

A status report on women and girls in Buckinghamshire

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A status report on women and girls in Buckinghamshire

'As long as girls and women are valued less, fed less, fed last, overworked, underpaid, not schooled and subjected to violence in and out of their homes – the potential of the human family to create a peaceful, prosperous world will not be realised'

Hillary Clinton, the UN Fourth World Conference on Women, Beijing 1995

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Research summary

Childhood:

- Girls make up 19.7% of the total population in Buckinghamshire
- Female life expectancy in Buckinghamshire is better than national average. A baby girl born in Greater Marlow ward could expect to live for 18 years longer than a baby girl born in Denham North ward
- 1 in 6 girls in reception and 1 in 4 girls in year 6 are with excess weight
- Almost half of Buckinghamshire girls aged 5-15 are in the lowest activity category.
- Buckinghamshire girls outperform boys in educational achievement at all stages of school. They are also achieving higher than national girls and boys.
- There is huge lack of services for children experiencing domestic abuse.
- More than half of young carer are female
- Mental health data for young girls is not currently available for Buckinghamshire. Aspiration gap information amongst Buckinghamshire girls is also missing at present

Adulthood:

- The majority of the total female population (60.3%) belong to the working age group (17-64 years)
- Only 1 in 4 of working age women actively participate in sports
- Teen birth rates have decreased in every district of Buckinghamshire
- Health screenings for females are better than the national rate but are decreasing
- The employment rate of women in Buckinghamshire is highest in the UK with the majority employed in part time roles
- Fewer women claim out of work benefit
- The gender pay gap has decreased over the past year, however men still earn £76 more than women per week
- Reported sexual assault was highest within young women aged 16-24, last year
- Domestic violence offences are increasing in deprived areas of Buckinghamshire.
- There were 53 arrests per 100 domestic abuse related crimes in the Thames Valley area in 2017.
- 3/4th of registered adult carers are female.
- Representation gap is significantly high in local councils in Buckinghamshire.

Retirement:

- Older women make up the rest of the total female population in Buckinghamshire
- Older women are living longer than men, but often in poor health
- Women aged above 75 are at a high risk of isolation and loneliness and are more at risk of doorstep crime.

Chapter 1: Introduction

This study focuses on understanding the barriers, needs and required support for girls and women in different stages of their lives in Buckinghamshire. This research identifies the areas vital to the health and wellbeing of women and girls, and pin points the gaps arising from gender differences which are impacting on our society.

According to the latest data, 5.2 million women are living in poverty in the UK¹. Three groups are more at risk of experiencing poverty: disabled women, women from ethnic minority communities, and lone parents. In the UK, 90% of all lone parents are women. The Global Gender Gap report, 2017 from the World Economic Forum suggests that the UK ranks 53rd in economic participation and opportunity, 36th in educational attainment, 100th on health and survival and 17th for female political empowerment. A recent estimate suggest that economic gender parity could add an additional 191.4 billion to the GDP of the UK. Investment in the economic development and stability of women and girls helps to break the cycle of poverty and to ensure the safety and vitality of communities. The issues that women advocate, prioritise and invest in, have broad societal implications, touching on family life, education and health. Women's engagement in public life fosters greater credibility in institutions and heightened democratic outcomes. In the political sphere, women's engagement in public life has a positive impact on inequality across society at large.

Much national research has been carried out on the issues that modern women face in the UK today. At a regional level organisations publish reports on the service area they cover. Few studies cover women's issues as a whole and no such report is available for Buckinghamshire. The main objective of this research is to increase our knowledge base of the issues faced by local women, delving the available statistics to bring out the gender gaps and challenges women face in different stages of life. This research also aims to identify local needs and any existing support structures which seek to meet those needs. This will form a primary resource for anyone working towards improving women and girls' lives in Buckinghamshire. It seeks to provide a basis for starting community dialogue, more collaborative working and targeted intervention for the identified gaps.

Heart of Buckinghamshire intends to initiate a women's fund based on the findings of this research, seeking to enhance the provision to meet the identified needs across Buckinghamshire. A few other Community Foundations are already running their own Women fund (Bedfordshire and Luton, Merseyside, Tyne & Wear and Northumberland). A dedicated women's fund can support the transition from welfare to work, assist advocacy programmes, address poverty and reduce homelessness. The impact of a women's fund could be far reaching.

¹ Joseph Rowntree Foundation: IWD2018, time to loosen the grip of poverty on women in the UK

Method: This is a mixed method research project, where both quantitative and qualitative data was collected to understand the status of women in Buckinghamshire. Secondary quantitative data was collected from various sources. National data was taken from official sources including the Office of National Statistics, Census, Public Health, Community Life survey and the Active People survey. Existing research reports and publications on the significance of women's issues at the national level were referenced.

County and district level data was collected from local sources including: The Local Government Association; Buckinghamshire County Council; Joint Strategic Needs Assessment; Public Health profiles; Local Area Forum profiles; County strategies on physical activity, adult exploitation and domestic violence; newsletters from local authorities; and reports from local charities.

All the references are listed on the bibliography section at the end of this report.

As part of the mixed methodology, qualitative data was collected through public consultation with 56 participants selected from women's groups (group leaders or coordinators), youth club leaders, council officials, councillors and professionals who are working with the diverse community groups across the county. Simple questionnaires were developed to collect information on a) the local needs of girls and women, b) the barriers women face c) types of support which could improve their lives d) any further recommendations.

From the consultation, several concerns about and barriers to the development of women lives were revealed, some types of support which could improve their life experience were identified and finally, women and girls, marginalised through a lack of personal, educational or social support, have had their voices heard. The recommendations for local interventions, which came to light through the consultation, may give policy makers and community leaders cause for immediate focus.

Women in Buckinghamshire – in the last century

The women of Buckinghamshire have influenced and continue to influence the national political sphere. They joined with women across Britain in national movements, taking on the work traditionally associated with men when the nation required it. There were key events within the Buckinghamshire area associated with the Suffragette movement: an open-air meeting in Aylesbury market square in 1909 that 200 people attended; the "Women's Suffrage Pilgrimage" in 1913 in which many other national federations of the NUWSS participated; as well as the burning of Saunderton Station. In 1907, Dame Frances Dove became the first female town councillor for Buckinghamshire, after founding Wycombe Abbey School for girls in 1896.

During WWI and WWII, across Britain women took on work traditionally associated with men, and as an example in Buckinghamshire, women were making radios in The Cartwheel in Amersham in the 1940s. The creation of the Henry Allen Nursery in

Amersham was a way to help women carry on with this work without having to worry about childcare. During WWII 75% of the 10,000 personnel working at Bletchley Park were women.

Women in Buckinghamshire – Demographics

The gender breakdown of the Buckinghamshire population is 51.0% females and 49.0% males, which is similar to the national and regional averages. There are 273,300 women and girls living in four districts of Buckinghamshire. 12% of the total female population are from ethnic minority groups. The highest ethnic minority female population to total female population is in the Wycombe District (6%), followed by Aylesbury Vale (3%), South Bucks (2%) and Chiltern (1.6%). Life expectancy for females at birth is 85 years, which is higher than the national average (2014-16). The population difference between genders is mainly due to the increased number of females in the elderly population, due to their longer life expectancy. The majority of the female population are of working age (60.3%) and of that group 79% are economically active in comparison to 73% across Great Britain and 76.6% for those living in the South East.

Stages of life and issues related to it:

Being female carries unique physical and emotional attributes.

In this report we analyse the life journey of being female in three stages:

1. Childhood: from birth to age of 16, when a baby girl is born through to becoming a young woman. Areas addressed include:
 - a. Life expectancy at birth
 - b. Health
 - c. Social media expectation and body image
 - d. Education
 - e. Substance misuse
 - f. Domestic abuse
 - g. Young carers
2. Adulthood: women of working age (17-64 years, acknowledging that the retirement age for women is increasing but has only just reached 65 in 2018 and will increment gradually to 67). Areas addressed include:
 - a. Health
 - b. Employment
 - c. Domestic violence
 - d. Modern slavery
 - e. Caring roles

3. Retirement: older women (65+ for the population at the time of analysis). Areas addressed include:
 - a. Ageing population
 - b. Health
 - c. Social connection and isolation
 - d. Long-term care and caring role
 - e. Vulnerability to crime

We investigated the health and wellbeing, social and economic issues that impact women during these three stages and compared the findings with local and national statistics. This enabled us to uncover the pressure points in growth and inequality. Many of the issues impacting women continue from one stage to the next. Our purpose is not just to find the shortcomings, but also to become aware of and evaluate the strengths.

Gender differences are discussed in each section and three profound gender gaps are identified as below:

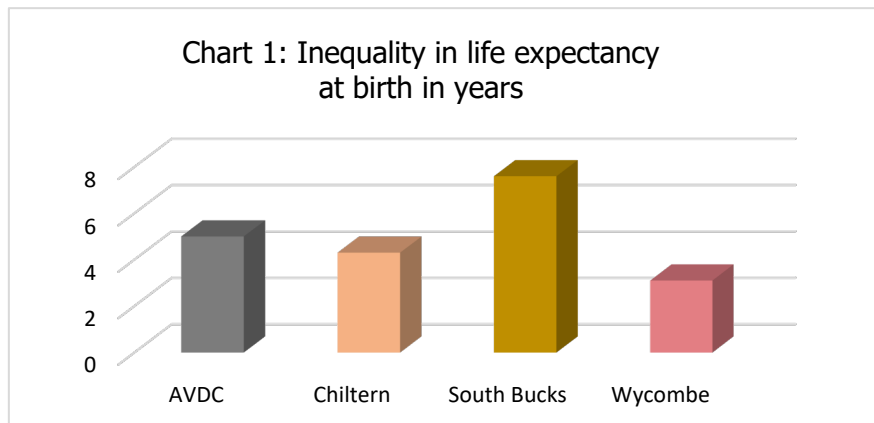
- Aspiration gap
- Payment gap
- Representation gap

Chapter 2: Childhood (birth to age 16)

Life expectancy at birth:

Young girls comprise 19.7% of the total female population of Buckinghamshire. Average life expectancy at birth is 85 years which is better than the national average (83.1 years). Around one in three baby girls born in the UK between 2015 to 2017 could expect to live to at least age of 90 years. In Buckinghamshire, female life expectancy at birth is highest in Chiltern district (86 years) and lowest in Aylesbury Vale district (84.1 years). The highest ward level life expectancy was recorded in Greater Marlow (96.2 years) with the lowest in Denham North (78.1 years). Healthy life expectancy of women at birth (70.3 years) is also better than for men (69.4 years). Inequality in female life expectancy at birth is highest in South Bucks (7.6 years) and lowest in Wycombe (3.1 years).

Life expectancy also varies with deprivation. According to the Health Profile of Buckinghamshire (2017), the life expectancy at birth gap for women is almost 5 years (4.9 years) between the most deprived and the least deprived areas, lower than the gap for men (6.5 years).



