneration shows some very good practice in engaging with communities of interest, this is not demonstrated consistently across the ten locality plans appended to the Glasgow Community Plan.    Place-based policies have the potential to bring benefit to, or miss many equalities groups, particularly those that are more 'hidden' such as LGBT, therefore without targeted objectives, Thriving Places could fail to set outcomes for protected characteristic groups.


**Differential impacts across the Plan**

The three key themes of the draft Plan are:

**ECONOMIC GROWTH**

**RESILIENT COMMUNITIES**

**A FAIRER MORE EQUAL GLASGOW**

Overlapping these themes are the priorities for action of transport and childcare, which have an impact across all themes.  For each theme in the Plan, there are a number of suggested work areas, which would benefit from an equalities perspective to focus the work more effectively.

 For example, for **Economic Growth,** the work areas focusing on skills and employment should identify some of the groups who tend to be furthest from the labour market – e.g. BME and disabled people, including people with mental health issues.   The Plan recognises that some groups are underrepresented in the Glasgow Guarantee – specifically BME, care leavers and disabled young

people. Young people are identified as a priority age group, but there is no mention of older people, who may struggle to find employment as a result of age discrimination. It would be helpful to include a specific statement to recognise that certain groups are further from the labour market than others, not just in relation to apprenticeships, and that pay gaps exist for women, disabled people and ethnic minorities in some sectors. The commitments about inclusive growth are welcome; however more specific commitments and targets are needed to show how this will support particular groups.

So, for example, the Scottish Surveys Core Questions (SSCQ) has recently started to collect sexual orientation data; it identifies those whose sexual orientation is 'LGB' (lesbian, gay, bisexual) or 'Other' as one of the subgroups **significantly more likely to live in the most deprived areas** than the Scottish population as a whole (31.8% living in most deprived 20% areas, compared to 19.5% of heterosexual respondents). The report also found **significantly higher unemployment rate** for LGB and Other adults; this was more than three times higher than the rate for heterosexual adults (11% and 3% respectively).

Data from LGBT Health's 2016 annual service evaluation found particularly **high levels of unemployment and under employment among transgender people** (65 respondents) when compared with already high rates reported by 'LGB' and 'Other' respondents (156 respondents):
- 32% transgender respondents not working (compared to 16% for 'LGB' and 'Other' respondents)
- 24% transgender respondents currently unfit for work (compared to 11% for 'LGB' and 'Other' respondents)
- 8% of transgender people currently self-employed.


The JRF Report 'Poverty and Ethnicity: Key Messages for Scotland (2016)' noted the impact of racism and discrimination across the experience of different research projects, where participants identified the impact of racism and discrimination as being an issue in limiting their opportunities to access jobs and services. Participants described incidents where, as a result of discrimination, they were prevented from finding work appropriate to their skills, were passed over for promotion to better paid work and where service providers failed to take account of their cultural and religious preferences. This confirms much other research that has highlighted the role of racism, whether direct or indirect, in limiting access to employment opportunities, education and other services. For example, a DWP, UK-wide study (which included Glasgow) found that someone from an ethnic minority background had to submit 16 job applications for every offer of an interview compared with just 9 for white candidates (Wood *et al.,* 2009).

Analysis of the 2011 Census shows that participation in the labour market varies significantly by ethnicity in Scotland. For instance, 86 per cent of White Polish people were in employment compared with 58 per cent of Pakistani people and just 45 per cent of White Gypsy /Travellers. 62 per cent of White Scottish were in work, just below the average for all ethnicities at 63 per cent (Scottish Government, 2015a).

Employment data from the 2011 census in Scotland shows that only 46.3% of the disabled population were in employment compared to 70.7% of non-disabled and only 47.8% of disabled people were economically active. The Glasgow Disability Alliance response to the consultation on the Glasgow Community Plan, states that CPP partners must involve and listen to disabled people of working ages, including young people, so that they can hear about the barriers faced and solutions needed to ensure that disabled people can benefit from opportunities, such as the Glasgow Guarantee.

Finally, gender still has a big impact on employment and pay: **70% of people on the minimum wage are women, and the gender pay gap is currently 11-13%, rising to 34% for part time work – with 74% of part time posts occupied by women[1].** This also applies across multiple characteristics: disabled men are three times more likely to be employed than disabled women and BME men four times more likely to be in employment than BME women.

