Thinking Gender First: Gender Mainstreaming in Thurrock

A Report for South Essex Rape and Incest Crisis Centre
relating to three areas of Service Delivery:
crime and disorder, regeneration, and mental health

prepared by a team at
Sheffield Hallam University

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October 2003
Foreword

For the last year South Essex Rape and Incest Crisis Centre has been working together with Sheffield Hallam University to look at strategies to respond to women's needs in the context of our understanding of the impact of violence against women.

As part of its overall aims and objectives, SERICC is committed to ensuring that women who are survivors of sexual violence receive an integrated service, which has been planned to meet some of women's needs.

The work so far has allowed the development of Gender Mainstreaming Action Plans for addressing gender equity and acknowledging the impact of violence on women’s lives. This has involved developing a 'gender lens', through which we have looked at service provision in specified areas, always recognising the need to embed violence against women issues within local policies and partnerships. The project has recognised that violence against women issues are relevant across the whole of society, and that it is vital to consider gendered violence as a key factor in the development of improving services and responses to women and children experiencing violence.

The conclusions from this report show real progress and commitment to achieving gender equity in Thurrock, but also reveal that there is still a long way to go before policy development and implementation is truly gender sensitive. This project has offered an opportunity to take significant steps forward, enabling Thurrock to develop a modern, inclusive and leading approach.

Acknowledgements

South Essex Rape and Incest Crisis Centre and Sheffield Hallam University would like to thank all those individuals and organisations who have contributed both time and energy to this project and their commitment to its ongoing development.

Disclaimer

The views expressed in this report are those of the authors and do not necessarily represent those of the funding agencies which supported this project.
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Executive Summary

1. Gender Mainstreaming involves the incorporation of gender considerations into all policies, practices and decision-making, so that at every stage of development and implementation, an analysis is made of the effects on women and men, and appropriate action is taken. Addressing gender means recognising that inequalities between women and men involve unfairness and stereotyping that damages everyone. Gender mainstreaming is everyone's issue, where everyone gains; the *Thinking Gender First* report emphasises the significant social and economic costs of ignoring or downplaying gender.

2. Following a seminar in Thurrock on Gender Impact Assessment, organised in autumn 2001 by South Essex Rape and Incest Crisis Centre (SERICC), Sheffield Hallam University was commissioned to carry out the Gender Mainstreaming project with resources secured from the Home Office. The activities and outcomes of this project are reported here in *Thinking Gender First*.

3. The Thurrock Gender Mainstreaming project aimed to
   - clarify policy aims, and the constraints on policy/service development affecting gender mainstreaming, in the selected service areas
   - gain an understanding of local agencies' strategies, missions and values in each of these areas
   - assess and measure what is known about the impact of the services delivered in each area on women and on men, and on specified groups of women
   - support local agencies in developing a gender mainstreaming strategy and a forward action plan to achieve improved outcomes for women, especially any women not well served by current provision

4. The project was carried out between September 2002 and June 2003 in consultation with all relevant departments of Thurrock Council, South Essex NH Trust, and the voluntary sector.

5. *Thinking Gender First* includes summaries of the evidence available from national and local sources to build a gender profile relating to three areas of policy development and implementation: crime and disorder; mental health; and regeneration/neighbourhood renewal.

6. Key issues from these gender profiles for each policy field are:
Crime and Disorder

7. The profile includes some of the key facts about men and women in relation to crime and disorder. These include: that more than 4 in 5 victims of domestic violence are women; that reported rapes have increased rapidly in recent years while conviction rates have plummeted; that men's and women's patterns of offending behaviour differ in important ways, as do both their fear of crime and their contact with the police. Special attention is given in the report to the crimes of domestic violence, rape, abduction and murder.

8. Important national developments affecting women and men include the Home Office Crime Reduction Programme, the Violence Against Women Initiative, and the establishment of working groups focusing on these issues at the Women's National Commission.

9. In Thurrock, local agencies' responses to the Crime and Disorder Act 1998 have included the establishment of a Crime and Disorder Partnership and a Crime and Disorder Reduction Strategy. The latter includes tackling violence against women among its objectives, but has not yet used sex disaggregated or gender-sensitive indicators across its entire field of work. Other local initiatives, such as Thurrock Council's Community Safety Strategy, include violence against women as a crucial community safety priority. The report highlights some examples of good practice in this field.

Mental Health

10. The report summarises the available national evidence which shows how women's and men's experiences of stressful events can differ. Women are at higher risk than men from mental health conditions associated with domestic violence, sexual abuse and anxiety, although men are more likely in a given year to have a mental health episode, and more men than women succeed in taking their own lives. There is also evidence that women and men from Black and minority ethnic groups experience mental health and services differently from the white population.

11. The National Service Framework for Mental Health has been an important stimulus in setting standards for mental health services. The standards on health promotion and on services for people with severe mental illness are orientated towards gender. The Department of Health Implementation Guide advises on the safety and accommodation of women admitted to hospital for reasons of mental health. In 2002, the Women's Mental Health 'Into the Mainstream' consultation outlined a way forward to ensure that all services of mental health care are sensitive to gender.
In Thurrock, the Local Health Plan has been used to improve services for women and men with mental health problems. Primary Health Care services have also been developed to offer improved services to women suffering from mental illness. SERICC continues to deliver services informed by a gender perspective, including women-only services for those who want them, and a focus on tackling both domestic and sexual violence against women.

**Regeneration/Neighbourhood Renewal**

13. Sex-disaggregated statistics on poverty and social exclusion show that women are more likely than men to be poor. National data shows that they are more likely than men to experience exclusion from the labour market, from services and from social activities. Despite this, national policy on the regeneration of neighbourhoods and communities has failed to take a gendered perspective.

14. The government's *Neighbourhood Renewal Strategy*, and its documentation and guidance on *Sustainable Communities* provide the national policy context. These include major plans for developments in the Thames Gateway which will affect Thurrock. The key requirements for Sustainable Communities are not expressed in gender-sensitive terminology, but do provide an opportunity to introduce a gender mainstreaming approach in this policy field.

15. Thurrock Council has expressed its commitment to equality and gender issues in a range of recent documents, including commitments made by its Community Services directorate and in its response to the recent assessment of its performance. There are opportunities for gender mainstreaming in Thurrock's policies on regeneration, in its Transport Plan, in its Community Strategy and through *Shaping Thurrock*, which outlines the vision and planned activities of the Local Strategic Partnership.

16. The report includes the draft Action Plans agreed at events held with partners during the consultation process in Thurrock in spring/summer 2003.

17. The Report notes the recent progress made in Thurrock towards gender mainstreaming policy-making and delivery, and outlines further key recommendations for both Thurrock Council and other statutory and voluntary agencies. These recommendations (see below) emerged from the Action Plans and will need to be followed up by all relevant agencies, working in partnership, if the vision for gender mainstreaming in Thurrock is to become a reality.
Recommendations for Action

This section of the report contains the recommendations which are based on the research, consultation and action-planning undertaken for the "Thinking Gender First" project. In most cases, consensus about the need for these developments was achieved among those who attended the action planning workshops in Spring/Summer 2003.

The recommendations are presented as follows:

- recommendations for Thurrock Council
- recommendations for other local agencies
- recommendations specific to each of the three fields of service delivery:
  - crime and disorder
  - mental health
  - regeneration and neighbourhood renewal

General Recommendations for Thurrock Council

- Diversity and Equalities themes should be incorporated into Service Plans - it is crucial that all these issues are approached using a consistent and systematic approach.

- Service Plans should be equality-proofed, with specific reference to gender and diversity issues, prior to submission. This may require specialist support.

- Performance targets relating to Gender and Diversity objectives should be incorporated into the personal objectives agreed with Senior Managers.

- Gender and Diversity issues should be firmly linked in to the Comprehensive Performance Assessment and Best Value agendas.

- Gender Mainstreaming should be a priority within the Thurrock Community Plan.

- Corporate Strategies and Plans should embed gender and diversity as priority considerations and objectives, as a means of delivering community objectives.

- Action should be taken to build capacity for citizenship and governance. This will involve developing a strategy for achieving inclusivity, e.g. re Community Forums
- **Urban Development Corporation (UDC)**
  Seize the opportunity provided by the establishment of the Urban Development Corporation to prioritise gender and diversity objectives.

- **Good Practice Forum**
  Establish a **Good Practice Forum** within Thurrock Council, in partnership with local voluntary sector bodies, to support the aim of becoming excellent/learning organisations. Prioritise gender and diversity issues as a way of supporting cultural change.

- **‘At Elbow’ support**
  Arrange for all departments in Thurrock Council to have access to support and expert advice on gender and diversity issues.

**Recommendations for all Local Agencies**

- Integrate gender and diversity into all existing training programmes
- Identify the need for specific gender/diversity training to ensure compliance with new legislative and other requirements
- **Ensure Statistical data** is available in a sex-disaggregated form, and that it is analysed to enable the following to be assessed:
  - what gaps exist in developing and delivering services to men and women?
  - what are the positive and negative impacts of services on different groups of women and men.

**Recommendations arising from the Action Planning Process relating to Crime & Disorder**

**Data Collection, Analysis and Interpretation**

Map the crime and disorder data currently collected in Thurrock by service providers, partnerships, including both statutory and voluntary sector organisations, and ensure it is sex-disaggregated.

Amend the Quality of Life Survey, so data can be gathered about men's and women's perceptions of crime/victimisation and the 'hidden crime' of violence against women by exploring the experiences of the victims of crime.

Ensure that the analysis of data collected by the Thurrock Drugs Action Team is sex-disaggregated. Gender the analysis of data gathered by the Thurrock Drugs Action Team.
Developing Inclusion in Community Forums

Develop the Active Citizens Entitlement (ACE) programme and build in Gender Mainstreaming. Link this to action planning for regeneration and neighbourhood renewal. Support the development of partnership working, where the voluntary sector (SERICC, and South Ockenden Community Forum, Thurrock Youth and Play Service) are leading on developing and piloting a Community Leadership Programme in West Area and gender mainstreaming the West Area Assembly.

Opportunities and Platforms

Undertake "gender proofing" of the Crime and Disorder Strategy. This includes reviewing its objectives, targets and performance indicators

Review the performance of Service Plans against diversity objectives.

Develop sex-disaggregated data collection, and strengthen the gender sensitive approach already in place within the Citizens Advice Bureau.

Create a new template for Council Reports on Gender and Diversity. Ensure the toolkit developed by the Diversity Co-ordinator is widely used and effective.

Recommendations arising from the Action Planning Process relating to Mental Health

Dialogue with Mental Health Professionals

Establish a practitioner-led multi-agency Dialogue/Exchange to focus on Women and Violence and Abuse as an initial priority area.

Progressing the Joint Investment Plans (JIPs): the Violence Against Women (VAW) Joint Investment Plan and the Mental Health Joint Investment Plan

Introduce Action Planning on how gaps will be met and prioritised, through a series of meetings with the VAWA JIP Implementation group. Focus on communicating with practitioners on decisions and progress made.

"Gender proofing" is the process of reviewing and amending policy documents to ensure that their implications for both women and men have been considered and that every effort has been made to ensure positive outcomes for both sexes.
Gender Specific Targets

Agree a detailed gender-specific implementation plan for the Assertive Outreach policy.

Start planning for a gender-sensitive approach to Crisis/Intervention in Home Treatment, which comes on-line in 2004.

Build gender mainstreaming into the job description for the new Development Worker working across the South Essex Service re Early Intervention in Psychosis.

Primary Care in Mental Health

Check that sex-disaggregated data is incorporated as part of the evaluation brief for Anglia Polytechnic University's report on Primary Mental Health Care Pilot Project.

If the pilot proves successful, the Primary Care Trust could commission the service to continue. Ensure that any subsequent service (and its key targets) is gender-sensitive.

Information FACTSHEET

Via the Social Services Mental Health Team, produce and disseminate a Fact Sheet about gender and gender differences and diversity of relevance in Thurrock. This document needs to include a gendering breakdown of the existing mental health facts, drawing on (i) data on MH already collected locally, (ii) the data analysed and presented in the Gender Mainstreaming in Thurrock report, and (iii) local data drawn from the 2001 Census of Population.

Recommendations arising from the Action Planning Process relating to Regeneration and Neighbourhood Renewal

Embed Gender Mainstreaming into the Community Strategy

Develop a form of words regarding gender and diversity appropriate for inclusion in the Community Strategy.

Sharing and Strengthening Data and Information

Consider how the GIS (geographical information system) can be used to provide sex-disaggregated data, and discuss other ways of strengthening the presentation and use of gender sensitive data in Thurrock. This is likely to
include:

- producing sex-disaggregated data for the Thurrock Profile
- producing corporate guidance on sex disaggregated data, analysis & interpretation and
- establishing a new inter-agency Data User Group (to include services and departments inside Thurrock Council and relevant organisations from the voluntary sector). The aims of this group should include: establishing the sources of data and information available across Thurrock; ascertaining how to make best use of this data; and raising the awareness of members of this group about gender and diversity related issues.

Enhancing Consultation and Capacity Building

Act to increase inclusivity by addressing community participation in the forthcoming Community Strategy. Start by establishing how to work with the West Area Assembly on gender mainstreaming

Review issues relating to gender and diversity in the plans and funding of the Youth Forum, which has recently been granted Community Forum status and funds.

