**Ensuring equality, diversity, inclusion and wellbeing are integral to the University of Stirling’s Covid 19 recovery and future delivery plans**

There is a clear opportunity for the University now, as it enters probably the most transformational period of redesign and redirection since its inception, to eradicate persistent, systemic inequalities, to promote equity, diversity and inclusion (EDI), to strengthen community and good relations between staff and students with different backgrounds & characteristics, and to maximise productivity and impact.

Key to this is the fundamental consideration of equity, diversity, inclusion and accessibility in any aspect of the University’s strategic planning, policy development, decision making and operational delivery that is likely to have an impact on people. This includes all key areas including learning and teaching, assessment, research and innovation, staff support, workload planning, student support, campus development and access to services and facilities.

**Purpose**

This paper provides a brief refresh on the importance of considering EDI implications during the delivery of our functions (defined as policies, practices, decisions and services[[1]](#footnote-1)) as a University, and summarises the purpose and process of carrying out an equality impact assessment. It provides a summary of the statutory framework and links to the University’s equality impact assessment toolkit. Finally, it provides some [illustrative examples](#examples) of issues and polices currently under consideration as part of post-Covid 19 planning and summarises some of the EDI issues that should be considered.

**The EDI impacts of Covid 19 and institutional responses**

Covid 19 is known to have disproportionately affected people from different equality groups with different circumstances. For example:

* Black people are more than four times more likely to die from Covid-19 than white people (Office for National Statistics, May 2020)
* There is evidence that women academics are carrying out less research and are submitting fewer research pieces for publication as a result of increased caring responsibilities during the lockdown period, whilst the same effect is not generally present amongst men ([Guardian, May 2020](https://www.theguardian.com/education/2020/may/12/womens-research-plummets-during-lockdown-but-articles-from-men-increase))
* International students who were unable to return home and who could not work are unable to access Scottish Government CV19 university hardship funds, meaning their risk of financial hardship was greater than that faced by Home students
* Charities that support LGBTQ+ people have reported an increase in people accessing support for their mental health and wellbeing, due to being forced to live in unsupportive or oppressive family environments, and for domestic abuse in the family home
* People with some long-term limiting health conditions and disabilities disabled are particularly vulnerable to COVID-19 and have been especially impacted by the lockdown and having to shield
* The eating disorders charity BEAT reported a 50% increase in calls to its helpline and a 78% rise in contact via social media between February and May 2020.
* Care experienced and estranged students are more at risk of negative effects of the crisis in that they are less likely to have family support and/or a family home to return to ([BBC, April 2020.)](https://www.bbc.co.uk/news/av/uk-52234122/care-leavers-say-they-re-struggling-during-lockdown)
* Some staff and students, particularly those experiencing socio-economic disadvantage, are affected by and are being disadvantaged by digital poverty e.g. lack of suitable IT equipment or access to broadband (Advance HE, 2020.)
* Single parents, often women, are finding it particularly difficult to balance work/study with childcare responsibilities.

In addition, there is evidence that the CV19 outbreak and associated lockdown and economic impacts are likely to exacerbate already high levels of anxiety and mental ill health amongst the population ([World Health Organisation, 2020)](http://www.euro.who.int/en/health-topics/health-emergencies/coronavirus-covid-19/technical-guidance/mental-health-and-covid-19)

Is it highly likely that response and recovery plans will have a similarly disproportionate effect on members of our community. Unrecognised and unmitigated, these disproportionate impacts could manifest as disadvantage, discrimination or structural inequalities, meaning that people who share a protected characteristic will experience worse outcomes. The impact for the University would be a decline in student and staff experience for certain groups, with associated damaging impacts on staff & student recruitment, retention and institutional reputation.

One of the stated values of the University of Stirling is **inclusion.** The University cannot be inclusive if staff do not meaningfully consider the impact of our decisions and actions on all of our people.

**What is equality impact assessment?**

Equality impact assessment (EIA) is a thought and engagement process which is intended to help create a culture of inclusion, fairness, transparency and respect for diversity. It involves taking steps to ensure an institutional culture and environment in which our people feel valued, respected, listened to, understood and supported. It is about creating a workplace that people want to be part of, and a University that is widely recognised for valuing the diversity and wellbeing of its people.

