



Equality and Human Rights Commission's Triennial Review

A submission by Citizens Advice

January 2010

Introduction

Citizens Advice is the national body for Citizens Advice Bureaux in England and Wales. The CAB service is the largest independent network of free advice centres in Europe, with 412 main bureaux. Bureaux provide advice from over 3,300 outlets, including bureaux in the high street, community centres, health settings, courts and prisons.

The Citizens Advice service provides free, independent, confidential and impartial advice to everyone on their rights and responsibilities. It values diversity, promotes equality and challenges discrimination. The service aims:

- To provide the advice people need for the problems they face; and
- To improve the policies and practices that affect people's lives.

In 2008/09 bureaux in England and Wales advised 1.93 million people about over 6 million new enquiries in total. Of these, over 25,000 concerned discrimination issues. In the first three quarters of 2009/10 bureaux have dealt with over 20,000 new discrimination issues.

Bureaux are acutely aware of inequalities: they are right at the heart of their communities, their services are for everybody and all bureaux aim to be a first point of contact for advice on discrimination issues. In 2008/09, 21 per cent of CAB clients were disabled or had long-term health problems and 15 per cent were from Black, Asian and Minority Ethnic communities. Our research has found that single parents, disabled people, people with a long term health condition, and people on means-tested benefit are more likely to have used a CAB than others. Many bureaux also provide services tailored to specific groups, such as people with mental health problems, ex-offenders, people with HIV, travelers, carers and older people.

We also work with the Equality and Human Rights Commission as a strategic partner in tackling inequality and discrimination. We therefore welcome the opportunity to submit our evidence to the Triennial Review and contribute to shaping the equalities agenda of the future. This review is also very timely as research on the impacts of the recession is beginning to suggest long term implications towards increased levels of inequality. Indeed almost every index and indicator – income, property, health and longevity, educational and occupational achievement – reveals a less equal society than at any other point in modern times.

What are the most significant challenges or inequalities you face (or are faced by the people you work with) in the areas of health, employment, education, criminal justice and quality of life?

Bureaux and their clients face challenges at all levels of inequality, both in terms of horizontal inequality (ie concerning “protected equality groups”) but also vertical inequality related to socio-economic factors and problems. Many face multiple disadvantage, for example with poverty or class combining with their race, disability or sexual orientation to make a complex set of problems and barriers to overcome. The recent report of the National Equality Panel explores the relationship

between economic inequality, disadvantage and the different equality “strands.”¹ Our evidence illustrates how these dynamics work in practice.

As part of our FAIR strategy, the CAB service seeks to develop and deliver a range of discrimination advice and policy services in partnership with others. The key challenge though that the CAB services faces is in assessing which clients are the *most* vulnerable and with the *greatest* need for advice – i.e. those facing the most serious and urgent threats to their rights, and those facing the greatest barriers to resolving their problems themselves, or a combination of both. For example there are those who are housebound, or people live in rural areas with limited or no public transport links. And there are clients who are discriminated against who end up being scared and frustrated, as they find that they are not believed by different agencies they visit and are left with nowhere to go. We do not however seek to identify greatest need by protected grounds, demography or geography alone, or by a designated hierarchy of needs. The individual experience of inequality is multi-dimensional and there is a strong overlap between horizontal and vertical inequalities.

Our starting point is therefore with individuals and their needs. In reviewing our evidence, the following groups however do raise *persistent problems of discrimination* and/or chronic disadvantage:

- **Failed asylum seekers who are often destitute and homeless or living on a no choice basis in a ‘no cash’ system with levels significantly below income support.** Often they are facing the threat of deportation and have no recourse to public funds, often have little/no English and unfamiliar with UK systems. In many cases their problems have been compounded by delays in the Home Office dealing with their status and we continue to get evidence on this despite the improvements of the New Asylum Model process. In our experience, this group receives very little attention or help from mainstream or third sector agencies, they are vilified by press and experience high levels of lawful discrimination and unlawful racism which they rarely report.
- **People with mental health problems, fluctuating levels of mental capacity, and/or learning disabilities.** Sometimes clients in this group may be unable to access other services because of judgements made over their behaviour, they and may find that they have exhausted all areas of help. Widespread discriminatory behaviour and failure to understand their needs contributes to the problems they face as does low levels of employment and income.² The association between poor mental health and poverty is well known and our evidence helps to illustrate this particularly in relation to personal debt.³ Inequality of income has also been recognised as a crucial factor in determining likelihood of interaction with mental health services.⁴ This broad group of clients are also extremely vulnerable to various frauds and scams. In relation to the future needs of this group the personalisation agenda is likely to impact in particular on mental health service users.
- **Those at the margins of low paid work and poverty, sometimes employed in an informal economy with minimal protection of their rights, sometimes out of work, and often facing barriers to work.** We see the problems of many people who are on the edge of the labour market, struggling with low paid and often erratic work patterns. We also see how the benefits system in particular does not always work well for part time low income workers. For example, the housing benefit system does not work well as an “in-work” benefit, particularly for

¹ *An Anatomy of Economic Inequality in the UK*, Report of the NEP, January 2010

² *Out of the picture: CAB evidence on mental health and social exclusion*, Citizens Advice, 2004

³ Jenkins et al. *Debt, income and mental disorder in the general population*, Journal Psychological Medicine 2008

⁴ Wilkinson, R. & Pickett, K. (2009) *The Spirit Level: Why More Equal Societies Almost Always Do Better*

people whose income fluctuates. People with minor disabilities often experience problems because the “welfare to work” agenda requires that they take on work that isn’t suitable for them or their additional support needs being met. Additionally there is a growing problem of unemployment and income gaps, with consequences for social cohesion.