Mainstreaming Gender and Diversity within the Urban Development Corporation

Act urgently to ensure that gender and diversity issues and approaches feature in the negotiations between government and Thurrock Council regarding the UDC. For this, gender and diversity need to be firmly embedded in the Community Plan.
1. Introduction

This report outlines the approach taken within the Thurrock Gender Mainstreaming project to embed a gender mainstreaming approach in service development and delivery in three fields: crime and disorder, mental health and regeneration and neighbourhood renewal.

After explaining the background to the project, and summarising what adopting a gender mainstreaming approach involves for a locality - with statutory and voluntary services working in partnership - the report profiles the gender issues which arise in each of the three service delivery fields. This draws on both national and local documentation and analysis relating to the way women and men are affected by the development of policies and services in each field, and summarises the information collected as part of the consultants' task - offering an outline gender profile of available information, highlighting ways in which gender issues are already being raised and tackled, and indicating areas where gender is not yet properly considered.

Gender Mainstreaming involves the incorporation of gender considerations into all policies, programmes, practices and decision-making, so that at every stage of development and implementation, an analysis is made of the effects on women and men, and appropriate action taken.

History of the Thurrock Gender Mainstreaming project

In autumn 2002, a team at Sheffield Hallam University was commissioned by South Essex Rape and Incest Crisis Centre (SERICC) to carry out a Home Office funded Gender Mainstreaming Project in Thurrock. The SERICC team comprised Sheila Coates, Lee Eggleston and Selena Chandler. The overall objective of the project was to assist selected local agencies, including Thurrock Council, in developing a gender mainstreaming approach in service provision in the fields of mental health, crime and disorder, and regeneration/neighbourhood renewal. The Sheffield Hallam University team comprised Professor Sue Yeandle and Christine Booth (Deputy Director of the University's School of Environment and Development) who had previously conducted seminars on Gender Impact Assessment in Essex, at the request of SERICC, and two members of the University's research staff, Bernadette Stiell and Dr Diane Burns.
The aims of the project were to:

- clarify policy aims, and the constraints on policy/service development affecting gender mainstreaming, in the selected service areas

- gain an understanding of local agencies’ strategies, missions and values in each of these areas

- assess and measure what is known about the impact of the services delivered in each area on women and on men, and on specified groups of women

- support local agencies in developing a gender mainstreaming strategy and a forward action plan to achieve improved outcomes for women, especially any women not well served by current provision

What did this involve?

The Gender Mainstreaming Project was designed to capture and develop existing gender expertise in Thurrock and in the agencies with which it works. The methods used to achieve this included:

- Consultation events with agencies working in the fields of Crime and Disorder, Mental Health, and Regeneration and Neighbourhood Renewal (November 2002)

- Telephone Interviews with heads of services and senior officers in Thurrock Council, and with key personnel in other agencies

- Analysis of national and local policy documentation

- Collection and analysis of available sex-disaggregated data

- Action planning workshops in each service delivery field (April/May 2003)
2. Why Does Gender Matter?

Gender is one dimension of the broader equalities and diversity agenda which all modern societies must address if they are to succeed in valuing all their citizens, using everyone's talents and giving each person equality of opportunity. Focusing on gender does not mean neglecting other aspects of diversity - but does need to be approached in a special way because it affects everyone. Whereas addressing discrimination and unfairness on the grounds of race, disability, or sexual orientation often involves tackling the ways in which minority groups are systematically disadvantaged, discriminated against and abused, addressing gender means recognising that inequalities between women and men involve unfairness and stereotyping that damages everyone.

Campaigns and policies for tackling gender inequality have developed from an initial focus on unfair legal and social restrictions on women - this emerged in Europe in the late 18th century - into a three-pronged strategy. This includes: a legislative framework which promotes and assures sex equality; support for positive action programmes which address past discrimination against women (or men); and gender mainstreaming, which insists that both women and men will be beneficiaries if we think about how all our systems, policies and programmes play out in terms of their real impact on men's and women's lives.

For organisations, gender mainstreaming can be a crucial step forward. The inefficiencies associated with disbaring women from certain roles, discouraging men or women from applying for jobs or positions not routinely associated with their sex, and ignoring either men's or women's needs, are now widely recognised. Organisations - whether governments, local authorities, businesses or voluntary sector bodies - know that they must work to develop and support all their employees and clients if they are to achieve organisational effectiveness, effective spend (targeting resources on the most important issues), and effective service delivery.

The women and men living in Thurrock, as elsewhere, come from different cultures and backgrounds, and face a wide variety of challenges. To serve them well, local agencies must also address challenging issues relating to their diversity. This means tackling racism and religious discrimination; it involves creating an environment in which disabled women and men are not at an unfair disadvantage and can access the support appropriate to their needs; and it relies on ensuring that people's individual choices about faith, lifestyle or sexual orientation do not expose them to unfair treatment or victimisation.
Gender mainstreaming is everyone's issue, where everyone gains. The social and economic costs of ignoring or downplaying gender are immense: they include wasted resources allocated to education and training; the personal and societal costs of mental ill-health and emotional distress when domestic and sexual violence is ignored or hidden; the losses to business when employees cannot achieve their potential; and the damage done to our democracy when one gender is not fairly represented or heard.
Gender in Thurrock Key Indicators

Thurrock's Population: 143,128 people

73,459 Women (51.3%)

69,669 Men (48.7%)  

Economic Indicators

Table 1  Employment and Economic Activity in Thurrock

<table>
<thead>
<tr>
<th>Status Category</th>
<th>Women</th>
<th>Men</th>
</tr>
</thead>
<tbody>
<tr>
<td>All persons 16-74 (numbers)</td>
<td>46,044</td>
<td>43,865</td>
</tr>
<tr>
<td>% economically active who are:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>employed Part Time</td>
<td>25.2</td>
<td>2.4</td>
</tr>
<tr>
<td>employed Full Time</td>
<td>39.0</td>
<td>64.7</td>
</tr>
<tr>
<td>self-employed</td>
<td>2.6</td>
<td>13.0</td>
</tr>
<tr>
<td>Unemployed</td>
<td>3.2</td>
<td>4.5</td>
</tr>
<tr>
<td>Full-time students</td>
<td>2.7</td>
<td>2.0</td>
</tr>
<tr>
<td>% economically inactive who are:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Retired</td>
<td>1.1</td>
<td>2.6</td>
</tr>
<tr>
<td>Students</td>
<td>2.6</td>
<td>2.4</td>
</tr>
<tr>
<td>Looking after home/family</td>
<td>16.2</td>
<td>1.0</td>
</tr>
<tr>
<td>permanently sick/disabled</td>
<td>3.9</td>
<td>5.0</td>
</tr>
<tr>
<td>Other inactive</td>
<td>3.4</td>
<td>2.3</td>
</tr>
<tr>
<td>% unemployed of working age who are aged 16 - 24</td>
<td>33.5</td>
<td>29.9</td>
</tr>
</tbody>
</table>

Source: 2001 Census, Census Standard Tables, Crown Copyright 2003. Crown Copyright material is published with the permission of the Controller of HMSO.

- Women in Thurrock earn 78% of the average male wage
- In 2001, 7,604 people in Thurrock were economically inactive because they were looking after a home or family: of these, 94% were women
- In Thurrock, women represent 45% of all those in employment. Table 2 shows how they are distributed between different occupational categories

Table 2 % of workers in Thurrock in different occupational groups who are women

<table>
<thead>
<tr>
<th>Occupational Group</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal service workers</td>
<td>86%</td>
</tr>
<tr>
<td>Sales and customer service workers</td>
<td>79%</td>
</tr>
<tr>
<td>Administrative and secretarial workers</td>
<td>78%</td>
</tr>
<tr>
<td>Associate professional and technical workers</td>
<td>43%</td>
</tr>
<tr>
<td>Professionals</td>
<td>41%</td>
</tr>
<tr>
<td>Elementary (unskilled) workers</td>
<td>39%</td>
</tr>
<tr>
<td>Managers and senior officials</td>
<td>34%</td>
</tr>
<tr>
<td>Process and plant operatives</td>
<td>9%</td>
</tr>
<tr>
<td>Workers in skilled trades</td>
<td>7%</td>
</tr>
<tr>
<td>ALL WORKERS</td>
<td>45%</td>
</tr>
</tbody>
</table>

Source: 2001 Census, Census Standard Tables, Crown Copyright 2003. Crown Copyright material is published with the permission of the Controller of HMSO.
Women are much more likely than men to work part-time and to be looking after a home and family, and slightly more likely to be retired. By contrast, men are much more likely to work full-time or to be self-employed, and are slightly more likely to be unemployed or permanently sick or disabled.

Thurrock Council Democratic Services
80% of councillors in Thurrock are men, 20% are women

Health and Care

In the 2001 Census, 16% of Thurrock's population of 143,128 persons reported having a limiting long-term illness; this included 12% of people of working age.

Almost 8% of the population also reported that their health was 'not good'. 13,338 of Thurrock's residents (9.3%) reported that they were providing unpaid care for another person; of these 2% were providing 50 or more hours of unpaid care each week.*

Social Indicators

89% of lone parents in Thurrock are women, 11% men.

24% of female lone parents work part time, 22% full time (54% not at all).

2.6% of male lone parents work part time, 63% full time (34% not at all)

13,338 people in Thurrock are providing unpaid care for a sick, disabled or infirm person: 2,905 of these provide over 50 hours of care per week.

Among Thurrock women aged 15-17, there were 397 conceptions during 1999-2001: a rate of 54 per 1,000, compared with 43.5 per 1,000 for England.

*Comparative figures for England and Wales were:

<table>
<thead>
<tr>
<th></th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Limiting long-term illness</td>
<td>18.2%</td>
</tr>
</tbody>
</table>
Health 'not good' 9.2%
Providing unpaid care 10.0%

**Education and Skills**

The Thurrock population has a low level of qualifications by national standards. Only one in ten people aged 16-74 (9.9%) have qualifications at degree level or higher (compared with 19.8% for England and Wales as a whole).

Furthermore, more than one third of the population (34.5%) have no qualifications at all (compared with 29.1% for England and Wales).
3 Developing an effective approach to equality and inclusivity: understanding and implementing gender mainstreaming

Background in the UK

The UK now has a wide range of equality legislation. However, if everyone within an organisation is to make fairness and equality a routine part of their working practice, legal measures are not enough. Positive action and the mainstreaming of gender and diversity issues are also needed.

Over the past few years, changes in UK and European law, and the devolution of government in Northern Ireland, Wales and Scotland, have brought a more inclusive approach to equalities. This puts genuine equality of opportunity firmly on the current policy agenda. The European Union has been important in raising the profile of gender equality. It now has a solid body of legal provisions which give women and men equal access to employment, training, working conditions and social protection. Meanwhile, in the UK, the Department of Trade and Industry (DTI) has recently published its commitment, endorsed by many other government departments, to achieving gender equality targets (DTI June 2003). And a UK government consultation on equalities, which is expected to herald new legislation as all dimensions of equalities are brought within the remit of public policy, has been taking place during the course of the Thurrock project.

Since 1996, the European Union has stressed that equality of opportunity between women and men must be incorporated into all policies. This approach draws upon law, positive action, and valuing difference and diversity. The UK is committed to promoting equality between women and men through the Treaty of Amsterdam (1998), which also addresses discrimination related to race, age, disability, belief, or sexual orientation.

Local government activities and the projects and initiatives led by voluntary sector and other bodies in local communities, have important effects on the quality of women's and men's lives. Yet 'gender blind' policies, by adopting gendered approaches which take no account of how men and women are affected, can produce unequal gender benefits - even where this is unintended and unwelcome. To avoid this situation, policy-makers need gender expertise to link their own fields of work with gender issues. One way of addressing this can be to conduct a Gender Impact Assessment (GIA) as a mechanism for raising awareness and developing expertise.

'Gender blind' is the ignoring/failing to address the gender dimension (as opposed to gender sensitive or gender neutral)
Gender Impact Assessment: the Thurrock Seminar

In February 2002, South Essex Rape and Incest Crisis Centre (SERICC) commissioned, with Thurrock Crime and Disorder Partnership funding, an initial seminar on Gender Impact Assessment in Thurrock. This explored how a wide range of local and national policy affects women and men, and considered how gender auditing and gender impact assessment can make a difference to policy outcomes. The seminar highlighted a variety of techniques which are now available to support organisations in raising awareness of gender issues and in developing gender expertise. The techniques considered, which draw on good organisational practice in other spheres, included analytical, educational and consultative tools. Surveys, forecasting, audits, cost benefit analysis, policy appraisal and the development of policy guidelines - all familiar to many policy makers as valuable tools for taking policy forward in effective ways - can be used, alongside specific additional techniques such as gender budgeting. To support the gender mainstreaming approach, these tools can be further supplemented with education and training, by the introduction of specialist expertise, and by devising checklists and routine procedures for those engaged in policy-making.

When assessing the gender impact of a policy, it is important to ask:

Who are the beneficiaries?
How have strategies, policies and programmes taken account of gender?
Who has been consulted in developing new policies or in changing old ones?
How are resources being targeted on specific groups, and what are the impacts on gender?

Beyond this, an effective gender impact assessment which is capable of underpinning a successful gender mainstreaming approach also needs to develop context-specific action plans for key actors in the locality or policy field, and must ask:

- Who will play a role in taking forward gender mainstreaming?
- What skills will they need?
- What will be their tasks and what workload is involved?
- What resources and training will they require?

Conducting a worthwhile gender impact assessment, and embedding gender mainstreaming as a key feature of good organisational practice, can be done at a variety of levels. It can be applied to a whole service, programme or policy; it can be introduced to deal with a specific problem; and it can be used
to modernise and update practice in strategically important and politically sensitive areas.

