

Equality and Human Rights Screening Template

The Safeguarding Board for Northern Ireland (SBNI) is required to address the 4 questions below in relation to all its policies. This template sets out a proforma to document consideration of each question.

What is the likely impact on equality of opportunity for those affected by this policy, for each of the Section 75 equality categories? (minor/major/none)

Are there opportunities to better promote equality of opportunity for people within the Section 75 equality categories?

To what extent is the policy likely to impact on good relations between people of a different religious belief, political opinion or racial group? (minor/major/none)

Are there opportunities to better promote good relations between people of a different religious belief, political opinion or racial group?

As part of the audit trail documentation needs to be made available for all policies and decisions examined for equality and human rights implications. The screening template is a pro forma to document consideration of each screening question.

For information (evidence, data, research etc.) on the Section 75 equality groups see the Equality Portal - [Screening Resources & Evidence](#).

SCREENING TEMPLATE

(1) INFORMATION ABOUT THE POLICY OR DECISION

1.1 Title of policy or decision

The Safeguarding Board for Northern Ireland Business Plan 2023-2024

1.2 Description of policy or decision

The Safeguarding Board for Northern Ireland (SBNI) was set up under the Safeguarding Board Act (NI) 2011 and is the statutory body responsible for coordinating and ensuring the effectiveness of its 21 member bodies and its six independent persons for the purposes of safeguarding and promoting the welfare of children and young people. It is the key strategic leadership and management organisation for safeguarding and promoting the welfare of children and young people in Northern Ireland.

The SBNI is a partnership organisation consisting of all of the key statutory bodies, the major voluntary agencies and appointed independent persons that control, manage, operate and resource the safeguarding and child protection systems in Northern Ireland.

The SBNI Independent Chair (independent person), senior representatives from the 21 member bodies and the five other independent persons are members of the Board of the SBNI. The independent persons are the SBNI Independent Chair, the Case Management Review Panel Chair, two Safeguarding Panel Chairs and two Independent Lay Persons.

Additionally, other partner organisations involved in safeguarding and child protection in Northern Ireland are represented on the various statutory and non-statutory committees that support the Board in its work.

The Board and its statutory and non-statutory committees are supported in its aims and priorities by a small SBNI Central Support Team (currently eight staff). For more details on the SBNI see: www.safeguardingni.org.

The SBNI is an unincorporated statutory body and is corporately hosted and relies on the Public Health Agency (PHA) for key corporate accountability, business and governance arrangements.

The primary responsibility of the SBNI is to protect children and young people from risk and harm and ensure that effective work to protect children and young people is properly coordinated. The fundamental corporate strategic value associated with this intention is that the SBNI will listen to children and young people, their views,

feelings and experiences and place them and these at the heart of what the SBNI does.

The SBNI has recently developed a new strategic plan for the period 2022-2026. This strategy sets out the strategic direction for the SBNI for the next four years, taking into account the vision and priorities set out by the SBNI Board and builds upon its previous strategic plan 2018-2022.

The strategic plan details our purpose, focus and outcomes and is a high level document setting out the mission, vision, values, direction and priorities for the SBNI over the next four years.

The strategic plan is supported by annual business plans enabling the SBNI to action the strategic priorities and aims within year and to incorporate new priorities and challenges that may arise over this period. It is the key core accountability tool, along with our annual assurance statement for the Department of Health (DoH), the SBNI sponsor department.

Consequently, the SBNI Business Plan 2023-2024 details how we will make best use of our resources to achieve our core goals and strategic aims, objectives and priorities as set out in our Strategic Plan 2022-2026. These are:

- To provide leadership and set direction in the safeguarding, protection and welfare of children and young people
- To hear and respond to the voices of children and young people affected by domestic violence and abuse
- To support children and young people in exercising their rights to enjoy the benefits of the online world free from harm, fear and abuse
- To hear and respond to the voices of children and young people affected by mental health issues.

Furthermore, the SBNI has committed to continuing to the delivery of the following business areas for 2023-2024 in addition to the above strategic priorities, on-going statutory work of case management reviews and the five local safeguarding panels these are:

- Child Sexual Exploitation
- Child Criminal Exploitation
- Communications and Engagement
- Interfaith

Additionally, the SBNI has been specifically directed by the Department of Health to lead on the roll out to embed a sustainable transformation model of trauma informed practice and build on the existing knowledge of adverse childhood experiences

This SBNI Business Plan 2023-2024 represents Year Two of the SBNI Strategic Plan 2022-2026.

This business plan will also provide a basis for staff objectives and training.

All of this is underscored by an agreed corporate value base that places children and young people at the heart of what we do.

The current context of restricted finances and upcoming health and social care reform must be noted as potential constraints to this plan. Both of these have been considered throughout the business planning development process and its associated equality screening.

1.3 Main stakeholders affected (internal and external)

Internal:

- SBNI Independent Chair
- SBNI Member Bodies (21)
- SBNI Independent Persons (5)
- SBNI Partner Agencies
- SBNI Statutory and Non-Statutory Committees
- Those other safeguarding and child protection agencies who sit on the five local SBNI Safeguarding Panels
- Those organisations whose goods and services are commissioned by the SBNI
- SBNI Director of Operations
- SBNI Professional Officers (X2)
- SBNI TIP Implementation Managers (X2) (Temporary Secondments)
- SBNI Online Safety Coordinator (Fixed-Term Temporary Appointment)
- SBNI Business Support Manager (P/T) (Agency Temporary)
- SBNI Office Manager/Board Secretary
- SBNI Business Support Officers (X2) (P/T)
- SBNI Business Support Officer (Agency)

External:

- Children and Young People
- Their families and carers
- Wider Public
- Department of Health (as the SBNI sponsor department)
- Public Health Agency (as the SBNI corporate host)
- Business Services Organisation Equality Unit (as the SBNI Equality Partner).

