Subject / Title Building Resilience: Tackling Poverty in Tameside	
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Team	Department	Directorate
Policy, Performance and Intelligence	Transformation, Policy and Communications	Governance and Pensions

Start Date	Completion Date		
07/12/2022	03/03/2023		

Project Lead Officer	Tom Hoghton			
Contract / Commissioning Manager	N/A			
Assistant Director/ Director	James Mallion			

EIA Group (lead contact first)	Job title	Service
Tom Hoghton	Policy & Strategy Service Manager	Policy, Performance and Intelligence
Colm Delaney	Policy Officer	Policy, Performance and Intelligence
Roseanna Wain- Basaran	Policy Officer	Policy, Performance and Intelligence

PART 1 - INITIAL SCREENING

An Equality Impact Assessment (EIA) is required for all formal decisions that involve changes to service delivery and/or provision. Note: all other changes – whether a formal decision or not – require consideration for an EIA.

The Initial screening is a quick and easy process which aims to identify:

- those projects, proposals and service or contract changes which require a full EIA by looking at the potential impact on, or relevance to, any of the equality groups
- prioritise if and when a full EIA should be completed
- explain and record the reasons why it is deemed a full EIA is not required

A full EIA should always be undertaken if the project, proposal and service / contract change is likely to have an impact upon, or relevance to, people with a protected characteristic. This should be undertaken irrespective of whether the impact or relevancy is major or minor, or on a large or small group of people. If the initial screening concludes a full EIA is not required, please fully explain the reasons for this at 1e and ensure this form is signed off by the relevant Contract / Commissioning Manager and the Assistant Director / Director.

1a.	What is the project, proposal or service / contract change?	Building Resilience: Tackling Poverty in Tameside
1b.	What are the main aims of the project, proposal or service / contract change?	Developing a new long-term partnership approach to address the causes and consequences of poverty in Tameside.

1c. Will the project, proposal or service / contract change have either a direct or indirect impact on, or relevance to, any groups of people with protected equality characteristics?

Where there is a direct or indirect impact on, or relevance to, a group of people with protected equality characteristics as a result of the project, proposal or service / contract change please explain why and how that group of people will be affected.

Protecte d Characte ristic	Direct Impact/Rele vance	Indirect Impact/Rele vance	Little / No Impact/Rele vance	Explanation			
Age				people, i	In Tameside, there are 231,063 people, in total. The breakdown based on age is shown below.		
					Census 202	21	
				Age Group	% Tameside	% England and Wales	
				0-9	12.3	11.3	
				10-19	11.8	11.6	
	X			20-29	11.6	12.7	
	^			30-39	14.0	13.7	
				40-49	12.6	12.7	
				50-59	14.2	13.8	
				60-69	10.8	10.7	
				70-79	8.5	8.6	
				80-89	3.6	4.0	
				90+	0.6	0.8	
				Children and young people			

In accordance with section 105, Children Act 1989 and the UN Convention on the Rights of the Child, a child is defined as anyone under 18 years of age. In Tameside, 51,193 people in Tameside are aged 0-17, around 22.2% of the population.

Research indicates that children are more at risk of poverty than adults.¹ 22.3% of children in Tameside live in poverty compared to just 17.1% nationally.²

According to research by the Joseph Rowntree Foundation. Families which include 3 or more children have an even higher child poverty rate (38%).3 . Several factors influence this, including larger families having higher consumption needs which are not reflected in wages, increased caring responsibilities creating further barriers to participation within the labour market and Government benefit policies such as the two child limit and the household benefit cap.4

Findings from the Joseph Rowntree Foundation also suggest that the rate of child poverty also varies depending on the age of children within the family. For example, children in families where the youngest child is aged between 5 and 10 are the most likely to be in poverty (29%), followed by children in families where the youngest child is aged 0-5

¹ Children in poverty: Measurement and targets - Work and Pensions Committee (parliament.uk)

² <u>Public health profiles - OHID (phe.org.uk)</u>

³ uk poverty 2023 - the essential guide to understanding poverty in the uk 0 0.pdf (jrf.org.uk)

⁴ Why we can't understand child poverty in the UK without thinking about family size | British Politics and Policy at LSE

(28%), children in families where the youngest child is aged 11 to 15 years old (24%), and children in families where the youngest child is aged between 16-19 (21%).⁵

This means that children and young people will be more affected by the Tackling Poverty in Tameside Strategy as a whole, and some recommendations, including measures relating to the uptake of healthy start vouchers, free childcare entitlement and free school meals will clearly have a greater direct impact on children and their families.

Older People

There are approximately 40,600 residents over the age of 65 in Tameside, or around 17.6% of the population. This can be further broken down into:

65-69 years: 11,300 (4.9%) 70-74 years: 11,600 (5.0%) 75-79 years: 8,000 (3.5%) 80-84 years: 5,300 (2.3%) 85-89 years: 2,900 (1.3%) 90+ years: 1,500 (0.6%)

The impact of poverty on older people is mixed. Research from the Resolution Foundation has found that while nonpensioners are £816 a year worse off on average as a result of changes to workingage benefits since 2010, pensioners are £666 a year better off due to the Triple Lock. However, due to fact that older people are likely to live in more energy-inefficient homes, they are paying a higher share of their income on energy bills

⁵ uk poverty 2023 - the essential guide to understanding poverty in the uk 0 0.pdf (jrf.org.uk)

			than any other age group. Tameside also has a higher proportion of older people affected by income deprivation (17.70%) than the England average of 14.2%. This means that while it is likely than older people will be less affected by the Tackling Poverty in Tameside Strategy as a whole, some recommendations, including measures aimed at preventing fuel poverty, may be more likely to be accessed by older people.
Disability	X		Data from the 2021 Census shows that 20% of Tameside residents are considered to be disabled under the Equality Act. Of those, 10.8% find their dayto-day activities "limited a little" while 9.1% find their day-to-day activities "limited a lot". Disabled people and their families face a number of challenges that make them far more vulnerable to poverty. Issues associated with disability and ill health mean that disabled adults face average extra costs of £583 a month, and families with disabled children face average extra costs of £581 a month. This covers specialist goods and services (therapies, equipment, adaptations), as well as greater use of, and higher costs for, non-specialist goods and services Despite progress in recent years, there continues to be a significant "employment gap" between non-disabled and disabled people. This means that disabled people and/or families often rely on benefits as a source of income, which are insufficient to prevent them from falling into poverty. 80% of disabled people have also experienced some difficulties

			accessing benefits and pension services. Data from Tameside Citizens Advice Bureau reveals that 52% of all residents presenting themselves identified as having a disability or a long-term health condition. 42 of the 141 LSOAs in Tameside, or 29.8%, are in the lowest 10% nationally for Health Deprivation and Disability. As a result of these factors, support for disabled residents who are either suffering from or vulnerable to poverty is likely to be heavily emphasised in the Tackling Poverty in Tameside Strategy. This will include recommendations on income maximisation, accessing relevant advice and support, and improving employment prospects.		
Ethnicity			2021 Cens Ethnicity	ws Data % Tamesi de	% Engla nd and Wales
	X		Asian, Asian British or Asian Welsh: Banglade shi	2.5%	1.5%
			Asian, Asian British or Asian Welsh: Chinese	0.6%	0.7%
			Asian, Asian British or Asian Welsh: Indian	1.6%	3.1%