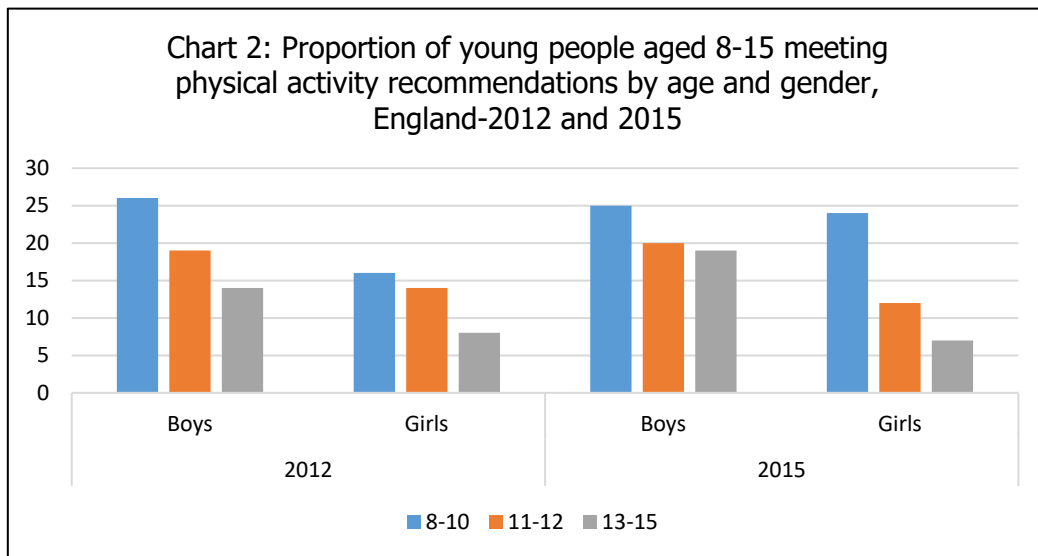
Data source: Public health outcome framework 2018 (2016/17 data)

Health:

The Health Foundations Key data on Young People report (2017) revealed some important observations about the health and lifestyles of young people in the UK.

- One in five 11-15 year olds are obese in England.
- On average teenagers consume 8 times more than the recommended daily sugar allowance.
- A quarter of secondary school children report they do not get enough sleep
- By the age 13-15, 19% of boys and only 7% of girls achieve one hour of exercise a day.

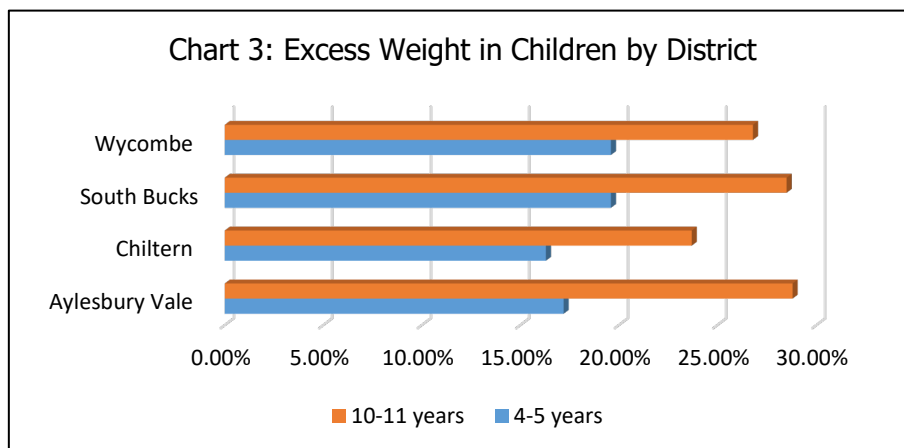
- The Health Behaviour in School-aged Children shows a decline in physical activity through adolescence with much lower levels of activity for young women (Brooks et al, 2015).



Source: NatCen Social Research/UCL (2015)

For young people at least 60 minutes exercise per day is recommended and 45% of Buckinghamshire girls aged 5-15 failed to achieve this recommended rate.

In Buckinghamshire 16% of total children (2-15 years) are considered obese and 12% are overweight. Excess weight in children both in Reception (18%) and Year 6 (27.2%) is better than the English averages of 22.6% and 34.2% respectively.



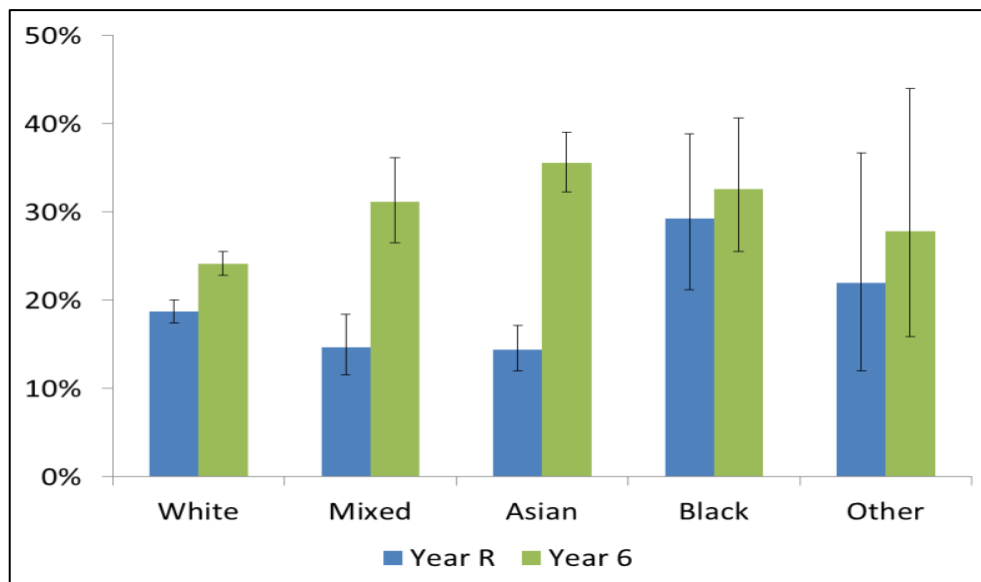
Source: Physical Activity Profile, Buckinghamshire 2018

South Bucks and Wycombe districts have the highest rates of excess weight amongst children aged 4-5 years, at 19.6%. For children aged 10-11 years, the highest rate is in Aylesbury Vale at nearly 28.8%. During the same year (2016/17), in Buckinghamshire 17.8% of girls aged 4-5 and 24.7% of Year 6 girls (10-11 years) recorded having excess weight.

Across the wards excess weight is higher in children in Marsh Gibbon, Waddesdon, Riverside and Watermead (Aylesbury Vale), Denham and Iver (South Bucks) and pockets of High Wycombe town (Wycombe).

According to recent a Public Health England publication (August 2018) in the 4 to 5 age group, Black African children were the most likely to be overweight in 2016/17, with almost a third (31.1%) overweight. In the 10 to 11 age group, Black African, Black Caribbean, Bangladeshi, and Other Black children were the most likely to be overweight (46.2%, 45.4%, 44.3% and 43.9%, respectively). The following chart (4) reveals the same trend for Buckinghamshire, whilst the percentage in each ethnicity is better than the English average. In Buckinghamshire, the maximum percentage of excess weight in Reception (R) years is evident with Black ethnic children whereas the minimum is observed in the Mixed and Asian children. Excess weight starts to rise in every ethnicity in the 10 -11 age group (Year 6) in Buckinghamshire, mirroring the national trend.

Chart 4: Excess weight in children by ethnicity and school year



Source: Physical Activity Profile, Buckinghamshire 2018

There has been huge concern over the mental health of young people recently. Ten percent of children and young people aged 5-16 years have a clinically diagnosable mental health problem, yet 70% of children and adolescents who experience mental health problems have not had appropriate interventions at a sufficiently early age. A cross-sectional survey of young people aged 11-13 in 2014 also concluded that emotional problems were more common in the girls; 20% compared to 7% in boys (Fink et al, 2015). Half of all lifetime cases of psychiatric disorders start by age 14 and three quarters by the age of 24. A quarter of women aged 16-24 show symptoms of anxiety or depression. Self-harm is a key part of the picture of mental health (Association for Young people’s health, 2013). Hospitalisation for self-harm and eating disorders is more common in young women (32%) compared to young men (11%), and peaks in girls aged 15.

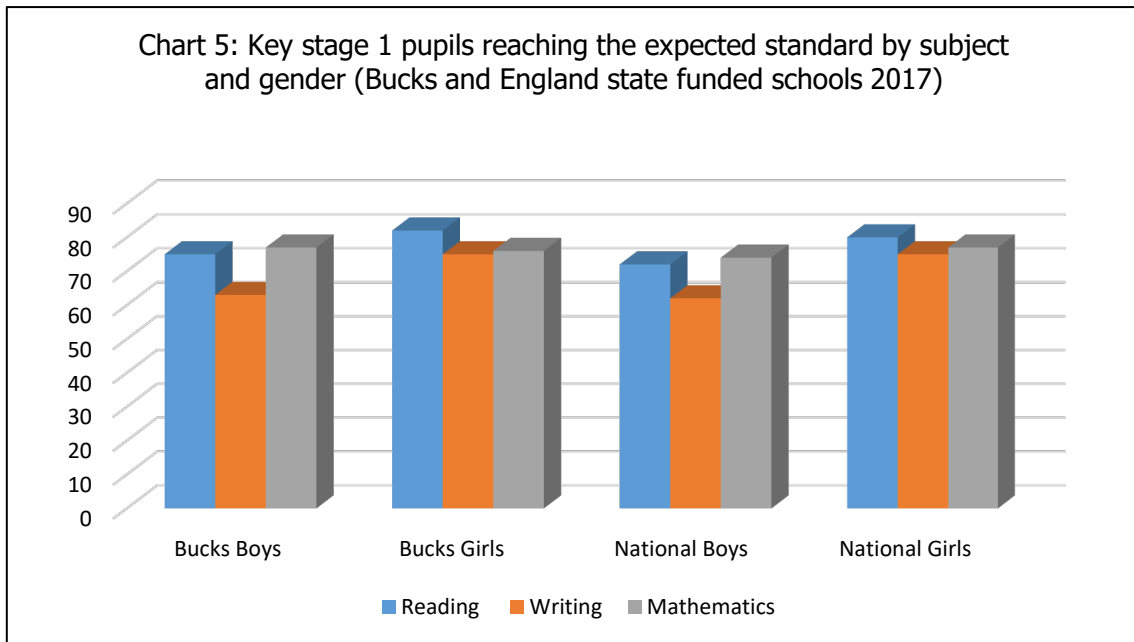
Gender based data on mental health is not available for Buckinghamshire. The only mental health data available on young people is rates of hospitalisations for self-harm, which includes both boys and girls. Hospital admission caused by unintentional and deliberate injuries in young people (15-24years) are increasing in Aylesbury, Wycombe and Chiltern while Wycombe has the highest occurrences of hospitalisation (138 per 10,000). Local area data shows that number of injuries are highest in Marlow (155.4/10,000 people) followed by Waddesdon (154.8/10,000).