1.4 Other policies or decisions with a bearing on this policy or decision

Internal:

- Safeguarding Board Act (Northern Ireland) 2011
- SBNI (Membership, Procedure, Functions and Committee) Regulations (Northern Ireland) 2012
- SBNI Terms of Reference 2012
- SBNI Strategic Plan 2022 – 2026
- SBNI Annual Report 2021-2022
- SBNI Safeguarding Statistics Snapshot 2021-2022
- SBNI Corporate Annual Business Plan 2022-2023
- SBNI Communications Strategy 2021-2023
- SBNI Engagement Strategy 2021-2023
- SBNI Child Safeguarding Learning and Development Strategy and Framework revised June 2020
- SBNI Equality and Disability Action Plan 2018-2023

External:

- UN Convention on the Rights of the Child 1992
- DHSSPS Guidance to the Safeguarding Board for Northern Ireland 2014
- DHSSPS May 2015 - Co-operating to Safeguard Children and Young People in Northern Ireland Policy Document
- Department of Health August 2017 - Co-operating to Safeguard Children and Young People in Northern Ireland Policy Document
- NI Executive's Children and Young People's Strategy 2020-2023
- Programme for Government Framework draft Outcomes Framework Consultation 2021
- OFMDFM 2009 – Safeguarding children: a cross-departmental statement on the protection of children and young people
- Northern Ireland Executive: Keeping children and young people safe: An Online Safety Strategy for Northern Ireland 2020-2025
- Online Safety – 3Year Action Plan
- Department of Health Protect Life 2: A Strategy for preventing Suicide and Self Harm in Northern Ireland 2019-2024
- Department of Health Anti-Poverty Practice framework for Social Work in Northern Ireland 2019
- Northern Ireland Executive: Child Poverty Strategy 2016
- Department of Health Mental Health Strategy 2021-2031

Central to obtaining and analysing all pertinent and relevant information to inform the development of the aforementioned strategic plan was the involvement of children and young people, their parents and carers in proactively eliciting their views on what the SBNI should focus on and prioritise for 2022-2026, prior to the SBNI Board meeting to consider its 2022-2026 priorities and objectives. This is in keeping with the SBNI's statutory functions to promote communication between the SBNI Board and children and young people for the purposes of safeguarding and promoting the welfare of children and young people. Central to this was the commitment and reality of ensuring all engagements with children and young people were reflective of the inclusion of the section 75 categories were relevant.

Specific direct proactive engagements were conducted with:

- Seven structured engagement sessions with children and young people (9-11-year olds and 12-18-year olds)
- Parental engagement consultation – direct interviews and an online survey
- Four specific direct group engagements with young people who have a lived experience of care

In addition to informing and influencing the strategic plan 2022-2026, the advice, learning and opinions derived from the above engagements have contributed to the development and formation of the SBNI Business Plan 2023-2024.

(2) CONSIDERATION OF EQUALITY AND GOOD RELATIONS ISSUES AND EVIDENCE USED

2.1 Data gathering

What information did you use to inform this equality screening? For example, previous consultations, statistics, research, Equality Impact Assessments (EQIAs), complaints. Provide details of how you involved stakeholders, views of colleagues, service users, staff side or other stakeholders.

- SBNI Statistics Snapshot 2020-2021 and 2021-2022
- SBNI Annual Report 2021-2022
- 2021 Census published by the Northern Ireland Statistics and Research Agency
- Northern Ireland Statistical Research Agency Mid-Year Population Estimates for Northern Ireland 11 June 2021 release
- Department of Health Children's Social Care Statistics for Northern Ireland 2019-2020
- Department of Education School Enrolments 2020-2021 statistical bulletins
- NI Young Life and Times Survey 2019 – Religion
- <https://www.health-ni.gov.uk/publications/tables-health-survey-northern-ireland>
- <https://www.ons.gov.uk/peoplepopulationandcommunity/culturalidentity/sexuality/bulletins/sexualidentityuk/2019>
- Registrar General Annual Report for NI 2020. Available at <https://www.nisra.gov.uk/system/files/statistics/RG%20Annual%20Report%202020%20Accessible.pdf>
- <https://www.nspcc.org.uk/about-us/news-opinion/2022/online-grooming-crimes-rise/>

Equality Commission for NI (2022) Shadow Report from the Equality Commission for Northern Ireland to the Advisory Committee for the Framework Convention for the Protection of National Minorities on the Fifth Monitoring Report of the United Kingdom.

Available at:

<https://www.equalityni.org/ECNI/media/ECNI/Publications/Delivering%20Equality/AdvisoryCommittee-FCNM-5thMonitoringReportUK.pdf?ext=.pdf>

2.2 Quantitative Data

Who is affected by the policy or decision? Please provide a statistical profile. Note if policy affects both staff and service users, please provide profile for both.

| Category | What is the makeup of the affected group? (%) Are there any issues or problems? For example, a lower uptake that needs to be addressed or greater involvement of a particular group? |
|-----------------|--|
| Gender | <p>General population: 1,903,175 – people in Northern Ireland 967,043 (50.8%) – female 936,132 (49.2%) – male</p> <p>SBNI Statistics: 2,298 – Children on the Child protection Register</p> <ul style="list-style-type: none"> • 1220 Males • 1087 Females <p>3,281 Children in Care of HSC Trusts (LAC)</p> <ul style="list-style-type: none"> • 53% Male • 47% Female <p>Population Statistics: There is a higher level of disability among adult females (23%) compared to adult males (19%). Girls (4%) are less likely to be disabled than boys (8%).</p> <ul style="list-style-type: none"> • Male prevalence rates are only higher than female rates amongst the youngest adults (16 to 25): 6% of males compared with 4% of females; • 8% of boys aged 15 and under were found to have a disability, compared with 4% of girls of the same age. <p>Transgender Research suggests for the Northern Ireland population as a whole:</p> <ul style="list-style-type: none"> • 140-160 individuals are affiliated with transgender groups • 120 individuals have presented with Gender Identity Dysphoria • There are more trans women than trans men living in Northern Ireland. <p>(McBride, Ruari Santiago (2011): Healthcare Issues for Transgender People Living in Northern Ireland. Institute for Conflict Research.) The Gender Identity Research and Education Society (GIREs) estimate the number of gender nonconforming employees and service users, based on the information that 7 GIREs assembled for the Home Office (2011) and subsequently updated (2014):</p> <ul style="list-style-type: none"> • gender nonconforming to some degree (1%) • likely to seek medical treatment for their condition at some stage (0.2%) • receiving such treatment already (0.03%) • having already undergone transition (0.02%) • having a GRC (0.005%) |