	Asian, Asian British or Asian Welsh: Pakistani Asian, Asian British or	0.5%	1.6%
	Asian Welsh: Other Asian		
	Black, Black British, Black Welsh, Caribbea n or African: African	1.8%	2.5%
	Black, Black British, Black Welsh, Caribbea n or African: Caribbea n	0.3%	1.0%
	Black, Black British, Black Welsh, Caribbea n or African: Other Black	0.2%	0.5%
	Mixed or Multiple ethnic groups: White and Asian	0.6%	0.8%
	Mixed or Multiple	0.4%	0.4%

ethnic groups: White and Black African Mixed or Multiple ethnic groups: White and Black Caribbea n	0.8%:	0.9%
Mixed or Multiple ethnic groups: Other Mixed or Multiple ethnic groups	0.4%	0.8%
White: English, Welsh, Scottish, Norther Irish or British	82.4%	74.4%
White: Irish	0.7%	0.9%
White: Gypsy or Irish Traveller	0.0%	0.1%
White Roma	0.0%	0.2%
White: Other White	2.4%	6.2%
Other ethnic group: Arab	0.2%	0.6%
Other ethnic group: Any other	0.6%	1.6%

			Poverty rates across ethnic groups vary significantly, however, some minority ethnic groups are more likely to be in poverty. Nationally, poverty rates for Bangladeshi and Pakistani ethnic groups are higher than for all other ethnicities. Poverty rates were also significantly higher for Black ethnic groups and peop from Other Asian backgrounds than white groups. Tameside has a greater percentage of Bangladeshi and Pakistani residents than the national average. Given the disproportionate deprivation experienced by people from the Bangladeshi and Pakistani ethnic groups, there is an increased likelihood that peop		
			poverty and alleviation m recommend Tackling Por Strategy.	neasures ed within th	ne
Sex			Tameside had 117,797(519 female, 113 are male, the national den	%) of these ,276 (49%) is reflects t	are of these he
	х		However, W likely to expe than men.8 V on average counterparts gap (gross h men and wo employment tripled for the	erience po Nomen ea than their r s. The geno nourly pay) men in full is £1.10, t	verty rn less male der pay between time chis is

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⁶ uk poverty 2023 - the essential guide to understanding poverty in the uk 0 0.pdf (jrf.org.uk)

⁷ Population and household estimates, England and Wales - Office for National Statistics (ons.gov.uk)

⁸ #IWD2018: time to loosen the grip of poverty on women in the UK | JRF

			paid at than ware in compart of the	on average vomen, 2 part time ared to 1 en also mationate of claimants 10,870). An area area area area area area area are	here mer ge of £3.4 8% of wo e employr 1% of me hake up a of univers (14,936) As wome mber of U people of t are also kely to fo people no ersal cred an increa milies are any family verty. 12 he Annua d survey 2 7,749,000 , lone mo	O more omen ment, en. 9 higher al credit of than en make JC of around od ot et., 10 sed risk et the etype to l Family 2022, of o single
			highliq more and th exper	ghting that common nerefore r	up 86%, ^{1:} at women ly lone pa nore likel disadvar this.	are rents y to
Religion						
or Belief				Cens	us 2021	Data
		×		Religi on	% Tame side	% Engl and and Wale s
				Buddh ist	0.3	0.5

⁹ NOMIS, Office for National Statistics, 'Annual survey of hours and earnings - resident analysis', July 2022, https://www.nomisweb.co.uk/

¹⁰ New data shows food insecurity major challenge to levelling up agenda | Food Foundation

¹¹ Stat-Xplore - Table View (dwp.gov.uk)

¹² uk poverty 2023 - the essential guide to understanding poverty in the uk 0 0.pdf (jrf.org.uk)

¹³ Families and households - Office for National Statistics (ons.gov.uk)

				Christi an	47.8	46.2
				Hindu	1.3	1.7
				Jewis h	0.0	0.5
				Musli m	7.3	6.5
				Sikh	0.1	0.9
				Other religio	0.4	0.6
				No religio n	38	37.2
				Not answe red	4.7	6.0
			pover within A great Tame Christ religion Wales Tame Sikh, Buddh that the Tame disprogroun however will have way we religion to the way we religion within the way we religion to the wellow the w	y direct lity and rethe UK. ater proposide resident Museus than its. However, It is ne Tackling of religions of religions and present and	ortion of dents ide lim and r n Englar er, fewer dents ide lindu or not anticing Pover tegy or it will have te impact gion or becomme delivered ensitive to on-religion or-	entify as non- nd and entify as ipated ty in te a ton elief, and in a to
Sexual Orientatio n	X		on the sexual is lack Howe	ody of re e relations Il orientat king in ma ver, the f ble most	ship betv ion and p any area indings t	veen poverty s. hat are

parallel evidence from other countries.

Gay men are somewhat more likely to experience poverty than heterosexual men, as well as more likely to be in receipt of means-tested benefits. There is limited research suggesting that gay men may also be overrepresented among homeless populations. However, gay men have comparable earnings to heterosexual men, even though there is some evidence they trade off "tolerant" occupations against higher pay. It is likely that gay older men experience significant social isolation, which could increase their risk of falling into poverty.

Lesbians are about as likely as heterosexual women to experience poverty, but are significantly more likely to participate in the labour market and higher education. There is a pay premium for lesbians, even when controlling for motherhood. These findings suggest that the lesbian experience is less disadvantageous materially than that of gay men, at least compared with heterosexual women.

Bisexual men are almost 4% more likely to experience poverty than heterosexual men, and bisexual women are nearly 3% more likely to experience poverty than heterosexual women. These findings are not statistically significant in themselves: but they are corroborated by other evidence, such as the fact that bisexual men and women both suffer a pay penalty compared with heterosexual men and women.

		This suggests that gay and bisexual men, as well as bisexual women, are more vulnerable to falling into poverty than their heterosexual peers. In light of this, although many of the suggested measures to alleviate poverty are universal, they may be accessed disproportionately by this group and therefore should be considered for additional support.
Gender Reassign ment	X	Data on the relationship between gender reassignment and poverty is very limited. However, the research which does exist suggests that transgender individuals face significant challenges in terms of income, discrimination and access to services. Despite the existence of anti-discrimination and equalities legislation, in 2009 the Equalities and Human Rights Commission found that transgender people are more likely to be found to be in jobs that are below their skills and educational capacity, and appear more likely to work in lower-paid and insecure employment in the public sector or to be self-employed. There is evidence that they may also experience greater debt and difficulty paying bills. A 2018 survey by Stonewall also found that 1 in 4 trans people have experienced homelessness at some point in their lives, while 29% of transgender people who had accessed social services in that year experienced some form of discrimination. It is very likely that transgender people will require additional support to access measures designed to alleviate poverty.