If it is to work, gender impact assessment requires gender awareness at a senior level within the management of relevant organisations, and needs political support. It is important that there is access to sex-disaggregated statistical information, and that a gender profile of the relevant policy field is conducted, to support successful implementation. And it is crucial to evaluate the impact of policy interventions on women and men, and to do this even where it has traditionally been assumed that women and men are equal beneficiaries, and where policies are not targeted on specific groups.

First Steps in Gender Mainstreaming

In Thurrock, as elsewhere in the UK, service providers in all sectors, policy makers and employers are beginning to take up the challenge of mainstreaming gender equality. The 'business case' for this approach is now widely accepted, even among private corporations for whom profitability and efficient production remain top organisational priorities. This is because mainstreaming recognises the price paid when discriminatory practices - however unintentional - prevent specific groups or individuals from making their full contribution to society. The mainstreaming approach aims to make full use of all human resources, and to work positively with diversity, by valuing and respecting each person's knowledge and skills, irrespective of their individual characteristics.

The Thurrock GIA Seminar in February 2002 was a key step on the journey which local organisations have been making towards best practice in gender mainstreaming. Of course it was not the first step, as the impetus to set up that event arose from years of work - both within the voluntary sector and in parts of local statutory services - to draw attention to women's needs and to inadequacies in the ways they were met. Their approach was to recognise differences between women's and men's situations, and to call for services and policies to be adapted to take account of this. But hard facts to underline the case were not always available, and entrenched attitudes and beliefs about the optimum way to operate services were sometimes barriers to improvement. The Seminar provided an opportunity to bring some of these issues into the open, to recognise the need to improve outcomes for women without attributing blame, and to stimulate thinking about how a fresh start could be made which would work with the grain of national and European policy to enable Thurrock to lead in good practice on gender mainstreaming.

The following recommendations flowed from the GIA Seminar, and have underpinned the subsequent work which is the main focus of this report:

- Gender inequality in service delivery needs to be identified and tackled.
- Gender equality needs to be a key value in determining access to services.
• Change can only be achieved if both women and men are fully engaged in decision-making and in policy management.

In Thurrock, it was felt that Local Strategic Partnerships (LSPs), the City Dona project\(^1\), Area Assemblies, Community Forums and the Unitary Development Plan all offered important possibilities for embedding a gender mainstreaming approach. Specific points included:

**Develop local and service-specific profiles**
- Increase the visibility and accessibility of sex-disaggregated information about Thurrock.
- Compare target areas and groups with broader population groups and identify gaps, needs and priorities for action.

**Use qualitative approaches to improve data**
- Monitor grassroots' perceptions - use case studies, focus groups, interviews and local women's organisations.
- Explore perceptions of secondary users and people on the boundaries of services.

**Gender Mainstreaming**
- Embed gender mainstreaming in all key policy developments.
- Use the opportunities available through City Dona, existing networks and SERICC.
- Use Best Value reviews to examine performance on gender and to ensure annual service plans, crime and disorder partnerships and joint investment plans address gender issues.

**Gender Impact appraisal**
- Encourage everyone to 'think gender' as a 'first thought, not an afterthought', and to identify key beneficiaries of policies and services.

**Pilot projects: gendered approaches to delivering services**
- Address the gender implications of changing lifestyles, and new patterns of time use in everyday life.
- Explore ways of involving women and of working with men on an equal footing.

\(^1\) This was a current EU project addressing the role which cities could play in promoting gender equality issues. Thurrock Council was engaged in this in partnership with cities in Spain, Portugal and Italy, at the time of the GIA seminar, and undertook a review of the gender pay gap in Thurrock using resources from the project.
Organisational practice

- Integrate gender into job descriptions.
- Challenge stereotypical views of women and men and gendered assumptions about their role.
- Challenge service traditions which see people in terms of age and not in terms of gender.
- Review workforce composition by sex, age and race, and set realistic targets for change.
- To ensure they do not reinforce gender inequality, reassess the gender implications of the rewards and conditions of employment.
- Examine innovative ways of working with the voluntary and community sector to promote gender equity.

Following the seminar, and to capture the enthusiasm evident among local organisations and policy-makers, SERICC secured funding from the Home Office's Crime Reduction – Violence Against Women Initiative to enable some of the recommendations from the seminar to be taken forward, and commissioned Sheffield Hallam University to conduct this work, over a 12 month period, with a remit to profile relevant issues in three specific areas of service delivery, and to run consultation and action planning events with statutory and voluntary sector bodies in Thurrock to embed a commitment to gender mainstreaming at the local level. The remainder of this report summarises the main points which have emerged from the review of documents and other evidence about how women and men benefit from services provided in three fields:

- Crime and disorder
- Mental health services
- Regeneration and neighbourhood renewal

The report also includes the draft action plans which were developed to address the local issues considered most important by those who attended the action planning workshops, and who agreed to address specific points in their own practice, or to champion gender issues where they could influence others.

During 2003, many of the recommendations from the 2002 Seminar, outlined above, have thus been taken forward, at least in part, through the Thurrock Gender Mainstreaming project - others remain on the agenda as possibilities for future commitment and action. The wider public policy agenda in the UK continues to give strong support to these priorities, and Thurrock Council has made its own commitment to work to achieve gender mainstreaming as part of its response to its 2002 Comprehensive Performance Assessment.

Much remains to be done. Action plans remain ineffective if they are not endorsed at senior levels and followed through with appropriate action by all concerned. Some local partnerships have been reinforced through the project, and some new channels of communication have been opened. Throughout the project, the Sheffield Hallam team has been struck by the commitment and enthusiasm, which many of those involved in the consultation and action
planning events, and in supplying information and documentation, have brought to this project.

This augurs well for the future development of gender and equalities mainstreaming in Thurrock. Furthermore, high level support for this approach, through the Leader of the Council, senior officers of Thurrock Council and key voluntary sector agencies, suggests that good progress can be made towards embedding fairness and equal opportunities for all women and men in Thurrock in the years to come.
4. **Building Gender Profiles of three policy areas in Thurrock: developing the gender mainstreaming approach.**

In this part of the report we present profiles of each of the three areas of service delivery in Thurrock on which the project has focused. The information included here has been drawn from both local and national documentary sources, and is informed by the interviews and exchanges of information which have taken place between the authors of the report and the public and voluntary sector agencies in Thurrock.

Each profile starts - in a section entitled *How are Women and Men affected: the National Picture* - by outlining the major differences, as evidenced at the national level, between women and men in relation to the relevant policy field - crime and disorder; mental health; and regeneration and neighbourhood renewal.

It then offers a summary - *Developments in National Policy Affecting Women and Men* - of relevant policy initiatives and official programmes which have been developed at the national level to address the issues which central government departments and ministers have identified as crucial in taking developments forward. Here we consider how far these initiatives and agendas offer support in adopting a gender mainstreaming approach.

In a third section, *What’s Happening in Thurrock?*, each profile contains a summary of the evidence the consultants have been able to gather about how relevant policies have impacted on women and men in Thurrock. Here we summarise the key local policy developments, comment on how the documentation reads when viewed through a 'gender lens', and present examples of good practice and a summary of local implementation issues.
GENDER, CRIME AND DISORDER

How are Women and Men Affected? The National Picture

At a general level, it is well known that there are major differences in men's and women's propensity to offend, in the crimes which they commit, and in the ways they are affected by the criminal behaviour of others. Public perceptions of crime are not always well-informed by detailed information, however, and media images can distort understanding of the policy responses needed to address offending behaviour and to support victims of crime. Here we outline some of the key facts about men and women in relation to crime and disorder at the national level.

Men and Women as Victims of Crime:

- On the streets of Britain, women are less likely to experience violent crimes than men. The British Crime Survey 2001/02, which interviewed a random sample of the population about their experiences of crime and victimisation, showed that men were the victims in 57% of muggings and 82% of stranger assaults.

- Overall, young people are more at risk of becoming a victim of violent crime. However, while young men are more at risk of non sexual violent crime, it is young women who are the more at risk of sexual violent crime\(^2\).

- In 81% of domestic violence incidents the victim is a woman\(^3\).

- Reported rape by known men has increased by 165% in the last ten years, but the conviction rate has dropped from 24% to 5.8% (Home Office 1999).

\(^2\) 2001/02 British Crime Survey
Men and Women as Perpetrators of Crime

Criminal activity varies with age and gender.

- Of the 475,000 people cautioned for or found guilty of an indictable offence in England and Wales in 2000, the vast majority, around eight in ten, were male.

- Among young people, the proportion of offenders rises sharply with age. This occurs between the ages of 10 and 18 years for boys (with an average offending rate of 7%) and between the ages of 10 and 15 years for girls (average offending rate just under 2%). After 18 for young men and after 15 for young women, these rates decline with age, with less than 1% of the population over the age of 40 being found guilty or cautioned for an indictable offence.

Contact with the police

Gender and age are also significant factors in police-initiated contacts:

- Across all ethnic groups, males aged between 16-29 years were significantly more likely to be stopped than older adults or than females.

- 39% of black males and 11% of black females aged 16-29 had been stopped in a vehicle compared with 25% of white men and 18% of white women of the same age group.

- 32% of black males aged 25 or younger had been stopped on foot, compared with 21% of young white males.

Fear of crime among women and men

Age and gender are strongly related to worry about crime and feelings of safety. An analysis of data from the British Crime Survey 2001/02 showed that:

- At 18% and 13% respectively, women were more worried about burglary than men. Around a quarter of women said they were very worried about being raped or physically attacked, and one-fifth were very worried about being mugged.

- Young women were particularly worried about being physically attacked (30%) or raped (34%). Although this high level of anxiety about these

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3 Source: Home Office figures of recorded crime based on administrative data collected by the police, England and Wales, 2000.
crimes does not increase further with age, it should be noted that it is also true for women from different minority ethnic groups.

- A Home Office research study, based on figures from the British Crime Survey 2000, showed that while people from minority ethnic groups are no more at risk of violent crime than others, they are much more likely to perceive a *racial dimension* in the crimes they experience.

**Domestic violence, rape, abduction and murder**

These crimes of violence raise especially important gender issues, and are of great concern to women. Research and campaigns have identified that some men view such crimes differently from women, as the example in the box below suggests:

A 1998 survey by the Zero Tolerance Charitable Trust on young people's attitudes towards violence against women showed that young men had a high acceptance of sexual violence:

- 1 in 6 thought they might force sex on a woman if she were his wife;
- 1 in 8 on a long-term girlfriend;
- 1 in 10 if they were "so turned on that they couldn't stop"

SERICC have been running the 'Respect' Education Initiative in Thurrock for three years and all their questionnaire results on this topic remain consistent with the 1998 Zero Tolerance survey.

**Domestic Violence**

- Domestic violence accounts for 23% of all violent crime.\(^6\)

- In 1997, 37% of women murder victims were killed by present or former partners, compared to 6% of men.\(^7\)

- Every week, 2/3 women are killed by their current or former male partners.\(^8\)

- It is estimated that one in four women will experience domestic violence at some time in their lives.\(^9\)

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• Research\textsuperscript{10} suggests that violence against women and children occurs in all sections of society, irrespective of race, culture, nationality, religion, sexuality, disability, age, class or education level.

The 1996 British Crime Survey\textsuperscript{11} found that:

• 4.2% of both women and men (aged 16 to 59) had been assaulted by a current or former partner during the previous year.

• Women were, however, more likely to be living under the threat of male violence: 3.8% reported being on the receiving end of threats compared with 1.2% of men.

• Women were twice as likely to report being injured as a result of assault: 2.2% compared with 1.1% of men.

• There was a high level of repeat victimisation within the year. Almost half of the women who had been assaulted had experienced three or more episodes of assault, compared with one-third of male victims.

• 12% of disabled women aged 16-29 had experienced domestic violence in 1995. This compares with 8.2% of non-disabled women of the same age.

• Violence against women by known men is the crime least likely to be reported, and the rate of attrition is very high.

\textit{Rape}

The British Crime Survey 2000 showed that 1 in 10 women said they had experienced some form of sexual victimisation, including rape, since age 16. (The Survey did not include homeless women, women in prison, mental health units or Special Hospitals.) However, the survey was a random sample of private households designed to give an account of crime that includes incidents reported to the police, or those reported but not recorded. Estimates of the level of sexual victimisation obtained by the British Crime Survey are acknowledged to be underestimates (see Percy and Mayhew ‘Estimating Sexual Victimisation in a National Crime Survey 1997). The conviction rate is currently 5.8%.

• Around 1 in 20 women said they had been raped on at least one occasion since the age of 16. (An estimated 754,000 victims.)


\textsuperscript{11} The 1996 British Crime Survey included a new computerised self-completion questionnaire on the extent of domestic violence in England and Wales. The results of this self-completion questionnaire showed considerably higher levels of domestic violence than other sources related to the British Crime Survey.
• Women are most likely to be sexually attacked by men they know in some way, most often by their partners (92%) and also by their acquaintances (22%).

• 'Current Partners' (at the time of the attack) were responsible for 45% of rapes reported to the survey. 'Strangers' were responsible for just 8% of rapes reported to the survey.

• 18% of incidents of sexual victimisation reported to the survey came to the attention of the police; and the police came to know about 20% of rapes. Of rape incidents the police came to know about, 52% were reported by the victim.