In **Resilient Communities,** the plan is focused on: mental health and mental wellbeing, social isolation and empowering Glaswegians. Research such as the recently completed BME health and wellbeing survey and the biannual NHS Health Survey of School Pupils, filtered for LGB young people, shows high levels of social isolation, stress and poor mental health in these groups. Within the BME community, poor mental health and isolation is a particular challenge for refugees and asylum seekers and others without adequate levels of English.

The 2017 BME Health and Wellbeing Survey showed that the BME community has positive views of their health and most of the respondents in this survey report healthy behaviours. While it must be acknowledged that we have to see the results in the context of the response rate to the survey, the information still provides useful information for further discussion, examination and planning in Glasgow and across Greater Glasgow and Clyde. The survey shows areas where more work needs to be done to improve health particularly for Pakistani people, some groups of women and those who haven't had access to or been able to learn English. There are also some key areas that need to be tackled such as feelings of safety and inclusion and freedom from discrimination.

Another of the key elements of Resilient Communities is the ten locality plans appended to the main Plan. There has been an initial review of each of the Locality Plans and while there is evidence of good practice, more work is needed to ensure that equality considerations are consistently reflected in these, and that suitable local outcomes are developed, demonstrating engagement with local groups. There are a number of resources that can support this work; the Understanding Glasgow neighbourhood profiles produced by GCPH provide useful local data[2], the CPP Equality Working Group can provide advice, guidance and support to staff developing Locality Plans and EQIA training is also available.

The Scottish LGBT Equality Report (Equality Network, 2015) found that, although significant legal and social advances have been made, minority sexual orientation and gender identity continue to be coupled with severe disadvantage. Ignorance, negative attitudes and stereotypes around LGBT identities are still prevalent and individuals often face discrimination and rejection (or fear of rejection) by family, friends, colleagues, neighbours and service providers. This can result in social isolation and marginalisation. The Equality Report found 33% of LGBT people reported feeling isolated where they live because they are LGBT.

LGBT Health's 2016 Glasgow community consultation, which had 246 responses, largely from individuals not yet engaged with our Glasgow programmes, found:

- 63% of respondents feel 'only a little' or 'not at all' connected to the LGBT community
- 97% want more LGBT-specific social activities
- 58% feel LGBT-specific social activities would improve their general wellbeing
- 47% report LGBT-specific social activities would help them feel less isolated.

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[1] Source: Wise Woman, via Women's Budget Group, UK Feminista, Office of National Statistics.
[2] Understanding Glasgow: http://www.understandingglasgow.com/profiles

The consultation also found that many LGBT people were keen to contribute their time and energy, with 46% indicating they were looking for volunteering opportunities.

The **Resilient Glasgow Strategy** also recognises that social isolation and loneliness has wider impacts on individuals, communities and ultimately services.  This will affect some groups more than others e.g. the elderly, disabled, people with mental health conditions, carers or refugees and asylum seekers.   Research by EHRC (2009) suggests men are more likely than women to be socially isolated in in their older age, with this issue heightened amongst men who were manual workers and/or in poor health.

Furthermore, men who have never married were additionally unlikely to have frequent social contact, whilst for both men and women, shorter working lives led to social isolation at old age (however, once other factors are considered, this relationship is only statistically significant for women).  The Joseph Rowntree Foundation (2010:21) provides an apt overview of the challenges:  minority groups seem to be at particular risk of having their emotional, social, spiritual/religious and sexual needs overlooked and are likely to experience a disproportionate negative impact where services take a one-size-fits-all approach.  This is reflected in the more recent BME Health and Wellbeing Survey carried out by the HSCP.

In relation to age profiles; GCC (2013) highlighted that around 70,000 people or the equivalent of 12% of Glasgow's population, aged three years and over, use a non-British language at home, although they may still be proficient in English[3].  A cross section of evidence regarding provision of and access to services, employment and health presents the reality of continued discrimination and/or social exclusion for older generations. Within this, it appears that the danger of experiencing such issues is heightened if an individual is situated within one of the protected characteristics (i.e. BME or Minority Faith).

Connection with the Resilient Glasgow workstream, potentially to develop a programme, would add value to the Community Action Plan, Locality Plans and to wider health outcomes for the city.

The outcomes related to **A Fairer and more Equal Glasgow** are predominantly focused on poverty and the Plan does recognise that some people are more likely to be in poverty than others e.g. disabled, some BME communities and female lone parents.  The BME Health and Wellbeing survey, for example, showed a high proportion of people of African origin without access to small sums of money for emergencies, and who were also less likely to use financial support services, less likely to own their own home, and with higher rates of food poverty.