- **Those experiencing gender violence, and all forms of hate crime or harassment.** Such violence all too frequently results in death, or otherwise is severely damaging to peoples’ esteem, mental and physical health and to community cohesion. Children and other family members are often badly affected also. Last year, bureaux dealt with 18,003 enquiries about domestic violence; many bureaux provide specialist advice services for victims of domestic violence, and 118 are involved in hate crime reporting. In our experience statutory services such as the police, housing and social services departments are often insufficiently responsive to people trying to escape or deal with violence or harassment situations. This lack of response can be due to ignorance of legal duties and procedures; straightforward prejudice and lack of respect for fundamental human rights; and gatekeeping or rationing of services due to funding pressures. Examples of this are given in our 2008 response to the Home Affairs Select Committee Inquiry into Domestic Violence (which is attached), and, in relation to hate crime, in the case studies section below. A major equality challenge is to secure a step-change in the way that authorities understand, prioritise and deliver on their duties to this group.
- **Ex offenders, prisoners and recently released offenders seeking to re-integrate into the community.** Often there are so many barriers to offenders’ rehabilitation that there is a massively increased risk of re-offending – this can push people back into a cycle of poverty, homelessness, mental health and substance misuse problems and involvement in the criminal justice system. We have been involved in research on this group,⁵ and have also undertaken our own research on the practical barriers and problems that offenders face both before and after prison discharge.⁶
- **Migrant communities in general, and Romany Gypsies and Irish Traveller communities in particular** who fare worst of any ethnic group in terms of access to services, and health and education outcomes. There are also consistently very low incomes and a heavy reliance on benefits or informal work amongst this group.

As regards the specific “sectors” identified above for consideration by the Triennial Review, bureaux deal with problems in all these areas – as well as others not mentioned by the review such as access to benefits and discrimination within the benefits system. Based on the categories highlighted by the review our evidence leads us to highlight the following issues.

Health

In 2008-2009 bureaux dealt with 69,000 enquiries about health and community care, including mental health issues, so we have some observations to draw. Indeed there is now increasing recognition of the important role played by preventative and early intervention advice work on people’s health and well-being, as well as a growing evidence base to back this up.⁷ Consequently, bureaux deliver services in a range of NHS health settings, including hospitals, mental health units, community

⁵ “Hand to mouth”: *The impact of poverty and financial exclusion on adults with multiple needs*, Revolving Doors 2009

⁶ *Locked Out: CAB evidence on prisoners and ex offenders*. Citizens Advice (2007)

⁷ *Outcomes of a Longitudinal Study of Citizens Advice Service Clients in Wales*, 2009

mental health centres, and GPs' surgeries. The need for advocacy in health settings is likely to grow as securing health care through direct payments rather than the direct provision of services by the NHS has the potential to radically alter the nature of the NHS.

In respect of health inequalities, our evidence often concerns the access needs and capabilities of low income groups, for example with access to NHS dentistry, and affording prescription and other costs. Charging regimes can also impact disproportionately on vulnerable people with the highest access needs for NHS services. Indeed, a fundamental contradiction at the heart of the National Health Service is the existence of charges for essential items such as prescriptions, dental and optical treatment, as well as the ongoing issue of the charging regimes for personal care. We welcome the Government's approach to improving access to NHS services and reducing postcode disparities by reframing services around patients' rights and entitlements.⁸ However, we are very aware of the extent to which some people, particularly those from more disadvantaged groups, can be unaware of their rights, or have difficulty in enforcing them effectively because of language or literacy problems or their vulnerability.

Our evidence also suggests that age discrimination continues to be a major challenge for the health and social care sectors. We see the effect of discriminatory practices across the sector from premature discharge from hospital and inadequate support after discharge, to more general age-related access issues due to inadequate service design, and all of which can have serious negative effects on the health and well-being of older people.⁹ Often it is the combination of a person's age and disability that creates additional needs or vulnerability that are not properly recognised or provided for, such as discharge support and timely needs assessments. These problems are often the result of hidden rationing policies. To keep within budgets, most local authorities ration provision of social care, first by having long waiting times for assessments, and secondly by restricting the provision of services or payments to those with the greatest care needs. The combination of a currently inadequate service and a large increase in the number of older people in the population means that very significant resources will be required if frail and disabled people are to receive a standard of care and support that matches 21st century lifestyles.