• Sexual assaults are almost three times as likely to occur in a public place

Home Office data have shown that:

• In 1997, the police recorded 6,281 offences of rape of a woman compared with 7,809 in 1999/00

• In these two years, 347 and 600 cases of male rape were reported.

• In 1997, 95% of police recorded rapes were of women; this fell slightly, to 93%, in 99/00.

• Over half of all recorded rapes are committed in the home of the victim or suspect. (56%)

• A high proportion of cases do not lead to a successful conviction. In 31% of cases, the police decide to take no further action, and in 8% the case was discontinued by the Crown Prosecution Service.

• Only 9% of suspects were convicted of rape or attempted rape.

• Cases where the victim was under 16 were most likely to go to court, and most likely to lead to a conviction.

Sexual and domestic violence are complex crimes, they differ markedly from other crimes in terms of their nature and consequences.

Homicide

Men are more likely than women to be a victim of homicide. The criminal Statistics for England and Wales (Home Office, 2001) show that 38% of murder victims were women in 1990, and 33% in 1999/2000. However, homicides where women are victims show particular characteristics, both in the way the murder is committed, and by whom the homicide is committed.
• In 1999/2000, 49% of male victims knew the offender, compared with 61% of female victims.

• In 1989, 61% of male victims knew their assailant, compared with 79% of female victims.

• Within the group of suspects known to the victim, women are much more likely than men to be killed by a current or former partner or lover.

• Throughout the 1990s, strangulation and being killed with a sharp instrument have been the main method of killing a female victim of murder. Although only a cause in a very small number of cases throughout the 1990s, poisoning and drugs accounted for 15% of cases of the murder of women by 1999/2000. In contrast, hitting, kicking, etc., and being killed by a sharp instrument, are the main methods of killing a male victim of homicide.

Stalking

Data from the 1998 British Crime Survey in England and Wales (Budd and Mattinson, 2000) showed that:

• 16% of women had experience of being stalked at some time in their lives, compared with 8% of men.

• Three-quarters of those identified as being stalked were women.

• The risk of being stalked during the previous year was higher for women (4%) than for men (2%).

• Risks were particularly high among young women. 17% of women aged between 16 and 19 years old reported being stalked, compared with 3% of men.

The majority of stalking incidents were committed by people known to the victim in some way (64% of women and 71% of men). This was almost equally split between close friends or relatives and acquaintances. Women were significantly more likely to have been the victims of stranger stalking (35% compared with 28% of men).

Developments in National Policy affecting Women and Men

The Crime and Disorder Act 1998 introduced important changes to the way local agencies collaborate to address issues in the field of crime and disorder. The Act requires the police and local authorities to work together to tackle crime and disorder in their area, in partnership with health, social services, education, probation, and other relevant services. In this section we note how
other government programmes and initiatives are reshaping action on crime and offending.

**Crime Reduction Programme**

This Home Office programme involves strategies and initiatives to reduce burglaries and to tackle alcohol related crimes, domestic violence and violence against women, as well as measures to deal with disorder and anti-social behaviour. Apart from the part of the strategy focusing on violence against women, documentation about the programme does not explicitly include a gender perspective in the way it understands these types of crimes or in the responding actions proposed by the government.

**The Violence Against Women Initiative**

In relation to tackling violence against women, the Government has three stated overriding aims:

- To improve safety and protection for women and children experiencing domestic violence.
- To hold offenders and abusers accountable for their behaviour.
- To achieve culture change, so that domestic violence is no longer tolerated, excused or ignored.

Five key areas for action have been identified:

- Increasing safe accommodation choices for women and children.
- Developing early and effective healthcare intervention.
- Improving the interface between the criminal and civil law.
- Ensuring a consistent and appropriate response from the police and the Crown Prosecution Service.
- Promoting education and awareness-raising.

In the context of the Home Office Consultation on 'Safety and Justice', Women’s Groups in the UK have also campaigned for the following reforms to law, policy and practice in responding to violence against women.

- Develop and resource a national strategy on violence against women.
- Provide sustained support to public awareness-raising campaigns for prevention.
- Integrate education for preventing violence against women in the National Curriculum.
• Reform the justice system to prevent, investigate, and hold offenders to account for acts of violence against women.

• Provide co-ordinated, ring-fenced, long-term national funding for specialist independent services that meet the needs of all women who have experienced violence, and their children.

• Reform immigration and asylum policies to guarantee the human rights of women with uncertain immigration status.

• Mainstream gender equality and women’s rights, including an analysis of violence against women, in UK foreign policy.


What's Happening in Thurrock?

Key Policy Developments

The documents referred to in this section have been reviewed through a 'gender lens'. This means that they have been 'gender-proofed' to identify their strengths and weaknesses in taking gender seriously, and in tackling any gender issues identified.

Document 1

'A Profile of Thurrock: a quality of life for all' (section on Crime & Disorder)

The Crime and Disorder Act 1998 requires the Local Authority and the Police to produce a crime and disorder reduction strategy for their area, and states that the local community, Health, Education, Social Services and the voluntary and business sector must be involved in this process. In Thurrock, the Thurrock Community Safety Partnership has created two groups to undertake this work: the Crime and Disorder Reduction Partnership (CDRP) and the Implementation Group.

• Thurrock's Crime and Disorder Reduction strategy reflects statistical data and local and regional issues and concerns. It supports and reflects the organisational strategies that the partnership is required to produce by central government. It includes a Health Improvement Plan and a Drugs Action Annual Plan.

• The CDR Partnership ensures that the views of the community were included in the crime and disorder strategy by consulting with the public to hear their views on criminal and anti-social behaviour. Community representation was invited through membership of both groups. Thurrock Council are introducing Area Assemblies as part of the local
decision-making structure, and these will play a role in monitoring and evaluating the crime strategy.

The CDRP strategy document provides data on recorded crime for 14 separate categories. One of these, 'indecent assault on females' is gender specific, but apart from this, the data presented in the document is not sex disaggregated.

The Crime and Disorder Act 1998 also requires that Local Authorities, working in partnership with the Police, carry out an audit to establish people's perception of crime and disorder in the area. Figures for Thurrock's 1997 Crime and Disorder Audit\textsuperscript{12} showed that 7% of women and 5% of men feared crime during the day. These figures rose, at night, to 41% and 31% respectively.

\begin{quote}
\textbf{Issue:}

\textit{Contributors to the consultation highlighted the view that the crime and disorder structure and strategy is directly informed by the Crime and Disorder Act 1998 and the associated work required by government - this work, and the government's approach, is not gender differentiated. Although there is a focus on violence against women and racially motivated crimes, these are treated as two specific areas where Gender is not mainstreamed.}
\end{quote}

\textbf{Document 2}

\textit{Thurrock Crime and Disorder Reduction Strategy Implementation Plan (March 2002-2005).}

This document explains that the CDRP strategy contains 7 objectives. They include burglary, car crime, anti-social behaviour and criminal damage, fear of crime, violence against women, hate crime, young people, drugs and alcohol. Apart from the objective of addressing violence against women, all the remaining objectives have been allocated performance indicators. None of these performance indicators is sex-disaggregated or gender sensitive.

\textbf{Document 3}

\textit{Thurrock Council Corporate Community Safety Strategy 2002-3}

In this document, Violence Against Women (VAW) is identified as a community safety priority and linked to other local strategies (e.g. anti-social behaviour, hate crime), to the Council's corporate objectives (e.g. Quality of

\textsuperscript{12} The findings of more recent audits were unavailable during the consultation period.
Life for All, Supporting Vulnerable people) and to the responsibilities of local authority departments (e.g. social services, education, neighbourhood and housing).

The VAW strategy is also linked to other initiatives, such as Street Wardens, the Racial Incident Panel, Child Protection and to the building of a new refuge facility. The documentation shows that, while specific targets are set for all corporate objectives (e.g. car crime, hate crime), none have been identified for the violence against women priority.

Local Authority Departments are tasked by the Home Office with evaluating the costs of crime and with collecting monitoring and evaluation data. However, no figures are given in the Corporate Community Safety Strategy for the costs associated with crimes of violence against women.

Document 4

Thurrock Youth Offending Team, Youth Justice Plan 2002/3 - 2004/5

The Youth Offending Team (YOT) is made up of representatives from the police, probation service, social services, health, education, drugs and alcohol misuse and housing officers. The YOT incorporates representatives from a wide range of services so it can respond to the needs of young offenders in a comprehensive way. The Team assesses each person's needs and specific problems, as well as measuring the risk the young offender poses to others and identifies a suitable programme with the intention of preventing further offending.

The Youth Offending Team, via its Youth Justice Plan 2002/3 - 2004/5, collates data on offending and sentencing by age, gender and ethnicity for Thurrock. The data does not have an immediate impact on the planning of the service, but is pooled nationally by the Youth Justice Board, informs national policy and the local direction of the Youth Offending Teams. However, none of the targets for the Youth Offending Team's work are gender specific.

Good Practice Examples from the Thurrock Consultation

Street Wardens
At the time of the consultation, five street wardens had been appointed, with one more waiting to take up post. As a result of a conscious diversity policy, diverse recruitment had been achieved - two women and three men, from White, Asian and Black African ethnic backgrounds.

Thurrock Vulnerable Witness Policy: Installation of Life Line Units.
Essex Police, working in partnership with Thurrock Life Line Community Call Centre, had established a new service aimed at providing support and assistance for people suffering from such incidents as domestic violence, crime and racial harassment. Evaluation of this was on going during the gender-mainstreaming project and the results were awaited.
South Essex Rape and Incest Crisis Centre ‘RESPECT’ Project
An education intervention originally based on a curriculum package for secondary schools. ‘Respect’ has developed through young people’s feedback into a peer education & peer support programme for schools and uniformed youth groups using a ten week intervention including, questionnaires, facilitated discussion and awareness raising. Complex issues such as power and control within relationships, sexual and domestic violence, pregnancy, and drug and alcohol misuse are expressed through drama to a peer group.

This project was cited as having had a significant influence on the development of Thurrock's Violence Against Women strategy.

Data collected during the consultation showed that SERICC receive, on average, 1,900 telephone helpline calls per year from 320 individuals

Thurrock’s Racial Incident Panel
This Panel examines reported incidents, shares best practice, helps ‘break down barriers' and raises the awareness of people from minority ethnic groups. As part of its countywide campaign against hate crime, Essex Police have also been partners in focus panels addressing specific forms of hate crime.

Issue

There are limited data collected locally to help build a gender profile. Home Office criteria direct most data collection, and are important requirements for funding. These criteria also shape the kind of initiatives that can be carried out locally.

Example: Home Office funding was available to install CCTV in areas with high crime/ fear of crime, subject to statistical proof of a need for CCTV.

- Thurrock received funding for its areas of high crime and anti-social behaviour. But the places where women are most affected by crime tend to be private or hidden from public view: especially homes and secluded or badly lit spaces.
- CCTV has now been installed in public areas where, typically, men attack other men.

Some consultees felt the Home Office does not recognise the differences between women’s and men’s fear of crime, and expressed concern about how this impacts on the ability to respond to differences in women’s and men’s needs at the local level.
Local Implementation

Violence Against Women Alliance (VAWA)

In 2001 members of the voluntary and statutory agencies established a Violence Against Women Alliance (VAWA) to replace the Thurrock Domestic Violence Panel. This move was made in line with the UK government agenda on violence against women - which recommended that violence forums should be replaced by violence against women forums by 2002. (The London Domestic Violence Strategy, Greater London Authority November 2001)

The VAWA Joint Investment Plan provides a detailed breakdown for investment requirements and action for policy and practice in relation to the following objectives:

1: To protect women who are experiencing, or who are under the threat of, violence by changing their circumstances so that the violence or threat is removed.

2: To prevent violence against women by challenging and changing attitudes towards women experiencing violence.

3: To prevent violence against women by targeting groups and individuals most at risk of violence.

4: To enable women to rebuild their lives and the lives of their dependants following crisis resolution.

5: To develop systems and attitudes that enables women and children who are in violent situations to survive emotionally and physically.

6: To prevent violence to women by targeting groups and individuals most at risk of perpetrating violence against women.
Issue

Most work to support women victims of violence is currently hidden - making it difficult to measure or evaluate.

The VAWA Joint Investment Plan addresses the needs of women, and offers a gender sensitive approach, but this focus rarely features in other areas of crime and disorder.

The Police have specific targets to cut street crime and car crime. Locally they operate a proactive policing policy, and work with the CPS to increase police responses to incidents of domestic violence. However, there are no government targets for other crimes against women and girls, including rape, forced prostitution, child sexual abuse, trafficking, etc.

Thurrock Drugs Action Team

Thurrock Drugs Action Team is a local multi-agency coordinating group set up under the UK government’s strategy for England, 'Tackling Drugs Together'.

The gender mainstreaming consultation process highlighted awareness within the Thurrock Drugs Action Team of some problems with access to provision and with arrangements for treatment and rehabilitation for women.

The National Drug Treatment Monitoring includes a demographic profile (age, gender and ethnicity) of individuals registered for drug treatment in Thurrock\textsuperscript{13} (see Table 3.) This shows very low numbers of young people and of women seeking / accessing treatment in Thurrock. Consultees suggested that this might be related to methods of recording information about that age/gender group.