Women are particularly affected by austerity, with data showing that 75% of austerity measures affect women, including: reduction in public sector posts, reduction/loss in public sector pensions, removal of child benefits (88% of single parents are women), freeze on child benefits, re-categorising of DLA criteria, 'bedroom tax', more employers paying only minimum wage, increase in temporary and zero hours contracts, loss of childcare support services and reduction in maternity and child support leave by employers. [4]

Poverty is one of the critical factors experienced by disabled people:

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[3] https://www.ethnicity.ac.uk/medialibrary/briefings/localdynamicsofdiversity/geographies-of-deprivation-and-diversity-in-glasgow.pdf

[4] Source: Wise Women via Poverty Action Group, ONS, UK Feminista and the Guardian

- A report by the Joseph Rowntree Foundation in 2016 identified that almost half of the people living in poverty in the UK are disabled, or live in a household with a disabled person.
- The same report also identified that living with disability also incurs additional costs, so disabled people are relatively poorer than non-disabled people.

There are various equalities based initiatives that could support these outcomes, as well as the **Poverty Leadership Panel**.   For example, the ESF Employability Project which has specific target groups: BME, young people, Roma etc.  The DWP is working with What Works Scotland to improve economic outcomes for BME citizens.  The Hard to Reach research team is seeking to understand more about the experiences of LGBT people who are either homeless or living in the most deprived areas.  The Glasgow Equality Forum is well established and brings together a wide range of equality organisations with the aim of increasing their voices in the planning process.  The need for an equalities perspective is a partnership approach that involves the Third sector and community as equal partners.

Finally, the Plan focuses on two emerging priorities for action that impact across the three themed areas, and these are likely to be the first two areas to develop action plans.  The first of these is **transport.**  We know from previous engagement that concerns are raised about the affordability, accessibility and safety of public transport by particular groups. Women, disabled people, ethnic minority groups and some faith groups have raised concerns about hate crime and harassment on public transport particularly buses. A recent survey of BME groups in Glasgow found that Polish groups were least likely to feel safe on public transport or walking alone[5].

In addition, affordable and reliable public transport is necessary for people to be able to meaningfully engage with the economic and social opportunities in the city. We understand the challenges and complexities of the current public transport structure, however we believe that there is scope in the development of the Action Plan and locality plans to consider these issues more fully. As an example, the GDA in their consultation response suggest a number of possible actions to improve transport provision for disabled people, as inaccessible transport is one of the biggest barriers that disabled people face. This includes public transport, as well as issues with roads, pavements and parking.  It is crucial that disabled people are directly involved in the development of the transport action plan.

Because LGBT people constitute a geographically dispersed community of interest, good transport links that serve communities and the city centre is a   particularly high priority. Affordability, because of the increased risk of experiencing economic disadvantage, is key.  Improving the safety of public transport is critical for LGBT people, given the fact that negative social attitudes can translate into harassment and hate incidents. Public transport can still be a dangerous place, especially for some transgender people for whom abuse is a commonplace, and often underreported experience. Similarly, there are access and safety issues for the BME community, firstly as potential victims of hate crime, but also due to cost: in particular, refugees and asylum seekers on very low incomes, or grant support, find it difficult to get around the city to services and have to rely on occasional destitution grants for travel.

The second priority area is **Childcare.** The affordability and accessibility of childcare placements is of particular importance to particular groups, such as lone parents (predominantly female) and those on a low income. Anecdotal evidence suggests that some ethnic minority groups may be less likely to be aware of and access childcare placements.

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[5] 2016 Black and Minority Ethnic Health and Wellbeing Survey, NHSGGC http://hdl.handle.net/11289/579514

The expansion of the national entitlement to childcare will require a significant expansion of the childcare workforce. Childcare in Scotland is still overwhelmingly provided by women. The expansion of the workforce provides an opportunity for employers and training and skills providers to encourage those from underrepresented groups, particularly ethnic minorities, to take up training and jobs. At the same time, it should be recognised that this is traditionally low paid employment, which needs reviewed. From the JRF Poverty and Ethnicity Report:

*'Other research by Khan et al, (2014b) looked at how Caribbean, Pakistani and Somali families balanced care and work. It investigated the availability and type of childcare on offer, including whether it met cultural needs. It also considered attitudes and preferences in relation to caring among different groups. They found that the high cost of childcare was a key barrier to work for low-income families across all ethnicities, as was the lack of family friendly flexible, well paid part-time work. The research found that Pakistani and Somali parents were least likely to use formal childcare, with those in work using informal family childcare. The research found that there was no generic attitude towards caring across participating ethnic minority communities. Some Pakistani parents expressed the desire to care for their children at home, especially when they are young, as of course do many women in the majority white populations.*

