

SSA EQUALITY IMPACT AND NEEDS ANALYSIS

Directorate	Chief Executive's Directorate
Service Area	Community Safety
Service/policy/function being assessed	Richmond's Community Safety Plan: Tackling Crime, Protecting Communities
Borough the service/policy applies to	Richmond
Staff involved	Steven Bow Nicholas Hall Robyn Thomas
Date approved Equality Group	8 th November 2017
Date approved by Policy and Review Manager	8 th December 2017
Date submitted to Directors' Board	9 th December 2017

SUMMARY

Collectively the Community Safety Partnership has one over riding objective 'to make Richmond a safe place to live, work, learn and visit - for all'

The Community Safety Partnership Plan recognises that work to tackle crime and increasing community safety needs to be supported by restoring neighbourhood policing to tackle crime & anti-social behaviour and providing additional protection and support to the most vulnerable people and places.

The Plan aims to treat all people fairly and equally. It recognises that protected groups as well as communities of interest and geography may be disproportionately impacted by particular crimes as well as feelings of insecurity and/or fear. And that therefore different services and/or interventions need to be in place to address this disadvantage. The outcome would be for everyone to be safe and feel safe.

Any changes to individual services contained within the Plan will be subject to specific EINA's and will be the responsibility of the lead agency in accordance with the requirements of the Equalities Act 2010.

The proposed delivery plans that directly impact on individuals or groups with a protected characteristic are;

Keep Children and Young People Safe,
Tackle Violence Against Women and
Standing Together to Tackle Hate Crime and Extremism

However, it is important to note that the Safer Neighbourhood plan seeks to increase problem solving to reduce vulnerabilities and inequalities and the re-offending plan includes actions to work with adult and young people's offender services in order to identify opportunities for joint initiatives to manage offenders through their 'transitional years'.

1. Background

Richmond's Community Safety Plan 2017-2021 'Tackling Crime, Protecting Communities'

The production of a Strategic Assessment and the associated Partnership Plan is a statutory requirement arising from the review of the Crime and Disorder Act 1998 as amended by the Police Reform Act 2002 and the Police and Justice Act 2006.

The Community Safety Partnership is required to review and update the priorities in the Plan each year. The process requires multi-agency work to provide the base data from the statutory partners within the CSP and to analyse this information in the form of the Strategic Assessment, which then informs the development of the community safety priorities for consultation and the development of the Partnership Plan. The priorities for 2017-2021 are:

- Safer Neighbourhoods
- Reduce Adult Re-offending and Prevent Offending

- Reduce Violence Against Women and Girls
- Keep Children and Young People Safe
- Standing Together Against Hate Crime, Radicalisation and Extremism

Demand reduction and addressing complex need will be critical to the deliverability of the Plan. There needs to be an increasing understanding of, and focus on, demand reduction both in relation to volume crime and higher harm/risk issues.

The emphasis on vulnerability in the Plan will help address demand created by unmet/insufficiently addressed complex needs.

The principle of community collaboration will help address demand by increasing community capacity, reassurance and confidence.

2. Analysis of need and impact

Protected group	Findings
Age	<p>ONS Mid year population estimate (2016) 24% of the population is aged under 18. 15% of the population is aged over 65.</p> <p>Age health needs assessment The following wards have higher proportions of particular age groups:</p> <ul style="list-style-type: none"> • Infants (0 – 4 years): Mortlake and Barnes Common, and South Twickenham • Children & young adults (5 – 24 years): Heathfield and South Richmond • Working age adults (26 – 60 years): Twickenham Riverside and South Twickenham • Older people (60 – 74 years): Hampton and Hampton North • Elderly (75+ years): Ham, Petersham and Richmond Riverside, and Whitton. <p>Community Safety Strategic Assessment 2016/17 Child sexual exploitation</p> <ul style="list-style-type: none"> • Between April and October 2016 there were 16 cases of alleged CSE investigated and classified, of which, nine are currently open. This is a lower total than last year but a higher percentage of these cases are classified as “open”. • There 3 cases per month in 2015-16, this has fallen to 2.28 cases in 2016-17, to date. • 81% of alleged victims were female and three quarters were recorded as White British. All victims were aged between 12 and 17, however only one was aged below 14. • 44% of cases involved situations such as improper relations with older men, periods of going missing overnight and sharing images. Only two cases involved online CSE.

