



Aberdeen City  
Health & Social Care  
Partnership

*A caring partnership*

## **Equality Outcomes Update Report April 2016 – March 2018**

What Aberdeen Health and Social Care Partnership (HSCP) has achieved in the period April 2016 – March 2018 to progress equality both in the services it provides, and within the HSCP

**July 2018**

This document is also available in large print and other formats and languages upon request. Please call Aberdeen HSCP on 01224 655725.

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## 1. Foreword by the Chair

The Aberdeen Health and Social Care Partnership (HSCP) came into being on 1<sup>st</sup> April 2016. It was created following the framework laid down in the Public Bodies (Joint Working) (Scotland) Act 2014 for the effective integration of adult health and social care services in Aberdeen. The stated aims of the Act are to:

“...improve the quality and consistency of services for patients, carers, service users and their families; to provide seamless, joined up quality health and social care services in order to care for people in their own homes or a homely setting where it is safe to do so; and to ensure resources are used effectively and efficiently to deliver services that meet the increasing number of people with longer term and often complex needs, many of whom are older.”

The role of the Aberdeen HSCP is to manage a wide range of health and social care services delegated by NHS Grampian and Aberdeen City Council to achieve these aims.

The Integration Joint Board (IJB) who manage the HSCP, managers, staff and partner agencies work hard to deliver the highest quality of health and social care services for the people of Aberdeen.

This is our first Equality Outcomes Update Report covering the period April 2016 to March 2018. It is produced in compliance with the Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012, as amended, and the requirements of the Equality and Human Rights Commission for Scotland, the main regulatory body. The report sets out what we have achieved over the last two years in the areas of:

- Race
- Disability
- Age
- Sex (male or female)
- Sexual orientation
- Gender reassignment
- Pregnancy and maternity
- Marriage and civil partnership
- Religion or belief

I hope you will take the time to read this document. We are here to serve the people of Aberdeen and we wish to have meaningful engagement with the people of Aberdeen for all aspects of our work.

Jonathan Passmore,  
Chair,  
Aberdeen HSCP

## 2. Why produce this report?

The Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012 came into force on the 27<sup>th</sup> May 2012. The Regulations were amended in 2015 to bring new public bodies such as the Aberdeen HSCP within its scope. One of the requirements of the Regulations was that new public bodies such as the Aberdeen HSCP must produce, consult and publish an Equality Outcomes Report setting out the objectives we wished to achieve in the field of equality and diversity in the period April 2016 to March 2018. Our Outcomes Report was produced and published in April 2016.

This Outcomes Report detailed the work we proposed to carry out to progress equality for each of the 9 “protected characteristics” of equality as defined by the Equality Act 2010. These 9 protected characteristics are:

- Race
- Disability
- Age
- Sex (male or female)
- Sexual orientation
- Gender reassignment
- Pregnancy and maternity
- Marriage and civil partnership
- Religion or belief

The law requires that equality outcomes are designed to help us progress the requirements of Section 149 (1) of the Equality Act 2010 to:

“(a) eliminate discrimination, harassment, victimization and any other conduct that is prohibited under this Act

(b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;

(c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.”

This is the Equality Outcomes Update Report for the period April 2016 to April 2018. Progress to deliver our Outcomes is shown at Sections 4-14 below.

### **3. Information about Aberdeen HSCP**

Aberdeen HSCP came into being on the 1<sup>st</sup> April 2016.

#### **a) Services provided**

The services provided by the HSCP are listed at Appendix I. In summary the HSCP is responsible for the services previously managed by the Aberdeen Community Health Partnership, but will also manage some additional adult health and social care services previously managed by NHS Grampian and Aberdeen City Council.

#### **b) Resources used**

In 2017/18, the budget for the NHS and social care services in the scope of the HSCP totalled approximately £259 million.

#### **c) Population Served**

The National Records of Scotland 2017 mid-year estimate of the population of Aberdeen city was 228,800.