Equality impact assessment should not be simply about compliance, form-filling, or box ticking, although a [template](#toolkit) is available to help staff structure their thoughts and document the process. Rather, it should be about meaningfully assessing the impact of a decision or activity on our community and reflecting on how a decision could have a positive, or negative, impact on people because they share a particular characteristic.

**What needs to be done?**

In the same way that they would consider risk, financial implications and reputational impact of any decision or action, put simply, **staff must routinely consider the impact of decisions and activities on our people.**

To do this effectively, it is imperative to recognise that people are not a homogenous group. Decisions and actions will impact on different staff and students in a slightly different way. Each decision or action should be assessed for its impact – negative or positive - on people with a range of characteristics. To put it simply, these questions should be asked each time:

1. Will this policy/practice/activity/proposal affect people?
2. If yes, will this be likely to result in a differential impact for people sharing a particular characteristic, and, if so, could this result in disadvantage, discrimination, harassment, victimisation or any other conduct prohibited by the Equality Act (2010)? ([PCs listed here](#PCs))
3. If yes, is that differential impact lawful, justifiable and proportionate? (See [full guidance for definitions provided by the Equality Act 2010](https://stir.app.box.com/file/676999536175))
4. If you have identified a risk of disadvantage, discrimination, harassment or victimisation against people who share a particular characteristic, what action should be taken to mitigate the risk?
5. Does this policy/practice/activity/proposal help the University to fulfil its statutory duties to promote equity and good relations between people who share a characteristic and those who do not?
6. If the answer to (v) is no, what steps can be taken/adjustments made to ensure that it does?

Asking the questions above, genuinely seeking answers through reading and talking to people, and considering answers is EIA in practice.

**Engagement and consultation**

To understand diversity of experience and differential impacts, it is imperative to understand the views and experiences of people with different characteristics, and to draw on data and research. It can be very difficult for an individual to understand the experiences or perspectives of people with whom they do not share characteristics without asking them or considering research that has already been carried out. This is why diversity is so important in decision making.

**Example:** If a decision about introducing or removing core working hours is made entirely by people without caring responsibilities, how can the decision makers effectively understand the potential impact of that decision on colleagues with those responsibilities without either reading relevant research or consulting with staff who do have caring responsibilities?

**Example:** If a decision is taken to develop a new access route between buildings, how can decision makers understand what it is like to navigate the route with a visual impairment if people with visual impairments have not been involved in design?

**Accessing the necessary data to inform decision making**

There are several ways to access data and evidence:

* Draw on existing national recent research, such as the [EHRC’s report on racial harassment in universities](https://www.equalityhumanrights.com/en/publication-download/tackling-racial-harassment-universities-challenged), [HEPI’s report on staff mental health](https://www.hepi.ac.uk/2019/05/23/new-report-shows-big-increase-in-demand-for-mental-health-support-among-higher-education-staff/), or [Revolt Sexual Assault’s 2018 report](https://revoltsexualassault.com/wp-content/uploads/2018/03/Report-Sexual-Violence-at-University-Revolt-Sexual-Assault-The-Student-Room-March-2018.pdf) on the prevalence of sexual violence experienced by university students. Seek advice from the Policy and Planning team if you are unsure of what is available.
* Consider the findings of local surveys such as NSS or the staff survey
* Engage and consult with students and staff from different backgrounds; rather than taking a tokenistic approach, seek to engage proactively with student and staff networks.

Data gaps undoubtedly exist. It is important now to ensure that these gaps are ameliorated over time and that the bank of evidence available to us to ensure that quality EIAs can be carried out continues to grow. Faculties and Professional Services should consider the following:

* Ensure that, when you carry out research or a survey, it is structured in a way to enable the findings to be analysed by equality characteristics
* Gather data on the uptake of opportunities by equality group and analyse findings. For example, equality data should be collected on applications, long listing, short listing, success rates, intake and attainment. This should apply to – for example - student recruitment, staff recruitment, applications for promotions, research leave, scholarships, CPD and overseas opportunities.
* Engage with students and staff to identify EDI issues in the fabric of institutional culture and environment and share findings. Consider regular culture “pulse” surveys.
* Consider the creation of diversity reference groups who can be consulted on the impact of major projects, such as large scale campus capital projects or a significant transformation of the curriculum.