Pregnanc y & Maternity	X			Pregnancy and maternity are a potential risk area for women who may experience issues with employment during this time. According to national research by the Joseph Rowntree Foundation, having children increases a women's likelihood of living in poverty, 25% of women in poverty have children, compared to 17% who don't have children. 14 Additionally, individuals from deprived areas who have given birth die at an increased rate compared to those from less
				deprived areas. ¹⁵ Therefore, individuals experiencing pregnancy and maternity are disproportionately affected by poverty. In light of this, although many of the suggested measures to alleviate poverty are universal, they may be accessed disproportionately by this group.
Marriage & Civil Partnershi p			X	No differential impact on residents due to their marriage or civil partnership status has been identified as a result of the objectives and recommendations in the Tackling Poverty in Tameside Strategy.
Other prot		letermined loc	ally by Tamesi	de and Glossop Strategic
Group (please state)	Direct Impact/Rele vance	Indirect Impact/Rele vance	Little / No Impact/Rele vance	Explanation
Mental Health	х			The estimated rate of Common Mental Disorders (CMDs) in Tameside is 19.5% for residents aged 16 or over, and 12.1% for residents aged 65 or

¹⁴ #IWD2018: time to loosen the grip of poverty on women in the UK | JRF

 $^{^{15}\ \}underline{MBRRACE\text{-}UK\ \underline{Maternal\ \underline{MAIN\ \underline{Report\ \underline{2022\ v10.pdf}\ (ox.ac.uk)}}}$

Carare		over. This is above the England averages of 16.9% (16+) and 10.2% (65+). Multiple studies have shown that there is a significant correlation between mental health and the social, economic and physical environment in which people live. This means that not only is poverty a risk factor for poor mental health, but that poor mental health can also exacerbate poverty (for example: through impacting a person's ability to work). Research from the Money and Mental Health Policy Institute (MMHPI) also suggests that a quarter of people with CMDs are in financial difficulties can also negatively affect the chance of recovery. Unemployment and low-quality employment are also closely associated with an increased rate of CMDs. This is often exacerbated by a lack of specialised employment support to help people into work that matches their needs, as well as gaps around residents being able to access mental health services in an easy and timely fashion. Due to the mutually reinforcing causal link between mental health and poverty, addressing this will form a core element of the Tackling Poverty in Tameside Strategy. It is therefore highly likely that implementation will have a disproportionate impact of people suffering with mental health issues.
Carers	X	Data from the 2011 Census shows that 9.5% of residents (20,675) in Tameside have some kind of unpaid caring responsibilities, and 3.1% of residents (6,719) provided

			more than 50 hours of unpaid care a week. Residents in poverty are likely to have more care needs and are also more likely to have at least some of those care needs informally met, or unmet entirely. This can lead to significant financial pressures on carers and families. Research from the Joseph Rowntree Foundation has also shown that the number of families in receipt of Carer's Allowance and in poverty has doubled from 15% in 2005-6 to 30% in 2019-20. Many carers also face significant difficulties in combining work with their caring responsibilities, an issue often exacerbated by inadequate support from existing systems. As a result many carers end up cutting back on hours or dropping out of the labour force entirely. This means that carers as a group are more vulnerable to falling into poverty than those without caring responsibility. Therefore our recommendations for alleviating property must target the particular issues carers face, meaning that the implantation of the Tackling Poverty in Tameside Strategy will disproportionately affect them.
Military Veterans		x	3.6% people in Tameside aged 16 or over previously served in the armed forces, which is slightly lower than the national average (3.8%) for England and Wales. ¹⁶ The evidence suggests that the majority of Serving personnel and their families manage the transition to civilian life well, but

16 UK armed forces veterans, England and Wales - Office for National Statistics (ons.gov.uk)

		there is a minority who do not. Issues can present relating a variety of factors including housing, wellbeing, spousal employment, service leaver employment, finances, health, education and children. 17 The 2017 figures from the Annual Population Survey found that working-age armed forces veterans were as likely to be employed as nonveterans (79% for both groups). 18 Data around poverty and Military Veterans is limited. However, available evidence also indicates that single veterans are not significantly over-represented in homelessness provision. 19 It is not anticipated that the Tackling Poverty in Tameside Strategy will have a disproportionate impact upon
Breast Feeding	x	this group. In Tameside, breast-feeding rates are significantly lower than the national average. In Tameside, 53.3% of babies are breastfed as their first feed, significantly lower than the North West and England averages, 62.4% and 67.4% respectively. Additionally, only 36.6% of babies in Tameside were breastfeeding at 6-8weeks, compared to the England average of 49.3%. 20 According to research by Peregrino et al, as neighbourhood deprivation increases, the odds for breastfeeding initiation decreases, reducing by 40%

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 $^{^{17} \}underline{\text{lifting-lid-transition-families-experience-support-they-need.pdf} (\underline{\text{fim-trust.org}})}$

¹⁸ <u>FINAL-REPORT-ON-HOUSING-FOR-SINGLE-VETERANS-9-Feb-2018-EMBARGOED.pdf</u> (stoll.org.uk)

¹⁹ Ibid.

²⁰ Public health profiles - OHID (phe.org.uk)

among mothers living in the most deprived areas when compared to mothers living in the least deprived areas.²¹ This suggests that currently mothers living in poverty will be less likely to breastfeed and therefore those mothers participating in breastfeeding may be less likely to be impoverished. Therefore. breastfeeding mothers may be less likely to be affected by the recommendations within the strategy. However, measures to alleviate poverty as recommended within the Tackling Poverty in

poverty as recommended within the Tackling Poverty in Tameside Strategy may help towards reducing deprivation and addressing social inequality, indirectly positively affecting breast-feeding rates and indirectly affecting breastfeeding mothers. The recommendation to increase Healthy Start voucher uptake within the strategy may have an indirect positive impact upon people who breast feed as some of them may be eligible for healthy start vouchers.

Are there any other groups who you feel may be impacted by the project, proposal or service/contract change or which it may have relevance to?

(e.g. vulnerable residents, isolated residents, those who are homeless)

Group	Direct	Indirect	Little / No	Explanation
(please	Impact/Rele	Impact/Rele	Impact/Rele	
state)	vance	vance	vance	
Low or no income groups	X			Tameside is the 37 th most income deprived local authority in England, 17.5% of the population was income deprived in 2019. ²² As of July 2022, 4.8% of people in Tameside were in receipt of benefits, compared to just 3.7%

²¹ Breastfeeding practices in the United Kingdom: Is the neighbourhood context important? - PMC (nih.gov)

²² Exploring local income deprivation (ons.gov.uk)

of people in Great Britain. ²³ Of the 141 neighbourhoods in Tameside 54 were among the 20% most income-deprived in England, while only 8 were in the least 20% income-deprived in England.17 out of 19 wards in Tameside have income deprivation in excess of the national average (12.9%). ²⁴
Low income is not spread evenly across Tameside. In Tameside, 20.570 per cent of LSOAs are among the 10 per cent most deprived. ²⁵ Based on LSOA scores from the Index for Multiple Deprivation (2019) St Peter's is the most deprived ward in Tameside followed by Ashton St Michael's and Hyde Godley.
Therefore, the impacts of poverty are geographically concentrated within particular areas and thus the recommendations of the Tackling Poverty in Tameside Strategy will impact people living within these areas disproportionately. Given that the focus of the Strategy is to alleviate poverty, low income groups will be disproportionately positively affected.

"Low or no income groups" should be included as a key consideration when assessing the impact of your project, proposal, policy or service/contract change.

Wherever a direct or indirect impact or relevance has been identified you should consider undertaking a full EIA or be able to adequately explain your reasoning for not doing so. Where little / no impact or relevance is anticipated, this can be explored in more detail when undertaking a full EIA.