	<ul style="list-style-type: none"> • A majority of the young persons involved were listed as missing from home or care, truancy and mental health concerns were not very prevalent. Only one child had a disability listed. • At this stage of the developing CSE analysis, the ratio of cases discussed and closed, to cases open and ongoing would suggest very low levels of CSE at the current time. • Missing persons data is problematic when being used as an accurate indication of CSE in particular but can show tensions and issues relating to individuals which may not appear elsewhere. From the missing persons data available there does seem to be small number where elements of CSE are being alleged, however these are usually reports where concern is expressed, and not open investigations. • In 2016-17 people aged over 65 accounted for 4% (43 cases out of 1088) of all notifiable Domestic Violence offences • Between April and September 2017, victims under the age of 18 accounted for 7% (483 out of 6687) of all notifiable crimes during this period. (Harm/Risk Analysis is a key focus in 2017-18 in line with the new MOPAC priorities and specialist datasets have been created to look at these issues in more detail)
Disability	<p>Disability Health Needs Assessment</p> <ul style="list-style-type: none"> • 21,447 (11.5%) of people in Richmond report that they have some form of disability or health problem that affects their day-to-day activities a lot or a little. This compares to 17.6% in England as a whole[4]. • 2802 (2%) of people in Richmond aged 16-74 years consider themselves to be economically inactive due to a permanent sickness or disability, compared to 4% in England as a whole. • Population estimates based on Census data and research suggest that among Richmond residents aged 18-64 years 9,180 people have a moderate physical disability and 2,673 a severe physical disability[5]. • Registration data for Richmond show that in 2011 370 people were blind, 260 were partially sighted[6], and in 2010 550 were deaf or hard of hearing[7]. • Estimates suggest the following numbers of people in Richmond aged 18-64 years (2011) have mental health problems[8]: <ul style="list-style-type: none"> ○ In total, 20,510 people with a common mental health problem ○ 9,155 have two or more psychiatric disorders ○ 1,526 have a serious mental illness (i.e. 574 borderline personality disorder, 442 anti-social personality disorder, 510 psychotic disorder). • Estimates suggest the following numbers of Richmond residents aged over 65 years (2011) with mental health problems: <ul style="list-style-type: none"> ○ 2,254 people with depression ○ 716 with severe depression ○ 26 with probable psychotic disorder ○ 506 with 2 or more conditions. • The number of older people living in with depression and severe depression is projected to increase by around 20% between 2012 and 2020[9]. • Estimates suggest that in 2011 Richmond 3,621 people aged 15-64 years have a learning disability, and that of these 770 have a moderate or severe learning disability[10].