**Who should carry out an EIA?**

The EIA should be carried out by the area of the University that is responsible for the decision, activity or policy. Ideally, at least two staff should be involved and preferably they should have undergone EIA training. Further guidance on carrying out the process and accessing training can be provided by the Policy and Planning team [equality@stir.ac.uk](mailto:equality@stir.ac.uk)

It is recommended that Faculties and Professional Services identify staff who can be trained in carrying out EIAs. These staff would support their colleagues and form a cross-University community of practice, as well as ensuring that EDI is considered as a core element of business and decision making e.g. ensuring EDI matters are considered as standard on Executive agendas.

**Do I need to fill out a form?**

The University has developed an [equality impact assessment template](https://stir.app.box.com/file/682067081539) which can help staff to structure their thoughts and note their findings. This guidance document is intended to supplement that template and provide further context in the time of CV19.

The move towards increased remote working provides scope to consider more innovative and collaborative ways to carry out EIAs. For example, the EIA could potentially take the form of a recorded team discussion with key issues and findings recorded either in writing or summarised at the end of the discussion.

Note the statutory requirement to publish the findings of EIAs, below.

**The legal framework**

Whilst compliance should not be the primary consideration, it is important to remember that the University is subject to statutory duties to prevent discrimination, promote equality and good relations, and to consider the EDI impacts of decisions before they are taken. It is also a [statutory requirement to publish the findings of equality impact assessments.](https://www.equalityhumanrights.com/sites/default/files/assessing-impact-public-sectory-equality-duty-scotland.pdf)

**The Equality Act (2010)** recognises that society and organisations often inadvertently create barriers for individuals or groups of people with protected characteristics. Universities, amongst other public bodies are subject to the [public sector equality duties,](https://www.equalityhumanrights.com/sites/default/files/essential-guide-public-sector-equality-duty-scotland.pdf) which require them to, in the exercise of their functions, pay due regard to the need to:

* Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010;
* Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it; and
* Foster good relations between persons who share a relevant protected characteristic and persons who do not share it, in particular, the need to tackle prejudice and promote understanding.

The Equality Act requires universities to consider **nine protected characteristics** when carrying out its public sector duties. These are: Age, Disability, Gender Reassignment, Marriage & Civil Partnership Status, Pregnancy & Maternity, Sex, Sexual Orientation, Race and Religion and Belief.

The University, cognisant of the diversity of our community, has added the following specific characteristics to its equality impact assessment template: caring responsibilities, experience of the care system (Care Experienced); gender identity; mental health[[2]](#footnote-2) and socio-economic background.

**Examples of issues to consider during planning for University life post Covid 19**

**[Appendix 1](#app1)** provides some examples of policies and decisions that are currently being considered, and provide some pointers on some of the EDI issues that should be considered. These examples are intended to be illustrative not exhaustive.

**In summary**

Equality impact assessment is the responsibility of every member of staff working in the University. It is not the responsibility of one person or team. Whilst further guidance can be provided or comments provided on a draft EIA, it is the responsibility of policy and decision makers and business leads to conduct the EIA.

Discussions will be required on who will be responsible for actions to mitigate disadvantage or promote equity and good relations. This will often be a partnership approach, involving colleagues from Faculty and Professional Services.

**Further guidance and reading**

Further guidance can be provided by contacting [equality@stir.ac.uk](mailto:equality@stir.ac.uk)

The University’s EIA template is available [here](https://stir.app.box.com/file/682067081539)

EHRC [guidance on the statutory duty](https://www.equalityhumanrights.com/sites/default/files/assessing-impact-public-sectory-equality-duty-scotland.pdf) to carry out EIAs

EHRC [guidance on carrying out equality impact assessment in light of Covid 19](https://stir.app.box.com/file/685831367681)

Advance HE further [reading and resources on equality impact assessment](https://www.advance-he.ac.uk/strategic-equality-impact-assessment-eia)