**4. Staff Training Outcome: Staff who work within the HSCP will understand and meet the health and social care needs of our local equality and diversity communities**

<p><b>This outcome will</b></p> <ul style="list-style-type: none"> <li>• <b>Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.</b></li> </ul>	
<p><b>Supporting Actions</b></p>	<p><b>Progress since April 2016</b></p>
<p>Over the next two years the HSCP will provide equality and diversity training for over 300 staff working within the HSCP, appropriate to their roles. The training will cover all 9 of the protected characteristics.</p>	<p>The target of have 300 HSCP staff attend an Equality and Diversity Staff Training Seminar has been achieved and exceeded. The figures are:</p> <p>In 2016/17, 120 HSCP staff attended this training, at a KSF Level appropriate to their role.</p> <p>In 2017/18, 211 HSCP staff attended this training, at a KSF Level appropriate to their role.</p> <p><b>Total 331</b></p> <p>A further programme of Equality and Diversity Staff Training Seminars is already ongoing.</p>

**5. Impact Assessment Outcome: We will ensure that no Aberdeen HSCP policy, strategy or re-organisational proposal discriminates against any equality or diversity group**

Equality and Diversity Impact Assessment is a legal requirement under the terms of the Equality Act 2010 and the Equality Act (Specific Duties) (Scotland Act 2012, as amended).

<p><b>This outcome will:</b></p> <ul style="list-style-type: none"> <li>• <b>Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it</b></li> <li>• <b>Eliminate discrimination, harassment, victimization and any other conduct that is prohibited under this Act</b></li> </ul>	
<p><b>Supporting Actions</b></p>	<p><b>Progress since April 2016</b></p>
<p>There are two main areas of work:</p> <p><b>a) Equality and Diversity Impact Assessment</b></p> <p>The aim of Impact Assessment is simply to avoid policies, strategies or re-organisational proposals being introduced, with the best of intentions, which discriminate against anyone who possesses one or more of the protected characteristics. All Aberdeen HSCP policies, strategies and re-organisational proposals will be Equality and Diversity Impact Assessed at final draft stage before being issued, to ensure they do not discriminate against any equality or diversity group.</p>	<p>All Aberdeen HSCP policies, strategies and re-organisational proposals have been Equality and Diversity Impact Assessed at final draft stage before being issued. This has been carried out by the NHS Grampian Equality and Diversity Manager on behalf of the Aberdeen HSCP.</p>

<p><b>b) Impact Assessor Training</b>  Aberdeen HSCP will train a further 5 staff to be Equality and Diversity Level One Impact Assessors by 31<sup>st</sup> March 2017.</p>	<p>One Aberdeen HSCP member of staff was trained in 2016/17, but is no longer in post. The NHS Grampian Equality and Diversity Manager will continue to provide this service until more Aberdeen HSCP staff can be trained in early 2019.</p>
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**6. Racial Equality Outcomes: Meeting the communication and health and social care needs of our local ethnic communities**

<p><b>This outcome will:</b></p> <ul style="list-style-type: none"> <li>• <b>Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.</b></li> </ul>	
<p><b>a) Communication needs</b>  The ability of all members of our local ethnic communities to communicate clearly and effectively their healthcare needs is essential if we are to achieve equality in health and social care. For most, the biggest barrier is language. Research has shown that over 90% are non-English speaking when they first arrive in Grampian.</p>	
<p><b>Supporting Actions</b></p>	<p><b>Progress since April 2016</b></p>
<p><b>(i) Interpretation services</b>  <b>Definition: interpretation</b> is changing the spoken word from one</p>	

language to another. There are two main types of interpretation services provided, these are:

- “face to face”
- telephone

**“Face to face” interpretation**

Aberdeen HSCP will continue to provide “face to face” interpreters for non- English speaking people when they access health or social care. The HSCP will work with partner agencies to ensure that a sufficient number of “face to face” interpreters are trained and available to meet our needs.

This has been achieved and work is ongoing. Currently over 154 “face to face” interpreters are available to the HSCP through the Grampian Regional Equality Council “In-Trans” Service and One World Lingo.

**Telephone interpretation**

The “Language Line” telephone interpretation service gives staff access to expert interpreters, on the telephone, in 60-90 seconds, for 170 different languages.