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| | <ul style="list-style-type: none"> likely to begin treatment during the year (0.004%). <p>The numbers who have sought treatment seems likely to continue growing at 20% per annum or even faster. Few younger people present for treatment despite the fact that most gender variant adults report experiencing the condition from a very early age. Yet, presentation for treatment among youngsters is growing even more rapidly (50% p.a.). Organisations should assume that there may be nearly equal numbers of people transitioning from male to female (trans women) and from female to male (trans men).</p> <p>Applying GIRES figures to NI population n=1,810,900 (Census 2011):</p> <ul style="list-style-type: none"> 18109 people who do not identify with gender assigned to them at birth 3622 likely to seek treatment 362 have undergone transition 91 have a Gender Recognition Certificate |
| Age | <p>General Population</p> <p>Age profile of the NI population (Census 2021):</p> <p>Age band Population Percentage</p> <p>0-14 365,200 19.2% (15-64 1,211,500 63.7%) 15-39 594,400 31.2% 40-64 617,100 32.4% (65+ 326,500 17.2%) 65-84 287,100 15.1% 85+ 39,400 2.1% All ages 1,903,200 100%</p> <p>Northern Ireland Statistics and Research Agency (NISRA) in its 2007 report indicated that prevalence of disability increases with age: ranging from 5% among young adults to 67% among those who are very old (85+); As the population ages, so does the likelihood of having a disability that limits the day to day activities 'a lot'. Figures from 2011 Census of people who are limited a lot by their disability are as follows within the following categories;</p> <p>Male</p> <p>0-15 – 3% 16-44 – 5% 45 – 64 – 16% 65 and over – 33%</p> <p>Female</p> <p>0 – 15 – 2% 16 – 44 – 5% 45 – 64 – 17% 65 and over – 38%</p> <p>Overall there are greater proportions of older people with a disability.</p> <p>SBNI Statistics:</p> |

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| | <p>438,384 – children under 18 years old (23% of total NI population)</p> <ul style="list-style-type: none"> • Children 0-4 years 124,400 - 6.87% of the total population • 5 to 9 years – 111,300 - 6.15% • 10 to 14 years - 119,000 – 6.57% • Young people 15 to 19 years- 126,200 – 6.97% <p>24,289 – Children known to Social Services as a Child in Need</p> <p>3,281 Children in Care of HSC Trusts (LAC)</p> <p>2,298 – Children on the Child Protection Register</p> <p>342,700 – pupils in schools 173,856 – pupils in primary schools 145,085 – pupils in post-primary schools 23,759 – pupils in funded pre-school education</p> | | | | | | | | | | | | |
| Religion | <p>Census 2021 Current Religion</p> <ul style="list-style-type: none"> • 'no religion' (17.4%) • 'religion not stated' (1.6%) • Catholic (42.3%) • Presbyterian Church in Ireland (16.6%) • Church of Ireland (11.5%) • Methodist (2.4%) • Other Christian denominations (6.9%) • Other non-Christian Religions (1.3%). <p>Religion/religion of upbringing (Number - Percentage)</p> <p>Catholic 869,800 45.7% Current religion 805,200 42.3% Religion of upbringing 64,600 3.4% Protestant and other Christian (including Christian related) 827,500 43.5% Current religion 711,000 37.4% Religion of upbringing 116,600 6.1% Other religions 28,500 1.5% Current religion 25,500 1.3% Religion of upbringing 3,000 0.2% None 177,400 9.3% All usual residents 1,903,200 100.0%</p> <p>The NI Young Life and Times Survey 2020-2021, for those who responded to belonging to a religion, gave the following percentages:</p> <table data-bbox="416 1792 957 2016"> <tr> <td>Church of Ireland (Anglican)</td> <td>7%</td> </tr> <tr> <td>Catholic</td> <td>60%</td> </tr> <tr> <td>Presbyterian</td> <td>19%</td> </tr> <tr> <td>Methodist</td> <td>2%</td> </tr> <tr> <td>Baptist</td> <td>2%</td> </tr> <tr> <td>Free Presbyterian</td> <td>2%</td> </tr> </table> | Church of Ireland (Anglican) | 7% | Catholic | 60% | Presbyterian | 19% | Methodist | 2% | Baptist | 2% | Free Presbyterian | 2% |
| Church of Ireland (Anglican) | 7% | | | | | | | | | | | | |
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| Baptist | 2% | | | | | | | | | | | | |
| Free Presbyterian | 2% | | | | | | | | | | | | |