UUK [guidance](https://www.universitiesuk.ac.uk/policy-and-analysis/reports/Pages/principles-considerations-emerging-lockdown-uk-universities-june-2020.aspx?utm_content=buffer7e5e6&utm_medium=social&utm_source=twitter.com&utm_campaign=UUK) on principles for universities to follow when reactivating campus provision, including EDI considerations

A [collection of articles](https://wakelet.com/wake/f4bc3fbd-b6d2-4d4a-8819-861ba1056304) exploring the EDI implications of CV19 in more detail

**Dean of EDI**

**June 2020**

**Appendix 1: Examples of issues to consider in relation to specific decisions/policies/actions**

In the following examples, some of the considerations and associated mitigation will be the responsibility of “front line” staff e.g. academic staff involved in design and delivery of the curriculum, and some will be the responsibility of Professional Services staff involved in, for example, provision of technological support or design of campus access guidelines. Due to the level of detail and the need for collaborative working, this guidance does not presume to indicate which staff/team should be responsible for each individual issue/action. Discussion should take place with colleagues and, if in doubt, contact [equality@stir.ac.uk](mailto:equality@stir.ac.uk) for further guidance.

**Transition to Technology Enabled Learning, Teaching & Assessment**

* People with children who are not able to go to school full time or who have other caring responsibilities are likely to have difficulties being able to access scheduled or synchronous classes; as far as possible, materials should be freely accessible and/or choice should be provided, with due consideration given to an appropriate and inclusive balance between synchronous and asynchronous delivery methods. Note that women are likely to be disproportionately affected by caring responsibilities, both for children and for older relatives, or to be single parents without recourse to additional financial or childcare supports.
* The same applies to people living in time zones other than GMT. Consideration of time difference should be built into any timetabling of synchronous online provision.
* Policies on attendance and engagement will need to be reviewed to ensure they do not disadvantage students who are unable to attend campus physically.
* Many students will not have suitable internet access, access to necessary IT equipment, or access to an appropriate place to study. Thought should be given to the provision of appropriate equipment or means to access the same, as well as safe and sensible use of the campus facilities to enable students to engage in remote learning as well as face to face.
* Accessibility needs of disabled students should be paramount when designing materials and delivering online e.g. are the platforms you use accessible; can your materials be captioned; have good practice guidelines on design of accessible materials been followed; have you considered the impact of cognitive impairment when designing delivery?
* Utilise a consistent layout and structure of module materials across Faculties to improve access for students using screen readers. Make use of newly developed Canvas guidance.
* Where possible, increase provision of and access to digital rather than physical resources
* Carry out real life trials of virtual learning software with students who are hearing impaired of visually impaired
* Take opportunities to link into other initiatives underway to improve EDI in the curriculum, such as steps to increase diversity in the content and delivery of modules to reflect different perspectives or more accurately reflect history (e.g. decolonising the curriculum)
* Move toward the long term adoption of more flexible and inclusive forms of assessment introduced during the lockdown period, which have significantly reduced the need for ARUAA exam adjustments and which have mitigated the impact of students being physically unable to attend campus.
* Be aware of accessibility issues if delivering classes that involve a mixture of students who are physically present and those who are attending remotely. For example, ensure that both groups are able to see your face when you speak and that lighting is effective. Ensure that sound quality is good.

**Travelling to the University campus**

* Students and staff with disabilities – including impaired mobility, visual impairments, hearing impairments, some mental health conditions and some long term health conditions – may have increased difficulties associated with use of public transport, or in terms of cycling or walking to the campus
* Students and staff of colour, particularly black people, are known to be at higher risk if they get Covid-19, so are likely to be less confident about taking public transport to get to campus
* People - women in particular - will be less likely to embrace cycling as a way to access the campus if there are inadequate changing facilities on campus or if rules around flexible working patterns mean that they are unable to have adequate time to change.
* Accessible parking spaces may not be available close to staff offices. Consider what adjustments can be made to parking policies to enable staff with accessibility requirements to park close to their usual access points. Otherwise, consider remote and flexible working policies.