“Language Line” services will be widely available across the HSCP to provide short notice ready access to telephone interpretation. 24/7. A further 20 Access Points will be provided over the next 2 years, if required.

This has been achieved and work is ongoing.

The “Language Line” service is widely available.

- In 2016 there were 3,246 calls made costing £29,897 +VAT.
- In 2017, there were 3,616 calls made costing £26,519 + VAT.
- In 2016 Access points increased from 281 to 305
- In 2017 Access points increased from 305 to 309

Total increase in Access Points = 28

**(ii) Translation services**

**Definition: translation** is changing the written word from one language to another.

A great deal of essential health and social care information is already available in translation. We will regularly review this material to

ensure:

- All material available in translation is up to date.
- Any identified gaps in health or social care information will be filled on an ongoing basis.
- The HSCP will produce any of its published material, upon request, in any other language, in compliance with the Equality Act 2010. This offer will appear at the front of all major HSCP documents.

This has been achieved and work is ongoing.

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## **b) Health and social care needs**

Over the next two years there will be continued close involvement with members of our local ethnic communities and their representative groups and organisations.

<b>Supporting Actions</b>	<b>Progress since April 2016</b>
<p><b>Work will continue to;</b></p> <ul style="list-style-type: none"><li>• Encourage and support recent migrant workers and their families to register with their local GPs by explaining their entitlement to free NHS healthcare.</li></ul>	<p>Achieved. Good progress has been made. The latest information shows that over 95% of members of our local ethnic communities are now registered with a GP. This work is ongoing through HSCP community based staff, through NHS Grampian staff and the Annual NHS Grampian Involvement and Consultation Events and through the work of other partner agencies.</p>
<ul style="list-style-type: none"><li>• Over the next two years there will be continued close involvement with members of our local ethnic communities and their representative groups and organisations.</li></ul>	<p>Achieved and work is ongoing, there is regular liaison.</p>
<ul style="list-style-type: none"><li>• Involve and consult our local ethnic communities in the planning of health and social care services by means of multi-lingual involvement and consultation events, run either by the HSCP or partner agencies.</li></ul>	<p><b>In 2016</b>, NHS Grampian held 3 Involvement and Consultation Events in Aberdeen, run jointly with the Grampian Regional Equality Council (GREC). HSCP staff were also actively involved. There were 129 participants over the 3 events, which were facilitated by “face to face” interpreters for 12 different languages. English was the second language of almost all of the participants. Most were non-English speaking.</p>

	<p><b>In 2017</b>, NHS Grampian held 3 Involvement and Consultation Events in Aberdeen, run jointly with the Grampian Regional Equality Council. HSCP staff were actively involved. There were 111 participants over the 3 sessions. Interpretation was provided for 12 different languages.</p> <p>The information from each year's events are written up by GREC and then widely distributed by NHS Grampian, so that any follow up action can be taken by NHS Grampian and the HSCP.</p> <p>The results showed high levels of patient satisfaction with both NHS Grampian and Aberdeen HSCP provided services. A number of areas for improvement were also highlighted.</p>
<ul style="list-style-type: none"> <li>Encourage and support recent migrant workers and their families to access social care services by explaining their entitlement to free social care services.</li> </ul>	<p>Achieved through the HSCP staff working in social care and the staff of partner agencies. This work is ongoing.</p>
<ul style="list-style-type: none"> <li>Support carers in the recent migrant worker communities, many of whom are unaware of the wide range of support available to them.</li> </ul>	<p>Achieved through the work of HSCP, NHS Grampian and Aberdeen City Council staff and the staff of partner agencies.</p>
<ul style="list-style-type: none"> <li>Provide multi-lingual Advocacy Services.</li> </ul>	<p>This is provided through Advocacy Services Aberdeen.</p>