Finally we have alluded above to the extent of our concern and evidence on mental health issues and discrimination. Whilst we welcome the aspirations set out in *New Horizons: towards a shared vision for mental health*, outlining the Government's vision for mental health and well-being for 2010 onwards, we consider that there is a need for far clearer and more substantial measures and benchmarking for improving access and commissioning, especially in respect of equalities. For example, the New Horizons document recognises the higher incidence of mental health illnesses in BME populations so specific strategies and services may be needed for this group. Further research is also required into the mental health needs of other sections of the community, specifically the mental health needs of the LGB community and especially the transgender communities as well as those of asylum-seekers, Gypsies and Travellers, single-parents, ex-service personnel and other specific groups. Given the harassment and victimisation some of these groups face on a daily basis, it is likely there will be higher incidences of mental health illnesses which require addressing with more targeted interventions

⁸ *National Health Service: A consultation on new patient rights* DoH (2010)

⁹ *Citizens Advice Response to National review of age discrimination in health and social care* (2009)

Employment

Our evidence concerns vulnerable worker exploitation and inequality of access to redress. The vulnerable workers groups we see are likely to be migrant workers, agency workers and low skilled workers. Most often the vulnerable workers we see are non-unionised, and may working from home or in small workplaces such as care homes, hairdressers, bars, restaurants and hotels, shops and other retail centres, food processing factories, cleaning companies, and other low-skilled or 'service' jobs. Their protection in terms of rights, health and safety standards as well as the minimum wage enforcement tends to be minimal. This is despite the fact that, according to many economic analysts, this is the sector of the economy in which there has been significant growth in recent years, and this disparity with the more regulated labour market is entrenching inequality and social immobility in our society.

Even where employment rights do exist, they are hard to access; almost 600,000 people apply to tribunals every year but are they unable to get legal aid for representation. Eight years ago we highlighted a shameful loophole in the employment tribunal system which means that thousands of successful claimants have been able to enforce their awards, a problem we now hope will be addressed by the introduction of state led enforcement.

There are several aspects of the Government's Welfare Reform programme and "welfare to work" initiatives which would sit uneasily with an overriding duty to tackle socio-economic disadvantage. In particular, we are concerned about the disproportionate emphasis that these policies place on low paid, low skilled work as a subsistence alternative to benefits, and the impact on options and life quality of disabled people in particular. We also see evidence of very poor quality of decision making in the benefits system and ineffective processes such as the supporting documentation required for employment and support allowance (ESA), especially in relation to fluctuating conditions. Combined with the complexity of the system, these can mean that many vulnerable people are treated unfairly. We would highlight the following issues at the intersection between work and benefits that can have the effect of exacerbating inequality.

- The policy adopted in the Welfare Reform Act on working for your benefit – effectively expecting claimants of jobseekers allowance (JSA) claimants to do full time work in order to get their benefit of £64.30 a week. This works out at £1.83 an hour. We have said that no-one should be made to do it at less than the national minimum wage, and this shouldn't undercut any employed staff currently doing the same job.
- Use of sanctions and conditionality. This involves reducing people's benefits because they haven't complied with requirements to actively seek work, do work-related activity, or turn up to work focused interviews. Consequently, the Government is often expecting families to manage for up to 26 weeks on less than the minimum safety net income.
- The invasiveness and quality of the medical assessments process for "work capability" tests under the employment and support allowance (ESA) which has replaced incapacity benefit (IB) and income support (IS) paid to disabled people. This can often result in disabled people being forced to take up work they are not sufficiently ready and supported for.
- Many men who have spent around forty years doing manual work and then develop a serious illness limiting their life expectancy are being found fit for work. If they have a partner who is working they lose entitlement to any means-tested benefit.

- The current housing benefits system does not work well as an “in-work” benefit, given the hassle factor of having to report every change in income on a weekly basis and compounded the slow response time of the system which can often lead to recoverable overpayments (which in turn result in rent arrears further down the line). In fact our evidence suggests that a poverty trap is created by the 65 per cent housing benefit and 20 per cent council tax benefit tapers, which together with the tax credit taper, can leave people very little better off if they increase their work hours.
- Finally, many BME claimants face additional communication barriers to accessing the benefits system because they have literacy, language or cultural issues. Claimants from BME groups are 10 per cent less likely to claim tax credits than their white counterparts, and this rises to 18 per cent for Indian families and 20 per cent for Chinese families.¹⁰

Overall our evidence suggests that despite the introduction of tax credits, low paid work does not always help people out of poverty or help advance social mobility. Indeed it can trap many people in a life of low income and high stress. Hundreds of thousands of the most vulnerable and low paid workers in the UK economy, many of them performing unglamorous but essential tasks, are exposed to persistent inequality and unfair treatment by employers. The continuing downturn, economic underperformance and impact of the recession is making this worse, and growing unemployment is affecting disadvantaged groups the most. As recent research published by the Equality and Human Rights Commission and the Government Equalities Office that reveals people from ethnic minorities have seen a marked increase in their rate of unemployment since the start of the recession in 2008.¹¹

Education

Child poverty remains an ongoing scandal and our evidence helps illustrate the practical impact of child poverty, for example on education. For 2008-9 we estimated that around 36 per cent of our enquiries come from households with dependent children. Citizens Advice endorses the outcomes identified in the *Every Child Matters* (ECM) Green Paper of most importance to children and young people - being healthy, staying safe, enjoying and achieving in education, making a positive contribution and economic well-being. However, bureaux are faced daily with families who experience the impact of the inequalities that result from the failure to achieve these outcomes. Part of the problem as we have highlighted above relates to the benefits and tax credit systems and the Government's welfare to work policies. Research with lone parents has found that poor administration of benefits, combined with the complexity and the small monetary rewards for moving into work form lead to key barriers and problems for many lone parent claimants.¹² However, the problems with child poverty run deeper as the National Equality Panel point out how inequalities in the early years then develop across the life-cycle.¹³ Citizens Advice therefore welcomes the Government's commitment to encourage all services for children, young people and families to work together to tackle inequalities.¹⁴ However, we have concerns about the lack of recognition for the role the advice sector plays in providing support to families and building financial capability among young people and parents.