**Campus access and space utilisation**

* Changes to pedestrian routes and flows around campus will have a significant impact on people with disabilities, particularly wheelchair users, people with limited mobility, blind & visually impaired people, Autistic people, and people with some mental health conditions. There will also be implications for people with short term limiting injuries and people with small children who may use buggies/prams. Service users should be involved in redesign of campus routes.
* Staff should be mindful of accessibility implications when delivering activities in larger spaces, e.g. if there remains a requirement for 2m distancing. For example, be aware of potential increased communication difficulties for visually or hearing impaired students.
* Mandatory temperature checks may have implications for people who might display a high temperature for reasons other than CV19 e.g. some health conditions, menopause. Consider how to manage the temperature checking process and subsequent conversations sensitively.
* Consider religious and cultural implications associated with temperature checking e.g. for Muslim women.

**Allocation of accommodation**

* EIA should be integral to policies and criteria to allocate accommodation; for example, allocating accommodation according to course may increase the risk of inadvertent cultural & racial segregation on campus.
* PEEPs may have to be reviewed if disabled students are allocated accommodation in different parts of the campus than before.

**Introduction of widespread use of protective masks**

* Some Deaf or hard of hearing people rely heavily on lip reading and are likely to be disadvantaged by any policy introducing the blanket use of masks. Thought should be given to mitigation, including the use of clear masks, adequate provision of hearing enhancement equipment, and additional support for students who are affected. Any policy on the blanket introduction of masks should first be subject to risk assessment to determine the proportionality and reasonableness of introduction.

**Academic promotions**

* Research is beginning to indicate that women researchers will be disproportionately affected by the CV19 outbreak. It is likely that women’s research outputs and activity will reduce and that men will be less affected due to disproportionate effects of caring responsibilities. Promotions criteria should be assessed and adjustments made to address potential inequalities arising from this period which may have a long term impact. For example, applicants should be able to set out the impact that the CV19 pandemic had on their research outputs.
* Line managers should consider ways to support staff to address any disadvantage that they experienced as a result of CV19, for example access to training/CPD, adjustments to workload allocation to enable inequalities to be addressed. This is similar to actions taken following, for example, a period of maternity leave.
* Data should capture the equality characteristics of those who are going forward for promotions, who are nominated and who are successful so that the long term impact of CV19 can be monitored.

**Return to work plans**

* EIA should be a core element of prioritisation for return to work. Some staff are currently unable to work effectively from home because of insufficient space, access to technology, or personal circumstances such as caring responsibilities, domestic abuse or physical or mental health issues. These factors should be considered as part of prioritisation.
* Some staff are currently more unsafe at home due to domestic abuse or coercive control.
* Conversely, providing a greater balance of home and office working in the future is likely to have great benefits for work-life balance for some staff. This will have potentially excellent benefits for the mental and physical health of staff and students, as well as having significant benefits in relation to carbon reduction targets, space utilisation and availability of car parking spaces. Thought should be given to how to protect and promote remote working following the gradual re-opening of the campus.

**Provision of mental health support**

* Covid 19 is known to have negatively affected the mental health of people, and certain groups e.g. LGBTQ+ people, single people, and people with disabilities are known to be at greater risk of mental ill health. It is widely anticipated that there will be a spike in need for mental health support as a result of the effects of isolation and the economic impact of the pandemic.
* Thought should be given to ensuring that mental health services are resourced effectively and are able to respond to the distinct needs of staff and students e.g. people of colour, LGBTQ+ people, disabled people.

**Development of an institutional bereavement policy and associated support**

* Bereavement has the potential to exacerbate existing mental health conditions and thus additional support for staff or students, including reasonable adjustments in the work place and for study, may be required.
* Students of colour are more likely to be affected by a bereavement as a result of Covid-19, so will potentially need additional support.

**Diversity of governing bodies, leadership teams and honorary positions**

* Recent discussions about racism and race equality are a reminder to universities of the need to diversify our leadership teams and governing bodies.
* Appointment must be based on merit, but inequalities in the process should be addressed.
* Universities should take more assertive positive action to address this issue, for example clear public statements or targeted searches during the recruitment process to address specific areas or under-representation, and consideration of – for example - no all-male or all-white shortlists where there is evidence of under-representation. Leadership development programmes should be utilised to support people who share protected characteristics that are under-represented in leadership positions.
* Faculties and decision making panels should take more assertive action to reduce the persistent inequalities in appointments of Honorary Professors and honorary senior academics, for example consideration of no all-male or all-white shortlists.