1d.		Yes	No
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²³ NOMIS, Official Census and Labour Market Statistics "Labour Market Profile –Tameside, Claimant Count by age", July 2022, https://www.nomisweb.co.uk/reports/lmp/la/1946157088/report.aspx?town=tameside

Office for Health Improvement and Disparities, 2019 https://www.localhealth.org.uk/#c=indicator&i=t1.income_dep&view=map12

²⁵ Indices of Deprivation 2019 - Tameside | LG Inform (local.gov.uk)

	Does the project, proposal or service / contract change require a full EIA?	x
1e.	What are your reasons for the decision made at 1d?	Poverty in Tameside is an overarching issue that has implications for a great number of residents and protected groups. Our initial screening exercise has shown that the Tackling Poverty in Tameside Strategy has a direct impact on the following protected characteristics: - Age - Disability - Ethnicity - Sex - Sexual Orientation - Gender Reassignment - Pregnancy and Maternity - Mental Health - Carers - Low and No Income In addition, Breastfeeding has been identified as an indirect impact. There is no impact as a result of the Strategy anticipated in the characteristics of Religion and Belief, Married and Civil Partnerships, and Military Veterans. Much of this impact can be quantified in residents with protected characteristics being more likely to access general services related to supporting those in poverty, or in residents facing specific challenges that require tailored responses or mitigations to address (For example: mental health support).
		This means that, given the number of protected characteristics directly or indirectly impacted by the Strategy, a full Equality Impact Assessment has been considered appropriate.

If a full EIA is required please progress to Part 2.

PART 2 – FULL EQUALITY IMPACT ASSESSMENT

2a. Summary

The impact of the cost-of-living crisis has necessitated a whole system review of how the Council and its partners consider and address the causes and impact of poverty within Tameside. In the short-term work is being undertaken in other areas to address the

immediate impacts, such as the establishment of Warm Welcome Hubs and the rollout of the Tameside Helping Hand campaign. However, it is recognized that a longer-term view is also required, which has led to the creation of the Tackling Poverty in Tameside Strategy.

A comprehensive Needs Assessment has been created to explore the relationship between poverty and protected characteristics, and provide a solid evidence base for the mitigations and recommendations in the final Strategy. This has been complemented by a program of service mapping and consultation (both directly through the Council's Communication functions and through contracting a third-party organization to run focus groups with residents on relevant issues) to identify pressure points, understand the views of residents and partners and fully integrate all relevant parties into the decision-making process.

Based on this data and feedback from consultation, recommendations have been formed around the following themes:

- Breaking the Cycle,
- Laying the Foundations,
- Putting People First,
- No One Left Behind Digitally,
- One Size Doesn't Fit All.
- Advocating for Change.

The recommendations cover a wide range of measures to tackle the causes and consequences of poverty, from introducing a local welfare provision scheme to supporting residents within employment.

The impacts of the Tackling Poverty in Tameside Strategy are fully elaborated upon in other parts of this Equality Impact Assessment, particularly in section 1c. However, a brief summary is as follows:

Age

Children and young people will be more affected by the Tackling Poverty in Tameside, with the risk increasing in families with younger children and/or large numbers (3+) of children due to caring responsibilities creating a barrier to employment and restricting access to relevant benefits.

Older people are generally less affected by poverty, although they are more likely to be face certain issues including fuel poverty due to them typically living in larger and more energy inefficient housing

Disability

Disabled people and their families face a number of challenges that make them far more vulnerable to poverty, including extra costs for specialised and general goods and services, greater reliance on benefits as a source of income, and the existence of an "employment gap" between non-disabled and disabled people.

Ethnicity

Poverty rates across ethnic groups vary significantly, however, some minority ethnic groups, including Pakistani and Bangladeshi, are more likely to be in poverty. As Tameside has a greater percentage of Bangladeshi and Pakistani residents than the

national average, there is an increased likelihood that those groups will be impacted disproportionately by poverty.

Sex

Women are more likely to experience poverty than men, as women earn less on average than their male counterparts and are more likely to be in part-time employment. Women also make up a higher proportionate of universal credit (UC) claimants.

In addition, lone parent families are the most likely of any family type to experience poverty. Since lone mother families make up 86% of lone parents families, they are therefore more likely to experience the disadvantages associated with this.

Religion and Belief

No direct or indirect impact anticipated.

Sexual Orientation

The body of research in the UK on the relationship between sexual orientation and poverty is lacking in many areas. However, the findings that are available indicate that that gay and bisexual men, as well as bisexual women, are more vulnerable to falling into poverty than their heterosexual peers. Lesbians are about as likely as heterosexual women to experience poverty, but are significantly more likely to participate in the labour market and higher education.

Gender Reassignment

Data on the relationship between gender reassignment and poverty is very limited. However, the research which does exist suggests that transgender individuals face significant challenges in terms of income, employment, discrimination and access to services.

Pregnancy and Maternity

Pregnancy and maternity are a potential risk area for women who may experience issues with employment during this time. Having children increases a women's likelihood of living in poverty, and individuals from deprived areas who have given birth die at an increased rate compared to those from less deprived areas.

Marriage & Civil Partnership

No direct or indirect impact anticipated.

Mental Health

Multiple studies have shown that there is a significant and mutually-reinforcing causal link between mental health and poverty. This means that not only is poverty a risk factor for poor mental health, but that poor mental health can also exacerbate poverty (for example: through impacting a person's ability to work).

Carers

Residents in poverty are likely to have more care needs and are also more likely to have at least some of those care needs informally met, or unmet entirely. This can lead to significant financial pressures on carers and families. Many carers also face significant difficulties in combining work with their caring responsibilities, an issue often exacerbated by inadequate support from existing systems.

Military Veterans

No direct or indirect impact anticipated.

Breast Feeding

According to research, as neighbourhood deprivation increases the odds for breastfeeding initiation decreases. This suggests that currently mothers living in poverty will be less likely to breastfeed and therefore those mothers participating in breastfeeding may be less likely to be impoverished. Therefore, it is believed that breastfeeding will be indirectly impacted by the Tackling Poverty in Tameside Strategy.

Low and No Income Groups

Given that the focus of the Tackling Poverty in Tameside Strategy is to alleviate poverty, low income groups will be disproportionately positively affected.

Mitigations to address these impacts have been laid out in detail in section 2d, and take the form of recommendations incorporated directly into the Tackling Poverty in Tameside Strategy. Broadly speaking, they fall into two distinct categories:

- Recommendations that address the causes and consequences of poverty in a general sense, but are more likely to be accessed by certain protected groups due to their increased vulnerability to poverty (For example: Since disabled people are typically more dependent on benefits as a major source of income, they are more likely to access income maximization services even if they are not directly targeted at disabled people specifically).
- Recommendations that specifically focus on a need faced disproportionately or exclusively by a protected group that makes them more vulnerable to poverty (For example: Translation services for residents from whom English is not a first language, or free period products for women)

Consideration has also been given where appropriate to situation where specific mitigations are not necessary, but there is nonetheless a heightened requirement for the needs of certain protected groups to be handled appropriate and respectfully (For example: transgender people are more likely to face discrimination when accessing services)

There are no anticipated direct negative impacts as a result of the recommendations proposed within the Tackling Poverty in Tameside Strategy, and all recommendations will be implemented in accordance with the socio-economic duty.

Evidence for this Equality Impact Assessment has been gathered from the Tackling Poverty in Tameside Strategy Needs Assessment, with further sources being considered as appropriate. A full list can be found in Section 2e.

The Tackling Poverty in Tameside Strategy will sit with the Health and Wellbeing Board (HWBB). This will involve the creation of a sub-group of representatives from all relevant council services and partners. Ongoing actions and accountability will be driven by the creation of an Action Plan laying out practical steps, including lead persons and timeframes, for the implementation of all recommendations. Further details can be found on Section 2f.

2b. Issues to Consider

In recent years the rise of poverty, exacerbated by an economic downturn, cost of living crisis and the Covid-19 pandemic has emerged as a major policy issue. Tameside Council, alongside partners in the public, private and voluntary sector, have recognize the severity of this and are working to support residents. However, beyond the immediate Action Plans to help residents in acute crisis (for example, the development of the Helping Hands scheme and the establishment of Warm Hubs) a more holistic and long-term approach to addressing the causes and symptoms of poverty is required. This looks beyond poverty as just a lack of income (although this remains a major issue) and focuses on how poverty interacts in a cross-cutting and multi-faceted way with other areas such as physical and mental health, education, employment, housing and the ability to participate fully in public life.