<ul style="list-style-type: none"> <li>Carry out two targeted health and social well being campaigns over the next 2 years.</li> </ul>	<p>A number of campaigns have been planned and will be implemented during 2018/19 and 2019/20.</p>
<ul style="list-style-type: none"> <li>The HSCP will continue to help and support our local gypsy/traveller communities to access health and social care services by promoting the use of the Hand Held Patient Record. In addition, our campaign to encourage gypsy/travellers to register with local GPs when in the Grampian area will continue. We will also continue to work closely with partner agencies to identify social care needs and carer needs.</li> </ul>	<p>This has been achieved and work is ongoing.</p>

### Supporting Demographic information

The 2011 Census figures show that since the 2001 Census, the population of Grampian has increased by 43,124 to 569,061. The total number of people in the categories “White Scottish” and “White Other British” was 492,180 or 86.5% of the total population of 569,061. People in other ethnic categories numbered 76,823 or 13.5%.

Aberdeen is the most popular area in Grampian for migrant workers and their families to live. This is also borne out by other statistics such as those shown below.

**The number of people in Grampian born outside the UK by Council area**

Council Area	2001 Census	2011 Census
Aberdeen City	6.3%	15.9%
Aberdeenshire	3.1%	5.9%
Moray	3.7%	5.2%

## Gypsy/Travellers

The Craigforth Report of 2008/9, identified a regular Gypsy/Traveller population in Grampian of approximately 450 people. The number of Gypsy/Travellers in Aberdeen was approximately 197. Recent involvement events suggest that these numbers are still current. Currently, there is only one permanent Halting Site adjacent to Aberdeen City, with 16 places.

## 7. Disability and Age Outcomes: We will meet the health and social care needs of disabled and elderly people living in Aberdeen

<p><b>This outcome will:</b></p> <ul style="list-style-type: none"><li>• <b>Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.</b></li></ul> <p>There are four main areas of work:</p>	
<p><b>a) Communication Needs</b></p> <p>It is vitally important to give disabled and elderly people equality of access to health and social care information so they will have equality of access to health and social care services and be able to make informed choices. The work the HSCP will carry out in this sphere is shown below.</p>	
<p><b>Supporting Actions</b></p>	<p><b>Progress since April 2016</b></p>
<ul style="list-style-type: none"><li>• All new HSCP information leaflets, booklets and published material will comply with the requirements of the Royal National</li></ul>	<p>This has been achieved and work is ongoing.</p>

<ul style="list-style-type: none"> <li>Institute for the Blind (RNIB) “Good Practice Guidelines”, as contained in the RNIB publication: “See it right, making information accessible for people with sight problems.</li> </ul>	
<ul style="list-style-type: none"> <li>The HSCP will produce accessible/pictorial Information to help people with a learning disabilities or aphasia.</li> </ul>	This has been achieved and work is ongoing.
<ul style="list-style-type: none"> <li>Portable Induction Loops (PILs) or fixed induction loops will be made available to help people who use a Hearing Aid. All front line services will have access to this equipment.</li> </ul>	This has been achieved and work is ongoing.
<ul style="list-style-type: none"> <li>The HSCP will provide BSL signers when deaf people wish to access health or social care services.</li> </ul>	This has been achieved and work is ongoing.
<ul style="list-style-type: none"> <li>Sensory Impairment Awareness Training will also be provided for staff.</li> </ul>	This is an integral part of our Equality and Diversity Staff Training Seminars. In addition, all attendees receive their own personal copy of the Education for Scotland “Z” card entitled: “Sensory Impairment, Points for Good Communication”.
<ul style="list-style-type: none"> <li>There are no Deaf blind Communicators living in Grampian. If a deaf blind communicator is required, they will be sourced via Deafblind Scotland.</li> </ul>	One of the four British Sign Language (BSL) interpreters in Grampian is now also a trained DeafBlind Communicator Guide. If more specialised support is required, this can be accessed through DeafBlind Scotland, who are based at Lenzie near Glasgow.