Social media expectation and body image:

Studies are revealing the impact of social media as it creates pressure upon teenage girls and young women which then impacts on their physical and mental health needs. Researchers worldwide are revealing that youngsters who spend more time on social media struggle with developing a healthy view of body image. Both digital and print media not only emphasize that female self-worth should be based on appearance, but present a powerful cultural ideal of female beauty that is unattainable (Richins, 1991; Silverstein, Perdue, Peterson, & Kelly, 1986). Slimness is seen as a desirable attribute for women in prosperous cultures, and is associated with self-control, elegance, social attractiveness and youth (Bordo, 2003; Murray, 2016). Teenagers are more vulnerable to social and peer pressure, which may explain the rates of eating disorders amongst them (Tree, 2012). 'Uncomfortable in our skin: the body-image report', found out that young girls today are bombarded with up to 5,000 digitally enhanced images a week that suggest how they should look. A report from the Centre for Appearance Research revealed that 9 out of 10 girls in the UK suffer from low body esteem and they eat less to avoid gaining weight. The report concludes that having higher levels of body esteem has a lasting impact on a girl's confidence, resilience and life satisfaction.

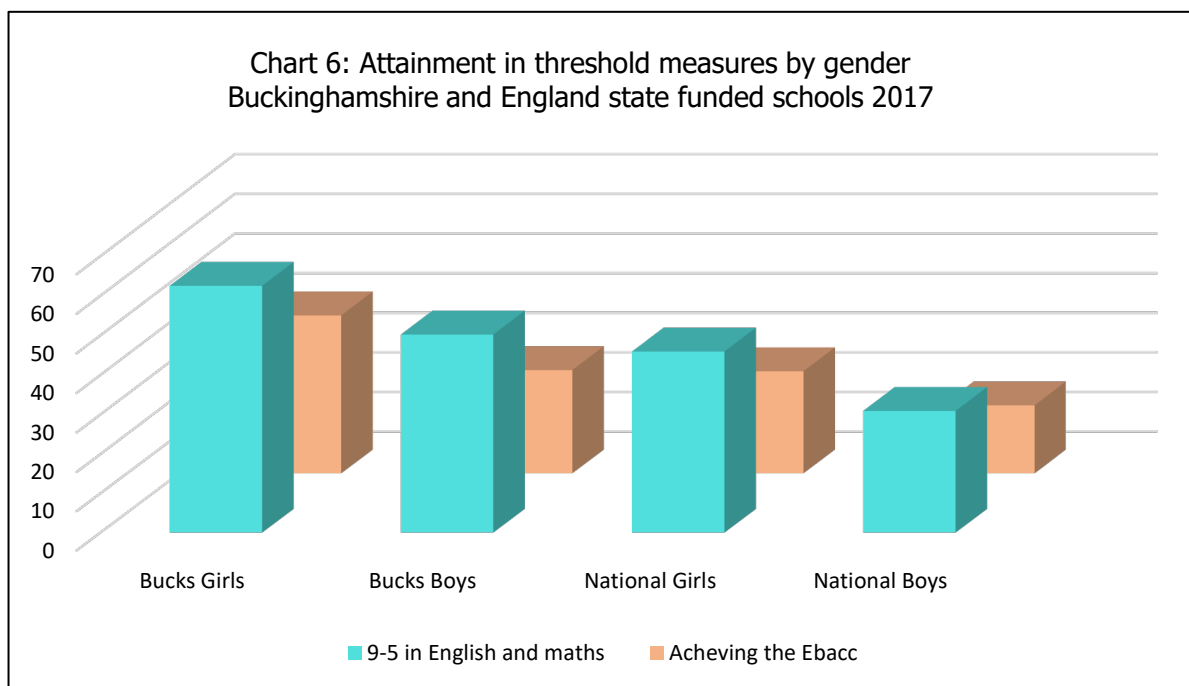
Education:

Buckinghamshire girls continue to outperform boys at the end of the Early Years Foundation Stage. Results for both boys and girls have increased by 3 percentage points since 2016. Nationally results for girls increased by only 1 percentage point, while nationally results for boys improved by 2 percentage points. Early Years Foundation Stage in Buckinghamshire 2017 reveals that 81% of girls and 67% of boys achieved expected standard in reading and writing; compared to nationally 78% of girls and 64% of boys.



Source: National curriculum assessments at Key stage 2, 2017; Department for Education

At the end of KS2 stage Buckinghamshire girls are also performing better. In 2017, 67% girls reached the expected standard (Boys 60%) and 11% girls are reaching a high score (Boys 8%). Likewise, GCSE results of 2017 reflected the same trend. 62.5% Buckinghamshire girls achieved 9-5 in English and Maths, which is much higher than National Girls (45.9%) and boys (39.9%).



Source: National curriculum assessments at Key stage 2, 2017; Department for Education

Substance misuse:

Adolescent alcohol consumption patterns have been a concern for many years. The 'Smoking, Drinking and Drug use' survey of 11-15 years old in England shows that the proportion of young people who drink alcohol have been falling. 64% of those aged 11-15 said they never drank alcohol. Only 8% said they had alcohol last week. During the same period 11% of boys and girls aged 15 in England reported that they had tried cannabis (NHS Digital 2015). Exposure to alcohol and illicit drug use during adolescence has been shown to lead to an increased risk of substance dependence and addiction in adulthood.

In Buckinghamshire 66.2% girls, aged 15 reported drinking alcohol. 9% of girls aged 15 had used Cannabis at some point while 7.3% boys stated the same.

Domestic abuse:

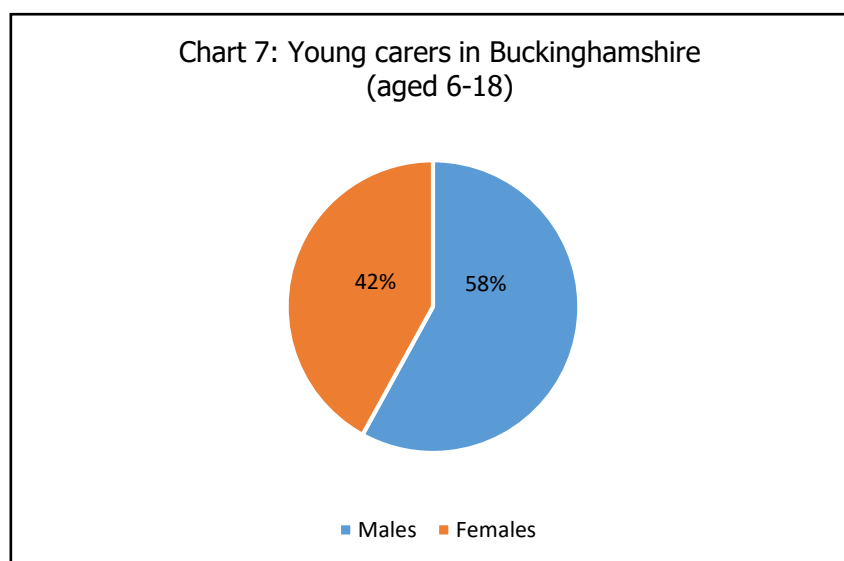
According to UNICEF 'Some of the biggest victims of domestic abuse are the smallest'. Domestic violence to women is well documented but less is known about the impact on children who witness a parent or caregiver being subjected to violence. A report on violence and health by the World Health Organisation shows that children who grew up in a violent home are more likely to be victims of domestic abuse. 130,000 children in UK live in households with high risk of domestic abuse (CAADA 2012). Radford's research (2011) revealed that 1 in 5 children have been exposed to domestic abuse. A very recent survey by NSPCC and Bristol University found that 1 in 5 teenagers have been physically abused by their boyfriends and girlfriends.

In Buckinghamshire, domestic abuse is considered to be one of the county's biggest problems (DVA strategy of Buckinghamshire County Council, 2018). During 2016-17 the family Resilience Service supported 1870 children who had experience of domestic abuse. Over the period of 2015-16 104 children and young people used Buckinghamshire refuges and during the same time period a further 203 children and young people seeking refuge could not be accommodated due to the lack of suitable places.

In April 2017 the Buckinghamshire Safeguarding Children Board published a Serious Case Review (SCR) into Child Sexual Exploitation in Buckinghamshire. The SCR identified that there are not robust arrangements in place to ensure that children who are being / have been sexually exploited continue to receive the right support once they turn 18. This is largely because they usually fall below the threshold for services provided through Adult Social Care and due to a lack of identified services for these young adults.

Young carers:

The 2011 Census indicated that almost 178,000 under 18s have caring responsibilities. The vast majority are providing under 20 hours of care a week. It is also clear from the same census data that women are more likely to be carers than men. In Buckinghamshire 1,875 young carers identified themselves as carers (2011). 81% of them were recorded as providing under 9 hours of care per week but a significant 8.4% of them provided more than 50 hours of care per week. Of these young 'high demand' care providers, 54% are female. Carer Buckinghamshire is the main support provider for carers in Buckinghamshire. At present they are supporting 852 young carers aged 6 to 18 years, majority of them are female.



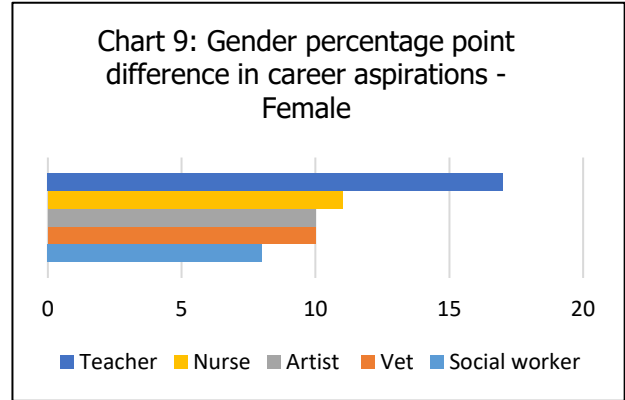
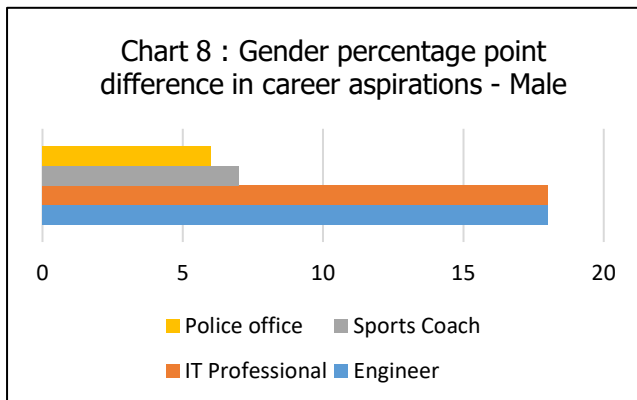
Source: Carers Bucks registered carers, 2018

The most common social impact reported by young carers is difficulty participating in family or social activities. One in ten carers feel lonely and socially isolated. The 'Hidden from view' report of The Children's Society (2013) made some significant findings on the impact of young carer's experiences. According to the report around 1 in 20 miss school because of their caring responsibilities, young carers have significantly lower educational attainment at GCSE level and they are more likely than the national average to be not in education, employment or training (NEET) between the ages of 16 and 19.