	<ul style="list-style-type: none"> • According to GP data 439 (2.76/1000) adults with a learning disability known to GPs in Richmond, compared to population rates of 3.44/1000 in London and 4.65/1000 in England[11]. • Also, according to other data 412 adults with a learning disability receive council services, of whom 169 live in a care home and 243 receive community services[12]. • A total of 4,344 school pupils have special educational needs (SEN) in Richmond (2013). Of these 731 have a SEN statement (2.28%) compared to 2.78% in England, and 3,616 do not have a SEN statement (11.25%) compared to 15.96% in England. <p><u>Community Safety Strategic Assessment 2016/17</u></p> <ul style="list-style-type: none"> • There were 12 incidents of disability hate crime between Apr-Nov 16, according to the local CSU; Richmond had the best sanction detection rate during this period, within all 32 boroughs, at 33%. Disability types were 50% mental disability and 50% physical disability. There is no direct comparison to the previous period due to the situation with under reporting. • MARAC cases identified as involving people with disabilities has risen by 1%, to 8 % (21) cases out of 249 MARAC cases in 2016/17.
Gender (sex)	<p>Sex / Gender health needs assessment</p> <ul style="list-style-type: none"> • In Richmond, the numbers and proportions of men (91,149: 49%) and women (95,849: 51%) are roughly equal overall, and across life-course age-bands until later life. As women experience longer life expectancy than men, by the time people are aged 85 years and over there are more than twice as many women as men. <p><u>Community Safety Strategic Assessment 2016/17</u></p> <ul style="list-style-type: none"> • The female/male ratio of victims of domestic violence remains at 75/25%, which is almost exactly reversed for domestic violence suspects, where it is 24/76 % female to male. Female suspect figures continue to slowly rise; this is also matched by a small rise in male victims. • Male victims has fallen from 9% to just 3% of all MARAC referrals, this is an area that has not matched the overall DV picture, however this possibly confirms either that men are less commonly victims of the most serious DV or that there is under reporting from men experiencing domestic violence.
Gender reassignment	<p>Gender Reassignment Health Needs Assessment</p> <p>There may be between 16 and 39 people with gender dysphoria in Richmond Borough, and the potential for 12 presentations for treatment in 2013 in those over 15 years old.</p>
Marriage and civil partnership	<p>Marriage and Civil Partnership Health Needs Assessment</p> <p>According to the 2011 Census, almost half (48%) of Richmond residents aged over 16 years of age described their status as 'married'. In addition, 665 residents (0.4% of the eligible population) stated they were in a civil partnership.</p>
Pregnancy and maternity	<p>Pregnancy and Maternity Health Needs Assessment</p> <p>The age profile of mothers giving birth in the London borough of Richmond upon Thames, London and England in 2011 is older than the London and England averages – 33.6% of mothers in the borough were aged 35 or over, compared to 19.8% in London and 16.1% in England[1] (Figure 1). In 2011 only 1.2% (36 births) of mothers were under the age of 20 years compared to 2.7% in London and 4.9% in England as a whole. In 2012, there were 2,916 live births to women living in Richmond borough. This live birth rate of 72 per 1000 women aged 15-44 years in the borough was slightly higher than both the London (67 per 1000) and England (65 per 1000) averages[5]. The number of births in Richmond is predicted to remain fairly stable over the next ten years at around 3,000 births per year[6].</p>

	<p>The total fertility rate^[*] for Richmond in 2012 was 1.88, higher than the rate in London but lower than the rate in England. Figure 2 suggests the total fertility rate in Richmond has followed a slightly decreasing trend over the past five years, in line with the regional and national picture.</p>
Race/ethnicity	<p>Race Health Needs Assessment 160,725 (86.0%) of Richmond’s residents categorise themselves as belonging to a White ethnic group, and 26,265 (14.0%) to a Black and minority ethnic (BME) group. Among White groups, other than White British, the largest resident ethnic groups are Other White (22,282, 11.9%) and Irish (4,766, 2.5%). Richmond’s White Other population is composed of substantial numbers of people from Australia, New Zealand, South Africa, and western and eastern Europe. Richmond’s BME groups are made up of 13,607 (7.3%) Asian/British Asian, 6,780 (3.6%) Mixed/multiple ethnic groups, 3,062 (1.6%) Other ethnic groups, and 2,816 (1.5%) Black groups. <u>Community Safety Strategic Assessment 2016/17</u></p> <ul style="list-style-type: none"> • In Richmond, Race Hate Crime has risen by 24% from 136 to 168 crimes; this is expected to remain the same. Richmond has fallen from safest to third safest for race hate crime in the Met area; confidence in reporting is a driver in these figures. • With victims of hate crime, white people were the most common victims (33%), followed by Asians (27%). The male/ female split was 53/47%. This fits in with the demographic profile of offences in last 3-4 years but the white percentage has risen slightly in last two years linked to comments about travellers and east Europeans, the Brexit issues are part of this. • Victims classified as BME constituted 47% of all Hate Crime victims, this is a further fall on the 2015-16 percentages but this will have been affected by “Brexit” and “anti-traveller” sentiment expressed where the victims are eastern European or from a traveller background. • The main difference between suspects and victims remains the fact that 80% of suspects were White males. • The majority of racial offences involved using racial insults and usually took place on public transport or at street level. There were no clear seasonal trends. There is a strong element of “passing through” crimes, on public transport where the suspect is not a borough resident. 66% of victims were borough residents, where information was available. • The percentage of MARAC cases from a BME background has risen from 36 to 45 in the two periods covered, after a review of BME case categorisation these figures are much lower than between 2010-14 but more realistic. These percentages remain higher than the borough BME population, which stands at 14%.
Religion and belief, including non belief	<p>Religion and Belief Health Needs Assessment</p> <ul style="list-style-type: none"> • The proportion of the population reporting themselves as Christian is declining and those reporting no religion increasing. Compared to London as a whole, Richmond continues to have a higher proportion of Christian (55% vs 48%), a higher proportion reporting no religion (28% vs 21%), and lower proportions of other religions (e.g. Muslim: 3% vs 12%). • Despite this, like the BME communities in which they are most common, the Muslim, Hindu and Sikh communities in Richmond are highly concentrated in Heathfield and Whitton wards. Unlike some Boroughs, Richmond does not have any sizeable non-Christian places of worship <p><u>Community Safety Strategic Assessment 2016/17</u></p> <ul style="list-style-type: none"> • Faith hate crime in between Apr-Nov 16 has increased, mainly Islamophobic crime up from 4 incidents to 14. These cases involved