## **b) Improve and promote good health for disabled and elderly people**

<b>Supporting Actions</b>	<b>Progress since April 2016</b>
<ul style="list-style-type: none"><li>Working with our partner organisations, we will provide targeted health promotion material to encourage people to keep active in old age, promote sports and other activities, provide self-care advice and opportunities for social interaction.</li></ul>	Materials have been planned and will be produced in 2018/19.
<ul style="list-style-type: none"><li>The HSCP will provide a wide range of health and social care services to support people in their own homes or in domestic type settings.</li></ul>	Achieved. This work is ongoing.
<ul style="list-style-type: none"><li>The HSCP will support national and local mental health initiatives such as the “See me” campaign to help overcome the stigma often associated with mental ill health.</li></ul>	Achieved. This work is ongoing.

<b>c) Improve physical access to buildings and services</b>	
<b>Supporting Actions</b>	<b>Progress since April 2016</b>
<ul style="list-style-type: none"> <li>Over the next two years, the HSCP will carry out Access Audits of the buildings used by staff working within the HSCP, to ensure physical ease of access. For most disabled and elderly people, the biggest barriers are steps, narrow entrances, a lack of lifts in multi-storey buildings, a lack of handrails, a lack of signage, a lack of toilets suitable for use by disabled people, a lack of Changing Places for adults, poor lighting and poor colour contrast on floors, walls and ceilings.</li> </ul>	<p>Achieved. Access Audits have been carried out and a range of improvements made. These have included the installation of electrically operated entrance doors and access ramps.</p> <p>The recently completed Foresterhill Health Centre included disabled toilet facilities and an Adult Changing Places facility as an integral part of the scheme.</p>

### **Supporting statistical information**

The 2011 Census figures show that approximately 16% of the population of Aberdeen had a long-term activity limiting health problem or disability. This equates to 35,645 people. It must also be remembered that the 2011 Census figures are now 7 years old and this number will have inevitably increased.

**8. Sex Equality Outcomes: The HSCP will meet the health and social care needs of people who are victims of gender based violence such as rape, sexual abuse, or who have been trafficked**

<p><b>This outcome will:</b></p> <ul style="list-style-type: none"> <li>• <b>Help to eliminate discrimination, harassment, victimisation and any other conduct that is prohibited under the Equality Act 2010.</b></li> </ul>	
<p><b>Gender based violence</b>                  The HSCP, in close co-operation with NHS Grampian, Aberdeen City Council, Police Scotland, other public bodies, the Scottish Government and partner agencies recognises that gender based violence is a serious issue. It affects both the physical and mental health of those involved. Most gender based violence takes place in the domestic setting.</p>	
<p><b>Supporting Actions</b></p>	<p><b>Progress since April 2016</b></p>
<ul style="list-style-type: none"> <li>• Provide training for front line staff to help them recognise the signs of gender based violence or people who have been trafficked. This training will also give staff the knowledge and skills to respond appropriately.</li> </ul>	<p>Achieved and further work is ongoing.</p> <p>All of our Equality and Diversity Staff Training Seminars include a section on Human Trafficking. All attendees receive their own personal copy of the Police Scotland leaflet: “Human Trafficking, Reading the Signs”, the content of the leaflet is them discussed in detail, together with local anonymised examples.</p>

<ul style="list-style-type: none"> <li>• Through consultation, involve the victims of gender based violence or trafficking, in the planning and development of service designed to provide help and support.</li> </ul>	Achieved. Further work is ongoing with partner agencies.
<ul style="list-style-type: none"> <li>• Produce information on the sources of help and support and make these readily available.</li> </ul>	Achieved. Further work is ongoing with partner agencies.
<ul style="list-style-type: none"> <li>• Put in place arrangements to help any HSCP staff member who may be experiencing gender base violence themselves.</li> </ul>	Achieved. Further work is ongoing.
<ul style="list-style-type: none"> <li>• Meet the ongoing healthcare and social support needs of people who have been raped, sexually abused or trafficked, in liaison with other bodies, and charitable organisations.</li> </ul>	Achieved. Further work is ongoing with partner agencies.