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| | <p>Brethren 1%</p> <p>Muslim 2%</p> <p>Other 6%</p> |
| Political Opinion | <p>Census 2021</p> <p>National identity (nationality based) (Number – Percentage)</p> <ul style="list-style-type: none"> • British 814,600 42.8% • Irish 634,000 33.3% • Northern Irish 598,800 31.5% • English 16,800 0.9% • Scottish 10,200 0.5% • Welsh 2,000 0.1% • Other national identities 113,400 6.0% <p>National identity (person based) (Number – Percentage)</p> <ul style="list-style-type: none"> • British only 606,300 31.9% • Irish only 554,400 29.1% • Northern Irish only 376,400 19.8% • British & Northern Irish only 151,300 8.0% • Irish & Northern Irish only 33,600 1.8% • British, Irish & Northern Irish only 28,100 1.5% • British & Irish only 11,800 0.6% • English only/Scottish only/Welsh only 16,200 0.9% • Other combination of British/Irish/Northern Irish/English/Scottish/Welsh only 11,700 0.6% • Other national identities 113,400 6.0% • Polish only 23,900 1.3% • Lithuanian only 11,900 0.6% • Romanian only 7,100 0.4% • Portuguese only 6,900 0.4% • Bulgarian only 4,300 0.2% • Indian only 4,100 0.2% • Other national identity with one or more of British/Irish/Northern Irish/English/Scottish/Welsh only 12,700 0.7% • Other national identities 42,600 2.2% • All usual residents 1,903,200 100.0% |
| Marital Status | <p>Northern Ireland Life and Times (2018)</p> <ul style="list-style-type: none"> • Single (never married) 32% • Married and living with husband/wife 51% • A civil partner in a legally-registered civil partnership 0% • Married and separated from husband/wife 3% • Divorced 6% • Widowed 7% |

| | |
|-------------------------|---|
| | <p>Please note: Census 2021 data relating to marital status has not yet been released (as of the date of this screening) Data from the 2011 Census informs us that:</p> <ul style="list-style-type: none"> • Married 47.56% • Single never married 36.14% • Separated 3.98% • Divorced 5.45% • Same Sex Civil Partnership 0.09% • Widowed or Surviving partner from SSCP 6.78 % <p>NB: the SBNI considers these as relevant for children and young people as they relate to aspects of identity, adversity, masculinity and understanding of social norms.</p> |
| <p>Dependent Status</p> | <p>Census 2021 Table 17: Provision of unpaid care (‘Provision of unpaid care’ covers looking after, giving help or support to anyone because they have long-term physical or mental health conditions or illnesses, or problems related to old age. It excludes any activities carried out in paid employment.)</p> <p>Northern Ireland All usual residents aged 5 and over 1,789,348 Percentage of usual residents aged 5 and over who provide:</p> <p>No unpaid care 87.58% 1-19 hours unpaid care per week 5.63% 20-34 hours unpaid care per week 1.38% 35-49 hours unpaid care per week 1.57% 50+ hours unpaid care per week 3.84%</p> <p>Information from Carers NI suggests that:</p> <ul style="list-style-type: none"> • 1 in every 8 adults is a carer • 2% of 0-17 year olds are carers, based on the 2011 Census • There are approximately 220,000 carers in Northern Ireland • Any one of us has a 6.6% chance of becoming a carer in any year • One quarter of all carers provide over 50 hours of care per week <input type="checkbox"/> • People providing high levels of care are twice as likely to be permanently sick or disabled than the average person • 64% of carers are women; 36% are men. <p>Carers NI (State of Caring 2022 report) There are over 290,000 people providing some form of unpaid care for a sick or disabled family member or friend in Northern Ireland – around 1 in 5 adults. (Carers UK (2022). Carers Week research report 2022.) Of those participating in the survey...</p> <ul style="list-style-type: none"> • 82% identified as female and 17% identified as male. • 4% are aged 25-34, 17% are aged 35-44, 33% are aged 45-54, 31% are aged 55-64 and 14% are aged 65+. |

- 24% have a disability.
- 98% described their ethnicity as white.
- 28% have childcare responsibilities for a non-disabled child under the age of 18 alongside their caring role.
- 56% are in some form of employment and 18% are retired from work.
- 31% have been caring for 15 year or more, 16% for between 10-14 years, 25% for 5-9 years, 25% for 1-4 years, and 3% for less than a year.
- 46% provide 90 hours or more of care per week, 13% care for 50-89 hours, 23% care for 20-49 hours, and 19% care for 1-19 hours per week.
- 67% care for one person, 25% care for two people, 5% care for three people and 3% care for four or more people.

It may be concluded that a considerable share of people with a disability are carers themselves.