	<p>racial comments, insinuations of being terrorists and references to their faith. Violence was more common in this category than any others, with four violent cases of Islamophobia.</p> <ul style="list-style-type: none"> • Anti-Semitic hate crime has fallen during this period from 3 to 2 incidents recorded • With the current tense situation in the Middle East and Syria in particular, along with the terror attacks in Europe during 2016, the religious hate crime problem remains an issue throughout London. • Muslim females are likely to be at an increased risk of being the target for hate crime, especially if they are wearing the niqab or other clothing associated with their religion. • A number of stickers were found in the Whitton and Heathfield area using Islamophobia and Xenophobic terminology. These stickers were posted on behalf of “National Action”, a national socialist organisation that was banned by the government in December 2016.
Sexual orientation	<p>Sexual Orientation health needs assessment</p> <p>Beyond Richmond, surveys found that 1.5% of the national population and 2.5% in London consider themselves LGBT[3]; and a government report estimated that between 5% and 7% of the population in England and Wales is LGBT[4]. A conservative estimate (5%) equates to 9,500 people in Richmond.</p> <p>Community Safety Strategic Assessment 2016/17</p> <ul style="list-style-type: none"> • Homophobic hate crime has risen from 15 to 37 reports. • The majority of both victims and suspects of homophobic crime were white males aged between 18-40. The victim male/female split was 62/38%. • A linked series of incidents were the cause of this rise, along with a perceived confidence in reporting. • Only 2% of MARAC cases were identified as involving LGBT people this is lower than last year and has been consistently low over the past few years.
Across groups	<p>Community Safety Strategic Assessment 2016/17</p> <ul style="list-style-type: none"> • The majority of both victims and suspects of homophobic crime were white males aged between 18-40. • 81% of alleged Child sexual exploitation victims were female and three quarters were recorded as White British. A majority of the young persons involved were listed as missing from home or care, truancy and mental health concerns were not very prevalent. Only one child had a disability listed.

Data gaps.

Data gap(s)	How will this be addressed?
Full awareness of impact on the protected characteristics is lacking due to existing data gaps, particularly in the areas of older people, disability, marriage and civil partnership, pregnancy and maternity, gender reassignment and sexual orientation. Some of these are likely to affect a large number of Richmond	Further data gathering will be undertaken to draw on information that has not be able to be sourced for the Strategic Assessment and this EINA.