## **b) Supporting information**

The most recent statistical information available comes from the Police Scotland Statistical Bulletin of Domestic Abuse for 2016/17. This shows that there were 58,810 incidents of gender based violence recorded by Police Scotland. These incidents comprised:

### 2016/17 Incidents of Gender Based Violence in Scotland

Perpetrator	No of incidents	% of total
Male perpetrator against female victim	42,759	72.7%
Female perpetrator against male victim	9,957	16.9%
Female perpetrator against Female victim	737	1.25%
Male perpetrator against male victim	835	1.41%
Unknown	4,522	7.74%
<b>Totals</b>	<b>58,810</b>	<b>100%</b>

In Grampian in 2016/17, there were 2522 incidents of domestic abuse recorded. It is generally accepted by all of the agencies concerned, that these figures are understated. Many incidents of gender based violence go unreported. This violence can take many forms, such as physical assault, rape, sexual assault, mental cruelty, forced marriages and so-called “honour crimes”.

In 2014, there were two convictions in Aberdeen of people involved in Human Trafficking. It is unlikely that these two people are the only ones involved in this trade in human misery in Grampian. This is also the view of Police Scotland.

**9. Sexual Orientation Outcome: The HSCP will meet the specific health and social care needs of our local LGB and T communities**

<p><b>This outcome will:</b></p> <ul style="list-style-type: none"> <li>• Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.</li> <li>• Foster good relations between persons who share a relevant protected characteristic and persons who do not share it</li> </ul>	
<p><b>Supporting Actions</b></p>	<p><b>Progress since April 2016</b></p>
<p><b>a) Promotion of a positive image of our local LGB &amp; T communities</b>                  The HSCP through its staff training programme will encourage staff to promote a positive image of our local LGB &amp; T communities, to the wider community in Aberdeen.</p>	<p>Achieved. All of our Equality and Diversity Training Seminars include information on promoting a positive image of our local LGB &amp; T communities, to the wider community in Aberdeen.</p>
<p><b>b) Increase the availability of information</b>                  Over the next two years, The HSCP will continue to provide health care information of particular interest to the LGB &amp; T communities. Work will also continue to identify and meet any new information</p>	<p>Achieved and work is ongoing.</p>

needs.	
<p><b>c) Training to help HSCP staff to be sensitive to the sexual orientation of people</b></p> <p>LGB and T awareness training will be an integral part of the HSCP Equality and Diversity Staff Training Programme.</p>	<p>Achieved. LGB and T awareness training is an integral part of the HSCP Equality and Diversity Staff Training Programme.</p>
<p><b>d) Sexual health</b></p> <p>We will promote the safe sex message to men who have sex with men to reduce the risk of contracting sexually transmitted diseases or blood borne viruses. The safe sex message will also be promoted to the wider community in Aberdeen City.</p>	<p>Achieved and work is ongoing.</p>

### **Supporting statistical information**

Information on sexual orientation is something which many people feel uncomfortable divulging. The General Register Office for Scotland considered including an LGB and T question in the 2011 Scottish census. A pilot was carried out in 2005 involving 4,400 households. They found:

“Overall only 2.2% of respondents declared non-heterosexual orientation.”

Most respondents felt that sexual orientation was too sensitive and too intrusive a question to include in a Census. Accordingly, no sexual orientation question was included.

The official UK Government estimate is that 6% of the population are gay, lesbian or bisexual. Using this estimate and the 2011 Aberdeen Census population of 222,793, this would give an LGB&T figure for Aberdeen of 13,368.

**10. Gender Reassignment Outcome: Meet the specific health and social care needs of members of our transsexual and transgender communities. Promote a positive image of the transsexual and transgender communities to the wider community in Aberdeen**

<p><b>This outcome will:</b></p> <ul style="list-style-type: none"> <li>• Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.</li> <li>• Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.</li> </ul>	
<p><b>Supporting Actions</b></p>	<p><b>Progress since April 2016</b></p>
<p><b>a) Healthcare</b>  HSCP staff will work hard over the next two years to further develop health care services for members of the transsexual and transgender communities.</p>	<p>Achieved in co-operation with NHS Grampian. The NHS Grampian Gender Identity Clinic has been reconfigured and clinical input increased to expand capacity.</p>