| Disability | <p>Census 2021</p> <p>Out of all usual residents (n=1,903,179), the Percentage of usual residents whose day-to-day activities are: Limited a lot – 11.45% Limited a little – 12.88% Not limited – 75.67% ('Day-to-day activities limited' covers any health problem or disability (including problems related to old age) which has lasted or is expected to last for at least 12 months.)</p> <p>The breakdown of the various long-term conditions as outlined in the 2021 Census is:</p> <table border="1" data-bbox="432 663 1342 1379"> <thead> <tr> <th>Type of long-term condition</th> <th>Percentage of population with condition %</th> </tr> </thead> <tbody> <tr> <td>Deafness or partial hearing loss</td> <td>5.75</td> </tr> <tr> <td>Blindness or partial sight loss</td> <td>1.78</td> </tr> <tr> <td>Mobility of Dexterity Difficulty that requires wheelchair use</td> <td>1.48</td> </tr> <tr> <td>Mobility of Dexterity Difficulty that limits basic physical activities</td> <td>10.91</td> </tr> <tr> <td>Intellectual or learning disability</td> <td>0.89</td> </tr> <tr> <td>Learning difficulty</td> <td>3.5</td> </tr> <tr> <td>Autism or Asperger syndrome</td> <td>1.86</td> </tr> <tr> <td>An emotional, psychological or mental health condition</td> <td>8.68</td> </tr> <tr> <td>Frequent periods of confusion or memory loss</td> <td>1.99</td> </tr> <tr> <td>Long – term pain or discomfort.</td> <td>11.58</td> </tr> <tr> <td>Shortness of breath or difficulty breathing</td> <td>10.29</td> </tr> <tr> <td>Other condition</td> <td>8.81</td> </tr> </tbody> </table> <p>Information on rare diseases provided by NI Rare Diseases Partnership www.nirdp.org.uk suggests 1 in 17 people is likely to be affected by a rare disease at some point in their lives; that is around 110,000 people in Northern Ireland. A disease is “rare” if it affects fewer than 1 people per 2,000.</p> <p>Research using data from 2011 (Getting and staying in work - LLTI 2001 - Research Report (nisra.gov.uk)) suggests that</p> <ul style="list-style-type: none"> The disability employment gap in 2011 was 52.3 percentage points (pps) – the difference in employment rate between those with (31.4%) and without | Type of long-term condition | Percentage of population with condition % | Deafness or partial hearing loss | 5.75 | Blindness or partial sight loss | 1.78 | Mobility of Dexterity Difficulty that requires wheelchair use | 1.48 | Mobility of Dexterity Difficulty that limits basic physical activities | 10.91 | Intellectual or learning disability | 0.89 | Learning difficulty | 3.5 | Autism or Asperger syndrome | 1.86 | An emotional, psychological or mental health condition | 8.68 | Frequent periods of confusion or memory loss | 1.99 | Long – term pain or discomfort. | 11.58 | Shortness of breath or difficulty breathing | 10.29 | Other condition | 8.81 |
|--|---|-----------------------------|---|----------------------------------|------|---------------------------------|------|---|------|--|-------|-------------------------------------|------|---------------------|-----|-----------------------------|------|--|------|--|------|---------------------------------|-------|---|-------|-----------------|------|
| Type of long-term condition | Percentage of population with condition % | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Deafness or partial hearing loss | 5.75 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Blindness or partial sight loss | 1.78 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Mobility of Dexterity Difficulty that requires wheelchair use | 1.48 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Mobility of Dexterity Difficulty that limits basic physical activities | 10.91 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Intellectual or learning disability | 0.89 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Learning difficulty | 3.5 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Autism or Asperger syndrome | 1.86 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| An emotional, psychological or mental health condition | 8.68 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Frequent periods of confusion or memory loss | 1.99 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Long – term pain or discomfort. | 11.58 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Shortness of breath or difficulty breathing | 10.29 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other condition | 8.81 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Ethnicity | <p>Equality</p> <p>In the general population the 2021 Census indicated that 3.4% (65,600) of the us population belonged to minority ethnic groups.</p> <p>Ethnic Group</p> <p>Ethnic Group Number Percentage White 1,837,600 96.6%</p> | | | | | | | | | | | | | | | | | | | | | | | | | | |

Minority Ethnic Group 65,600 3.4%
 Black 11,000 0.6%
 Indian 9,900 0.5%
 Chinese 9,500 0.5%
 Filipino 4,500 0.2%
 Irish Traveller 2,600 0.1%
 Arab 1,800 0.1%
 Pakistani 1,600 0.1%
 Roma 1,500 0.1%
 Mixed Ethnicities 14,400 0.8%
 Other Asian 5,200 0.3%
 Other Ethnicities 3,600 0.2%
 All usual residents 1,903,200 100.0%

Country of birth

Country of birth Number Percentage
 Northern Ireland 1,646,300 86.5%
 Great Britain 92,300 4.8%
 England 72,900 3.8%
 Scotland 16,500 0.9%
 Wales 2,800 0.2%
 Republic of Ireland 40,400 2.1%
 Outside United Kingdom and Ireland 124,300 6.5%
 Europe (other EU countries) 67,500 3.5%
 Europe (other non-EU countries) 3,700 0.2%
 Other Countries in the World 53,100 2.8%
 All usual residents 1,903,200 100.0%

Main language of usual residents aged 3 and over

Main language Number Percentage
 English 1,751,500 95.4%
 Main language not English 85,100 4.6%
 Polish 20,100 1.1%
 Lithuanian 9,000 0.5%
 Irish 6,000 0.3%
 Romanian 5,600 0.3%
 Portuguese 5,000 0.3%
 Arabic 3,600 0.2%
 Bulgarian 3,600 0.2%
 Other languages 32,200 1.8%
 All usual residents aged 3 and over 1,836,600 100.0%

Figures from the 2011 Census provide the prevalence of disability among following ethnic groups

Percentage of those whose disability limits their day to day activities a lot

All – 12%
 Irish Traveller – 20%

White other – 12%
Chinese – 3%
Indian – 3%
Pakistani – 6%
Bangladeshi – 4%
Other Asian – 2%

Considering the 2011 Census figures for the ethnic composition of the General Population alongside those of People whose disability limits their day to day activities a lot, it is clear that with the exception of Irish Travellers, black and minority ethnic people are underrepresented amongst those with a disability when compared with their share amongst the general population.

White – 98.21% (1, 778, 449) – 99.40%
Chinese – 0.35% (6, 338) – 0.10%
Irish Traveller – 0.07% (1, 268) – 0.12%
Indian – 0.34% (6, 157) – 0.08%
Pakistani – 0.06% (1, 087) – 0.03%
Bangladeshi – 0.03% (543) – 0.01%
Other Asian – 0.28% (5, 070) – 0.03%
Black Caribbean – 0.02% (362) – 0.01%
Black African – 0.13% (2354) – 0.03%
Black Other – 0.05% (905) – 0.02%
Mixed – 0.33% (5976) – 0.10%
Other – 0.13% (2354) – 0.08%

The five most popularly requested languages in HSC settings (as reported by the HSC Translation Service) 1st July – 30th September 2021 were:

1. Polish (4515 requests);
2. Arabic (3518 requests);
3. Lithuanian (2382 requests);
4. Romanian (2316 requests) and
5. Bulgarian (1516 requests)