¹⁰ Child and working tax credit take up statistics 2006/07, HMRC 2008

¹¹ *Monitoring update on the impact of the recession on various demographic groups*, GEO December 2009

¹² *Barriers to work: lone parents and the challenges of working* Citizens Advice (2007); *One parent families* Gingerbread & the London Child Poverty Commission (2007) London lone parents' choices around work and care.

¹³ *An Anatomy of Economic Inequality in the UK*, Report of the NEP, January 2010

¹⁴ *Ending child poverty: making it happen*. Child Poverty Unit 2009

Our evidence often concerns the practical impact of child poverty. For example, children should not have to face bullying or exclusion because their parents can't afford the right uniform or pay for expensive residential trips. Citizens Advice research demonstrates that 57% of authorities currently do not provide school uniform grants even though they have the discretion to do so under legislation. In many cases they may be operating an illegal blanket policy.¹⁵ Indeed following a successful legal challenge by a Rossendale CAB client, Lancashire County Council agreed to re-instate its provision of grants.

The criminal justice system

For several years we have been expressing concerns from our evidence about the social and financial exclusion of ex-offenders. Indeed the whole issue of both prisoners and ex-offenders access to services is extremely relevant to the reducing re-offending agenda. All the Government statistics concerning the over representation of ethnic minorities, those with mental health problems, and low-skilled and low income groups within the criminal justice system largely speak for themselves. However, systemic failures with the system of discharge support and access to discharge grants, the social fund, other benefits and housing on release adds significantly to their problems, as do barriers to work and basic financial services such as a bank account.¹⁶ But the problem is wider, as we conclude in our report, the failure of mainstream agencies to deal with the more challenging aspects of social exclusion often means that the criminal justice system is often being asked to put right a lifetime of service failure, and yet conversely once people have been through the criminal justice process they find themselves “locked out” of mainstream services.

In general – given the focus of CAB work – we do not comment on criminal law matters. However, we do question whether alleged shoplifters who are subjected to heavy handed civil recovery practices which often involve demanding huge additional costs are being treated fairly and proportionately by our legal system.¹⁷ We are also extremely concerned that the huge increase in short term sentences for minor offences, and the use of remand as a pre-trial option, as causes so much disruption and negative impact in the lives of some of our clients, that it must be questioned whether the punishment process fits the crime.

Quality of life

We have much evidence concerning broader quality of life issues for protected equality groups, for those who are particularly excluded or disadvantaged and for vulnerable customers. For example, high fuel prices mean that increasing numbers of people are struggling to pay for their gas and electricity bills and we regularly see vulnerable elderly people who end up having to go through prolonged cold periods without heating. Often, pricing policies do not help, for example those who use energy pre-payment meters which have often been installed because they have run up arrears end up paying more for their fuel. And whilst there are “universal service obligations” imposed by regulators for everyone to have access to the same baseline level of services at affordable prices, there are few practical steps required by regulators to achieve this. There is little consistency for example in the application of “social tariffs” across the energy sector. We therefore support government intervention to provide greater direction over the assistance that suppliers currently offer certain groups such as providing mandatory social price support - in the form of direct assistance with

¹⁵ *Adding up: The range and impact of school costs on families* Citizens Advice (2007)

¹⁶ *Locked Out: CAB evidence report on prisoners and ex-offenders theft* Citizens Advice (2007)

¹⁷ *Unreasonable Demands: Threatened civil recovery against those accused of shoplifting or employee theft* Citizens Advice (2009)

energy bills - to vulnerable consumers.¹⁸ The EHRC may also want to consider the human rights and equalities dimensions of utilities policy issues, as it is impossible to survive in the modern world without utilities such as water, fuel or telecommunications.

Our evidence also shows that there are very poor levels of customer service and satisfaction with utility companies. This can mean that vulnerable people in particular are unable to sort out their problems or get access to redress when systems fail vulnerable customers.¹⁹

However, the problem with utilities is only one aspect of the difficulty or inability some of our clients have in accessing essential services such as banking and basic financial products. Instead of services becoming more accessible to the public, the trend has been in the opposite direction, particularly for people living in rural areas, those – generally on lower incomes – who are not connected to the internet, people who find it too difficult or costly to use the telephone, and those who need to deal with an issue face-to-face. Even customers who are able to use telephone services face excessive costs when using their mobile phones to call government helplines, when in fact many of those calls are preventable. According to the Varney Report on public service delivery, nearly two-thirds of all contacts made to government services could be avoided if processes were clearer and more efficient and more information was available.