<p>residents.</p> <p>There are also data gaps regarding vulnerability and victimisation of vulnerable persons / groups, which will include protected groups.</p>	<p>Work is in progress to analyse vulnerability and victimisation. This should identify and help address data gaps identified.</p>
--	--

3. Impact

Protected group	Positive	Negative
Age	<ul style="list-style-type: none"> • The CSP Plan has a priority to ‘Keep Children and Young People Safe’, the actions in the delivery plan cover key issues and services to address issues that impact children and young people. • The Plan is aligned to the work of Achieving for Children and the Local Children’s Safeguarding Board. • Older people may be affected by all crimes and anti-social behaviour however they are more vulnerable to crimes including cyber crime and artifice fraud. Action to tackle this is included under the Safer Neighbourhoods priority. There is also a local performance priority to ‘Safeguard older people against crime’. • There is work within the Reducing Re-offending theme to improve work with young offenders as they transition from services for young people to those for adults. Both young people and older people may be victims of hate crime which is covered through the priority ‘Standing Together Against Hate Crime, Radicalisation and Extremism’. • Young people may be vulnerable to radicalisation either from the extreme right wing or Islamist extremists. Work to safeguard young people from such influences is also included in the above priority. • The victims and perpetrators of violence against women and girls may be young people and older people. Work to support and protect victims, including younger and older victims, as well as work to address perpetrators behaviours and bring them to justice is included in the ‘Tackle Violence Against Women and Girls’ priority. 	None identified
Disability	<ul style="list-style-type: none"> • Disability hate crime is any criminal offence that is motivated by hostility or prejudice based upon the victim’s disability or perceived disability. Such hate crime may be committed against a person or 	None identified

	<p>property. It is under reported, though to what extent is unclear.</p> <ul style="list-style-type: none"> • Richmond has an established Hate Crime Forum to better understand the extent of hate crime and related issues in the borough. Actions to address disability hate crime are included in the priority 'Standing Together Against Hate Crime, Extremism and Radicalisation'. • People with disabilities may also be victims of abuse and/or violence from spouses, children or other family members. Action to address this is within the priority 'Tackle Violence Against Women and Girls'. • This work is aligned to the work of the Adult's Safeguarding Board. 	
Gender (sex)	<ul style="list-style-type: none"> • Violence Against Women and Girls covers a range of crimes against women and girls including domestic abuse, coercive control, sexual violence, Female Genital Mutilation and so called Honour Based Violence. • Women are more likely to be the victims of violence against women and girls and men are more likely to be the perpetrators. In 2016/17 95% of the victims were women and 95% of the perpetrators were men. It is for this reason that Violence Against Women and Girls (VAWG) is regarded as gendered abuse. VAWG is also under reported. The Plan recognises this – and also that men and boys are victims of both domestic abuse and sexual violence. Work to reduce the extent and impact of domestic abuse and to increase reporting is included in the priority to 'Tackle Violence Against Women and Girls'. A wide range of actions are included to prevent VAWG, to protect and support victims and to prosecute offenders where possible. • For 2017/18 there is no reduction in financial support for VAWG services. • The re-commissioning of VAWG services is subject to a separate EINA which has been consulted upon and will be published on the council website. This EINA was subject to scrutiny from the Equality Stakeholder Scrutiny Group • Women can be perpetrators of crime and anti-social behaviour however services for offenders are focussed on the needs of male perpetrators / offenders (the majority). There are actions in the 'Reduce Adult Re-offending and Prevent Offending' priority to develop specific services to address the criminogenic needs of women. 	None identified
Gender reassignment	<ul style="list-style-type: none"> • People who have undergone gender reassignment may be more vulnerable to hate crime, known as transphobic hate incidents. Hate crimes can be committed against a person or property. It is likely that hate crime is under reported. 	None identified