Department of Education School Enrolments 2019-2020 statistical bulletins: Schools are increasingly becoming more ethnically diverse. There are more than 17,500 pupils in schools in Northern Ireland recorded as “non-white”, and this represents 5.0% of the school population. A newcomer pupil is one who has enrolled in a school but who does not have the satisfactory language skills to participate fully in the school curriculum. In 2019/20, there were nearly 17,400 newcomer pupils accounting for 5.0% of the school population. This has risen by nearly 5,500 pupils from five years prior. The growth in diversity in the school system may be explained by increased levels of migration among school age children over the last number of years. The top languages spoken by newcomers are: Polish, Lithuanian and Portuguese

Sexual Orientation

[Please note: Census 2021 data relating to sexual orientation has not yet been released (as of the date of this screening)]

There are no accurate statistics on sexual orientation in the population as a whole, it is however estimated that between 5% and 10% of the population would identify as lesbian, gay or bisexual. Between 2005 and 2017, there were 1202 recorded Civil Partnerships regionally. However, this is not indicative of the LGB population

A report published by the Rainbow Project (O'Hara, 2013), based on research conducted with more than 500 individuals reported common experiences of invisibility, homophobia/transphobia, and a range of violence from threats to physical violence, whether direct or indirect. As a result of their actual or perceived sexual orientation and/or gender identity:

- 65.8% had been verbally assaulted at least once;
- 43.3% had been threatened with physical violence at least once;
- 33% had been threatened to be 'outed' at least once;
- 34.7% had experienced discrimination in accessing goods, facilities or services at least once.

ONS Sexual Orientation 2019 (released May 2021)

- An estimated 2.7% of the UK population aged 16 years and over identified as lesbian, gay or bisexual (LGB) in 2019, an increase from 2.2% in 2018.
- Younger people (aged 16 to 24 years) were most likely to identify as LGB in 2019 (6.6% of all 16 to 24 year olds, an increase from 4.4% in 2018); older people (aged 65 years and over) also showed an increase in those identifying as LGB, from 0.7% to 1.0% of this age category.

2.3 Qualitative Data

What are the different needs, experiences and priorities of each of the categories in relation to this policy or decision and what equality issues emerge from this? Note if policy affects both staff and service users, please discuss issues for both.

Target Audience

The SBNI Business Plan 2023-2024 covers a wide range of issues across safeguarding and child protection in Northern Ireland. It has the aim of safeguarding and promoting the welfare of children and young people in Northern Ireland, including all Section 75 groups.

The document is high level and sets out the key strategic actions and corporate business objectives for 2023-2024 and will be supported by the statutory and non-statutory committees and sub-groups' work plans and other detailed plans and business cases as relevant.

The SBNI recognises that the needs, experiences and priorities of the groups within each Section 75 category may vary substantially and that some may require specific actions to benefit from safeguarding and child protection activities as described in this business plan. A top level screening of this plan will not do justice to giving consideration to the needs of all the Section 75 groups. Therefore, the SBNI is committed to undertaking, where appropriate, the screening of associated pieces of work as they are taken forward, for example new policies and/or procedures. We have however identified some known issues or needs in the table below; these will inform each screening undertaken as listed in Annex 1.

The plan is closely aligned with the core functions of the SBNI, as defined by the legislation and with other key strategies including the Children's Services Cooperation Act (NI) 2015 and the Programme for Government and draft Outcomes Framework 2021.

| Category | Needs and Experiences |
|-------------------|--|
| Gender | <p>If engagement and participation activities result from the outworkings of this annual business plan, then the differing ways of communicating with different genders groupings will need to be considered in terms of gender appropriate engagement and communication channels for males and females where appropriate.</p> <p>NSPCC recently reported an 80% increase in online grooming crimes in the UK (compared with 4 years ago), with 82% in the year 21/22 being girls.</p> <p>NSPCC also reported that of reported child sex offences during 2019/20, where gender was recorded, girls were 4 times as likely to be victims.</p> |
| Age | <p>Research published by the NSPCC highlights that rates of police recorded physical, sexual and online abuse offences against adolescents are higher than rates against younger children. Any general safeguarding issues and in particular engagement and communications activities will need to cater for differences in age. Generally, the SBNI has targeted under 11 Year olds and 12-18 year olds separately.</p> <p>Younger people may have preferences for using social media as a means of communication; Alternative forms of providing information may need to be considered.</p> |
| Religion | There is no evidence of a differential impact on the grounds of religion. |
| Political Opinion | <p>There is no evidence of a differential impact on the grounds of political opinion.</p> <p>However, children and young people living in areas associated with paramilitary groups may be more likely to be drawn into paramilitary activities, or be victims of such activity, and therefore have particular safeguarding needs.</p> |
| Marital Status | There is no evidence of a differential impact on the grounds of marital status. |
| Dependent Status | If engagement and participation activities result from the outworkings of this annual business plan, then consideration will need to be given to how carers can be accommodated in terms of timings and locations. |
| Disability | Generally, given that disabled children and young people are particularly vulnerable to all forms of abuse, consideration will be given to making any engagement and participation activities both accessible and sensitive to their needs and experiences. |

| | |
|---------------------------|---|
| <p>Ethnicity</p> | <p>The Equality Commission has highlighted issues of racist bullying and harassment, which can impact on the mental health of young people from minority ethnic groups.</p> <p>Young asylum seekers and refugees who have escaped conflict in their home countries may also have specialist needs in relation to PTSD and mental health, as well as physical health needs.</p> <p>Consideration will be to given requests for making the plan available in alternative formats as issues relating to children and young people, their parents and carers whose first language in not English.</p> |
| <p>Sexual Orientation</p> | <p>Research commissioned by the Dept of Education has shown that young people who identify as gay, lesbian or bisexual are more likely to experience bullying and hostility in relation to their sexual orientation, both in school and outside school. This in turn has led to increased incidence of mental ill-health amongst people who identify as other than heterosexual. However, UK research has also shown that gay, lesbian and bisexual people report more negative experiences of care systems, including GP access, and other health care services.</p> |

2.4 Multiple Identities

Are there any potential impacts of the policy or decision on people with multiple identities? For example; disabled minority ethnic people; disabled women; young Protestant men; and young lesbians, gay and bisexual people.