Although not commonly considered to be an equalities issue, we consider that personal debt – the problem which generates the highest number of CAB enquiries – is a massive issue which impacts adversely on quality of life. A recent survey of CAB debt clients showed that significantly high proportion are lone parents (more than one of out five of our survey respondents - 45 per cent of respondents with children), while 24 per cent of UK families were lone parent families.²⁰ Twelve per cent of respondents were from ethnic minority backgrounds, compared to 7.9 per cent of the total ethnic-minority population of the United Kingdom. Twenty seven per cent of the respondents reported that they had a person with a disability or long term illness living in their households. We have already alluded to all the evidence suggesting a causative relationship between debt, stress and mental health.

For many of our debt clients the end point is often the threatening, invasive and intimidatory tactics of some bailiffs and debt collectors. And whilst remedies such as personal bankruptcy may appear to offer a fresh start from unmanageable debt, stigma and exclusion can follow as discharged bankrupts find that it may not be possible to access basic financial products such as a basic bank account. We consider it to be wrong in principle that people should be stigmatised and excluded from society in this way.

Examples or case studies that demonstrate the challenges or inequalities you have identified above?

On all the issues that we have raised above, we can identify many examples from our evidence database. The examples we provide here are not exhaustive, but rather illustrative of some of the issues we have raised above and attempt to show the practical discriminatory impact of the application of blanket policies, such as “no recourse to public funds” rules for particular groups and

¹⁸ Citizens Advice briefing on the Energy Bill 2009

¹⁹ *Are you being served? CAB evidence on contacting utilities companies* (2007)

²⁰ *A life in debt – a profile of CAB debt clients in 2008*, Citizens Advice, (2009)

the effect of “gatekeeping” practices by local authorities homelessness services which can discourage the victims of discrimination from seeking the help they need.

Here are only a few examples of the issues we have raised in our consultation response. We would be happy to find more for EHRC should this be necessary:

Destitute asylum seekers

A West Midlands CAB saw a 36 year old Bangladeshi man who had been living with family, friends and within the mosque. He was homeless and was unable to claim any benefits as he was an asylum seeker and had no recourse to public funds. The client could not get any NASS support for asylum seekers as he had been refused as he had no proof of destitution. Consequently he had no access to any money, housing, or means of washing and eating.

A Staffordshire CAB saw a 20 year old man who was a failed asylum seeker. He was trying to appeal the decision. However, he was also caught on a train with no valid ticket. A penalty notice was issued. As he had no recourse to public funds, he had no means of paying it. NASS support did not allow him any spare money for travel fares. The collection authority now signalled intention to enforce through the courts. He feared that this might prejudice his asylum application.

Problems of vulnerable clients with mental health issues

A Birmingham CAB a repeat client, a 27 year old man with a diagnosis of chronic obsessive compulsive and schizophrenia who was homeless, sometimes staying with his mother, friends, hostels etc came in to the bureau to complain about the Job Centre. He was receiving £179 in ESA per fortnight. However, he was very unhappy about doing work related activities and his doctor considered that he should not be working because of his medication could make him drowsy, and without it he could get violent.

A Suffolk CAB reported that a client, a 51 year old man, who suffered with a history of mental health issues and was having trouble coping with day to day management of finances and came into the bureau with a debt problem. He was vulnerable and needed a support worker a lot of the time. After losing £20 in benefit payments, he took a home credit loan out of £100, at 50% interest. He did not understand the fact he would have to pay back £150 on this loan and was struggling to make these repayments. The lender allowed this vulnerable individual to take out a loan, knowing full well that he did not fully understand the terms of the loan, or have means to repay the loan quickly and easily

A Mid-Wales CAB saw a 33 year old woman who had various physical and mental health problems. She had not received a definite diagnosis from mental health professionals and as a result she has had difficulty accessing services. She had tried self-referral to social services but because she did not have a definitive diagnosis, she did not meet their criteria for assistance. This issue had become such a problem, that she had prepared a complaint via the help of the local Community Health Council Advocate.

The same bureau also reported that a 33 year old man, who had severe epilepsy and other physical health problems, had attempted suicide five times this year. Despite this, he did not receive any aftercare from mental health hospital services or social services.

Discrimination and breaches of basic human rights in health services

A CAB advised the family of a 72 year-old Hindu woman who was admitted to hospital and was considered by staff to be 'a difficult one' due to her religious dietary requirements. At one point staff knowingly gave her a meal containing beef, when challenged the staff maintained that the patient 'remained a difficult and fussy eater'; This incident resulted in the patient, who was on increasingly high doses of morphine and lacking lucidity, refusing to eat anything that was put in front of her, including home cooked food the family had brought. When the family commented that they were worried about her mother not eating due to her need as a diabetic for regular meals, the nursing staff said, 'if she wants to starve herself to death, you should respect her wishes.'

A Hertfordshire CAB saw a client whose 75-year old husband had been discharged from hospital without her agreement or consultation. She was only informed he was coming home when he was already on his way in an ambulance. She was promised carers but this did not happen and her husband was re-admitted to hospital by the GP soon after. The hospital wanted to discharge him again but the client was not herself fit enough to look after him. The couple were told he could not go to rehabilitation because his doctor at the hospital had blocked it – despite social services approving it. The client's health was being badly affected by the anxiety.