	<ul style="list-style-type: none"> Richmond has an established Hate Crime Forum to better understand the extent of hate crime and related issues in the borough. Work to tackle hate crime is included in the priority 'Standing Together Against Hate Crime, Radicalisation and Extremism'. Transgender people can also be victims of violence within their intimate relationships. VAWG is under reported. The Plan recognises this. Work to reduce the extent and impact of domestic abuse and to increase reporting is included in the priority to 'Tackle Violence Against Women and Girls' (see also above). 	
Marriage and civil partnership	Women are more likely to be the victims of violence against women and girls and men are more likely to be the perpetrators. It is for this reason that Violence Against Women and Girls (VAWG) is regarded as gendered abuse. Such abuse can occur within all intimate relationships, whether marriages, civil partnerships, common-law or more casual. VAWG is also under reported. The Plan recognises this – and also that men and boys are victims of both domestic abuse and sexual violence. Work to reduce the extent and impact of domestic abuse and to increase reporting is included in the priority to 'Tackle Violence Against Women and Girls'.	None identified
Pregnancy and maternity	Pregnancy and maternity are risk factors for VAWG. The pregnancy may be a trigger for the abuse or the pattern of abuse may change in terms of frequency and severity. The health risks can be increased to the mother, unborn child and/or baby. It is for these reasons that the risk assessment checklist for domestic violence includes pregnancy. All women assessed as high risk will be referred into the Multi-Agency Risk Assessment Conference (MARAC). This is incorporated in the priority to 'Tackle Violence Against Women and Girls'.	None identified
Race/ethnicity	<ul style="list-style-type: none"> Hate crimes are any crimes that are targeted at a person because of hostility or prejudice towards a person's race or ethnicity and/or religion or belief. Hate crimes can be committed against a person or property. It is likely that they are under reported. Hate crimes may escalate to further crimes or tensions in a community. Richmond has an established Hate Crime Forum to better understand the extent of hate crime and related issues in the borough. Work to tackle hate crime is included in the priority 'Standing Together Against Hate Crime, Radicalisation and Extremism'. The level of BME cases referred the MARAC is high at 66 out of 249 (27%) compared to the BME population level of 14%. There were 9 cases of Honour Based Violence (HBV) safeguarded through the MARAC in 2016/17 and no FGM or Forced marriage cases. 	None identified

	<ul style="list-style-type: none"> The MARAC closely monitors the level of reporting of Honour Based Violence, Forced Marriage and FGM. These are high risk crimes and individual cases are safeguarded at the MARAC through individual protection plans. 	
Religion and belief, including non belief	<ul style="list-style-type: none"> Hate crimes are any crimes that are targeted at a person because of hostility or prejudice towards a person's race or ethnicity and/or religion or belief. Hate crimes can be committed against a person or property. It is likely that they are under reported. Hate crimes may escalate to further crimes or tensions in a community. Richmond has an established Hate Crime Forum to better understand the extent of hate crime and related issues in the borough in recognition of under reporting. Work to tackle hate crime is included in the priority 'Standing Together Against Hate Crime, Radicalisation and Extremism' and includes support to victims as well as advice and security for places of worship. Nationally there has been an increase in Islamophobia evident through incidents and media coverage. This has an impact on local residents and communities increasing their experience of such crimes and incidents – as well as fear. Visible difference increases vulnerability and therefore women wearing the hijab may be more likely to experience Islamophobic incidents. For Muslim families - parental concerns for the safety of their children has also been raised through consultation. 	There is a perception that Prevent is targeted only at Muslim communities. This will be addressed by transparent discussion of the issue and including radicalisation by Extreme Right Wing in all training and materials.
Sexual orientation	<ul style="list-style-type: none"> Hate crimes are targeted at a person because of hostility or prejudice towards a person's sexual orientation. Hate crimes can be committed against a person or property. It is likely that they are under reported. Richmond has an established Hate Crime Forum to better understand the extent of hate crime and related issues in the borough. Work to tackle hate crime is included in the priority 'Standing Together Against Hate Crime, Radicalisation and Extremism'. Levels of reported Domestic Violence and abuse from the LGBT community are low with only 4 LGBT cases out of 249 heard at MARAC in 2016/17. As part of the Community Safety plan Richmond will ensure that commissioned services are available and accessible to the LGBT community by: <ul style="list-style-type: none"> Analysing the level of reporting to the police and IDVA services Assessing performance through contract management Consulting with the LGBT forum on the accessibility of services to LGBT communities 	None identified

4. Actions

Action	Lead Officer	Deadline
Through the new Hate Crime Forum, monitor and respond to any evidence of disproportionate impact	Jenny Iliff	March 2018
Relevant EINAs to be completed as part of work identified above	Robyn Thomas	March 2018

5. Consultation

A public consultation was held on the plan in order to understand what priorities residents and stakeholders thought should be set for the partnership and the borough as a whole, as well as for them to identify the most important issues to tackle in the local area. The responses have been analysed. In summary residents feedback was that the priorities addressed local need and that the actions being taken to address the issues were broadly supported.