<p><b>b) Social services</b>  Work will be progressed to provide enhanced social services support and counselling services.</p>	<p>This development has not yet been funded.</p>
<p><b>c) Promoting a positive image</b>  HSCP staff will work hard promote a positive image of the transsexual and transgender communities to the wider community in Aberdeen.</p>	<p>Achieved. LGB and T awareness training is an integral part of the all Equality and Diversity Staff Training Seminars, All attendees also receive a personal copy of the Booklet: “Guide for Staff to help them meet the needs of Transsexual Patients attending for Hospital Care”.</p>

## Supporting statistical information

### Transsexual Community

There is no reliable information on the numbers of people in Grampian who have transitioned from one sex to another. However, the best local estimate made by NHS Grampian is 44 with a further 101 engaged in the transition process.

Various studies have shown that 70% of people who transition, transition from male to female. The average age at which people realise they have gender dysphoria is 14, the average age to transition is 42. This often means that when people come to transition, they are married with children. This adds emotional trauma to the trauma of facing major surgery and a major life change. Member of the transsexual community are some of the most vulnerable in our society. Research by NHS Grampian indicates that approximately 58% have either attempted suicide or had serious suicidal thoughts.

## Transgender Community

There is no reliable information on the numbers of people in Grampian who are transgender.

### 11. Pregnancy and Maternity: Meeting the specific health and social care needs of pregnant and nursing Mothers

<b>Aim: This outcome will:</b> <ul style="list-style-type: none"><li>• <b>Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.</b></li></ul>	
<b>Supporting Actions</b>	<b>Progress since April 2016</b>
<b>a) Maternity care</b> The HSCP will continue to provide the highest standard of community based antenatal and post natal care through our GP's, Community Midwifery network and Health Visitors.	Achieved and ongoing.
<b>b) Facilities for Nursing Mothers</b> All buildings used by the HSCP will provide facilities for Nursing Mothers by 31st March 2017.	Achieved and ongoing.

<p>All new buildings will include facilities for Nursing Mothers in their design brief.</p> <p>Additional GP and Community Nursing support will be provided to nursing Mothers who require this.</p>	<p>Achieved and ongoing.</p> <p>Achieved and ongoing.</p>
<p><b>c) Social care and support</b></p> <p>We will continue to provide social care and support services to young Mothers and Mothers who are experiencing social issues during and after pregnancy.</p>	<p>Achieved and ongoing.</p>

## Supporting statistical information

### Birth rate

The birth rate in Grampian has increased gradually over the period 2002 to 2010.

In 2002 there were 5,027 live births, this figure increased to 6,327 live births by 2010. This gradual increase is the same pattern which can be seen across Scotland.

### Ethnic origin of Mothers

In Scotland in the period 2000 - 2003 live births to Mother of UK origin averaged 92%. In the period 2006-2008 live births to Mothers of UK origin reduced to an average of 85%. In Grampian, the 2011 live birth figures are:

<b>Location</b>	<b>Total Number of live births</b>	<b>Percentage born to Mothers of UK Origin</b>
Aberdeen	2608	67.87%
Aberdeenshire	2695	85%
Moray	973	89%

These figures emphasise the important of making interpretation services widely available.

## **12. Marriage and Civil Partnership Outcomes: Staff will respect the rights of marriage partners, civil partners and common law partners in the health and social care setting**

<b>This outcome will:</b>	
<ul style="list-style-type: none"> <li>• <b>Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.</b></li> </ul>	
<b>Supporting Actions</b>	<b>Progress since April 2016</b>
<p><b>a) Respecting the rights of marriage partners, civil partners and civil partners</b></p> <p>Staff are already aware of the need to respect the legal rights of marriage partners, especially when important health care or social care decisions are being made which may involve seriously ill patients or end of life issues.</p>	<p>Achieved. Information on respecting the rights of marriage partners, civil partners and common law partners is an integral part of all of our Equality and Diversity Staff Training Seminars, together with discussion and anonymised examples.</p>

However, due to the relatively small number of people in civil partnerships or in a same sex marriage living in Grampian, it may not immediately occur to staff that a same sex marriage or civil partnership may exist when people receive health or social care.