Aspiration gap:

On average girls have been performing better than boys nationally. As shown in the previous section, the educational attainment of Buckinghamshire girls is also better than boys. However, several research studies have demonstrated that aspirations differ widely amongst girls and boys. Education and Employment published a report (2018) based on 13,000 primary school children aged between 7 and 17, which found that gender stereotyping about jobs is set from a young age. Boys overwhelmingly aspire to take on roles in traditionally male dominated sectors and professions.

Conceptions of traditional femininity, specifically ideas around 'nurturing' or 'caring' roles, may also explain the difference in the number of girls wanting to become a teacher or doctor compared to boys.



Source: Closing the gender gap report

Based on a survey of 2,000 young people and 2,000 parents, 'Closing the Gender Gap' has been released by World Skills UK and The Careers & Enterprise Company and shows over half the participating young women aged 17 to 19 (56%) believe their gender limits their career options. Only 37% of young men felt gender limited their own options.

According to the report, young women aspire to lower salaries than men, by around £1,000 per year. Young men are more likely to consider a technical and vocational education or career in future (40%) than young women (32%).

This research also finds that young people of both genders influence their friends by promoting career options based on gender rather than on ability and interest.

Both of these research studies suggested that engagement with role models from the world of work could significantly increase salary aspirations of young women. There is a definite need for greater access to career role models from a young age.

Chapter 3: Adulthood

Health:

The UK guidelines for physical activity recommend that adults aged 19 and over should undertake a minimum of 150 minutes of moderate intensity activity per week in spells of 10 minutes or more. According to the Health Survey of England (2016), 26% of men and 27% of women aged 16 and over in England were obese, and a further 40% of men and 30% of women were overweight. Women (58%) are further behind in meeting the physical activity recommendation than men (66%). This survey also revealed that deprivation affected women's obesity rate more than for men.

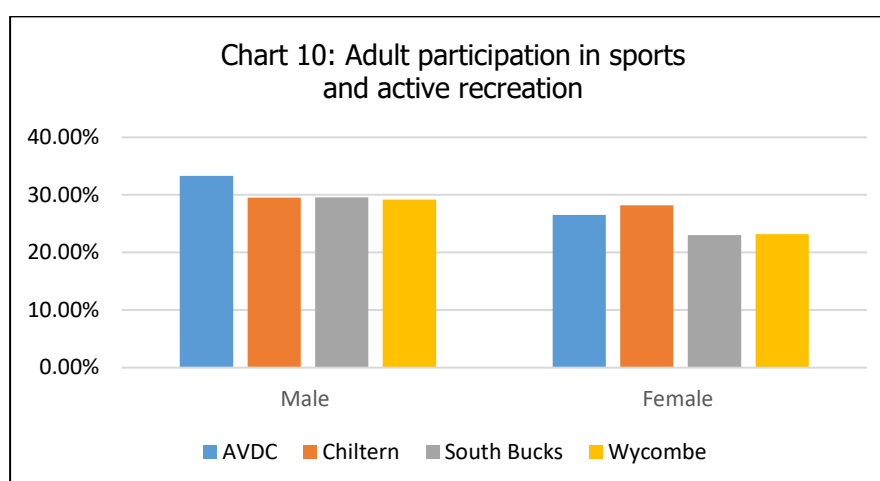
The physical activity profile of Buckinghamshire, 2018 revealed some facts on adult physical health. Currently 64.5% adults are meeting the aerobic physical activity guideline. However, more than half of adults are overweight or obese.

Table 1: Adult activity profile, Buckinghamshire

District	Aylesbury Vale	Chiltern	South Bucks	Wycombe
% of Adults 'fairly active' *	65.8	63.3	63.9	64.0
% of Adults physically inactive	21.3	20.9	20	20

*More than 150 minutes each week. Source: Physical activity profile Buckinghamshire 2018

Data from the Active People Survey in 2016 on the levels of physical activity among 16+ year olds in Buckinghamshire show that 32.8% men and 26.1% women actively participated in sports. The numbers vary by districts for both men and women; women's participation rate is highest in Aylesbury Vale and lowest in South Bucks.



Source: Active People Survey, 2016 by Sports England

There are strong links between physical and mental health problems. A 2012 report by The King's Fund found 46% of people with a mental health problem also had a long-term physical health problem. Mental Health and Wellbeing survey (Adult Psychiatric Morbidity survey) provides data on mental health conditions in the English adult population aged 16 and over. The latest survey of 2014 revealed that women (19%) were more likely than men (12%) to have reported common mental disorder (CMD).

In Buckinghamshire there was an estimated 71,650 people aged 16 and over with a CMD. In a recent counselling report (April 2017 to March 2018) from Buckinghamshire Mind it shows that 62% of females accessed counselling services over 38% of males in High Wycombe and a similar trend is observed in Aylesbury 53% (female) and 47%(male).

Teen birth:

During 2016, the national under 18 conception rate per 100 women was 18.9. During the same time Buckinghamshire under 18 conception rate was 10.4, which is well below the national average implying that the dropout rate from education of teenage girls (for this reason) would also be lower. Though the trend of teenage conception has gone down for every district of Buckinghamshire, Aylesbury Vale still had a higher rate in 2016 than the county average (13 per 1000 girls) with the lowest conception rate for this age group observed in the Chiltern area (8.1).

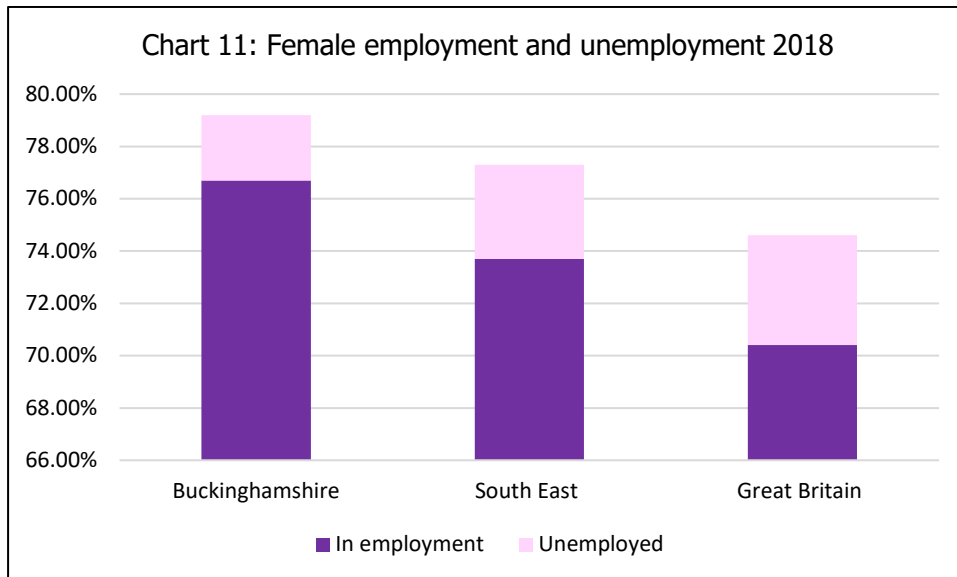
Health screening:

More than 3200 women are diagnosed with cervical cancer every year in the UK and nearly 900 die annually. But 1 in 4 women skip cervical screening and as a result the cervical screening coverage trend is going down nationally. In 2017 the national cervical screening rate was 72%, a decrease from 75.4% in 2012. According to the Public Health Outcome Framework, cervical screening rates are higher than the national average amongst the districts of Buckinghamshire but the trend is decreasing each year, reflecting the national trend. Chiltern had the highest rate (76.8%) while lowest cervical screening coverage was recorded in Wycombe (73.1%).

Breast screening coverage statistics show a similar declining trend in the four districts of Buckinghamshire. During 2017, the county coverage rate (79.4%) was well above both the South East (77%) and National average rate (75.4%) in 2017. In the districts statistics reveal that the highest breast cancer screening coverage was recorded in Chiltern (80.5%) and the lowest in Aylesbury Vale (78.7%).

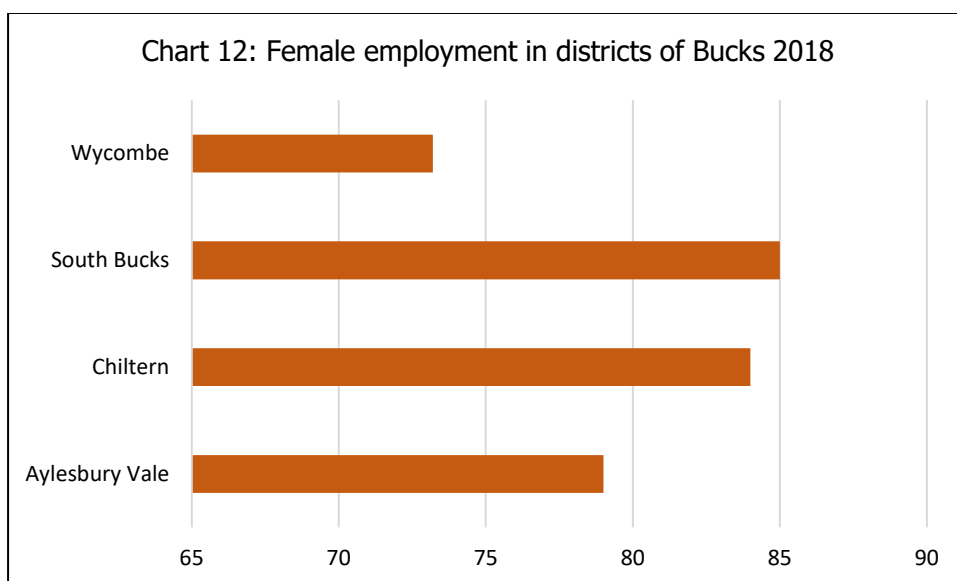
Employment:

Buckinghamshire has the highest percentage of women in employment in the whole country; with nearly 79 per cent of all women, aged 16-64 economically active, according to the Annual Population Survey 2018. 65.2% work as an employee and the rest are self-employed. The percentage of unemployed females in Buckinghamshire is 2.5%, lower than the South East (3.6%) and Great Britain (4.2%).