It is possible that some of the work to be taken forward in the business plan may impact on people with multiple identities. The SBNI recognises that the needs and experiences of people with multiple identities will vary across our work.

In our commitment to ensuring that potential impacts are considered and mitigated, the SBNI will screen plans, policies and procedures individually, where applicable to ensure that the potential impacts of each plan, policy and procedure are considered fully in that context.

2.5 Making Changes

Based on the equality issues you identified in 2.2 and 2.3, what changes did you make or do you intend to make in relation to the policy or decision in order to promote equality of opportunity?

| <i>In developing the policy or decision what did you do or change to address the equality issues you identified?</i> | <i>What do you intend to do in future to address the equality issues you identified?</i> |
|---|---|
| <p>Any requests for the Business Plan in alternative formats will be considered as per the arrangements in the SBNI Accessible Formats Policy</p> <p>Where specific priorities and aims result in products being commissioned and created, the SBNI will ensure that such relevant work will be screened.</p> | <p>As an integral part of the annual business planning process, each statutory and non-statutory committee and sub-group within SBNI formulates its own specific work plan to deliver on its work mandated by our strategic and annual business plans in the financial year ahead.</p> <p>A range of actions to be delivered as part of the overarching business plan will be equality screened and where appropriate, Equality Impact Assessed.</p> <p>Those currently known/predicted are to be found in Annex 1.</p> |

2.6 Good Relations

What changes to the policy or decision – if any – or what additional measures would you suggest to ensure that it promotes good relations? (refer to guidance notes for guidance on impact)

| <i>Group</i> | <i>Impact</i> | <i>Suggestions</i> |
|---------------------|---|--|
| Religion | Tackling any inequalities in the safeguarding and promoting the welfare of children and young people will help promote equality of opportunity and good relations | Continued focus on partnership working and public participation where appropriate. |
| Political Opinion | Tackling any inequalities in the safeguarding and promoting the welfare of children and young people will help promote equality of opportunity and good relations | Continued focus on partnership working and public participation where appropriate. |
| Ethnicity | Tackling any inequalities in the safeguarding and promoting the welfare of children and young | Continued focus on partnership working and public participation where appropriate. |

| | | |
|--|---|--|
| | people will help promote equality of opportunity and good relations | |
|--|---|--|

(3) SHOULD THE POLICY OR DECISION BE SUBJECT TO A FULL EQUALITY IMPACT ASSESSMENT?

A full equality impact assessment (EQIA) is usually confined to those policies or decisions considered to have major implications for equality of opportunity.

How would you categorise the impacts of this decision or policy? (refer to guidance notes for guidance on impact)

Please tick:

| | |
|-------------------|---|
| Major impact | |
| Minor impact | ✓ |
| No further impact | |

Do you consider that this policy or decision needs to be subjected to a full equality impact assessment?

Please tick:

| | |
|-----|---|
| Yes | |
| No | ✓ |

Please give reasons for your decisions.

The SBNI Business Plan 2023-2024 sets out the strategic context, key priorities and actions that will be progressed by the SBNI during 2022-2023. Safeguarding, child protection and promoting the welfare of children and young people is the essence of the plan and complements the Section 75 Agenda,

The plan covers a wide range of issues and business activities across the safeguarding, child protection landscape in Northern Ireland.

It has the aim of improving the safeguarding and promotion of the welfare of children and young people by ensuring all member and partner agencies work together in partnership to prevent and protect them from risk and harm for all children and young people in NI (inclusive of all relevant section 75 groups).

As an integral part of the annual business planning process, each statutory and non-statutory committee within the SBNI formulates its own work plan to deliver on its priorities and work in the financial year ahead.

A range of actions to be delivered as part of the overarching Business Plan will be Equality Screened and where appropriate, Equality Impact Assessed – see Appendix 1.

The SBNI recognises the need to consider the impact on Section 75 groups of this draft business plan and subsequent policies and programmes of work. The needs, experiences and priorities of these groups will vary and this annual business plan and subsequent work programmes, policies and business cases will be equality screened as appropriate as they are developed and taken forward over the next year.

Therefore, a full Equality Impact Assessment is not required at this stage.

(4) CONSIDERATION OF DISABILITY DUTIES

4.1 In what ways does the policy or decision encourage disabled people to participate in public life and what else could you do to do so?

| <i>How does the policy or decision currently encourage disabled people to participate in public life?</i> | <i>What else could you do to encourage disabled people to participate in public life?</i> |
|--|--|
| Not applicable | Not applicable |

4.2 In what ways does the policy or decision promote positive attitudes towards disabled people and what else could you do to do so?

| <i>How does the policy or decision currently promote positive attitudes towards disabled people?</i> | <i>What else could you do to promote positive attitudes towards disabled people?</i> |
|---|---|
| Not applicable | Not applicable |

(5) CONSIDERATION OF HUMAN RIGHTS

5.1 Does the policy or decision affect anyone's Human Rights? Complete for each of the articles

| ARTICLE | Yes/No |
|--|--------|
| Article 2 – Right to life | No |
| Article 3 – Right to freedom from torture, inhuman or degrading treatment or punishment | No |
| Article 4 – Right to freedom from slavery, servitude & forced or compulsory labour | No |
| Article 5 – Right to liberty & security of person | No |
| Article 6 – Right to a fair & public trial within a reasonable time | No |
| Article 7 – Right to freedom from retrospective criminal law & no punishment without law | No |
| Article 8 – Right to respect for private & family life, home and correspondence. | No |
| Article 9 – Right to freedom of thought, conscience & religion | No |
| Article 10 – Right to freedom of expression | No |
| Article 11 – Right to freedom of assembly & association | No |
| Article 12 – Right to marry & found a family | No |
| Article 14 – Prohibition of discrimination in the enjoyment of the convention rights | No |
| 1 st protocol Article 1 – Right to a peaceful enjoyment of possessions & protection of property | No |
| 1 st protocol Article 2 – Right of access to education | No |