The Council and partners are also aware that, given the scale of the crisis, many people are likely to require support who have not previously needed to. Therefore the Tackling Poverty in Tameside Strategy also explores ways to use data to identify those at risk of falling into poverty, and breaking down barriers to ensure that everybody is able to access the services they need. Furthermore, consideration must be given to the rising scale of demand across public and voluntary, community and faith based services across the borough, necessitating a coordinated and partnership-based approach based on need and capacity.

A comprehensive needs assessment has been produced to explore these relationships, inform the development of the Tackling Poverty in Tameside Strategy, and provide a robust evidence base to support short and long-term actions. Some of the key findings from this relevant to Equalities include:

Benefits

- As of July 2022, 4.8% of people in Tameside were in receipt of benefits, compared to just 3.7% of people in Great Britain.
- Many benefits are under-claimed. For example; there is an estimated £5.2million unclaimed pension credit per vear in Tameside.

Debt

- Almost 1 in 4 of Tameside residents are over-indebted (i.e. owing money that needs to be paid back, but struggling to do so).
- Tameside has the seventh highest rate of individual insolvencies in the country.
- Data collected from the DJS surveys show that 36% of respondents expected their financial circumstances to worsen over the next five years.

Food Poverty

- The percentage of households defined as "experiencing struggle with food insecurity" in Tameside is the highest in Greater Manchester at 15.07%.
- The number of food parcels distributed by foodbanks in the Trussell Trust Network in Tameside increased from 9,917 in 2019-20 to 12,976 in 2020-21.

Fuel Poverty

- 14.1% of households in Tameside are estimated to be in fuel poverty. This is higher than the national average of 13.2%.
- Nearly 60% of homes in Tameside are considered to be energy inefficient.

Employment

- Tameside has the lowest proportion of jobs paying the Living Wage or above in Greater Manchester at 71.5%, compared to the Greater Manchester average of 79.2%.
- Tameside has the lowest rate of residents with higher level of qualifications in Greater Manchester. Just 26.6% of residents achieve an NVQ4 or above level qualification, 17% lower than the national average.

Council Tax

- When compared to other Greater Manchester local authorities, working age claimants receiving Council Tax Support within Tameside had to pay the highest percentage of their bill as a minimum contribution (25%).
- Four in five respondents (79%) to a UK-wide survey of National Debtline clients with council tax arrears felt that the actions of their council in collecting the debt had a negative impact on their wellbeing.

Mental Health

- The estimated rate of Common Mental Disorders (CMDs) in Tameside is 19.5% for residents aged 16 or over. This is above the England average of 16.9%.
- There is a significant gap in terms of employment support for people with CMDs, with only 33% of respondents to a poll conducted by the Money and Mental Health Policy Institute (MMHPI) saying that they had received such a service.

Disabilities

- Adults with disabilities face average extra costs of £583 a month, and families with children with disabilities face average extra costs of £581 a month due to issues associated with disability and ill health.
- Tameside's disability employment gap in 2019-20 was 31.9%, the 4th highest in Greater Manchester

Life Expectancy

- While Tameside is ranked 5th out of 10 in Greater Manchester authorities for male life expectancy and healthy life expectancy, it is ranked 9th out of 10 for female life expectancy and healthy life expectancy.
- There are significant disparities in life expectancy within Tameside. Males born in Denton West can expect to live 8.7 years longer than those born in St. Peters, while females born in Stalybridge South will live 7.9 years longer than those born in St. Peters.

Carers

- Data from the 2011 Census shows that 11% of residents (14,106) in Tameside have some kind of unpaid caring responsibilities, and 2.9% of residents (6,359) provided more than 50 hours of unpaid care a week.
- Research from the Joseph Rowntree Foundation has also shown that the number of families in receipt of Carer's Allowance and in poverty has doubled from 15% in 2005-6 to 30% in 2019-20.

Barriers to Accessing Services

• Digital exclusion in Tameside is high, with 14.9% of LSOAs with a Digital Exclusion Risk Index score of 5.0+ compared to 4.2% across Greater Manchester.

 The percentage of residents who found it "difficult or very difficult" to access information and services increased from 59% before the Covid-19 pandemic to 80% during it.

Service User Experience

 A number of respondents to our consultation stated their belief that people in poverty should be treated with more dignity, respect or compassion by council staff and services.

Child Poverty

- 1,250 households in Tameside are affected by the two-child limit on Universal Credit and tax credits.
- In the 2022 Summer term, 30% of Children in Tameside were eligible for Free School Meals (FSMs) which is 7.15% higher than England's national average

Social Housing

- Data from the latest Tameside Housing Strategy shows that 71.7% of tenants in the affordable rented sector receive an income of less than £300 gross each week and 41.3% receive less than £200 gross each week.
- In the 13 years between 2006/7 and 2018/19 5,985 homes, of which 1,628 were affordable, have been built in Tameside. This is significantly below the target of 8,720 for the same period.

Private Rent

- Between 2020 and 2021, the gap between Local Housing Allowance (LHA) and average rent in Tameside increased from £30 to £40 a month. This is the 3rd highest increase in Greater Manchester over this period.
- The median rent for properties in Tameside has increased by nearly 20% across all property sizes in the last 4 years.

Homelessness

- Following the lifting of lock down measures, including the eviction ban, there has been a 31% increase in the number of people requiring temporary accommodation in Tameside from June-December 2021.
- According to Crisis, due to the cost-of-living crisis, more than 66,000 more people
 nationally will be homeless by 2024, with the bulk of the increase being among people
 forced to "sofa surf".

According to the latest English Indices of Multiple Deprivation (IMD) data, 17.5% of the population in Tameside was income-deprived in 2019. Of the 316 local authorities in England, Tameside is ranked 37th most income deprived, falling within the 20% most income deprived local authorities nationally. Of the 141 neighbourhoods in Tameside, 54 were among the 20% most income-deprived in England.

The distribution of poverty within Tameside is also unusual when compared to other local authorities. As a rule of thumb, local authorities with a higher overall level of income deprivation tend to have distinct areas of affluence and poverty. However, Tameside is abnormal in that it has a high level of income deprivation, but poverty in the borough is less clustered and more evenly spread geographically. This must be borne in mind when developing recommendations and policies. For example; a focus on targeting the most deprived areas in Tameside may not be effective in delivering support to those that require it.