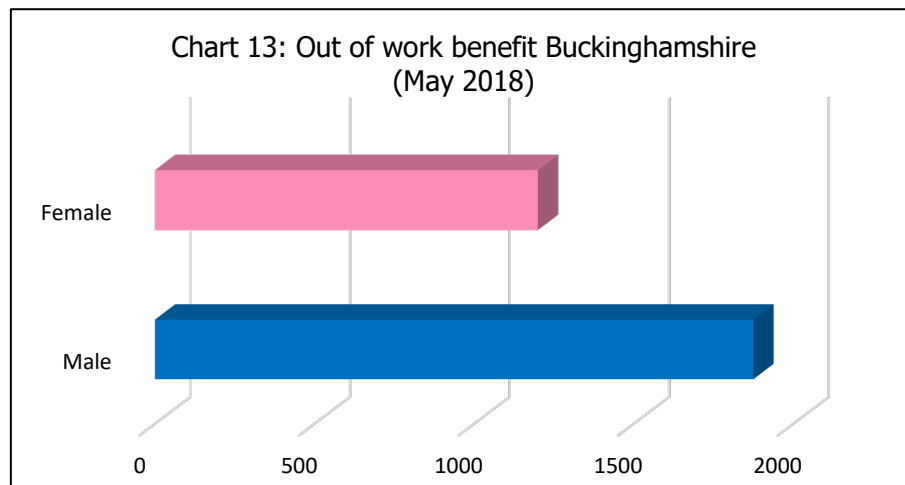
Source: ONS annual population survey

According to Buckinghamshire Business First, Buckinghamshire also has the highest percentage of female managers, directors and senior officials out of all women in employment. Chiltern and South Bucks districts perform best, both placed in the top seven of all districts in the country. Both districts have high female employment rate, South Bucks being the highest 85% followed by Chiltern 84%; while Wycombe has the lowest at 73.2%.



Source: NOMIS, Official Labour Market Statistics

Economic activity of females by ethnic group in Buckinghamshire demonstrates that in both full time and part time employment, White British groups have the highest employment figures, which is proportionate to the total population. Within BME groups Asian/Asian British women have the highest employment engagement in all four districts. Black African/Caribbean/Black British women had the second highest rate of employment rate amongst BME groups. The Wycombe district had the highest numbers of female full time employees from Asian and Black/African/Caribbean backgrounds.



Source: NOMIS, Official Labour Market Statistics

As a result of the high female employment rate, Buckinghamshire women (0.7%) are claiming less out of work benefits than men (1.1%). The number of female claimants of out of work benefit was highest in Wycombe (500), followed by Aylesbury Vale (415) during May 2018.

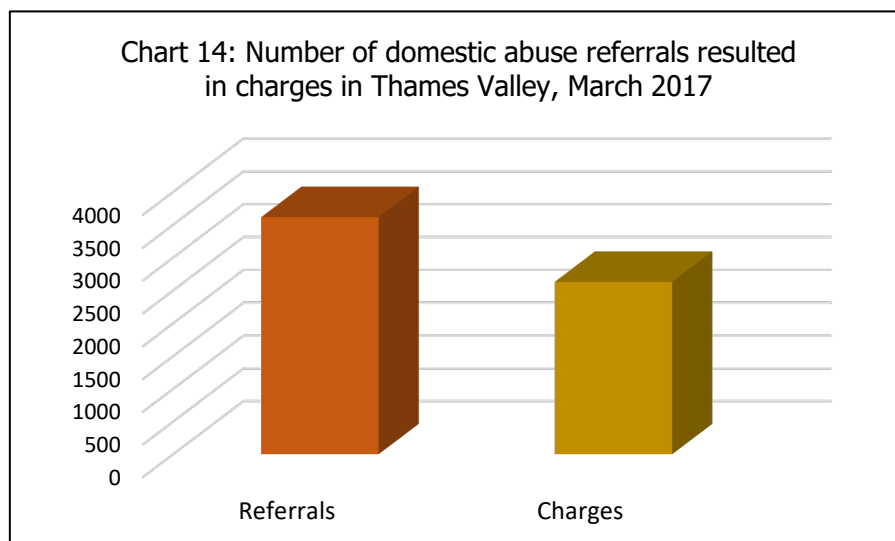
Domestic violence and crime:

The Crime Survey for England and Wales (CSEW) estimated that 26% of women and 15% of men aged 16 to 59 had experienced some form of domestic abuse since the age of 16, equivalent to an estimated 4.3 million female and 2.4 million male victims, according to the year ending March 2017. An estimated 7.5% of women (1.2 million) and 4.3% of men (713,000) experienced domestic abuse in the last year. Sexual assault (including attempts) by a partner is where the largest difference between men and women was observed, with women being five times more likely than men to have experienced this type of abuse in the last year. For both men and women, those in the younger age groups were more likely to be victims of domestic abuse in the last year than those in the older age groups.

A recent Bristol University study (2016) found out that gendered assumptions about the allocation of household resources and caring responsibilities are central in shaping women's vulnerability to domestic violence. These include:

- Gendered assumptions around shared access to household incomes and resources
- Situations of financial dependency which can put women at risk of poverty if they leave, including whether benefits are received as a dependent or in one's own right
- Gendered expectations regarding women's caring responsibilities which limit employment prospects
- Gendered expectations that any benefits received by women are for the benefit of other family members
- Situations where male partners prevent women from working, claiming benefits, or leaving the house

According to the Buckinghamshire County Council DVA strategy, the prevalence of domestic abuse is one of the county's biggest challenges. In 2015/16, 101 women used Buckinghamshire refuges and a further 187 women could not be accommodated in due to a lack of suitable places. In the Thames Valley area, 13,457 domestic abuse related crime were recorded (TVP report, March ending 2017). During the same time, 3080 domestic abuse related prosecutions took place, which was equivalent to all prosecutions in the area. There were 53 arrests per 100 domestic abuse related crimes in Thames Valley in the year ending June 2017.



Source: Domestic abuse related crimes recorded by the police, TVP 2017

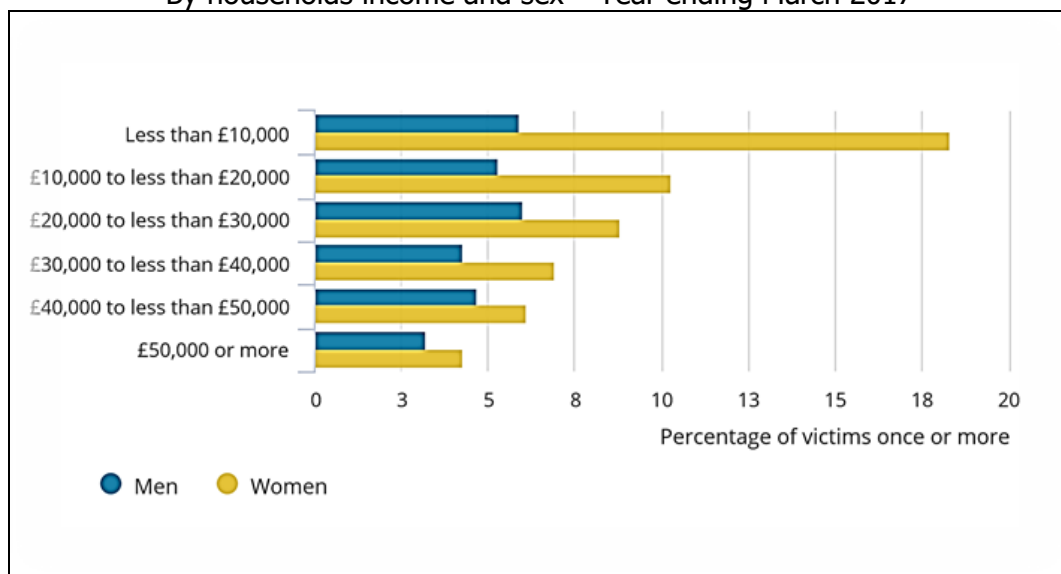
During the year ending March 2017, 22% of domestic related abuse crimes in Thames Valley area resulted in a charge. This is higher than the England and Wales average of 18%.

Those in the younger age groups were more likely to be victims of domestic abuse than those in the older age groups. Nationally, women aged between 20 and 24 (11.2%) were significantly more likely to be victims of any domestic abuse in the last

12 months than women in any other age group. In Buckinghamshire, 7.2% women aged between 20 and 24 reported sexual assault which is the second highest prevalence within all age groups. Girls of 16-19 years are in highest category (8.8%) of reported sexual assaults in the year ending March 2017.

British Crime Survey data demonstrates a significant association between household income and DVA, with women (and men) living in poor and financially insecure households being more likely to experience domestic violence.

Chart 15: Prevalence of domestic abuse for adults aged 16 to 59
By households income and sex – Year ending March 2017



Source: Crime Survey for England and Wales

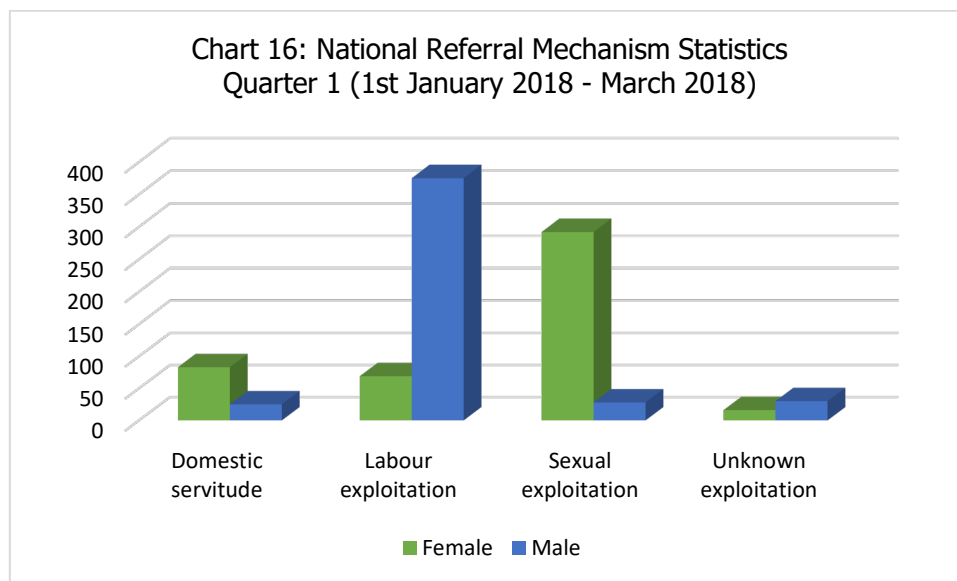
This demonstrates that in England and Wales, women in the lowest household income bracket were more likely to be victims of domestic abuse in the last 12 months (18.3%) than those in any other household income groups.