Ex-offenders

A Suffolk CAB's client had been released from prison, but was required to wear a tag and report to the police station six days a week. However he lived in a village about seven miles away from the town and could only get there by bus. He was finding this difficult to manage, as his essential expenditure needs already exceeded his income, and there was a danger that he would re-offend. The client has epilepsy and there was a danger that the added stress could have a bad effect on his health. He could not obtain help from his family who lived in Essex, because he was forbidden to enter that county by the terms of his release.

A Devon CAB saw a lone parent with a 15 month old daughter. She had just been released from prison on licence and was extremely worried that she would end back in prison and therefore lose access to her child as she had received no support on release. Whilst in prison, her bank account had been emptied, and the bank needed copies of bank statements to look into it. Her income support claim was not yet in payment, so she could not get a community care grant. The local authority homeless department were unable to help her until they received confirmation from the Prison Service that she was released to this area. In the meantime, the client was living in a holiday let, paying £100 per week.

Work and welfare

A Yorkshire client struggled with English and needed the help of an interpreter for anything complicated. She was attending Newstart training as part of her terms for JSA. She was ill and missed part of the course but because of her language difficulties failed to report her situation adequately. As a result her jobseekers allowance stopped which impacted on her housing benefit and council tax benefit. She had been unable to get an interview with Jobcentre Plus with an interpreter present so that she could resolve the situation. The bureau adviser made

numerous phone calls to different departments within Jobcentre Plus in order to arrange for an appropriate interview with an interpreter. She had been without any money for six weeks.

A South London's disabled client had been "sanctioned" by Job Centre Plus for failing to attend a job interview. She was in her forties and had never had a paid job, though she had done voluntary work. She had been paralysed down one side from birth, and suffered from other conditions including memory loss. She had forgotten about the interview and said she felt under increased pressure to attend different appointments and she was struggling to remember what was required when. She said she found it difficult to cope with a lot of things at the same time, and was getting stressed which caused her to forget things. The bureau assisted her to complete a form challenging the sanction and advised her to make a copy of it and attach supporting evidence from her GP. The sanction caused her further stress, exacerbating her health condition.

A Hampshire CAB reported that a Polish woman was working ten hours a week and claiming JSA top-up along with other benefits. She was a graduate and had a good grasp of spoken and written English. She was told by her Jobcentre Plus adviser that she should attend a course to help her with form filling and CV writing. The course clashed with the hours she worked and as she felt that the course would not be of extra benefit to her she refused to go. Her JSA payments stopped as a result. The bureau adviser commented that whilst claimants want training it needs to be focused on their personal training needs and advisers need to take a more flexible approach.

An Essex CAB's case highlighted the financial impact that sanctions can have on families. Their client was a lone parent with disabilities. She was repaying a budgeting loan and having recently failed to attend a work focussed interview had been given a 20 per cent sanction, which left her with just £29.75 per week income support. Her child tax credit and child benefit were being taken from her bank to repay her overdraft. She was struggling to pay for food and clothing.

Race discrimination against Gypsies

A Cambridgeshire CAB's client, a 57 year old male gypsy who lives in a caravan on Council run site, had been unable to get home and buildings insurance for his caravan. He tried several companies and was told that they would not accepting applications from his post code. His post code is unique to the site and is shown as "Travellers Site". The client believed he was being discriminated against.

A Buckinghamshire CAB's client described how a local publican had refused to serve gypsies and travellers, including signing and making statements signed a statment in front of the client and his family and friends stating he will not serve travellers and gypsies on his premises.

A Merseyside CAB reported two similar cases of possible race discrimination against Czech Gypsies. Their first client was a 20 year old single woman living with her parents as a non-dependant. She was a Czech Gypsy who had been in this country for two and a half years. She was unable to find work because she was deaf and consequently been unable to learn English. She was now pregnant with the baby due in November. She had been refused benefits such as jobseekers allowance and a social fund maternity grant because she was not working and had not done 12 months registered work. She had no income and was entirely

supported by her parents. Due to her disability, she could not learn English and was disadvantaged in the jobs market. She could not claim any benefits as an A8 national that she would normally be entitled to because of continued derogation from European Treaty rights in respect of A8 nationals being able to claim benefits. She could not return to the Czech Republic because of discrimination against Czech Gypsies.

The second case involved a couple and four dependant children (two disabled) plus one non dependant young person who could not claim benefit. Their only income was child tax credit and child benefit. The family had settled in this country because of racial discrimination and verbal abuse in both the Czech Republic and Slovakia. They lived in privately rented accommodation with no heating or hot water, costing £1,000 a month in rent. The house was infested with beetles and the family had bite marks on their arms. The client initially came about a local authority decision to stop payment of housing and council tax benefit. This was because his claim for jobseekers allowance had been turned down on the grounds that he did not meet the contribution conditions for the contributory part of the benefit and he had not completed 12 months registered work under the Worker Registration Scheme (WRS) which would have entitled him to the income-related part of the benefit. He had worked for a fast food restaurant from February 2007 until August 2008, and registered under the WRS in July 2007. In February 2008 he had moved from the branch at Burgess Hill to a branch in Leeds. The company had told him that he did not need to re-register because he was still working for the same employer. However the WRS lapsed his registration in February 2008 before he had completed 12 months work.