A number of benchmarking and consultation exercises have been undertaken to inform our recommendations and ensure that partners and residents have been fully integrated into the decision-making process. This includes:

- A comparison with Poverty Strategies launched by local authorities to ensure that gaps and common issues are identified. This included a number of Poverty Strategies from other GM councils: Trafford, Bury and Salford in recognition of the similarities across the city region. However, Poverty Strategies from Scotland (North Lanarkshire), Wales (Swansea) and other regions in England (Cambridge and Durham) were assessed and compared to provide a more complete picture. Information from Scotland and Wales was particularly relevant as uptake of the socioeconomic duty section of the Equality Act 2010, through the Fairer Scotland Duty and A More Equal Wales, means that consideration of socioeconomic status as a legal equality issue is more advanced in these areas.
- 43 individual services were mapped to capture the views of service users and front-line staff, and to understand processes, demand, and pinch-points across the local public and voluntary sector infrastructure. This was achieved through a combination of desk research and conversation with stakeholders, include council officers, representatives from local VCSFE groups and resident's panels. Particular attention was focused on the views of young people and those with disabilities. To engage with these groups, officers attended the Tameside Youth Council and People First Tameside.
- An 8-week consultation was launched in Summer 2022, asking respondents "What do
 you think about poverty in Tameside?" and "What can we do about poverty in
 Tameside?". Following the completion of the first draft of the Building Resilience
 Strategy in December 2022, this was followed up with a second survey asking for
 resident's and partner's views on the proposed recommendations as a whole.
- Stockport-based DJS Research Ltd, an employee-owned market research company, was commissioned to conduct a series of four focus groups with people with lived experience of poverty in Tameside.
- Poverty was the headline focus of the July 2022 Partnership Engagement Network Conference, exploring the themes emerging from early consultation and service mapping work.
- To amplify the voices of people living in poverty, Tameside Council have supported the Poverty Truth Commission, delivered by Greater Manchester Poverty Action. The commission brought together grassroots commissioners, people with lived experience of poverty and senior civic, political and business leaders, known as civic commissioners, on an equal footing to inform decision making within Tameside. Grassroots commissioners shared difficult stores and worked tirelessly to help identify and shape urgent priorities across the borough, focusing on: housing, access to services and mental health. Recommendations from these groups have enormously influenced the development of the Strategy as well as the wider approach to poverty across the borough.
- Data, research, literature and other qualitative and quantitative data was used to inform the Strategy and supporting material such as the Needs Assessment. Exact sources have been referenced where appropriate.
- The Inequalities Reference Group (IRG) aims to reduce inequality in Tameside & Glossop. The group meets on a quarterly basis, providing a forum for the sharing of ideas and thoughts on carrying out responsibilities under the Equality Act 2010 and the Public Sector Equality Duty. Membership is drawn from Tameside Council elected

members, local NHS Governing Body members, VCSFE representatives and the Tameside Independent Advisory Group. The group has produced a number of papers on topic ranging from *Barriers to Accessing Information* to *Voices of People with Learning Disabilities* which have been incorporated into this Strategy.

As a result of the financial situation across the public and voluntary, community, faith and social enterprise sectors, consideration has been given in the Tackling Poverty in Tameside Strategy to ensuring that recommendations do not result in increased financial or capacity commitments that may be unsustainable in the future. Instead, wherever possible, focus is given to building on existing programmes of work, unlocking capacity in the system, fostering a culture of "Poverty is Everybody's Business", and encouraging a preventative approach to save financial resources and hardship down the line.

2c. Impact/Relevance

Consultation:

- As highlighted in Section A, some of the recommendations within the Building Resilience: Tackling Poverty in Tameside Strategy will have a direct impact upon groups based on the following characteristics: age (Children, Older People), disability, ethnicity, sex, sexual orientation, gender reassignment, pregnancy and maternity, mental health, carer status, low income groups. As highlighted in Section A, some of the recommendation may have an indirect impact upon people who breastfeed.
- The disproportionate effects of the recommendations within the strategy are in line with the aims under the strategy. This is because, based on the findings of the needs assessment, consultation and additional evidence referenced within this Equality Impact Assessment, the groups who will be disproportionately affected are those who have an increased likelihood of experiencing poverty, which is why within the recommendations some targeted measures have been identified to support these groups. There are no anticipated direct negative impacts as a result of the recommendations proposed within the Tackling Poverty in Tameside Strategy.
- A prominent theme identified in the focus group run by DJS Research on behalf of Tameside Council was that the two primary barriers to accessing services, particularly for ethnic minority residents, were a lack of digital skills and language barriers. In addition, residents highlighted an overall lack of awareness of what the Council does, a strong perception that services are "faceless" and/or difficult to contact, and a sense that turning to the council for support is a "last resort" for people worse off than them. In response to this, some face-to-face consultations sessions were held in community locations in Tameside such as the Carer's Centres to target harder-to-reach groups, giving them the opportunity to contribute to the development of the Tackling Poverty in Tameside Strategy with council officers on hand to offer any necessary in-person guidance and support.
- The recommendations were developed following service mapping meetings with 43 services across Tameside, including representation from council officers and the VCSFE sector. Particular attention was focused on the views of young people and those with disabilities, to engage with these groups, officers attended the Tameside Youth Council and People First Tameside. The recommendations also benefited from an 8

week consultation which had over 300 responses and was circulated widely including on social media and through partner organizations, from focus groups carried out by DJS Research Ltd, engagement with the Poverty Truth Commission and with the Partnership Engagement Network.

The recommendations will be implemented in accordance with the socio-economic duty.

2d. Mitigations (Where you have identified an impact/relevance, what can be done to reduce or mitigate it?)

Age

A number of recommendations within the Tackling Poverty in Tameside Strategy are focused on addressing the impact of poverty on children, young people and the elderly. These include:

- Increase the uptake of Healthy Start vouchers, using public campaigns and assets (such as Community Champions) to ensure that all eligible families are aware of and can access the scheme.
- Explore opportunities to enable auto-enrolment for Free School Meals for eligible families. Improve systems and processes around monitoring of Free School Meals to encourage uptake among eligible families through awareness-raising and improving school catering offers.
- Ensure everyone who needs welfare rights advice can access support by securing capacity within the Welfare Rights Advice Team, associated services and other partners to carry out targeted work with groups known to be under-claiming benefits, such as older residents missing out on pension credit.

There are also specific priorities and sets of recommendations with an explicit focus on issues that have an age-related component. For example; Priority 5 is a series of recommendations on providing the best start in childhood and education for our young people, while Priority 8 focuses on digital exclusion with we know has a disproportionate impact on elderly residents.

Disability

Disabled residents have been identified as particularly vulnerable to poverty, and support from them is heavily emphasised within the Tackling Poverty in Tameside Strategy. This includes general recommendations that are likely to be accessed more frequently by disabled residents, including:

- Proactively identify and support households on legacy benefits ahead of the 2024 managed migration to Universal Credit to ensure they are receiving everything they are entitled to.
- Introduce and adequately resource a permanent Local Welfare Provision scheme which is responsive, easy to access and connects residents to support to resolve root causes of presenting issues providing timely help to those in crisis.

Mitigations also include recommendations specifically focused on disabled residents, particularly around access to services/support and improving employment prospects. These include:

- Promote awareness of skillsets that disabled and neurodiverse people can offer to drive employment and support employers to reduce the barriers those groups face in the workplace.
- Conduct audits on public buildings and websites to gauge accessibility for residents in poverty (particularly those with physical/learning disabilities or for whom English is not a first language) and take action to improve if necessary.
- Increase targeted employability support for groups which have been identified as under-served in regards to mental health provision and/or vulnerable to falling into poor-quality employment, particularly ethnic minorities, young people and residents over 50+.

Ethnicity

Given the disproportionate deprivation experienced by people from the Bangladeshi and Pakistani ethnic groups, there is an increased likelihood that people in Tameside who are Bangladeshi or Pakistani will be impacted disproportionately by poverty and thus by the poverty alleviation measures recommended within the Tackling Poverty in Tameside Strategy.

This will be addressed in part through our general recommendations around income maximisation, service access etc. However, in recognition of the unique challenges ethnic minority residents face a number of specific recommendations have been proposed, including:

- Commit to ensuring that all services can access relevant communication and interpretation services.
- Work with Action Together to develop and improve links with community organisations supporting ethnic minority residents and those for whom English is not a first language to improve access to and understanding of information related to poverty.
- Carry out work to understand whether local support to residents with refugee status, (including those seeking asylum, facing financial hardship, or subject to No Recourse to Public Funds restrictions) could be improved, and to understand how best to support EEA+ nationals with pre-settled status.