\textsuperscript{13} At a rate of 98\% (the average for the Eastern region is 79\%), Thurrock has the highest rate of forms filled in by Agencies and GPs and returned to the National Drug Treatment Monitoring System.
<table>
<thead>
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<th>Gender</th>
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<th>18-24</th>
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<td>16</td>
<td>2</td>
<td>88</td>
</tr>
</tbody>
</table>


Of the 88 people seeking treatment for drug use during this period, less than a quarter were women. Additionally the report reveals that 77 of the 88 individuals were White, 2 of mixed ethnicity (White and Black Caribbean), 2 Irish, 3 'other' and 4 of unknown ethnicity.
GENDER AND MENTAL HEALTH

Mental health services are the second field of policy and service delivery which has been reviewed in the Thurrock Gender Mainstreaming project. This is a field in which there is a substantial body of evidence about the difference in men's and women's experiences of mental health, but where less attention has been given to whether this knowledge is appropriately reflected in policy responses and programmes. One indicator, the *rate per thousand population having a longstanding mental disorder*, shows that the incidence of this condition among Thurrock women (26 per 1,000) is just a little lower than the national average for Great Britain (28 per 1,000) (Source: General Household Survey 2000/01).

How are Women and Men Affected? The National Picture

Exposure to risk

The Psychiatric Morbidity Survey (ONS, 2000) showed that, over a lifetime, experiences of stressful events could be different for men and women.

- Married women and single men are at the greatest risk of mental health problems (Ussher, 1991).
- Men are twice as likely as women to be affected by being sacked or made redundant.
- 10% of women reported violence in the home, compared with 4% of men.
- 5% of women reported experiences of sexual abuse, compared with 2% of men.
- In England and Wales, 54 per 1,000 female patients were recorded as having been treated for anxiety by their GP, compared with 24 per 1,000 male patients (General Practice Research Database, 1998).
- More men, 56% compared with 44% of women, had a mental health episode during 2001/02 (Department of Health, health episode statistics, 2001-02).
Ethnicity and Mental Health

The Health Survey for England - The Health of Ethnic Minority Groups 1999, shows there are differences in the experience of mental ill health for different ethnic groups. Furthermore, the Threshold Women and Mental Health Initiative (1999) 'Black and Minority Ethnic Women and Mental Health' raises questions about how minority ethnic people, and in particular Muslim women, encounter Mental Health services.

- Within the general population, 30% of women reported a mental disorder. Figures disaggregated by ethnicity show a higher than average rate for women of Irish ethnic origin, at 41%, and for Black Caribbean women, at 31%.

- 28% of men reported a mental disorder across the general population. Figures disaggregated by ethnicity show a higher than average rate for Irish men, at 33%, and for Bangladeshi men, at 33%.

Dual Diagnosis

The Department of Health's Mental Health Policy Implementation Guide Dual Diagnosis (2002) reports significant differences between men and women. Women who misuse substances are more likely than other women or men to have experienced sexual, physical and/or emotional abuse as children.

- Substance misuse lifestyles can impact on women's sexual health and establish a pattern of re-victimisation.

- The complexity and severity of need among women with a dual diagnosis requires the development of tailored services that are both attractive to women and relevant to their needs. More specifically, services must be informed and sensitive to the needs of childhood sexual abuse survivors.

Fatal and Non-Fatal Suicide and Self-Harm

According to figures based on the Survey of Psychiatric Morbidity among Adults in GB (ONS 2000) and evidence from the Mental Health Foundation (1997):

- Nearly three times more men than women kill themselves every year (of the 6,500 suicides and undetermined deaths in 1995, 4,835 (74%) were men and 1,665 (26%) were women. In young people aged 15-24 this difference is even greater. One possible reason for this is that men use more 'successful' or violent methods of suicide, whereas women more often use self-poisoning with drugs, where the effects can be unpredictable. The non-fatal outcome of suicide for women is perhaps reflected in the figures, which show a higher occurrence of self-harm in women than is the case for men (see below).
• Men in unskilled occupations are four times more likely to commit suicide than are those in professional work.

• Suicide associated with marital breakdown is different for men and women, particularly young Asian women.

• Among women living in England, those born in India and East Africa have a 40% higher suicide rate than those born in England and Wales, indicating a need to investigate the suicide rates and causes among people of minority ethnic communities. This is made difficult by the fact that ethnic origin is not recorded routinely at registration of death.

• Women are four times more likely than men to commit non-fatal deliberate self-harm.

• Single respondents, particularly single women, were the most likely to have deliberately harmed themselves, followed by separated and divorced women.

• Women who were unemployed were more likely than other women to have deliberately harmed themselves at some time (9% compared with 2% of those in full time employment).

In sum, experiences of mental health and of mental health services differ for men and women. It is also now well established that women and men from Black and minority ethnic groups, and those who are or have been asylum seekers and/or from 'non-Christian' faiths, experience mental health and services differently from those within the majority group.

Developments in National Policy Affecting Women and Men

The National Service Framework for Mental Health (Department of Health, September 2001) aims to raise standards in health and social care services. The Framework sets seven standards for Mental Health, and gender is a consideration within some aspects of the framework. Standards 1 and 5 contain strategies orientated to gender:

• Within Standard 1, regarding health promotion, there is recognition of the different rates with which men and women experience depression; and that sexual abuse and domestic violence lead to increased rates of mental health problems. However, gender is not considered within strategies to develop and evaluate health promotion services.

• Standard 5 proposes strategies to develop effective services for people with severe mental illness, including a timely access to appropriate hospital beds or places. The rationale and service model do not contain a gendered perspective, but it is intended that the performance assessment for this standard will include assessment of access to single sex accommodation. This measure will be monitored through the NHS Charter.
• Standard 7 aims to ensure that health and social services play their full part in the achievement of the target in *Saving lives: Our Healthier Nation* to reduce the suicide rate by at least one fifth by 2010.

• Within an aligned theme, relating to *Workforce Planning Education and Training*, there is a commitment to clarify and endorse 'key skills and competences required via mental health services which are non-discriminatory and sensitive to the needs of all service users and carers regardless of age, gender, race, culture, disability and sexual orientation'.

The Department of Health *Implementation Guide for Acute Services* advises on women-only admission wards, stresses the need to ensure the physical and psychological safety of women, and points to the development of day care facilities for women in the community.

• At present in Thurrock most women-only services are provided by the voluntary sector; the new strategy should see patients being offered women-only services within the statutory sector as well as the voluntary sector.

The consultation document, *Women's Mental Health: Into the Mainstream Consultation, Strategic Development of Mental Health Care for Women* (Department of Health, 2002), outlines the way forward to ensure that all aspects of mental health care - service planning, organisation, delivery, research and evaluation - are sensitive to gender and specifically to the needs of women.

• It is recognised that women are three times more likely to have experienced violence and abuse than men, and that the majority of abusers are men. 'Violence and abuse' refers to child sexual abuse, domestic violence, sexual violence and rape.

• The document describes 'gender sensitive' and 'gender specific' approaches to mental health services, and outlines how service planning, organisation, delivery, research and evaluation can reflect these approaches.

The Wider Policy Context

• A new *Mental Health Bill* is planned, which will update the legislative framework.

• The *Social Exclusion Unit's* work over the coming year will be to tackle joblessness in deprived areas and help adults with mental health problems overcome barriers to opportunity. However there is no specific emphasis on gender evident within the documents reporting plans of this initiative.
• The Supporting People programme gives local authorities greater flexibility to support vulnerable people, including people with mental health problems, to retain tenancies and stay in their own homes. This recognises the needs of women with experiences of domestic and sexual violence.

What's Happening in Thurrock?

Document 1

The Essex Health Authority Franchise Plan 2002/03 - 2004/05 is the planning framework which confirms the major priority areas for Essex, including mental health. A weakness of the data within this Plan is that it is not disaggregated by gender.

**Issue:**

Basildon Hospital: Local data records mental health admissions and length of stay, and diagnosis (including dual diagnosis and self-harm). However, data is not monitored or analysed by gender.

Document 2

The Thurrock Local Health Plan (LHP), the Health Improvement and Modernisation Plan 2002/03-2004/05, contains two aims relating to mental health.

**Aim 1:** To promote positive mental health for children, adolescents and their families. This aim links to 'Quality Protects' and Essex's Promoting Positive Mental Health. The objectives do not include a gendered perspective. A Joint Investment Plan (JIP) has been produced, and implementation is to be funded within existing resources.

**Aim 2:** To improve services for people with mental health problems.

• This aim links to the National Service Framework for mental health, and has objectives within the JIP/Thurrock Delivery Plan. It will deliver against the 7 NSF standards.
• The Plan embeds the principle that each objective must include issues and problems relating to: Gender, women and mental health; Ethnic Minority Issues; and Age. It will be resourced through existing South Essex Heath Authority (SEHA)/SSC core funding, plus: SSD: Mental Health Grant, and SEHA: Modernisation Funds.
• The draft JIP (August 2002) outlined plans for women-only services.
• Standards to improve primary mental health care. Actions include the introduction of a pilot generic mental health service, and support and funding to train volunteers to work with vulnerable Asian people. This will be funded by the Primary Care Trust (PCT) recurring Development Fund Grant.

Local Implementation

In Primary Health Care, there is evidence of consideration of gender in service provision, through the Community Health Trust's development of a 'mothers group', which provides support for women with severe mental illness who have parental responsibilities. This is particularly welcome given recent figures, which show suicide to be the leading cause of deaths among new mothers (Royal College of Psychiatrists press release - 27 June 2002).

The user involvement network has been charged with creating five user forums in South Essex, one of which is a women's forum. Representatives from the forums are part of the wider South Essex forum, where representatives from the Trust are also members. The forum aims to promote women's mental health through the forum and to monitor how the Trust implements it.

South Essex Rape and Incest Crisis Centre (SERICC), among other aims and objectives, offers confidential, independent sexual violence counselling, support and advocacy. This is a women only service used by women and girls aged 13 years and older which aims to meet the needs of women by providing: a) a women only service to those who want it; b) outreach services for women; c) child care; and d) an out of hours service to ensure women who are in employment can access the service. A gendered perspective is central to this service provision, and to its aims and objectives, and is written into SERICC's constitution. SERICC also offers advice and information to those men who are the 'significant others' of, and are in a supporting role to, women who have experienced sexual violence and abuse, and also supports men by signposting the services provided by male survivor organisations. SERICC also offers information and support to callers who are supporting a partner, friend, family member or work colleague who has experienced sexual violence. SERICC has a monitoring system and evaluation process in place to ensure the experiences and views of their users are considered within future provisions and developments.

SERICC was commissioned in 2001 to carry out a survey focused on gender segregation in an acute admissions ward. A number of points emerging from this are now guiding the development of a gender perspective within Mental Health provision in South Essex Partnership NHS Trust. Issues include:

- women only wards sex-differentiated wards, and separate washing areas
- a gender balance of staff, with, in women-only areas, female staff
- sexual harassment of female patients and of female staff
- gender awareness training
The consultation process regarding gender mainstreaming showed that discussions are ongoing about the development of gender sensitive provision, and about gender specific and mixed provision in Thurrock.

For example:

- At a Service Planning Day (December, 2002) a workshop on the needs of women in hospital took place. There was discussion about accommodation and facilities for women, and questions were raised about whether single rooms with en suite facilities would be preferable to a women only admission ward. At the time of preparing this report, the views of female patients at Basildon Hospital were being surveyed by the South Essex NHS Partnership Trust.

- Evidence from Thurrock MIND is showing that some women patients do like the opportunity to mix with men. There is therefore an issue about providing accommodation which meets all women's needs but does not limit women's choices.

In summary, the JIP aims to respond to objectives outlined in the Mental Health National Service Framework, the Women's Mental Health Strategy Consultation document and to the recommendations made in the report of research about gender and severe health provision commissioned by SERICC.

There will be an opportunity for local engagement with the Department of Health Consultation 'Women and Mental Health into the Mainstream, which was launched in September 2003.
Policies on Regeneration and Neighbourhood Renewal seek to tackle poverty and social exclusion, recognising that these problems tend to be concentrated in specific neighbourhoods and localities. They also work to promote the improvement of local infrastructure, including housing, transport, services, and to assist people living in deprived or disadvantaged neighbourhoods or communities in accessing education, training and employment. Here we present some gender-disaggregated statistics on poverty and social exclusion.

How are Women and Men Affected? The National Picture

Recent research (Bradshaw, Finch, Kemp, Mayhew & Williams *Gender and Poverty in Britain* Equal Opportunities Commission, 2003) has shown that after housing costs, women are more likely than men to be poor when they are:

- single pensioners
- in households with an unemployed adult
- Pakistani/Bangladeshi
- tenants
- the head of household is 19 or under.

<table>
<thead>
<tr>
<th>Table 4</th>
<th>Poverty Rates by Gender</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Men</td>
</tr>
<tr>
<td>Before housing costs</td>
<td>22</td>
</tr>
<tr>
<td>After housing costs</td>
<td>16</td>
</tr>
</tbody>
</table>

*Source: Family Resources Survey 1999/00, Department for Work and Pensions*

Women and men's experiences of social exclusion are also somewhat different, as shown in Table 5, which reports a recent survey of Poverty and Social Exclusion.
### Table 5  Social Exclusion of Men and Women

<table>
<thead>
<tr>
<th>Type of social exclusion</th>
<th>MEN</th>
<th>WOMEN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Labour market (individual)</td>
<td>12.9</td>
<td>21.3</td>
</tr>
<tr>
<td>Service</td>
<td>2.6</td>
<td>5.6</td>
</tr>
<tr>
<td>Social activity</td>
<td>17.4</td>
<td>22.9</td>
</tr>
<tr>
<td>No daily contact with family or friends</td>
<td>15.0</td>
<td>9.6</td>
</tr>
<tr>
<td>Social support</td>
<td>2.8</td>
<td>3.3</td>
</tr>
<tr>
<td>Disengaged from all activities</td>
<td>12.5</td>
<td>11.1</td>
</tr>
<tr>
<td>Restricted because feels unsafe</td>
<td>16.5</td>
<td>42.1</td>
</tr>
</tbody>
</table>

Source: Poverty and Social Exclusion Survey, Gordon et al 2000, cited in Bradshaw et al 2003 (See footnote 14)

The same research also explored what items, perceived by most people to be necessities, could not be afforded by some men and women (Table 6).