Hate crime / harassment

A CAB in County Durham reported a shocking case of a vulnerable adult who was subject to harassment and taunting by a group of individuals. A website on a social networking site was set up, people were encouraged to join and express their opinions or knowledge of the client. Some 611 people became members. The client's whereabouts were noted, his health problems discussed, the street where he lives, and his previous address. Members of the social networking group took videos on their mobile phones of the client which were posted on the site and hundreds of comments made.

A CAB client in the North suffered a sustained campaign of racial and religious harassment at work, during which he was tied to railings and force-fed bacon while a rucksack with protruding wires was put on his locker, and his trousers were set on fire. He finally left his job, but despite several visits to the police neither they nor his employers would take action. He then sought advice and a CAB volunteer supported him over many months, going with him to the police until they agreed to act, making a claim to the employment tribunal, and supporting him at the crown court trial, giving him the encouragement and confidence to carry on. In April 2008, his attackers were convicted of racially aggravated assault and jailed for three years. The employer settled during the employment tribunal, making a substantial award to the client.

For evidence on gender violence please see attached submission to the Home Affairs Select Committee on Domestic Violence. Our evidence on gender violence often intersects with other problems highlighted above, for example Derbyshire CAB saw a woman who had left her husband due to domestic violence, but had been unable to get child benefit for her seven year old son. She had applied for the benefit in April 2009 and by October had still heard nothing. It had previously been paid into a joint bank account.

Quality of life

A Gloucestershire CAB saw a 68 year old man who had applied to be on the housing register. The organisation running it gave applications a choice of housing based on a bidding system. However, the only way to register for social housing now was on the internet or by phone. As the man had neither a phone nor access to the internet, he would find it very difficult to find a home. He would have to travel to the library once a week to use the internet to put in a bid. He would have to use public transport to get there.

An Essex CAB saw a 69 year old man on a low income with health problems who consumed a lot of fuel. He lived in sheltered social housing and the property was as energy efficient as possible. The client was horrified to receive a bill from his fuel suppliers, stating that because of arrears built up during the year and the rise in fuel prices, his direct debit would have to be raised from £46 a month to £118. The previous bills had given no warning of this, because they were estimated readings. The client phoned the fuel company but was only told that the arrears would have to be paid off within six months and that the increased direct debit reflected this. He turned to the bureau in panic. The bureau was able to reduce the amount payable monthly to £103 but was told by the fuel supplier that even without the back payments of arrears, the monthly amount would have to increase to £70 to reflect higher prices and the client's consumption.

A Derbyshire CAB saw a man who was receiving chemotherapy for terminal cancer. He was being phoned repeatedly by a bailiff firm enforcing council tax arrears. The client told them he was very ill and had signed a letter authorising his wife to deal with this. However, they were still phoning him and being aggressive to his wife refusing to discuss the matter with her. Although the client had reasonable grounds for disputing the debt, including how the bailiffs had accounted for a payment of £500 he had made by client to them, they would not justify the amount they were chasing him for. He was extremely distressed at the way in which the bailiffs had treated him and his wife.

Can you give examples where you (or the people you work with) have faced severe problems due to multiple inequalities?

Yes. Many bureaux clients face multiple inequalities relating to a combination of equality grounds and economic disadvantage.

In relation to what is now known as combined discrimination, last year we conducted some research with the Government Equalities Office into the subject. A copy is attached. The research highlighted that this is a problem that both warrants protection and for which greater protection would be practicable. While it is now proposed that the Equality Bill covers direct discrimination on a combination of 2 grounds, our research also showed the need for protection against combined indirect discrimination and combined harassment.

The research identified examples of multiple discrimination including:

- Black men being subjected to specific stereotypes and prejudices relating to sexual prowess and aggression resulting in discrimination
- Older disabled employees experiencing increased and unfair scrutiny of their capability

- A gay man dismissed by an employer for being too effeminate where a 'masculine' gay man would not have been
- Migrant women workers exploited in discriminatory ways including non-payment of wages and extortionate rents and agency fees

Feedback from advisers also suggests that there is a significant issue with pregnancy and maternity as factors in intersectional discrimination cases, particularly in relation to young women and to migrant women. For example:

A Lincolnshire CAB saw a single woman who had come from Poland to work in the UK. She was currently employed by an agency but they had been unable to find any work for her. She had been on maternity leave until recently, but calculated that she had maternity pay for 33 weeks only (should be 39). Also, her maternity payments had not started on the first day of her maternity leave, but three weeks after the baby was born. Then she got a payment in lump sum, but it was not paid into a bank account, only cash in hand. She was also owed holiday pay for her time off. When the client tried to ask the company about this, they refused to give an explanation and they did not reply to written enquiries. It seemed as if the agency would not discuss the missing maternity and holiday pay with the client, assuming that as she was a migrant worker, she would not be aware of her rights.