Sex

Women are more likely to experience poverty than men in Tameside as a result of the gender pay gap and making up a higher number of Universal Credit claimants. Women also face specific challenges around "period poverty", domestic abuse and, since lone mother families make up 86% of all single-parents families, access to childcare and similar amenities.

General recommendations within the Tackling Poverty in Tameside Strategy that are likely to be accessed more frequently by women include:

Improve uptake and awareness of free early education and childcare entitlements for two, three and four-year-olds. Influence employers in the borough to become both Living Wage and Living Hours employers, and provide support for them to do so through improved productivity and skills development through delivery of the Inclusive Growth Strategy. Recommendations that specifically focus on challenges faced disproportionately or exclusively by women include: Encourage employers to signpost eligible women about to go on maternity leave to the availability of Healthy Start vouchers and other benefits. Increase availability and promotion of domestic abuse services for victims and targeted perpetrator programmes to break the cycle of abuse. Provide free period products within libraries and explore opportunities to expand this to all publically accessible council buildings and partner organisations. It is not anticipated that the Tackling Poverty in Tameside Strategy or Religion or Belief its implementation will have a disproportionate impact on grounds of religion or belief, however, the recommendations will have to be delivered in a way which is sensitive to religious and non-religious beliefs and practices. While data on the interaction between sexual orientation and poverty Sexual Orientation is limited, it does appear to indicate that gay and bisexual men, as well as bisexual women, are somewhat more vulnerable to falling into poverty than their heterosexual peers. In light of this, although there are no recommendations within the Tackling Poverty in Tameside Strategy that focus specifically on sexual orientation, universal measures to alleviate poverty may be accessed disproportionately by these groups. This means that the needs and concerns faced by this group should be considered and handled respectfully and appropriately by services and partners in the exercise of this Strategy. Data on the relationship between gender reassignment and poverty is Gender very limited. However, the research which does exist suggests that Reassignment trans individuals face significant challenges in terms of income, discrimination, homelessness and access to services. In light of this, although there are no recommendations within the Tackling Poverty in Tameside Strategy that focus specifically on gender reassignment, it is very likely that transgender people will require additional support to access measures designed to alleviate poverty. This is likely to be both in terms of transgender people disproportionately accessing service to alleviate poverty, and ensuring that their concerns are dealt with in a sensitive and non-discriminatory manner. Pregnancy & The effects of pregnancy and maternity can pose risks for women in a Maternity number of areas, including sustaining employment, increasing their vulnerability to poverty and, within deprived areas, incidences of mortality after childbirth.

Therefore, individuals experiencing pregnancy and maternity are disproportionately affected by poverty. In light of this, many universal recommendations, particularly around income maximisation and employment support, may be accessed disproportionately by this group. This includes:

- Introduce and adequately resource a permanent Local Welfare
 Provision scheme which is responsive, easy to access and
 connects residents to support to resolve root causes of
 presenting issues providing timely help to those in crisis.
- Redesign the Family Help offer across Children's Services to bring a greater emphasis on direct help for improved parenting, including management of family plans, empowering independence and promoting structure and achievable goals. This will maximise access to work, childcare, education and training, household budgetary management, reduce parental conflict and neglect to create stronger, resilient homes built on love and care.

A number of recommendations within the Strategy also focus on access to benefits such as Healthy Start vouchers and childcare, which are likely to have a positive effect on women who are about to, or have recently, given birth. These include:

- Encourage employers to signpost eligible women about to go on maternity leave to the availability of Healthy Start vouchers and other benefits.
- Improve uptake and awareness of free early education and childcare entitlements for two, three and four-year-olds.

Marriage & Civil Partnership

No differential impact on residents due to their marriage or civil partnership status has been identified as a result of the objectives and recommendations in the Tackling Poverty in Tameside Strategy.

Mental Health

The estimated rate of Common Mental Disorders (CMDs) in Tameside is 19.5% is above the England average. Research has shown that there is a significant correlation between mental health and poverty, with each serving as a risk factor for the other. This means that not only can poverty lead to poor mental health, but that poor mental health can also exacerbate poverty (for example: through impacting a person's ability to work).

Due to the mutually reinforcing causal link between mental health and poverty, addressing this will form a core element of the Tackling Poverty in Tameside Strategy. It is therefore highly likely that implementation will have a disproportionate impact on this group of people. This could take the form of people with mental health issues disproportionately accessing general services, including:

 Explore the feasibility of expanding subsidised access to Active Tameside facilities, ensuring that residents experiencing poverty are not disadvantaged or excluded from activities that may be beneficial to their physical and mental health. Review council tax collection practices and Council Tax Support Policy to support those with vulnerabilities including people on low income. Explore adopting the Citizens Advice Council Tax Arrears Good Practice Protocol.

However, a number of recommendations within the Strategy are also focused on specifically providing support for residents with mental health issues. These include, but are not limited to:

- Increase targeted employability support for groups which have been identified as under-served in regards to mental health provision and/or vulnerable to falling into poor-quality employment, particularly ethnic minorities, young people and residents over 50+.
- Explore the possibility of developing Mental Health Awareness
 Training for staff and volunteers, working with residents
 experiencing poverty to help address the known impacts of
 poverty on mental health and signpost them to further support
 (income maximisation, welfare rights, food security etc)

Carers

Census data indicates that around 10% of residents in Tameside have some kind of unpaid caring responsibilities. Residents in poverty are likely to have more care needs and are also more likely to have at least some of those care needs informally met, or unmet entirely. This can lead to significant financial pressures on carers and families.

This means that carers as a group are more vulnerable to falling into poverty than those without caring responsibility. Therefore a number of recommendations in the Tackling Poverty in Tameside Strategy target the particular issues carers face, meaning that the implementation of the Strategy will disproportionately affect them.

This includes recommendations to help carers combine work with their caring responsibilities, either through increasing support from existing systems or working with employers directly,

- Promote and encourage support for working carers in Tameside from employers in the borough, linking in with the GM Carer's Charter/Employer's Forum and covering issues such as flexible working policies, guaranteed assessment schemes and emergency time off.
- Provide comprehensive and wrap-around support to help carers get into employment if they want to, ensuring that they are informed of and are supported to achieve their rights, opportunities and responsibilities as both carers and employees.