### Table 6  Lack of perceived necessities because they cannot be afforded: selected items from the PSE Survey

<table>
<thead>
<tr>
<th>ITEM</th>
<th>% WHO ARE LACKING ITEM</th>
</tr>
</thead>
<tbody>
<tr>
<td>All medicines prescribed by the doctor</td>
<td>0.7</td>
</tr>
<tr>
<td>Fresh fruit and vegetables daily</td>
<td>4.6</td>
</tr>
<tr>
<td>Heating to warm living areas</td>
<td>2.8</td>
</tr>
<tr>
<td>Two meals a day</td>
<td>3.2</td>
</tr>
<tr>
<td>A warm waterproof coat</td>
<td>2.4</td>
</tr>
<tr>
<td>Visits to friends or family</td>
<td>1.8</td>
</tr>
<tr>
<td>Insurance of contents of dwelling</td>
<td>7.1</td>
</tr>
<tr>
<td>A washing machine</td>
<td>0.5</td>
</tr>
<tr>
<td>Appropriate clothes for a job interview</td>
<td>3.0</td>
</tr>
<tr>
<td>Regular savings for rainy days or retirement</td>
<td>21.0</td>
</tr>
<tr>
<td>Small amount of money to spend on self weekly</td>
<td>9.2</td>
</tr>
<tr>
<td>Presents for friends or family once a year</td>
<td>2.8</td>
</tr>
<tr>
<td>Holiday away from home for one week, yearly</td>
<td>15.6</td>
</tr>
<tr>
<td>Replace any worn out furniture</td>
<td>18.0</td>
</tr>
<tr>
<td>A telephone</td>
<td>0.7</td>
</tr>
</tbody>
</table>

Source: Poverty and Social Exclusion survey, cited in Bradshaw et al 2003

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14 The PSE survey operationalises the notion of social exclusion and explores variations in social exclusion by gender. Representation of social exclusion was on six dimensions (see below):

**Labour market exclusion** - those of working age and not students, not in employment.
**Service exclusion** - lacks access to two or more basic services because they cannot afford them.
**Social activity exclusion** - excluded from 3 or more social activities because they cannot afford them.
**Social isolation** - including no daily contact with family or friends and lacks social support in four or more areas.
**Disengaged** - no active membership of voluntary associations and or political engagement.
**Restricted** – feels unsafe walking alone after dark.
Historically, regeneration in the UK has been characterised by the absence of a gender perspective

- Since the 1960s there has been a ‘lack of explicit attention to gender issues’ in the area of regeneration (Appleton 1999).
- From the 1980s, some Labour Councils began to pursue an agenda for greater participatory democracy, and began to focus regeneration initiatives at a community level.
- The recent emphasis on efficiency through customer-led service delivery has reinforced this preoccupation with the regeneration of communities.
- Nevertheless, despite evidence that urban regeneration programmes can significantly impact on women’s lives, tackling poverty, poor housing, health and crime - ‘the community’ has not been seen as gendered.

Single Regeneration Budget (SRB)

- In 1994, SRB established regeneration partnerships to harness the talent, resources and experience of local businesses, the voluntary sector and the local community working together.
- SRB’s priority was to enhance the quality of life of people living in deprived areas, and to target disadvantaged groups within them.
- Riseborough (1997) found that SRB was mostly 'gender blind', with no mention of women in the SRB funding guidelines. Men and women gained unequal benefits from regeneration projects and were unequally represented in the local management process (Braithwaite 1998). Women's representation in SRB management structures was mainly 'token' (Appleton 1999) and their input into project management was concentrated in areas such as training, community development and cultural activities (Jour-Schroeder 1998).

Neighbourhood Renewal Strategy

- Although New Labour introduced its national Neighbourhood Renewal Strategy in January 2001, at a strategic level there is still ignorance about women’s role in the social and cultural life of communities, and of the support these activities provide for economic actors in the community.
- This is underlined in documents relating to the Neighbourhood Renewal Strategy. There is no reference to gender or to women in the 2002 national conference report "Managing Neighbourhood Change" (2003), and only scant reference to women's concerns in the Neighbourhood Renewal Unit's Annual Review 2001/2 "Places, People, Prospects" (2002) and in the key policy document, "A New Commitment to Neighbourhood Renewal: A National Strategy Action Plan."
• The Neighbourhood Renewal Unit's list of national deprivation-related 'floor targets' makes no reference to the differing needs and problems of women and men in deprived communities.

**European Social Policy**

• There is now substantial expertise about gender developed by EU member states. European initiatives represent a sophisticated level of gender analysis, gender-aware practice and gendered tools, and have been translated into the commitment to 'mainstreaming equality'.

• Mainstreaming explicitly assigns gender equality as the responsibility of national policy makers, recommends a gender perspective in all policy making, and stresses that previous legislative and positive action approaches are complementary to a mainstreaming strategy and should be used in conjunction with a gender perspective.

**Developments in National Policy Affecting Women and Men**

The government's **Neighbourhood Renewal Strategy** aims to tackle five key issues:

• poor job prospects
• high crime levels
• educational under-achievement
• poor health
• housing and the physical environment

It includes the following elements:

- Neighbourhood Renewal Fund
- Neighbourhood Management Programme
- Neighbourhood Wardens
- New Deal for Communities (none of these are in Thurrock)

This provides funding and a national context for developments, and complements a wide range of regional and local initiatives, including the specific strategies and policies pursued by local authorities. During the consultation, some consultees commented on the very limited references to gender in the documentation and guidance issued by central government re Neighbourhood Renewal issues.
In February 2003, the ODPM published **Sustainable Communities: building for the future**. This set out how the Government’s intention to achieve a 'step change to deliver successful, thriving and inclusive communities' would be achieved. Key elements include:

- £22bn to improve housing and communities including over £5bn to regenerate deprived areas.
- £5bn for more affordable homes.
- £446m for Thames Gateway with new development agencies.
- £2.8bn to bring council homes up to a decent standard.
- £500m to tackle low demand and abandonment.
- £260m to tackle homelessness.
- Guarantee to protect green belt.
- £201m to improve local environment - parks and public spaces.

Among the key requirements of Sustainable Communities are:

- A flourishing local economy to provide jobs and wealth.
- Strong leadership to respond positively to change.
- Effective engagement and participation by local people, groups and businesses, and an active voluntary and community sector.
- A safe and healthy local environment.
- Good public transport and other transport infrastructure.
- A well-integrated mix of decent homes of different types and tenures to support a range of household sizes, ages and incomes.
- Good quality local public services, including education and training opportunities, health care and community facilities, especially for leisure.
- A diverse, vibrant and creative local culture, encouraging pride in the community and cohesion within it.
What's Happening in Thurrock?

Thurrock Council reorganised in late 2002, establishing a number of new Directorates. These include the *Regeneration and Support Services Directorate*, and the *Community Services Directorate*, which have a key role in the regeneration and neighbourhood renewal field. *Education* and *Housing and Social Care* also retain important responsibilities in this sphere.

These changes have brought a new commitment to equality issues, with (for example) consultees within the Community Services explaining that, 'all aspects of the diversity agenda - including gender mainstreaming' are really important'. The *Statement of Intent for the Delivery of Community Services* (Dec 2002) notes the need for a 'different and more connected way of working', with commitment to 'sustained community development' crucial in addressing the social exclusion apparent in some Thurrock communities. Community Services' commitment to leading on the Local Governance Agenda includes 'leading on equality of opportunity for all members of our communities', as well as 'investing in our staff'. A key commitment is to

"Develop and mainstream diversity within the directorate by developing a strategy to deliver all aspects of the Diversity agenda including Gender, and at least level two of the Equal Opportunities Standard by September 2003."

The recent background to this reorganisation of service delivery and to new policy development in this field in Thurrock Council is recorded in a number of key documents, as discussed below.

**Document 1**

In November 2000 Thurrock Council received a Cabinet Report entitled *"Taking Regeneration Forward in Thurrock"*. This focused on

- Drivers to Business Growth
- Labour Market and Skill Requirements
- Niche IT Sectors
- Supply and Demand Locational Issues
- Higher Education Opportunities

In retrospect, this is a 'gender blind' document, which does not identify any difference in women and men's needs, or explore the potential differential impact on women and men of any of the approaches proposed. The only acknowledgement of gender issues comes in an appendix to the Report, which notes that 'the large majority (81%) of discouraged workers' are

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15 Unemployed, but not claiming benefits and or actively looking for work.
female; often people who would like to work again after caring for families'. It was also noted that there was a generally low level of qualification in the borough, with men and the young tending to be the more qualified groups.

Document 2

In December 2000 the **Local Agenda 21 Strategy** was submitted to Thurrock Council's Cabinet for approval. This focused on sustainable development issues, in line with national government requirements following the 1992 UN Summit on Environment and Development in Rio. The detailed proposals within the strategy do not appear to have been subjected to gender mainstreaming, and there is no evidence in the document of identification of men and women's distinct needs, or engagement as beneficiaries/consultees.

Document 3

In 2000/1 Thurrock Council's Neighbourhood Services agreed a **Community Strategy** focused on achieving continuous improvement in services and in the quality of life of the Thurrock Community. This included as a core value 'ensuring fairness and equal opportunity'. Within Neighbourhood and Housing (Direct Work Services) there was also a commitment to an Equal Opportunity Plan in 2000/1, which focused strongly on equality in relation to disability and ethnicity. As part of a commitment to ensure equal access to training for all staff, there has been active encouragement of women staff to access training and development: for example, 19 women achieved NVQ 1 and NVQ2 training is being arranged for this group. Work has also been undertaken within the Direct Work Services Depot to provide facilities to accommodate women and men, and to encourage young women to consider entering the construction industry.

Document 4

Thurrock's **Local Transport Plan** (August 2001) was supplemented with its

- Annual Progress Report
- Road Safety Plan
- Strategy to Reduce Road Casualties
- Parking Plan
- Local Walking Strategy

These documents emphasise the importance of partnership working and acknowledge the role of transport planning in combating social exclusion, but there is little evidence of a gendered analysis of key statistics within them, and few targets are set which recognise men's and women's different transport behaviour and needs. However, there is reference to personal safety issues, and a pledge to respond to the concerns and experiences of specific groups, including women.
Document 5

The **Thurrock Council Performance Plan** for 2002/3 (produced within the Best Value framework) emphasised recent improvements to services, which included:

- introducing 'area governance'
- leading the development of the Thurrock Local Strategic Partnership
- introducing scrutiny panels
- a new performance monitoring system.

Areas for improvement identified in this plan included:

- developing a Race Equality Scheme
- Refreshing the Citizens' Panel

**Local Implementation**

Thurrock’s Comprehensive **Performance Assessment** was received early in 2003. The Council has now made a commitment to seek to become an 'excellent council' when next assessed. To this end it has identified a range of improvements to services, user involvement and satisfaction, and to corporate and business processes. Underpinning these, the Council plans to promote more sharing of best practice, to become a healthy council and an employer of choice, and to 'mainstream gender and diversity issues'.

In developing the **Sustainable Communities** approach, the ODPM and Thurrock Council are currently (spring 2003) considering the establishment of a **UDC** (Urban Development Corporation) in Thurrock. This development would recognise Thurrock’s 'potential to become an important centre for trade and enterprise', through 'empowering its diverse communities to provide an exciting, vibrant and sustainable place to live work and visit'.

Thurrock Council is a member of the Thames Gateway London Partnership (TGLP), and "**Go East**", the Economic Strategy of the TGLP will form an important part of the Sustainable Communities approach. This key document contains only one reference to women and does not offer any gendered analysis of key issues or any gender-sensitive solutions to the problems identified.

The **Thames Gateway South Essex** states that its overriding aim is 'to provide an improved quality of life for all the people of South Essex and to allow the area to participate, via the Thames Gateway initiative, in the prosperity of the wider South East and East of England'.
Its key document, "A Vision for the future" focuses on skills, learning and employment, transport and infrastructure, investment and development, environment, health and community, and marketing and communications.

Among its key aims are to break down the barriers to opportunity caused by inequality, to promote urban and social renaissance in South Essex through intelligent and targeted investment, and investment in local communities.

"Shaping Thurrock" - the LSP (Local Strategic Partnership)

- Thurrock's Local Strategic Partnership is aiming to be accountable to local people and stakeholders - and makes provision for representation, consultation, reporting back and the publication of key performance indicators.

- It is also developing a new version of the 'Citizen's Panel', with the intention that this becomes 'a consultation mechanism representative of the Borough in terms of age, sex, ethnicity, disability and geographical areas'.

- "Shaping Thurrock" states that it wishes to ensure that its membership and work 'adhere to diversity, sustainability and social inclusion values'.

Its vision is to:

- develop a 20-year borough wide Community strategy
- develop a neighbourhood strategy to tackle deprivation
- develop a public service agreement focusing on young people's needs
- achieve 'joined up' services
Issues for Thurrock in neighbourhood renewal and regeneration: evidence from consultees

**Issue 1**
In the fields of Area Governance and Community Development, some difficulty has been experienced in drawing women into leadership roles within Community Forums. Thurrock Council is setting up a training and development programme to promote women's engagement and leadership.