Do the challenges or inequalities you have identified worsen at a particular point in life (i.e. early years & pre-school; older care & retirement; starting a family or starting work)?

This will require more demographic and detailed analysis of our case evidence and client contact statistics in order to identify with empirical certainty how particular problems may be clustered at particular point in life. However we can say the following on "point of life" issues:

- We are aware from our evidence that there are very significant age discrimination issues in health and social care, but also in access to key financial services and products. Retirement in particular requires some very major financial and life adjustments, and it is often from the point of retirement that discrimination starts kicking in – for example many payment protection insurance policies exclude over 65s.
- Pregnancy, maternity and paternity also require major life adjustments which are not well supported by labour market practices. Our evidence shows that for many low-income families, the daily juggling of their caring and working commitments is less a case of enjoying a good 'work-life balance', than of enduring a work-life compromise in which both suffer.
- Relationship breakdown can be a trigger or gateway to a range of problems such domestic violence, homelessness and debt. Often legal aid in crisis situations of relationship breakdown can be extremely hard to obtain.²¹ It is therefore concerning that the Legal Services Research Centre's periodic survey of legal needs reveals that 45,000 victims of domestic violence do nothing because they are unaware of their rights or are "too scared to do anything", whilst

²¹ *Legal Aid at 60: No Time to Retire*, Citizens Advice (2009)

another 250,000 with relationship problems take no action because they don't want to damage the relationship.²²

Can you tell us about any solutions you have found or heard about which help to tackle these challenges and inequalities?

There are no easy solutions, especially in an era of very rapid social, demographic, economic and technological change. However, we need to be able to harness the best solutions from technology, the state and the market to improve equality outcomes, whilst recognising that the scope for large scale public expenditure interventions may be extremely limited in future years. There is a need for a coherent vision for addressing the complexity of society and its diversity and a willingness to address new challenges alongside existing ones, such as digital exclusion, rural versus urban, intergenerational issues, and the effect of personalisation in public service delivery.

Firstly, in both access to public services and markets, there is a need to adopt policies which can address the “poverty premium” – circumstances in which those on low incomes and with lower skills either lose out or may actually have to pay more for very basic services. This is why we support the socio-economic duty in the Equality Bill and have argued for the duty to be extended to the powers of economic and market regulators.

In relation of work and welfare, we argue that a push towards higher labour market standards and flexible working patterns might actually help the labour market participation rates of vulnerable people with win-win outcomes for both employers and the workforce. There is considerable evidence of relationship between the workforce’s diversity, health and productivity.

In relation to the quality of life agenda, we consider that financial capability is key to both improving confidence, life quality and reducing dependency. It is an essential “skill for life” in today’s and tomorrow society, so needs to be mainstreamed across the education and training sector, all relevant government/regulatory and third sector agencies and the financial sector’s relationship with consumers.

We need a renewed focus on “community cohesion” or whatever language that policy makers use to describe efforts to support understanding and greater integration across different social groups. Diversity in our society is likely to increase in the longer term with the effects of migration – for example more young ethnic minority young people and more flux in make-up of local populations. There is a risk however is of increased instability and insecurities in communities. Tackling hate fuelled or abusive violence must be a priority in such initiatives, as the basic building block of a human rights based society is freedom from violence. Finally in this context of increasing fear and insecurity, we need to continually make the case to policy makers that the best and most cost-effective strategy for tackling crime and protecting the public may not be more investment in increased prison capacity, but rather investment in offender rehabilitation and integration into the community.²³

The new public sector duties under the Equality Bill may be a useful tool to drive forwards improvements. Local public services should target their efforts where improvement is most needed to

²² *Causes of Action – Civil Law and Social Exclusion (LSRC)*

²³ We refer here to the Justice Select Committee’s report on *Cutting Crime: the case for justice reinvestment*. HC 94-I 2009

tackle inequalities within and between communities. This may include focusing on the particular needs of people who are disadvantaged or discriminated against through age, disability, race, gender or trans-gender, religion or belief, and sexual orientation, but it may also include efforts to reduce child poverty or other inequalities within communities and improve services for the most vulnerable. Equality Assessments should consider how well local public services know and understand the nature and extent of inequality and disadvantage within their communities and client groups.

All local public services need to “raise the bar” to ensure that services are fully accessible. Often this can be achieved by removing simple barriers and making small adjustments that do not add to the overall costs of delivery or require any capital cost expenditure. This should involve.:

- Effective triage and appointment systems
- Ensuring that helplines are answered and reachable at a reasonable costs (in this respect we welcome DWP’s recent agreement with mobile phone companies, and urge others to look at ways of reducing call costs.)
- Making reasonable adjustments and accommodations for people with disabilities
- Adopting effective inter-agency referral systems and partnerships
- Ensuring that public and self help information is easily available via the internet and in other ways. It should also be available in different languages as appropriate.

Finally, we need a policy consensus on protecting vital support networks and infrastructures. We believe these include advice agencies and post offices which can act as “hubs” or “access points” to a range of services that can benefit excluded people. It is also important to support civil society in tackling the equalities agenda – for example through the empowering effect of community and self-organised help and support groups and initiatives.