Carers are also disproportionately more likely to benefit from the income maximisation recommendations contained within the Strategy, particularly in regards to specialised benefits such as Carer's Allowance. Recommendations within the Strategy in regards to this include:

 Expand income maximisation and money advice services to carers (both working and non-working) to ensure that they are

receiving all appropriate guidance around carer's allowances and other benefits. The Strategy calls for the Council and partners to be more proactive in identifying and supporting carers at an early stage, and to put in place methods of facilitating this. This incorporates recommendations such as: Develop measures to ensure that carers, particularly from seldom heard groups, are identified as early as possible and are assessed, informed, empowered and supported as needed. Facilitate focus groups with carers to improve and build on our offer for working carers, recognising and respecting their views and opinions as expert partners. It is not anticipated that the Tackling Poverty in Tameside Strategy will Military Veterans have a disproportionate impact upon this group. However, data shows that a minority of serving personnel and their families have difficulties handling the transition of civilian life. Services should therefore be aware of these issues and handle them appropriately in their regular workload. **Breast Feeding** Breastfeeding rates in Tameside are significantly lower than the England average. Research suggests that mothers participating in breastfeeding are more likely (although not always) to not be impoverished. Therefore, breastfeeding mothers may be less affected by the recommendations within the Tackling Poverty in Tameside Strategy. However, measures to alleviate poverty as recommended within the Strategy may help towards reducing deprivation and addressing social inequality, indirectly positively affecting breast-feeding rates and indirectly affecting breastfeeding mothers. In particular, the recommendation to increase Healthy Start voucher uptake within the Strategy may have an indirect positive impact upon people who breastfeed as some of them may be eligible for the scheme. Tameside is the 37th most income deprived local authority in England. Low and No Income Groups with 17.5% of the population being considered income deprived in 2019. However, low and no income groups are not spread evenly across the borough. Based on LSOA scores from the Index for Multiple Deprivation (2019) St Peter's is the most deprived ward in Tameside followed by Ashton St Michael's and Hyde Godley. As the Tackling Poverty in Tameside Strategy is primarily focused on identifying and addressing the causes and consequences of poverty and other forms of socioeconomic disadvantage in the borough, every recommendation within the Strategy is in some form a mitigation exercise for residents within Low and No Income Groups. Therefore, the recommendations of the Strategy is likely to impact people living within these areas disproportionately.

2e. Evidence Sources

Needs Assessment:

A comprehensive Needs Assessment has been produced to, inform the development of the Tackling Poverty in Tameside Strategy, and provide a robust evidence base to support short and long-term actions. The complete document, which also contains the sources used as an appendix, can be found here:

https://www.tameside.gov.uk/TamesideMBC/media/Environmental-Health/Poverty-Needs-Assessment-Final.pdf

Equality Impact Assessment Sources:

A number of additional sources have also been used to inform this Equality Impact Assessment:

<u>Children in poverty: Measurement and targets - Work and Pensions Committee</u> (parliament.uk)

Public health profiles - OHID (phe.org.uk)

uk poverty 2023 - the essential guide to understanding poverty in the uk 0 0.pdf (irf.org.uk)

Why we can't understand child poverty in the UK without thinking about family size | British Politics and Policy at LSE

uk poverty 2023 - the essential guide to understanding poverty in the uk 0 0.pdf (jrf.org.uk)

uk poverty 2023 - the essential guide to understanding poverty in the uk 0 0.pdf (jrf.org.uk)

<u>Population and household estimates, England and Wales - Office for National Statistics</u> (ons.gov.uk)

#IWD2018: time to loosen the grip of poverty on women in the UK | JRF

NOMIS, Office for National Statistics, 'Annual survey of hours and earnings - resident analysis', July 2022, https://www.nomisweb.co.uk/

New data shows food insecurity major challenge to levelling up agenda | Food Foundation

Stat-Xplore - Table View (dwp.gov.uk)

uk poverty 2023 - the essential guide to understanding poverty in the uk 0 0.pdf (jrf.org.uk)

Families and households - Office for National Statistics (ons.gov.uk)

#IWD2018: time to loosen the grip of poverty on women in the UK | JRF

MBRRACE-UK Maternal MAIN Report 2022 v10.pdf (ox.ac.uk)

UK armed forces veterans, England and Wales - Office for National Statistics (ons.gov.uk)

lifting-lid-transition-families-experience-support-they-need.pdf (fim-trust.org)

FINAL-REPORT-ON-HOUSING-FOR-SINGLE-VETERANS-9-Feb-2018-EMBARGOED.pdf (stoll.org.uk)

Ibid.

Public health profiles - OHID (phe.org.uk)

<u>Breastfeeding practices in the United Kingdom: Is the neighbourhood context important? - PMC (nih.gov)</u>

Exploring local income deprivation (ons.gov.uk)

NOMIS, Official Census and Labour Market Statistics "Labour Market Profile –Tameside, Claimant Count by age", July 2022,

https://www.nomisweb.co.uk/reports/lmp/la/1946157088/report.aspx?town=tameside

Office for Health Improvement and Disparities, 2019 https://www.localhealth.org.uk/#c=indicator&i=t1.income dep&view=map12

Indices of Deprivation 2019 - Tameside | LG Inform (local.gov.uk)

https://www.poverty.ac.uk/editorial/poverty-and-sexual-orientation

https://www.stonewall.org.uk/system/files/lgbt in britain - trans report final.pdf

https://www.equalityhumanrights.com/sites/default/files/research_report_27_trans_research_review.pdf

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment data/file/85498/transgender-action-plan.pdf

https://www.gov.scot/binaries/content/documents/govscot/publications/research-and-analysis/2013/04/scottish-government-equality-outcomes-lesbian-gay-bisexual-transgender-lgbt-evidence-review/documents/social-research-report-scottish-government-equality-outcomes-lesbian-gay-bisexual-transgender-lgbt-evidence-review/social-research-report-scottish-government-equality-outcomes-lesbian-gay-bisexual-transgender-lgbt-evidence-review/govscot%3Adocument/00420922.pdf

2f. Monitoring progress						
Issue / Action	Lead officer	Timescale				
Emphasising a partnership approach, feedback on the Needs Assessment and final draft of the Tackling Poverty in Tameside Strategy has been sought from partner organisations and forums such as the Health and Wellbeing Board, Action Together, Tameside Poverty Action Group and People First Tameside. Where necessary, the content and recommendations have been revised to address concerns and gaps identified in these settings. Moving forward, continuous engagement will	James Mallion, Assistant Director of Population Health Emma Varnam, Assistant Director - Operations and Neighbourhoods - Place	Dependent on recommendations. From sign off of Strategy in March 2023. Short-term: 6-12 months – 49 recommendations				
remain central to our partnership approach by listening and learning from residents and organisations with first-hand knowledge and experience of the reality of poverty in Tameside,	- 1 lace	Medium- term: 1-3 years – 29 recommendations				

and the strategy will be kept under regular review as new evidence and learning emerges so we remain informed of ongoing and future issues.

Following the adoption of the Tackling Poverty in Tameside Strategy by the council and partners, a comprehensive Action Plan will be produced outlining our approaching to meeting the recommendations contained therein. This will include specific and measurable actions, named lead individuals and/or organisations, and timescales. Recommendations and associated actions will be grouped under the same themes used in the Tackling Poverty in Tameside Strategy (as described in section 2d) for ease of reference.

As a statutory function where political, clinical, professional community leaders come together to improve health and tackle inequalities Tameside's Health and Wellbeing Board (HWBB) is well-placed to oversee the implementation of the Strategy. This will involve the creation of a regularly scheduled sub-group with representatives from all relevant Council services and partner organisations where an Action Plan can sit and will be accountable to the Board for delivery.

Implementing an Action Plan of this scope will require a whole system approach and buy-in to ensure successful delivery. This should include inviting into governance roles members of the Poverty Action Group, those with lived experience of poverty and key partners, and incorporating their feedback through a two-way mechanism. Leaders must be aware and well informed of what causes poverty so that decision-makers can implement remedial actions swiftly and effectively. All partners should pay due regard to the Tackling Poverty in Tameside Strategy when planning and implementing any relevant work going forward.

The Strategy also complements, and should be viewed in conjunction with, other corporate strategy documents such as the Inclusive Growth Strategy, the Housing Strategy, the "Grow with Me" Child and Parent Relationship Strategy, the Early Help Strategy and the Adult Social Care Strategy.

Long-term: 3+ years – 9 recommendations

Signature of Contract / Commissioning
Manager

Date

Signature of Assistant Director / Director	Date