**Delivery of support services**

* Consider the advantages of retaining a blended model of support e.g. students with caring responsibilities or who are managing a disability or mental health condition will benefit from the option to engage remotely. Conversely, some students e.g. those in crisis or those with accessibility needs will be disadvantaged by an entirely online service.
* Consider provision for students who use BSL as a first language. For example, what provision is in place to access remote BSL interpretation services as an alternative to having trained staff on campus or having to work with interpreters?
* What additional support or provision might be needed to support students or staff who are shielding and who are particularly at risk of isolation or disadvantage?

**Appendix 2: Equality Act 2010 definition of discrimination, harassment and victimisation**

In summary, the EA 2010 identifies four forms of discrimination:

* **Direct discrimination**. This occurs when a person treats another less favourably than they treat or would treat others because of a protected characteristic. Direct discrimination cannot be justified except in the case of age discrimination.
* **Indirect discrimination**. This occurs when an apparently neutral policy is applied or decision is taken that puts people sharing a protected characteristic at a particular disadvantage, and that puts an individual at that disadvantage. Indirect discrimination can be justified if it is ‘a proportionate means of achieving a legitimate aim’.
* **Discrimination arising from disability**. This occurs where a disabled person is treated unfavourably, where this treatment is because of something arising in consequence of the disabled person’s disability, and where it cannot be shown that this treatment is a proportionate means of achieving a legitimate aim. There is no discrimination if it can be shown that the employer/service provider did not know and could not be expected to know that the disabled person had the disability.
* **Failure to make reasonable adjustments**. The duty to make reasonable adjustments can comprise three requirements:
  1. Where a provision, criterion or practice puts disabled people at a substantial disadvantage compared to those who are not disabled, to take reasonable steps to avoid the disadvantage.
  2. Where a physical feature puts disabled people at a substantial disadvantage, compared with people who are not disabled, to avoid that disadvantage.
  3. Where not providing an auxiliary aid puts disabled people at a substantial disadvantage compared with people who are not disabled, to provide that auxiliary aid.

[**EA 2010 definition of harassment**](https://www.equalityhumanrights.com/en/advice-and-guidance/what-harassment)

In summary, there are three types of harassment which are unlawful under the Equality Act:

* Harassment related to a relevant protected characteristic.
* Sexual harassment.
* Less favourable treatment of a student because they submit to or reject sexual harassment or harassment related to sex.

[**EA 2010 definition of victimisation**](https://www.equalityhumanrights.com/en/advice-and-guidance/what-harassment-and-victimisation#victimisation)

Victimisation is defined under the EA 2010 as treating someone badly because they have carried out a ‘protected act’, or because an employer, service provider or other organisation believes that you have carried out or are going to carry out a protected act. The reason for the treatment does not need to be linked to a protected characteristic.

A protected act is:

* making a claim or complaint of discrimination (under the Equality Act)
* helping someone else to make a claim by giving evidence or information
* making an allegation that you or someone else has breached the Equality Act
* doing anything else in connection with the Equality Ac

1. Definition set out in the Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012. [Guidance published by the Equality & Human Rights Commission](https://www.equalityhumanrights.com/sites/default/files/assessing-impact-public-sectory-equality-duty-scotland.pdf) “uses the term ‘policy’ as shorthand for any activity of your organisation. Therefore ‘policy’ should be understood broadly to embrace the full range of your policies, provisions, criteria, functions, practices and activities including the delivery of services – essentially everything you do.” [↑](#footnote-ref-1)
2. Note discrimination on the grounds of mental health is protected as a disability under the Equality Act 2010, but the inclusion of mental health in the guidance provides a prompt to consider the impact of a decision or activity on mental health and wellbeing generally, rather than focusing simply on diagnosed mental ill health. [↑](#footnote-ref-2)