**Issue 2**
Consultees pointed out that Thurrock Council has recognised the importance of ensuring that gender sensitivity is mainstreamed into the full range of its services. It is accepted that there is still some work to do in training a mainly male workforce about these issues.

**Issue 3**
Thurrock Council's Leisure Services 'think of themselves as inclusive', and targeting of young people with special needs and young people 'at risk' has been adopted, although there is no targeting of men or women. In practice this tends to involve more provision for boys/young men than for girls/young women (ratio of about 2:1).

**Issue 4**
Leisure Services acknowledge that while sex-disaggregated data is collected, little has been done with it. The effective use of data needs to be a priority in future planning.

**Issue 5**
Consultees were not aware of any sex-disaggregated data used to underpin regeneration planning, although national funding streams have supported developments such as Sure Start and Community Mums, which have a major impact on women in the communities affected.

**Issue 6**
The male dominance of senior and decision-making roles in Thurrock, as elsewhere, especially in the fields of regeneration and planning, was thought to be a barrier to gender mainstreaming. In this context the commitment to mainstream gender and diversity, in response to the CPA (Thurrock Council's Comprehensive Performance Assessment) is particularly important.
Good Practice Examples:

Gender-Sensitivity in Regeneration and Neighbourhood Renewal in Thurrock

The consultation process identified the following examples:

- Work at Oak Wood (South Ockenden - Thames Chase Urban Fringe Forest) has been undertaken to improve visibility into the forest from the road to enhance safety for women users.

- Work on home to school travel and the national cycle network is likely to have particularly strong impacts on women (as the majority group taking children to school, and as a group often without individual access to a car).

- In Property and Procurement, the service plan identifies diversity issues for women and men.

- Regeneration and Support Services (R&SS) is a new Directorate established in Nov 2002. Consultees were aware that historically Thurrock has not been good at gender mainstreaming and diversity policy. It is now intended that equal opportunity issues should be fully integrated into the new comprehensive training and development programme for staff within this Directorate.

- Work has been done on the wording of employment contracts, and in supporting options for more flexible and varied working hours. This has enabled many women to negotiate individual working hours. The R&SS Directorate has responded to a problem about a lack of women managers by setting up 'bubble groups' - through which women become project managers, and are enabled to lead teams and thus gain in terms of career development.
5. **Action Plans for Achieving Gender Mainstreaming in Thurrock**

The following pages include the three Action Plans developed in consultation with Thurrock's statutory and voluntary organisations. These were issued as drafts in May 2003, with some consultees and participants identifying roles they were prepared to play in taking action forward.

Assessment of the resource implications of these plans, and of funding streams available to support them was outside the scope of the present gender-mainstreaming project. It is crucial that high-level discussions about, and commitments by named lead officers to, the actions identified in the plans now take place, and that these are made public, with the resources necessary for their achievement acknowledged and secured.
GENDER MAINSTREAMING IN THURROCK

CRIME AND DISORDER

*ACTION PLAN*

This is a draft action plan developed during an Action Planning Workshop held 9th May 2003. It was convened as part of a SERICC/Home Office Project and facilitated by a team from Sheffield Hallam University.
Gender Mainstreaming in Crime and Disorder: Priority Areas for Action in Thurrock

Three key areas were identified during the action-planning workshop as the focus of the 2003 Action Plan. These are:

1. Data Collection, Sex-Disaggregated Analysis and Interpretation
2. Developing Inclusion in Community Forums
3. Embedding Gender in Business, Service Plans and Key Strategies

The following pages outline the actions needed, and indicate how, when and by whom action should be taken. Detailed consideration of outcomes and resource implications was beyond the remit of the Action Planning workshop, but will need to be considered by the key actors concerned. It will be helpful if each Priority area for action has a lead agency or agencies, and has a named individual or individuals, who understand the importance of the action, planned and will work to achieve a wide degree of commitment to its achievement.

The Action Planning Workshop was attended by:

Graham Lettington  Thurrock Drug Action Team (DAT) Co-ordinator
Gillian Hirst  Assistant Chief Officer, Essex Probation Area
Neville Baldwin  Director of Community Services, Thurrock Borough Council (TBC)
Lee Eggleston  Thurrock Women's Community Worker, South Essex Rape and Incest Crisis Centre (SERICC)
Sheila Coates  Manager, South Essex Rape and Incest Crisis Centre (SERICC)
Linda Daysh  Community Safety Co-ordinator TBC
Alan Dawkes  Head of Community TBC
Mike Rawlings  Citizens Advice Bureau
Vi Wagner  Chief Executive Thurrock Primary Care Trust
Yash Gupta  President, Thurrock Asian Association

The workshop was facilitated by Professor Sue Yeandle, Christine Booth and Dr Diane Burns of Sheffield Hallam University
<table>
<thead>
<tr>
<th>Priority Area for Action 1</th>
<th>Data Collection, Analysis and Interpretation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Description</strong></td>
<td>Crime and disorder data currently collected in Thurrock leave some crimes hidden. Data which are collected need to be gender disaggregated, so that services can undertake meaningful interpretation and respond appropriately. The analysis of drug use data is a specific area, which could be more sensitive to gender.</td>
</tr>
</tbody>
</table>
| **Lead Agency/Individual**| (a) CDiT Vaughan Hartridge  
(b) Community Services, Neville Baldwin  
(c) DAT, Graham Lettington |
| **Implementation**        | (a) Map the crime and disorder data currently collected in Thurrock by services, providers, partnerships, including both statutory and voluntary sector organisations, and check it is gender disaggregated.  
(b) Amend the Quality of Life Survey, so data can be gathered about men and women's perceptions of crime/victimisation and 'hidden crime', and about the experiences of the victims of crime.  
(c) Gender the analysis of data gathered by the Thurrock Drugs Action Team (DAT) |
| **Timescale**             | (a) Long term  
(b) Medium term: Now to September. The next Quality of Life Survey is due in September 2003  
(c) Begin now and ongoing. |
<p>| <strong>Resource Implications</strong> | to be assessed |
| <strong>Outcomes</strong>              | Increase sex disaggregated data collection, analysis and interpretation about crime and disorder, including 'hidden' crime in Thurrock. |</p>
<table>
<thead>
<tr>
<th>Priority Area for Action 2</th>
<th>Developing Inclusion in Community Forums</th>
</tr>
</thead>
<tbody>
<tr>
<td>Description</td>
<td>Strengthen the structures within the Community Forums to improve the participation of women and young women and other under-represented groups. Develop an inclusive training programme for women and men in Community Forums, Chairs and Officers.</td>
</tr>
<tr>
<td>Lead Agency/Individual</td>
<td>Community Services/ Neville Baldwin and Alan Dawkes.</td>
</tr>
<tr>
<td>Implementation</td>
<td>Develop the ACE programme and build in Gender Mainstreaming. Linked action is planned for regeneration and neighbourhood renewal, where the voluntary sector (SERICC, Sure Start Tilbury and South Ockenden Community Forum) are leading on developing and piloting a Community Leadership Programme in West Area.</td>
</tr>
<tr>
<td>Timescale</td>
<td>The current training programme is already advertised. The next programme will start in Autumn 2003 and should feature the new training.</td>
</tr>
<tr>
<td>Resource Implications</td>
<td>to be assessed</td>
</tr>
<tr>
<td>Outcomes</td>
<td>to be determined</td>
</tr>
<tr>
<td>Priority Area for Action 3</td>
<td>Opportunities and Platforms</td>
</tr>
<tr>
<td>---------------------------</td>
<td>-----------------------------</td>
</tr>
<tr>
<td><strong>Description</strong></td>
<td>Not all plans and strategies have a gender and diversity approach, and the extent to which these plans and strategies have met their objectives to ensure diversity is not clear. Service Directors, Managers and Partnerships will take a lead in embedding gender and diversity in Business Plans, Service Plans and Key Strategies.</td>
</tr>
</tbody>
</table>
| **Lead Agency**           | (a) Crime Reduction Partnership  
(b) Primary Care Trust/ Vi Wagner  
(c) Citizens Advice Bureau/Mike Rawlings  
(d) All officers at TBC |
| **Implementation**        | (a) Undertake gender proofing of crime and disorder strategy  
(b) Review performance of Service Plans against Diversity Objectives  
(c) Develop sex-disaggregated data collection and strengthen the gender sensitive approach within the CAB  
(d) Create a new template for Council Reports on Gender and Diversity |
| **Timescale**             | (a) May - September review objectives  
(b) Autumn: Review performance re gender and diversity before the preparation of the next round of Service Plans  
(c) Mike Rawlings will make a start by posing a resolution for gender mainstreaming at the next CAB National conference.  
(d) To begin Immediately |
| **Resource Implications** | to be assessed |
| **Outcomes**              | to be determined |
GENDER MAINSTREAMING IN THURROCK

MENTAL HEALTH

DRAFT ACTION PLAN

This is a draft action plan developed during an Action Planning Workshop held 10th April 2003 and convened as part of a SERICCC/Home Office Project and facilitated by a team from Sheffield Hallam University.
Gender Mainstreaming in Mental Health: **Priority Areas for Action in Thurrock**

Five key areas were identified during the action-planning workshop as the focus of the 2003 Action Plan. These are:

1. Dialogue with Mental Health Professionals  
2. Progressing the Joint Investment Plan  
3. Gendering Key Mental Health Targets  
4. Primary Care in Mental Health  
5. Information FACTSHEET

The following pages outline the actions needed, and indicate how, when and by whom action should be taken. Detailed consideration of outcomes and resource implications was beyond the remit of the Action Planning workshop, but will need to be considered by the key actors concerned. It will be helpful if each Priority area for action has a lead, one or more support agencies, and a 'champion', who understands the importance of the action planned and will work to achieve a wide degree of commitment to its achievement.

The Action Planning Workshop was attended by:

Cheryl Ashton-Cox    C.M.H.T. Thurrock  
Mike Chapman         Thurrock Council/SE Partnership NHS Trust  
Sheila Coates        South Essex Rape & Incest Crisis Centre (SERICC)  
James Fraser         Partnership NHS Trust  
Linda Kirton         Thurrock MIND  
Tina Martin          Community Mental Health Team (C.M.H.T) Thurrock  
Liz Mayne            Mental Health Services Branch, Dept of Health  
Luxmy Ramanathan     Community Mental Health Team (C.M.H.T.) Thurrock  
Mike Rawlings        Thurrock Citizens Advice Bureau  
Jackie Bright        Rethink

It was facilitated by Professor Sue Yeandle, Christine Booth and Dr Diane Burns of Sheffield Hallam University

