Introduction
This paper has been developed by the Carers Collaborative, a national forum for carer*1 representatives on IJBs. It sets out the case for partnerships to include and involve carers in Equality Impact Assessments (EQIA).

It is intended for Health and Social Care Partnerships and other listed authorities who have a legal duty to prepare Equality Impact Assessments.

It draws heavily on the guidance previously issued by the Equality and Human Rights Commission Scotland2 - referred to as ‘the Guide’ throughout.

Summary
In 2019 the Scottish Government estimated that there were approximately 750,000 carers in Scotland.3 As a result of Covid-19 the number of carers in Scotland has now risen to over one million.4

These carers provide care and support that in 2015 was valued at £10.8 billion5.

This paper sets forward a case for the inclusion of carer in EQIAs, through

1. Consultation with local carer representatives and local carer support organisation in EQIAs where there is likely to be a direct impact for carers
2. The inclusion of carers in local EQIA templates, alongside those with protected characteristics, in order to assess the impact of proposals on them

Reasons for inclusion
Although carers are not a protected group under the Equality Act 2010, they receive protection under the Act because of their association with the disabled people they care for. They are also protected from direct discrimination where they are treated less favourably as a result of their caring role.

There are several other reasons why carers should be included as a specific group within EQIAs

1. Many carers fall within groups with protected characteristics. For example the majority of carers are women (59%). In addition, many are older carers (10.7%)6 and carers from BAME communities. Partnerships should consider the equality impacts for carers within these groups when making their assessments
2. Carers may be disadvantaged by changes to services provided to those they care for. Often these impacts can be significant, such as affecting their ability to combine caring with employment.

1 Where we use the term ‘carer’ we refer to unpaid carer and not paid care worker
2 Assessing Impact and the Public Sector Equality Duty, July 2018
3 Scottish Government Health and Experience Survey
4 Carers Week 2020 research report ‘The rise in the number of unpaid carers during the coronavirus outbreak’
5 Valuing Carers 2015 – the rising value of carers’ support [2015] University of Sheffield, University of Leeds and CIRCLE, published by Carers UK
6 Scottish Census 2011,
3. Where service changes impact on carers, this may also have an impact on the people they care for. For example, the withdrawal of key support may lead to a breakdown in the caring role, having an adverse effect on the disabled person as well as the carer.

4. Young carers should also be considered alongside adult carers in EQIAs. Changes to adult social care services, may still impact on young carers, where they are looking after an adult with care needs. In these circumstances partnerships may also want to consider their duties under the Children and Young People (Scotland) Act 2014.

5. The Guide states that 'The specific duty to assess impact is intended to be carried out within a listed authority's existing systems and frameworks and to improve outcomes for those who experience discrimination and disadvantage. Carers fall into the latter category in terms of health, wellbeing, longevity and in many cases, economic hardship.

The Guide includes an example of the potential to disadvantage carers through changes to social care services and the subsequent consequences for carers and their ability to participate in public life.

**Example: Assessing the impact of policy proposals on equality**

A local authority is making changes to policies for funding and delivering social care, day care, respite for carers and community transport. Small changes in each of these policies may have a relatively minor effect on disabled and older people, but the cumulative effect of changes to these areas could have a significant effect on the participation in public life of these groups.

The actual and potential effect on equality of all these proposals, and appropriate mitigating measures, should be examined and understood so that gaps do not continue or widen.

**Involving carers and representative organisations**

As the guide states, in S8 Decisions on who should be involved in assessing impact will vary. You may find it helpful to have a team of people support an assessment to bring a range of experience and expertise to the process.’

It also recommends the inclusion of carers in order to be ‘better equipped to respond to any queries or challenges from stakeholders.’

We therefore recommend the involvement of both carer representatives and local carer support organisations, such as carers centres in EQIAs for decisions that may impact on both disabled people and their carers.

**EQIA Templates**

Although it is not required by legislation, most partnerships use a template when undertaking Equality Impact Assessments.

Many HSCP’s have already included carers within their EQIA’s.

For those that have not, we recommend they include carers as a separate category within the EQIA, or include them specifically under the category ‘other’.

**Further Information**

Peter Burke, Carer representative on COSLAs Health and Social Care Board and Angus Integration Joint Board, Email: Peter.Burke4@nhs.scot

Claire Cairns, Coalition of Carers in Scotland, Email: coalition@carersnet.org