There has been an increase in domestic violence rates noticed in deprived areas of Buckinghamshire. The Aylesbury south and west neighbourhood DVA offences are up 71% and 45% respectively, this year (02/09/2017 to 02/09/2018) compared to the previous year (02/09/2016 to 02/09/2017). In Walton Court, located in Aylesbury south neighbourhood, offences are up 118% this year compared to last year (11 offences to 24 offences).

Domestic violence against a person offences have also increased in Quarrendon, which is situated in the Aylesbury West neighbourhood. Over the past year offences have increased by 175% (from 16 offences to 44 offences).

Modern slavery:

The Global Slavery Index estimated that there were 136,000 people living in modern slavery in the United Kingdom on any given day in 2016, reflecting a prevalence rate of 2.1 victims for every thousand people in the country. According to the 2017 annual figures provided by the National Crime Agency (NCA), 5,145 potential victims of modern slavery were referred through the National Referral Mechanism (NRM) in 2017 of whom 2,454 (47%) were female, 2,688 (52%) were male and 3 (less than 1%) were transgender. Latest figures published by NCA shows an 11% increase in referrals (1631 in total) in first quarter of 2018 (1st January to March 2018) compared to the last quarter of 2017.

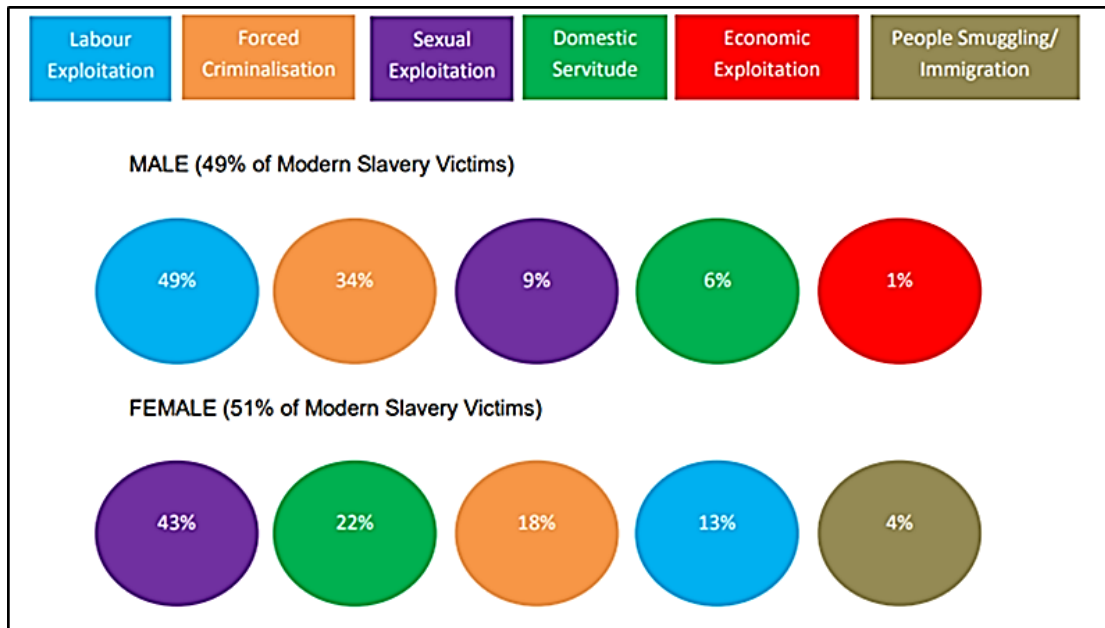


Source: National Crime Agency report, 2018

Sexual exploitation and domestic servitude were the two major causes of referrals for females.

During the same period Thames Valley police referred 44 cases to NRM. Between July and December 2017 there were six individuals in Aylesbury Vale referred into the National Referral Mechanism, the national framework for identifying and supporting potential victims of Modern Slavery. There were almost 200 referrals across Thames Valley in the year 2017.

Chart 17: Modern slavery in Thames valley area by type and gender
February 2016 – March 2017



Source: Buckinghamshire Adult Exploitation Strategy 2017 – 2020

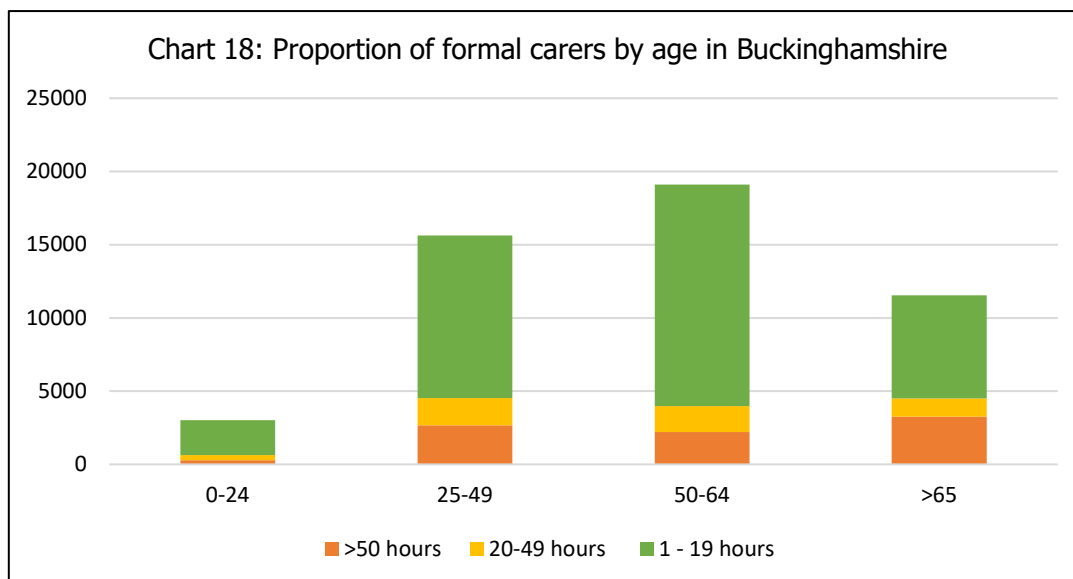
Above chart shows that during 2016-17, 51% identified modern slavery victims were female in Thames Valley area. The majority of these (43%) fall into the sexual exploitation category. 22% of female victims were recorded as domestic servitude cases.

National Crime Agency indicated that the true numbers are likely to be substantially higher in all regions as many victims are unable or reluctant to report to authorities or may not be recognised as victims of modern slavery when they do report.

Caring role:

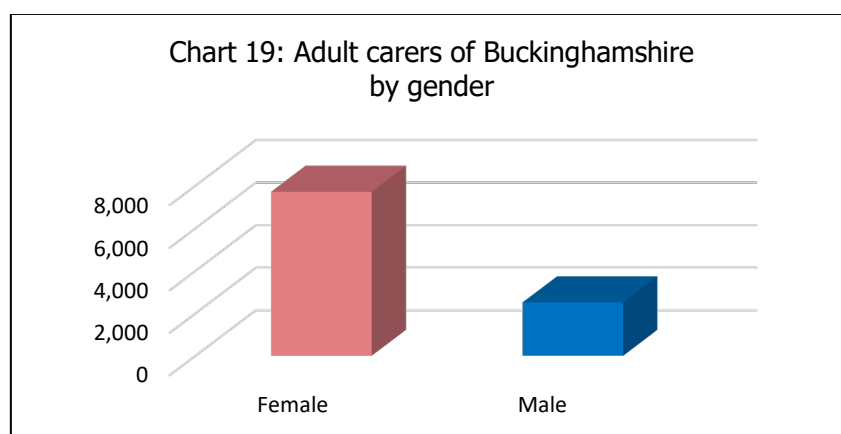
There are around seven million carers in the UK. It is estimated that there will be nine million carers in the UK by 2037. Nationally one in four women aged 50-64 are carers compared to one in six men. Out of the UK's carers, 42% are men and 58% are women. The percentage of carers who are female rises to 60% for those who are caring for 50 hours or more a week. Women have a 50:50 chance of providing care by the time they are 59; compared with men who have the same chance by the time they are 75.

According to Census 2011, 9.8% of the total population provided unpaid care in Buckinghamshire. 58% of total unpaid carers are female. Majority of the registered carers provide up to 19 hours care per week. The highest proportion of carers in Buckinghamshire is in the 50-64 age range (chart 18)



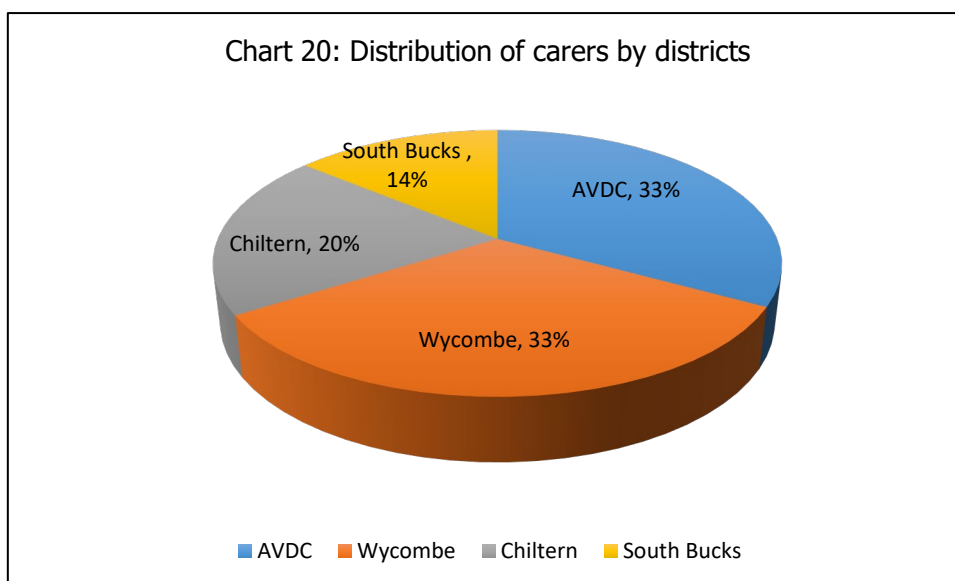
Source: Census 2011

Recent statistics from Carers Bucks (2018) show that at present 10,217 carers are registered with them and the majority of adult carers are female (75%). Carers Bucks also support 136 young adult carers aged 16-25. 82 of them are female.



Source: Carers Bucks 2018

The district distribution of carers shows that two third of carers live in the Aylesbury Vale and Wycombe districts. The largest number of all self-identified carers is from a BME background (13%). The largest ethnic minority group of carers is of Asian ethnicity, forming 7% of the total carer population in Buckinghamshire. The NHS Information Centre Survey of Carers in Households found that BAME carers are more likely than White carers to provide support for at least 20 hours a week (56% compared to 47%).



The pressures of caring can take their toll on physical and mental health. The GP Patient Survey in 2015 highlighted the impact of caring on carer’s health – whilst 51% of non-carers had a long-standing health condition this rose to 63% of all carers and 70% of carers caring for 50 or more hours a week. The survey also highlighted higher levels of arthritis, high blood pressure, long-term back problems, diabetes, mobility problems, anxiety and depression amongst carers.