Following the national consultation to develop a Women's Mental Health Strategy (Women's Mental Health: Into the Mainstream, Department of Health 2002), a final document giving clear direction from the Department of Health on how services and partnerships should be providing services to women is to be published in June 2003. The strategy will provide an important context in which to consider each of the five priority areas for action on gender mainstreaming in mental health services in Thurrock.
<table>
<thead>
<tr>
<th>Priority Area for Action 1</th>
<th>Dialogue with Mental Health Professionals</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Description</strong></td>
<td>A forum for effective dialogue among practitioners. Begin with a focus on practitioners' experiences of dealing with Violence and Abuse - this underlies all areas of MH, and is pivotal to women's mental health. The action needs professionals from both statutory and voluntary agencies to translate the issues arising from practice and enter into effective dialogue with MH managers and policy developers.</td>
</tr>
<tr>
<td><strong>Lead Agency</strong></td>
<td>SE NHS Partnership Trust</td>
</tr>
<tr>
<td><strong>Supporting Agency</strong></td>
<td>Violence Against Women Alliance</td>
</tr>
<tr>
<td><strong>Champion</strong></td>
<td>To be determined</td>
</tr>
<tr>
<td><strong>Implementation</strong></td>
<td>Establish a practitioner-led multi-agency Dialogue/Exchange to focus on Women and Violence and Abuse as an initial priority area. Sheila Coates and James Fraser will make a start by identifying the Mental Health representatives on PCT, and will link Child and Adolescent /Adult services into the PCT (as they are not currently represented there).</td>
</tr>
<tr>
<td><strong>Timescale</strong></td>
<td>The VAWA has made a start on this very recently. The work will be ongoing and long term.</td>
</tr>
<tr>
<td><strong>Resource Implications</strong></td>
<td>to be assessed</td>
</tr>
<tr>
<td><strong>Outcomes</strong></td>
<td>to be clarified</td>
</tr>
<tr>
<td>Priority Area for Action 2</td>
<td>Progressing the Joint Investment Plans (JIPs): VAW Joint Investment Plan; Mental Health Joint Investment Plan</td>
</tr>
<tr>
<td>---------------------------</td>
<td>-----------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td><strong>Description</strong></td>
<td>Gaps in service and provision are already identified in the JIPs, but decisions have yet to be made about what to do to address these gaps. This action will stimulate gender-sensitive planning of the response to the JIP analysis.</td>
</tr>
</tbody>
</table>
| **Lead Agency/Individual**| Thurrock Partnership and Commissioning Forum (TPCF)  
Mike Chapman and Philip Howe  
Gender Mainstreaming is a priority area for the TPCF, which also has responsibility for targeted services. |
<p>| <strong>Supporting Agency/Individual</strong> | James Fraser will act as a link with the VAWA JIP Development Group |
| <strong>Implementation</strong>         | Action Planning on how gaps will be met and prioritised, through a series of meetings with the VAWA JIP development group. Focus on communicating with practitioners on decisions and progress made. |
| <strong>Resource Implications</strong>  | to assess |
| <strong>Outcomes</strong>               | Clarity about priority actions flowing from the JIP and how these are to be achieved. |</p>
<table>
<thead>
<tr>
<th>Priority Area for Action 3</th>
<th>Gendering Key Targets</th>
</tr>
</thead>
<tbody>
<tr>
<td>Description</td>
<td>At the local level there are key targets set for a) Assertive Outreach, b) Crisis Intervention: Home Treatment, and c) Early Intervention in Psychosis. Although new guidance to be received from government in the near future relating to these services should be sensitive to race and gender, Thurrock will take a lead in working towards building a gendered approach into work to achieve these targets.</td>
</tr>
<tr>
<td>Lead Agency</td>
<td>PCT (to be confirmed)</td>
</tr>
<tr>
<td>Supporting Agency</td>
<td>James Fraser and Mike Chapman to consult and identify members of the PCT to be responsible for taking the plans for achieving gender mainstreaming of these targets.</td>
</tr>
<tr>
<td>Champion</td>
<td>to be identified</td>
</tr>
</tbody>
</table>
| Implementation            | a) Assertive Outreach - detailed implementation plan to be agreed  
b) Crisis /Intervention in Home Treatment - this will come on line 1 year from now, but planning for a gender-sensitive approach should commence as soon as possible.  
c) Early Intervention in Psychosis - build gender mainstreaming into the job description for the new post about to come on line for a new development worker, working across the South Essex Service. |
| Timescale                 | Assertive Outreach - immediate  
Crisis Intervention: Home Treatment - Year 2  
Early Intervention in Psychosis - immediate |
<p>| Resource Implications     | to be assessed         |
| Outcomes                  | to be determined       |</p>
<table>
<thead>
<tr>
<th>Priority Area for Action 4</th>
<th>Primary Care in Mental Health</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Description</strong></td>
<td>The extent to which gender is explicitly considered in the planning of the piloting of primary mental health care in Thurrock is unclear. Mental health primary care is currently being piloted in Thurrock and delivered by the Primary Care Mental Health Team. The pilot is being evaluated by Anglia Polytechnic University. It is crucial to establish gender as a key focus within the evaluation brief.</td>
</tr>
<tr>
<td><strong>Lead Agency/Individuals</strong></td>
<td>Primary Care Trust / Mike Chapman</td>
</tr>
<tr>
<td><strong>Supporting Agency/Individuals</strong></td>
<td>Primary Care Mental Health Team / Jim Fraser</td>
</tr>
<tr>
<td><strong>Implementation</strong></td>
<td>Jim Fraser to write to the Professor leading the evaluation of PC Pilot Project at Anglia Polytechnic University to check that gender is incorporated within the evaluation brief.</td>
</tr>
<tr>
<td></td>
<td>If the pilot proves successful, the Primary Care Trust could commission the service to continue and the gendering of any subsequent service and its key targets, beyond the pilot stage, must be ensured.</td>
</tr>
<tr>
<td><strong>Time Scale</strong></td>
<td>Completion of the Pilot Project is due in January 2004, therefore actions will need to be immediate (feeding into the evaluation of the pilot) and longer term (responding to the issues raised by the evaluation) during 2004 and, if the service is to be continued beyond the pilot phase.</td>
</tr>
<tr>
<td><strong>Resource Implications</strong></td>
<td>to assess</td>
</tr>
<tr>
<td><strong>Outcomes</strong></td>
<td>to be determined</td>
</tr>
<tr>
<td>Priority Area for Action 5</td>
<td>Information FACTSHEET</td>
</tr>
<tr>
<td>---------------------------</td>
<td>------------------------</td>
</tr>
<tr>
<td>Description</td>
<td>Aims to raise awareness about gender and gender differences in the field of Mental Health in Thurrock. Key facts, which are critical in informing policy planning, development and delivery, are known but are ungendered. The fact sheet will use data about MH issues at local and national level to provide information of relevance to Thurrock for use by Mental Health policymakers, practitioners and managers.</td>
</tr>
<tr>
<td>Lead Agency/Individual</td>
<td>Mike Chapman</td>
</tr>
<tr>
<td></td>
<td>Thurrock Council and South Essex Partnership NHS Trust</td>
</tr>
<tr>
<td>Implementation</td>
<td>To produce and disseminate a Fact Sheet about gender and gender differences and diversity of relevance in Thurrock. This will involve gendering the existing mental health facts, and could draw on existing data on MH collected locally, the data analysed and presented in the Briefing Note produced by the Consultation Team from Sheffield Hallam University, and local data drawn from the 2001 Census of Population.</td>
</tr>
<tr>
<td>Time Scale</td>
<td>Immediate: To produce the Fact sheet by mid June 2003</td>
</tr>
<tr>
<td>Resource Implications</td>
<td>to assess</td>
</tr>
<tr>
<td>Outcomes</td>
<td>Fact sheet to be distributed widely among relevant agencies in Thurrock</td>
</tr>
</tbody>
</table>
GENDER MAINSTREAMING IN THURROCK

REGENERATION AND NEIGHBOURHOOD RENEWAL

ACTION PLAN

This is a draft action plan developed during an Action Planning Workshop held 8TH May 2003. The workshop was convened as part of a SERICC/Home Office Project and facilitated by a team from Sheffield Hallam University.
Gender Mainstreaming in Regeneration and Neighbourhood Renewal: Priority Areas for Action in Thurrock

Four key areas were identified during the action-planning workshop as the focus of the 2003 Action Plan. These are:

1. Embedding Gender Mainstreaming in the Community Strategy/LSP (Local Strategic Plan)
2. Sharing and Strengthening Data and Information
3. Enhancing Consultation and Capacity Building
4. Mainstreaming Gender and Diversity within the anticipated Urban Development Corporation (UDC)

The following pages outline the actions needed, and indicate how, when and by whom action should be taken. Detailed consideration of outcomes and resource implications was beyond the remit of the Action Planning workshop, but will need to be considered by the key actors concerned. It will be helpful if each Priority area for action has a lead agency or agencies, and a named individual or individuals who understand the importance of the action planned and will work to achieve a wide degree of commitment to its achievement.

The Action Planning Workshop was attended by:

Sheila Coates  Manager, South Essex Rape and Incest Centre
Lee Eggleston  Thurrock Women’s Community Worker, South Essex Rape and Incest Centre
Caroline Holden  South Ockendon Community Forum
Ian Rydings  Head of Housing, Thurrock Borough Council (TBC)
Marion Canavon  Senior Projects Manager, TBC
Jon Bowman  Youth and Play Service Manager, TBC
Annie McKinney  Director, Sure Start Tilbury
Keith Ireland  Head of Organisation Development, TBC
Lisa Thomas  Head of Customer Service, TBC
Chris Stephenson  Senior Policy Officer, TBC
Alan Smith  Leader of the Council, TBC and Chairman of the Thames Gateway South Essex Partnership

The workshop was facilitated by Professor Sue Yeandle, Christine Booth and Dr Diane Burns of Sheffield Hallam University
<table>
<thead>
<tr>
<th>Priority Area for Action 1</th>
<th>Embed Gender Mainstreaming into the Community Strategy</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Description</strong></td>
<td>The Community Strategy will be the main vehicle for shaping and directing all of the work of TBC over the coming two year period. It is vital that the formulation and writing of the new Community Strategy embraces a gender sensitive approach and embeds gender mainstreaming.</td>
</tr>
<tr>
<td><strong>Lead Agency/Individual</strong></td>
<td>Corporate Development and Information Team (CDIT)/Chris Stephenson</td>
</tr>
<tr>
<td><strong>Implementation</strong></td>
<td>Chris Stephenson, Senior Policy Officer at TBC, will develop a form of words regarding gender and diversity appropriate for inclusion in the plan.</td>
</tr>
<tr>
<td><strong>Timescale</strong></td>
<td>Urgent: The action is short term as the process for producing the Strategy has already begun and draft for consultation will be circulated in July 03.</td>
</tr>
<tr>
<td><strong>Resource Implications</strong></td>
<td>to be assessed</td>
</tr>
<tr>
<td><strong>Outcomes</strong></td>
<td>to be determined</td>
</tr>
<tr>
<td>Priority Area for Action 2</td>
<td>Sharing and Strengthening Data and Information</td>
</tr>
<tr>
<td>---------------------------</td>
<td>-----------------------------------------------</td>
</tr>
<tr>
<td><strong>Description</strong></td>
<td>The extent to which (and the quality of) data and information relevant to the regeneration and neighbourhood renewal agenda is collated and analysed across Thurrock is unclear. All services need to consider how to present information and data in way that is helpful for reviewing, planning, developing and evaluating services and needs in a gender sensitive way. Any analysis of 2001 Census data will provide a good opportunity in which to do this.</td>
</tr>
<tr>
<td><strong>Lead Agency/Individual</strong></td>
<td>Corporate Development and Information Team (CDIT)/Chris Stephenson</td>
</tr>
</tbody>
</table>
| **Implementation**        | (a) Chris Stephenson will contact Ray Joyce to discuss the GIS (geographical information system) providing sex disaggregated data. Chris Stephenson will talk to Keith Fenton about three ways of strengthening the presentation and use of gender sensitive data in Thurrock. This will include:  
  b. talking to Keith about producing sex-disaggregated data for the Thurrock Profile  
  c. producing corporate guidance on gender disaggregated data, analysis & interpretation and  
  d. establishing a new inter-agency Data User Group (to include services and departments inside TBC and relevant organisations from the voluntary sector). The aims of this group will include establishing the sources of data and information available across Thurrock, ascertaining how to make best use of this data, and raising the awareness of members of this group about gender and diversity related issues. |
| **Timescale**             | (a) Begin now, but action is long term: the development of sex disaggregated data within the GIS will need to continue as it is rolled out.  
  (b) Short Term  
  (c) Medium Term  
  (d) Medium Term |
<p>| <strong>Resource Implications</strong> | to be assessed |
| <strong>Outcomes</strong>              | to be determined |</p>
<table>
<thead>
<tr>
<th>Priority Area for Action 3</th>
<th>Enhancing Consultation and Capacity Building</th>
</tr>
</thead>
<tbody>
<tr>
<td>Description</td>
<td>Women do not currently engage with local democracy to the same extent as men. To address this, there is a need to build the participatory capacity of women and young women. The focus of this work would be firstly to tackle the Area Assemblies, to make them more accessible and relevant to women, and second SRB. To realise this aim, joint action / partnership is needed between the local authority and the voluntary sector.</td>
</tr>
</tbody>
</table>
| Lead Agency/Individual     | (a) South Essex Rape & Incest Centre, South Ockendon Community Forum & Youth and Play Service Thurrock Council  
(b) Youth and Play Service Thurrock Council/Jon Bowman |
| Implementation             | (a) Actions needed to increase inclusivity are multi-layered and complex, and will be shaped by the way community participation is addressed within the forthcoming Community Strategy. SERRIC, SOCF and Youth & Play Service are meeting to discuss how to work with the West Area Assembly on gender mainstreaming.  
(b) The Youth Forum was recently granted Community Forum status and funds. It is therefore timely to review issues relating to gender and diversity in the plans and funding of this Forum. |
| Timescale                  | (a) Now and ongoing: Sheila Coates and Lee Eggleston (SERICC), Caroline Holden (South Ockendon Community Forum) and Jon Bowman (Youth & Play Service) are meeting in early June with a long-term aim of including other partners such as Sure Start Tilbury, & linking with the ACE Programme, & to discuss developing a community leadership programme for women/young women.  
(b) Short-Term: Jon Bowman (Youth & Play Service) will also make a start by talking to Steve Byron about gender and diversity in the Youth Forum. |
<p>| Resource Implications      | to be assessed                              |
| Outcomes                  | to be determined                            |</p>
<table>
<thead>
<tr>
<th>Priority Area for Action</th>
<th>Mainstreaming Gender and Diversity within the Urban Development Corporations</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Description</strong></td>
<td>Thurrock has been pinpointed for major growth in the Government's 'Sustainable Communities' plan, and in April 2003 the ODPM published a consultation document proposing a UDC for Thurrock. If established, the UDC will include a master plan drawing on TBC documents and base line figures. It will be important that the Master Plan is sensitive to the mainstreaming of gender and diversity issues.</td>
</tr>
</tbody>
</table>
| **Lead Agency/Individual** | (a) TBC: Rod Lyons, David White and Andy Smith are key players in the development of a UDC and its work.  
(b) SERICC and Marion Canavon (Thurrock Council, Regeneration). |
| **Implementation**      | (a) Urgent action is required to ensure that gender and diversity issues and approaches feature in the negotiations between government and TBC. For this, gender and diversity need to be firmly embedded in the Community Plan.  
Leader of the Council Andy Smith to raise gender and diversity issues with David White, Managing Director, TBC.  
(b) Sheila Coates and Lee Eggleston, SERICC, and Marion Canavon, Senior Projects Manager at TBC, to raise gender issues with Christine Paley at the next meeting of Women in Thurrock. |
| **Timescale**           | Urgent: Now and ongoing |
| **Resource Implications** | to be assessed |
| **Outcomes**            | to be clarified |
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Thurrock Council (2000) *Local Health Plan (LHP), the Health Improvement and Modernisation Plan 2002/03 - 2004/05.* [www.thurrock.gov.uk](http://www.thurrock.gov.uk)


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