*Pakistani parents were concerned that formal childcare provision would not maintain cultural and religious traditions (including dietary traditions). If provision was more culturally sensitive some felt they would make more use of services. On the other hand, many Pakistani parents felt comfortable about using mainstream after- and pre-school clubs. The Equal Opportunities Committee's 2013 report, which highlighted the role of childcare in tackling gender inequality and recommended greater provision of childcare up to the age of 15 years (Scottish Government, 2013b) is very welcome. The Scottish government has pledged to increase free childcare availability to 600 hours a year and, if re-elected in 2016, the SNP has set out an ambition to raise this to 30 hours a week by the end of the next parliament. To tackle poverty across all ethnicities it is important that this additional childcare is designed to enable ethnic minority parents to access it. Khan et al., (2014b) found there was a need for greater provision of flexible and affordable childcare. They stressed the need to provide childcare that parents feel is inclusive and responds to sensitivities around cultural and religious factors. They suggest that one way to do this would be for providers to take steps to increase the ethnic diversity of their workforce so that cultural awareness is embedded in the workplace. It is important to also consider that many caring jobs are very low paid with few opportunities for progression. Those jobs are already dominated by women and in some areas there are high numbers of ethnic minority workers. It is therefore important that ethnic diversity is combined with measures to promote better pay and conditions as part of the Fair Work agenda. The research also suggests promoting the educational benefits of childcare for under fives, especially targeted at communities with low take-up of childcare but who do engage with education and out-of-school clubs for slightly older children.'*

Similarly, the issue of accessible and affordable childcare is one that impacts LGBT parents in the same way as other parents. In addition, LGBT parents often have concerns about how accepting childcare providers will be of their families, which raises questions around the need and access to equality and diversity training of the childcare workforce, to enable them to provide inclusive and affirmative services.

Detailed below are some of the key areas that Community Planning Partners will need to be reflective and flexible in their thinking to examine and address.

# 4.   Outcomes, action & public reporting

**Next steps:**
The specific policy implications suggested at the end of the first *Hard to Reach* review summarise the general requirements for equalities neatly:

- A continued focus on improving data on equalities groups, including from *ad hoc* research by CPPs and the use of the Scottish harmonised survey questions across local citizens surveys.
- Greater emphasis on the importance of carrying out equality impact assessments at the level of single outcome agreements and any "below the waterline" policies for specific neighbourhoods and/or programmes.
- Greater use of logic modelling by CPPs and local partnerships to reveal implicit assumptions in place-based policies and to bring out a focus on *possible* positive and negative impacts on equalities groups.
- The need for greater awareness among policy-makers and practitioners of the evidence relating to the differential impact on equality groups and techniques to infer impact from this.
- Further evaluation at a local level of specific projects and approaches to engaging equalities groups and dissemination of this at a CPP and national level.
- The need to consider some specific approaches under the new positive equalities duty, relating to one or more equality groups which can complement the general policy of mainstreaming, focused on those persistently in the lowest income deciles and resident in the most deprived neighbourhoods.

In addition, there are a number of specific recommendations which have been suggested by the EQIA planning group:

**Economic Growth:**
- Going forward, the Community Action Plan should explicitly recognise that some groups are further from the labour market than others and are more likely to experience poverty as a result of structural inequality in the labour market, not just in relation to the Glasgow Guarantee. In developing the Action Plan, there should be specific actions and targets to help support those furthest from the labour market and to support skills development e.g. disabled people, young people & some BME communities. There are already a number of initiatives in the city that could support this work, such as the ESF Employability Programme, which has various workstreams, including BME people, refugees and young people.

**Resilient Communities**:
- The ten Locality Plans are a key element of the Resilient Communities strand.  The lead officer for each Locality Plan should set out how they plan to engage with equality groups to develop local outcomes. They can be supported in this by the Principal Officer within Democratic Services and by the CPP Equality Working Group members, who have experience and knowledge of equalities and who represent the interests of a wide range of diverse communities in Glasgow.  It is also recommended that they participate in EQIA training to assist this process and that further equalities assessments are carried out on the ten locality plans.