The peak age of caring also often coincides with the peak of an individual’s career in their 40s-60s. National opinion polling for Carers UK’s Caring & Family Finances Inquiry showed that middle-aged people with caring responsibilities were more likely than carers of other ages to have given up work or reduced working hours and seen a negative impact on their work, such as stress and tiredness. In particular, women aged 45-54 were more than twice as likely as other carers to have reduced working hours as a result of caring responsibilities. Women are more likely to be sandwich carers (combining eldercare and childcare) are also more likely to give up work in order to care. The employment rate for carers is at 67% (72% of men and 62% of women); over half of those who are not working say that they want to do so. One in five carers gives up employment to care.

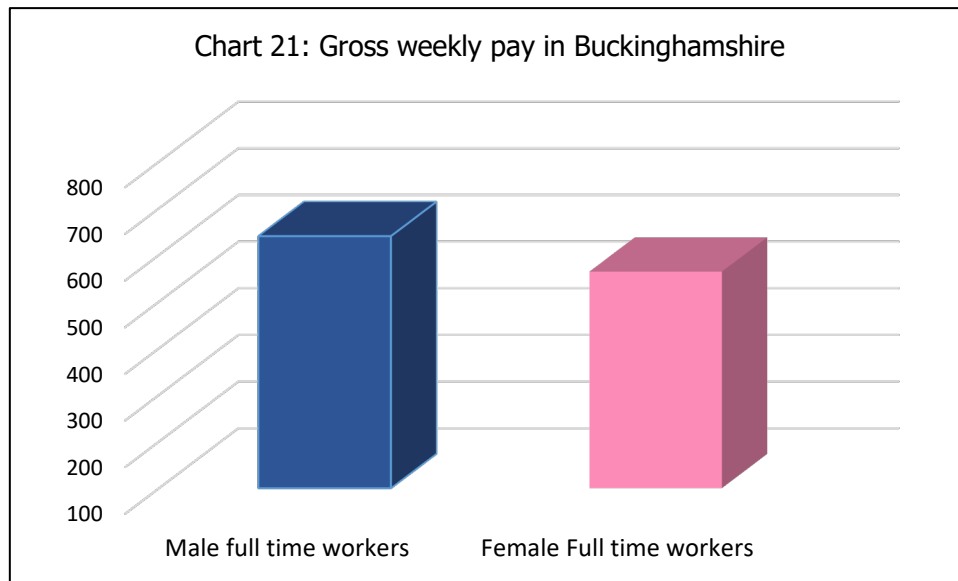
Gender pay gap²:

In 2018, Buckinghamshire women earned £76 less per week than men who are in full time employment (male: £640, female: £564). The hourly rate pay gap in Buckinghamshire is £3.26. Across districts the mean³ gender pay gap recorded highest

² The gender pay gap is calculated as the difference between average hourly earnings of men and women as a proportion of men’s average hourly earnings.

³ Mean - a measure of the average which is derived by summing the values for a given sample, and then dividing the sum by the number of observations (i.e. jobs) in the sample.

in Chiltern area (31.6) followed by Wycombe (28.1) both are above Buckinghamshire average of 26.2.



Source: NOMIS, Official Labour Market Statistics; 2018

The area distribution table of mean gender pay gap below shows the difference in full-time work and part-time work in major towns of Buckinghamshire. Full-time female employees are earning less in each major town. The pay gap difference is highest in Buckingham while Beaconsfield shows the lowest gender pay gap in full-time work. But the situation changes quite significantly in part-time employment. Female part-time workers are earning more than male workers in Buckingham (-47%), Beaconsfield (-32.1%) and Wycombe (-12.9%).

Table 2: Mean Gender Pay Gap (%) by Area 2017

Area	Full-Time Work	Part-Time Work
Aylesbury	23.6	5.2
Beaconsfield	12.2	-32.1
Buckingham	33.9	-47.3
Chesham and Amersham	22.9	Not available
Wycombe	15.2	-12.9
UK	14.1	5.2

Source: Gender pay gap 2017; Annual Survey of Hours and Earnings

The Annual Survey of Hours and Earnings gender pay gap table also reveals that increasing age has a direct correlation with the pay gap. For both full time and part time work, the gender pay gap remains lowest until the age of 30 and peaks after 50.

Table 3: Highest and Lowest Mean Gender Pay Gap (%) by Job Type and Age 2017

Age	Highest	Lowest
18-21	Technical occupations (14%)	Professional occupations (-44.7%)
22-29	Skilled trades occupations (15.9%)	Sales and customer service occupations (2.7%)
30-39	Process, plant and machine operatives (16.7%)	Sales and customer service occupations (6.9%)
40-49	Skilled trades occupations (27.8%)	Caring, leisure and other service occupations (11.7%)
50-59	Skilled trades occupations (30.3%)	Caring, leisure and other service occupations (10.9%)
60+	Managers, directors and senior officials (27.3%)	Caring, leisure and other service occupations (4.1%)

Source: Age by Occupation: Gender pay gap 2017, Annual Survey of Hours and Earnings

The table of gender gap by age and job type above reveals that nationally the gender pay gap is reversed at the early age of professional occupations where on average women earn 44.7% more than men in the same category. However, in all other occupations and in other age categories the pay gap is in the men's favour. The maximum gender pay gap recorded is in skilled trade occupations with women aged 50-59 earning 30.3% less in skilled trade occupation. Before retirement, women in caring, leisure and other service occupation are receiving almost similar (4.1% less) salaries to men but at the same age women senior officials, managers and directors are receiving 27.3% less than men in equivalent roles.

Similar data is currently not available regionally. Future research can be done to find spatial gender gap data by age and job type Buckinghamshire.

Representation gap:

2018 marks 100 years since The Representation of the People Act and The Parliament (Qualification of Women) Act were passed to reform the electoral system in Great Britain. The former gave all men over the age of 21 the right to vote and also extended voting rights to women of property over the age of 30 whilst the latter gave women over the age of 21 the right to stand for election as an MP. Both pieces of legislation marked major advances for women's political participation and empowerment. It is the right time to reflect upon the women's political representation, power and leadership.

Women continue to be under represented at all level of politics. Women are more than half of the population yet, currently only 32% of MPs and 33% of local councillors in the UK are women. Buckinghamshire does not show an encouraging picture on the representation map. 35.5% of our county councillors are women (15/40). Amongst the four district councils, only Chiltern (32.5%) has more than 30% women representation while Wycombe has lowest at 20% women councillors.

Table 4: Women town councillors of Buckinghamshire 2018

Town Councils	Percentage of Women Councillors
Amersham	40% (6/15)
Aylesbury	32% (8/25)
Beaconsfield	12.5% (2/16)
Buckingham	29.4% (5/17)
Chesham	15.8% (3/19)
Gerrards Cross	36.4% (4/11)
Marlow	41.7% (5/12)
Princes Risbrough	15.4% (2/13)
Winslow	33.4% (4/12)

The above table shows the number and percentage of women councillors in town councils of Buckinghamshire. Marlow, Amersham, Gerrards Cross, Winslow and Aylesbury representation trends are similar to those nationally. There are low numbers of elected women councillors in both Princes Risborough and Buckingham town councils. Overall, in Buckinghamshire there is a considerable gender gap in local councils.

The reasons for the continuing deficit of women’s representation in politics has been well studied, with some scholars attributing women's low election rates to problems of supply, focusing on the question of who decides to run for office, while others highlight issues of party demand, focusing on whether parties discriminate against particular types of candidates. To understand the local reasons of women representation we consulted with local councillors from different districts. Some of the barriers identified by the councillors are listed below

- Lack of access to available information on when and how to get involved
- Lack of access to role models and opportunity to shadow. There is no defined career path for girls in school.
- Traditional views on joining politics

- Politics is time demanding and not child friendly.
- Lack of awareness about women in politics in local media. Generally, more focus on appearance and this perpetuates a gender stereotype.
- Selection process is gender biased and hierarchical.

On 10th October 2018 the first Women conference of Buckinghamshire was held at the Buckinghamshire New University Campus in High Wycombe to encourage young women and girls to take up leadership roles.

Chapter 4: Retirement

Ageing population:

Our ageing population is the single most significant driving force for changing the health and care needs in our society. Between 2005/06 and 2015/16 the total number of people aged 65 or over in England increased by close to 21 per cent, representing nearly 1.7 million people. Moreover, the greatest growth in percentage terms has been amongst those aged 85 and over – this age group increased by 31.3 % over the period. Today, on average, a woman aged 65 in England can expect to live another 21.2 years, while a man can expect another 18.8.

Currently 16.8% of the total population is aged 65 and above. Similar to the national picture, Buckinghamshire will also face its greatest growth in the older population. As a result of ageing population our old age dependency ratio⁴ is also rising. According to the latest release of ONS, the age dependency ratio is highest in South Bucks (28%) and lowest in Wycombe (23%) amongst all four districts of Buckinghamshire.

20% of total female population are aged 65 and over. As women are living longer, they make up the larger proportion of older people in Chiltern and South Bucks.

Health:

As previously mentioned, the female population in the UK live longer than males. However, females are spending the majority of these extra years of life in poor health. Healthy life expectancy numbers indicate the years in good health for both men and women. At the age of 65 a woman is spending on average 47% of the rest of her life in poor health (while a man 44% of his life). In Buckinghamshire, healthy life expectancy for females at 69.6 years is better than the English average of 64.8 years. There are big inequalities in different parts of the county. Female life expectancy is worst in Wycombe area (64.7 years) and best in Missenden area (73.3 years) according to the local area profile 2017. For women living in good health over poor health, the gap is highest in North West Chiltern wards where on an average older women live 14.4 years in poor health while men live 11.7 years in poor health. According to the Local Area Profile, excess weight is a major cause of poor health and early death in Buckingham, Wing, Waddesdon and Iver.

The rate of falls also increases with age. Women are more likely to fall than men. Hospital admission due to falls per 10,000 population remains the same over 2016/17 except in South Bucks where the hospital admission due to falls in people aged over 80 are significantly worse.