*If you have answered no to all of the above please move on to **Question 6** on monitoring*

5.2 If you have answered yes to any of the Articles in 5.1, does the policy or decision interfere with any of these rights? If so, what is the interference and who does it impact upon?

| List the Article Number | Interfered with? Yes/No | What is the interference and who does it impact upon? | Does this raise legal issues?* Yes/No |
|-------------------------|-------------------------|---|--|
| N/A | | | |

** It is important to speak to your line manager on this and if necessary seek legal opinion to clarify this*

5.3 Outline any actions which could be taken to promote or raise awareness of human rights or to ensure compliance with the legislation in relation to the policy or decision.

| |
|-----|
| N/A |
|-----|

(6) MONITORING

6.1 What data will you collect in the future in order to monitor the effect of the policy or decision on any of the categories (for equality of opportunity and good relations, disability duties and human rights)?

| Equality & Good Relations | Disability Duties | Human Rights |
|---|-------------------|--------------|
| <p>The SBNI will continue to monitor requests for alternative formats to inform the development of information in various formats at the time of publication.</p> <p>Whilst no monitoring specifically for this business plan was conducted, the ongoing need for monitoring will be kept under review as the SBNI screens each piece of work as appropriate.</p> | | |

Approved Lead Officer:



Position:

Director of Operations

Date:

31 March 2023

Policy/Decision Screened by:

Paul McNeill: Business Support Manager

Please note that having completed the screening you are required by statute to publish the completed screening template, as per your organisation's equality scheme. If a consultee, including the Equality Commission, raises a concern about a screening decision based on supporting evidence, you will need to review the screening decision.

Please forward completed template to:

Equality.Unit@hscni.net

For advice and support on screening contact:

Equality Unit|BSO|James House|2-4 Cromac Avenue|Belfast|BT7 2JA

Tel: 028 9536 3961

Template produced June 2011

If you require this document in an alternative format (such as large print, Braille, disk, audio file, audio cassette, Easy Read or in minority languages to meet the needs of those not fluent in English) please contact the Business Services Organisation's Equality Unit: email: Equality.Unit@hscni.net

SBNI Business Plan 2022-2024

Equality Screening and Human Rights Template – Annex 1

2.5 Making Changes: Equality Screening Plan 2022-2023

| Outcome | Business Plan Objective | Action |
|---------|--|--|
| | General Items | <p>Equality screen the SBNI Business Plan 2023-2024</p> <p>Equality screen the SBNI Equality Action Plan and Disability Action Plans 2023-2028</p> |
| 1.1 | To ensure that the Case Management Review, Safeguarding and Child Death Overview Panels meet their statutory functions | Ensure each CMR Author addresses equality issues in every review and attendant report completed. A statement confirming this has been completed must be evident in each completed report |
| 1.2 | <p>To ensure that the non-statutory committees fulfil their delivery obligations within their terms of reference</p> <p>Review, update and disseminate the Regional Core Child Protection Policies and Procedures (P&P)</p> <ul style="list-style-type: none"> • Update the Case Conference Appeals Process • Develop the Sexually Active Children Guidance <p>Establish a Trauma Informed Practice (TIP) Committee to</p> | <p>Each committee must identify any equality Issues in their ongoing work, screen or assess where necessary and ensure compliance with equality legislation</p> <p>Case Conference Appeals Process will be screened within year</p> <p>This will be screened within year</p> |

| | | |
|------------|--|--|
| | <p>support member and partner agencies on how to embed a sustainable transformational model of TIP and build on existing knowledge of Adverse Childhood Experiences and TIP</p> <ul style="list-style-type: none"> • Develop an online tool to support the development of trauma informed organisations • Develop a specific communications strategy to increase the engagement and promotion of TIP for use across SBNI member agencies | <p>To be screened within year</p> <p>This will be screened within year</p> |
| 1.3 | To participate in relevant child safeguarding and child protection fora | |
| 2.1 | Work with government departments and their agencies to prevent domestic violence and abuse (DVA) from occurring | |
| 2.2 | To work with member and partner agencies engaged in the DVA arena to raise awareness among parents/carers and professionals of the impact of DVA on children and young people | |
| 2.3 | To work with member and partner agencies to provide training resources and expertise in how to improve the recognition, assessment, and responses to children, young people and families experiencing domestic violence and abuse | The SBNI DVA Committee is scoping current training available and mapping this against the SBNI Learning Skills Development Framework. Any subsequent gaps will be identified and new training created. These will be screened within year. |
| 3.1 | To work with government departments and their agencies to develop an online infrastructure and associated standards to prevent children and young people from experiencing harm and abuse online | |

| | | |
|------------|--|---|
| 3.2 | To work with member and partner agencies to educate children and young people, their parents and carers and those who work with them to navigate the online world safely and confidently and support them to stay safe and well online | |
| 3.3 | To ensure the views of children and young people inform and influence online policy and practice development | |
| 4.1 | To work with government departments and agencies to help reduce the incidence of children and young people affected by mental health issues | Following the formation of the committee and the ratification of its terms of reference in 2022-2023, any products from this committee will be screened in 2023-2024. |
| 4.2 | To work with member and partner agencies to raise awareness among parents, carers and professionals of the impact of poor mental health and any associated stigma, on children and young people | |
| 4.3 | To work with member and partner agencies to promote awareness for children and young people, their parents and carers in how to recognise, respond and seek help in relation to mental health | |
| 4.4 | To work with partners to promote training in how to improve the recognition, assessment, and responses to children, young people and families experiencing the impact of mental health issues | |