- That future work plans in relation to social isolation and mental wellbeing take account of evidence that some groups are more likely to experience isolation and poor mental health than others e.g. some BME, LGBT people and the elderly, and develop outcomes to change this.
- That all community empowerment programmes e.g. participatory budgeting, should be screened for both negative and positive equalities outcomes.

### A Fairer and more Equal Glasgow:

- There will be targeted action underway as part of the PLP and Resilient Glasgow workstreams but the Community Action Plan development process gives partners a further opportunity to consider additional interventions that might benefit particular groups.
- Action should include review of the PLP & Resilient Glasgow strategies & EQIAs, to establish where joint interventions can provide better outcomes for people with protected characteristics.

### Transport:

- In developing the Action Plans and Locality Plans, Community Planning Partners should specifically consider any action they can take to improve safety on public partners and specifically what further steps they could take to tackle hate crime. A range of wider actions to improve accessibility and affordability should also be considered, and these should be developed in partnership with Glasgow's disabled community in particular.

### Childcare:

- In further developing the Action Plan, Community Planning Partners should consider what further steps they could take to improve the affordability and accessibility of childcare, particularly for some groups such as lone parents. Community Planning Partners should also set out what steps they intend to take to encourage underrepresented groups into the childcare workforce.

### General recommendations:

- The next steps of the process of developing the Community Action Plan(s) need to be undertaken with full engagement of the relevant Third Sector and community partners, in addition to the public sector bodies. A timetable for further consultation should be agreed, allowing time and resources for full engagement.
- The Community Planning Partnership agrees measurable bench-marks for improving data collection on equalities groups. So that after the Glasgow Community Plan is in place, we can for example, specify one or more protected characteristics we will improve upon, which public sector partners are the focus, how they will be supported, and a time period, with what improvements we hope to see.
- There are relevant structures to support this process – primarily the **Community Planning Partnership Equality Working Group (CPP EQWG)**, who would take a key role in supporting and monitoring this work. It is recommended that this role is made clear as part of the review of Community Planning structures to take place in autumn/winter 2017 and that the organisational chart is amended to reflect this.
- Wider Council family engagement and partnership working will be facilitated via the GCC Strategic Group and Working Group. The BME strategic group and/or other thematic groups of communities of interest within the CPP structure and the HSCP Equalities Group will also provide support for the equalities element of the Glasgow Community Plan and associated Action Plans.

# 5. Monitoring Outcomes, Evaluation & Review

The **Equalities Impact Assessment (EQIA)** is not an end in itself but the start of a continuous monitoring and review process. The **Community Planning Partnership Equality Working Group (CPP EQWG**) and any future Strategic Community Planning co-ordination Group at City or Locality level will be responsible for monitoring and reviewing this EQIA, the future anticipated EQIAs developed at locality level, and all actions following those EQIAs that may have been taken to mitigate impacts or enhance positive impacts, where identified.

A performance management framework is being developed for the Glasgow Community Plan, Locality Plans and Action Plan(s). In developing the Performance Management Framework, it would be useful to consider providing links to performance reporting of other key city strategies. In addition, the relevant plans should be reviewed to see where the CPP partners can add value, in terms of outcomes that relate to people with equalities characteristics.

The **CPP EQWG** with support from the Principal Officer will primarily be responsible for the monitoring and review of equalities practice, in the Glasgow Community Plan and beyond. This could initially be carried out by the development of a work plan for the partners via EQWG, in conjunction with the CPP support team in Partnership & Development Services.

This group will meet regularly – bimonthly - and will also support the Lead Locality Officers and partners to EQIA their approach and action plans. So, for example, these officers have already been prioritised for Equality Impact Assessment training, in order to ensure that the Locality Plans are also assessed for Equality Impacts.

The Glasgow Community Plan EQIA approach therefore reflects a two tiered approach, providing firstly a guide for the future Locality EQIAs that will complement and sit alongside the 10 area Locality Plans (LOIPs), which will, necessarily, be tailored according to local needs in those specific localities.

And secondly it also provides a broad framework for the city-wide Community Action Plans including the localities outwith the 10 areas, reflecting potential areas of engagement. This will ensure a consistent approach and ensure that the Community Planning Partners can respond to community needs around Equalities in areas of interest or concern, as they arise across the City.

The diagram below details the broad structure of the Glasgow Community Planning Partnership. This structure is subject to change as the new Partnership model develops, following the Community Empowerment (Scotland) Act and introduction of new Community Planning Partners. However it demonstrates a model of governance both for the monitoring and reporting of the plan and of the Equality Outcomes that will necessarily be part of the delivery outcome.