Our staff training will enhance staff awareness to ensure that staff are aware of the possible existence of civil partnerships or same sex marriages when providing health or social care. This will help them to safeguard the rights of civil partners and same sex marriage partners. The training will also make staff aware of the rights of Common Law partners.

### Supporting statistical information

Grampian is in line with the Scottish trend in terms of the numbers of couples getting married or entering into civil partnerships. The figures for Grampian from the General; Register Office for Scotland are:

	<b>Year</b>	<b>Total</b>
Marriages in Aberdeen	<b>2017</b>	<b>710</b>
Civil Partnerships in Aberdeen	<b>2017</b>	<b>nil</b>

The reduction in the number of people entering into civil partnerships suggests that most same sex partner prefer to enter into a same sex marriage.

There are currently no statistics available on the number of people entering into a same sex marriage or in a Common Law partnership in Grampian.

**13. Religion or Belief Outcomes: Staff will be aware of the specific religious and spiritual needs of people in a health or social care setting.**

<p><b>This outcome will:</b></p> <ul style="list-style-type: none"> <li>• Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.</li> <li>• Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.</li> </ul>	
<p><b>Supporting Actions</b></p>	<p><b>Progress since April 2016</b></p>
<p><b>a) Provide educational resources</b>                  We will provide educational resources for staff working within the HSCP to enhance their awareness of the specific religious and spiritual needs of different faith communities.</p>	<p>Achieved. All attendees at the Equality and Diversity Staff Training Seminars receive their own personal copy of the NHS Grampian booklet: "Religions and Cultures in Grampian: A Practical guide for health and social care staff to the diversity of beliefs, customs and cultures of the people of Grampian".</p> <p>Over 100 additional copies have also been requested and provided to HSCP staff.</p>

<p><b>b) Staff training</b> The staff training will make staff aware of the need to respect the religion or belief of patients and those receiving social care.</p>	<p>Achieved and ongoing. Information on respecting the rights of people of different religions and cultures is an integral part of all of our Equality and Diversity Staff Training Seminars, together with the discussion of anonymised examples.</p>
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**14. Equality and Diversity Monitoring within the HSCP: The HSCP will comply with all current equality and diversity legislation and have in place effective monitoring arrangements**

<p><b>This outcome will:</b></p> <ul style="list-style-type: none"> <li>• Eliminate discrimination, harassment, victimization and any other conduct that is prohibited under this Act</li> <li>• Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it</li> </ul>	
<p><b>Supporting Actions</b></p>	<p><b>Progress since April 2016</b></p>
<p><b>a) HSCP Board Monitoring</b> The HSCP Board will:</p> <ul style="list-style-type: none"> <li>• monitor compliance by the HSCP organisation with equality and diversity legislation</li> </ul>	<p>Achieved.</p>

<ul style="list-style-type: none"> <li>• monitor compliance by staff working within the HSCP</li> <li>• Address any issues or problems promptly</li> <li>• Receive an annual report from the HSCP Chief Officer</li> </ul>	<p>Achieved.</p> <p>Achieved.</p> <p>Deferred meantime during the HSCP Chief Officer post vacancy.</p>
<p><b>b) Production of Statutory reports</b></p> <p>The HSCP Chief Officer will ensure that all statutory reports are produced by the due date and presented to the HSCP Board for scrutiny and approval. Thereafter, the finalised reports will be made widely available.</p>	<p>Some delays have occurred during the HSCP Chief Officer post vacancy, but these are now being addressed.</p>

## 15. Distribution of this Report and Comments

This Report will be posted on the Aberdeen City HSCP website, as required by law and will also be made widely available to partner agencies, equality and diversity groups and the wider community in Aberdeen. Comments on this Report will be warmly welcomed and can be made by phone to: 01224 655725 or by email to: [ACHSCPEnquiries@aberdeencity.gov.uk](mailto:ACHSCPEnquiries@aberdeencity.gov.uk) or by post to:

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