Dementia is one of the main causes of disability in later life, ahead of some cancers, cardiovascular disease and stroke and is the leading cause of death for women in the

⁴ The OADR is the number of people over 65 years old for every 1,000 people aged between 16 and 64 years old

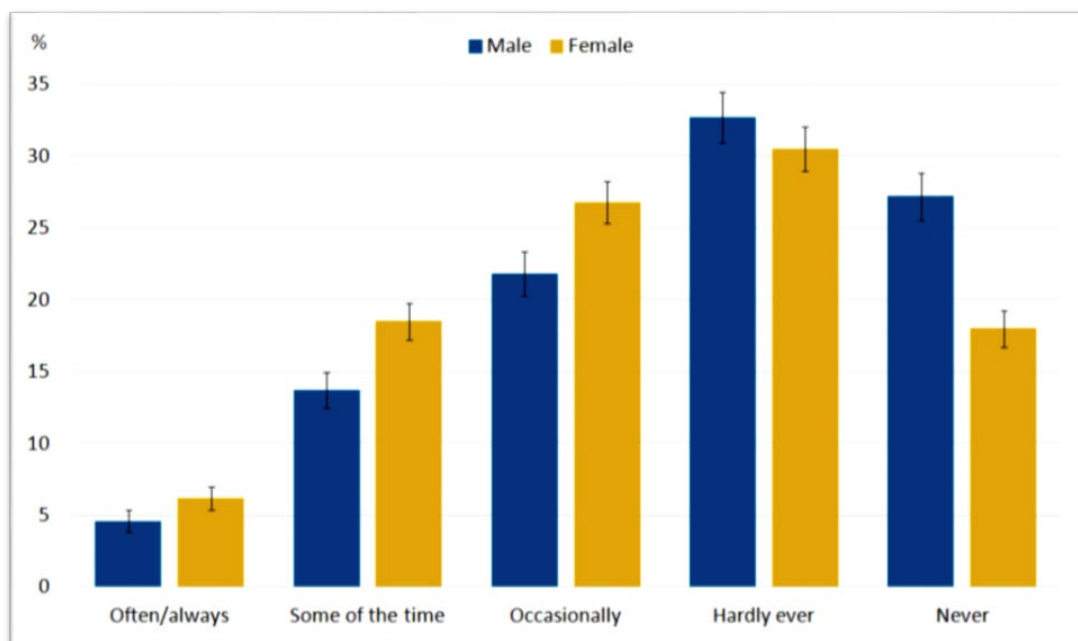
UK. According to Buckinghamshire County Council’s statistics, the prevalence of dementia is only 4% for 75 to 79 years old. Nevertheless, the numbers rise significantly to more than one in four among women aged 95 to 99.

Social connection and isolation:

Social connectedness is key to healthy living. Studies have shown that older people who have better social contact live longer, cope better with health conditions and experience less depression. Isolation and lack of social connection leads people to loneliness. Loneliness can increase the risk of premature death by up to a quarter (Age UK).

The Community Life Survey (2016-17) revealed that women feel lonely more often than men. They were significantly more likely than men to report feeling lonely “often/always”, “some of the time” and “occasionally” and were much less likely than men to say they “never” felt lonely. Some research suggested that men may be more reluctant than women to report undesirable feelings such as loneliness. Those single or widowed are at particular risk of experiencing loneliness more often. Similarly, people with disabilities and poor health more likely to report feeling lonely and isolated than people with good health.

Chart 22: Reported frequency of loneliness by sex, England



Source: Community life survey 2016-17

The Adult Social Care User’s Survey carried out each year, includes measures of social connectedness. In 2016-17 survey, 400 respondents from Buckinghamshire answered the question about social connectedness. 45.1% of them said they had as much social contact as they wanted but 14.6% said they have some social contact but not enough

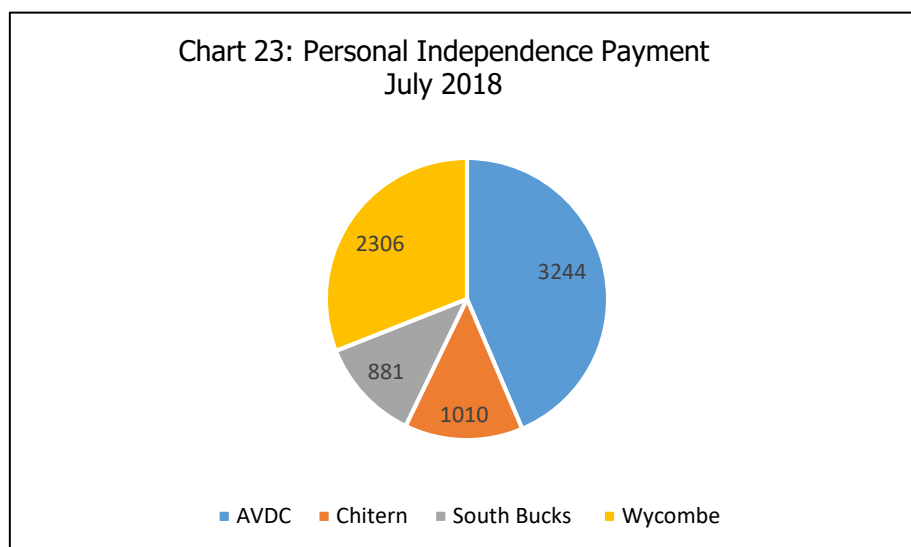
for them. Social connectedness is also influenced by the ability to get around outside people's homes. 405 Buckinghamshire residents responded to this question stating that 24.6% do not leave their home at all, whereas 24.9% are unable to get to the places in the local area.

Local area profiles of Buckinghamshire identified that risk of loneliness amongst aged 65 years and above is highest in the parts of Amersham on the Hill wards. 21 further wards are also at high risk of loneliness. Though the Community Life survey suggested that people living in urban areas were more likely to feel lonely 'often or always' than those living in rural areas (6% compared with 3%), in rural Buckinghamshire the risk of loneliness is high amongst elderly people because of lack of public transport. Social isolation and loneliness was recognised as the key issue in Aylesbury Vale district area in the recent ROC conversation on 10th October 2018 (ROC Conversation Aylesbury report).

It is also evident from our consultation research that women aged above 75 are at high risk of isolation and loneliness.

Long-term care and caring role:

An estimated four million older people in the UK have a limiting, longstanding illness. Nationally, 21% of men and 35% of women aged 65+ need help with at least one activity of daily living. Of these, 17% of men and 26% of women aged 65 and over had some unmet need with at least one activity of daily living, and 12% and 15% respectively had some unmet need with at least one instrumental activity of daily living. The Adult Care User Survey 2016-17 revealed that in Buckinghamshire almost half of the respondents (48.9%) said they have adequate control of daily life and 13.9% believed that the control they have was not enough.



Almost 9,000 older people in the county needed help in looking after themselves, as indicated by the numbers claiming Attendance Allowance (April 2017). 67% of total claimants are female. The total number of claimants reduced considerably in July 2018 (7741) as the above chart shows. The highest number of claimants are from Aylesbury Vale and the lowest from South Bucks.

The number of carers over the age of 65 is increasing more rapidly than the general carer population. Whilst the total number of carers has risen by 11% since 2001, the number of older carers rose by 35%. Nationally, 59% of carers over 85 are men and 41% are female. 65% of older carers (aged 60–94) have long-term health problems or a disability themselves.

In Buckinghamshire, more than 10,000 carers (Census 2011) were elderly and chart 18 demonstrates that they represented the highest percentage of those providing care for more than 50 hours per week.

Fraud and scam:

Older people are more at risk when it comes to door step crime. Impostors scammed nearly 49,000 older people across the UK in the past year, equivalent to almost six reports every hour. The total number of reports has nearly doubled in the past three years but the true number of elderly victims is likely to be in the millions. The police state that more victims are coming forward but admitted they were the "tip of the iceberg". In 2016-17 there were 40,487 reported frauds affecting people aged over 60. Nationally 54% of doorstep crime victims are female.

In Buckinghamshire, the combined value of loss from Doorstep crime was £974,000. Over 70s, especially women, are most at risk, particularly those who are living alone often with no one to call on. The average victim in Buckinghamshire is aged 77 years and female, 57% of them live alone.

Chapter 5: Findings from community consultation

The community consultation was instrumental in understanding local issues for women and girls, which are difficult to find from any statutory or statistical data. Gaining an insight into local needs is crucial for shaping any service for Buckinghamshire. From the consultation, several concerns and barriers to the development of women's lives were identified, as well as the support which might help to make improvements. The consultation also highlighted groups of marginalised women and girls who are lacking personal, educational, social support. Finally, recommendations have been made for future collaborative working and targeted intervention to improve the lives of girls and women in Buckinghamshire.

Findings from the consultation are divided into four categories - social, financial, mental health and awareness/education.

Social:

'Not being taken seriously, not heard and believed, judged – women face everyday basis' – community consultation participant

Women and girls of different ages are still lacking a support network where they can feel safe and valued. A major concern which was identified in the social category was a lack of confidence and self-esteem amongst women. Not being respected in their own home is one of the reasons for low self-esteem in women. For some communities, language barriers can also increase women's lack of confidence. Gender expectation along with family expectation is also creating social isolation. There is a lack of local role models which is creating a gap for young girls and women. A lack of support from mentors or peers especially for girls and young mothers has been identified, as well as safe places to meet. Trust with local agencies is also missing. All the above mentioned barriers are also creating resistance for integration for women in wider society.

Identified support needs:

- Long term tailored support to enhance confidence and increase self-value
- Counselling service and support to build social skills
- Safe places to meet up regularly, which may help to overcome isolation and enhance wellbeing
- Peer support and mentoring opportunities within communities to encourage and motivate women to believe that they can reach a similar target
- Help with integration into the community
- Need for role models and access to role models
- Intergenerational activities for elderly women with shared interests
- Platform to integrate communities
- Community building via support group –gives a sense of belonging and self-worth
- Affordable or free female-only health related activities

Financial:

"Finding childcare and making sure that it is cost effective to work or finding the time to study" - Community consultation participant

Lack of affordable childcare is the most talked about challenge within the financial category. Women who are willing to join a course or training find it difficult because of the cost of childcare. Financial barriers are a constant worry for young women as identified by participants. They are also lacking money management skills, which may lead to debt and financial crisis. Women from deprived areas are more likely to face economic difficulties than other areas. Teenage girls from deprived areas lack social networks as they come from a low income background, they don't have access to technology such as a laptop or computer. This creates a barrier in their studies and social life. Ethnic minority women from different communities are also unaware of their financial rights, with culture playing a major role in financial dependency on male members of the family. Female members hardly have access to money or public funds. Other economic challenges identified from the consultation are lack of practical workshops/support on employment and lack of peer mentor support.

Relationships, money and debt can cause stress which affects quality of life and mental health. Women may face issues, which are often interlinked, combining cultural and community context and creating challenges that are more complex in nature.

Identified support needs:

- Network of support for women to access employment
- Adequate child care provision
- Informal job clubs
- Free or low-cost vocational courses after children start school to gain skills
- Short courses on job hunting, CV writing and interview etiquette
- Training on setting up own business and financial management
- Ongoing consistent support with experienced business advisers to support moving towards their goals
- Evening and weekend childcare facilities

Mental health:

"Peer pressure/pressure of living up to unrealistic expectation of social media is making their (young women's) life more challenging" - Community consultation participant

Women from all spectrums of life are experiencing mental health issues as identified by the participants. Social media plays a big role in younger generation's focus on appearance, which creates gender stereotypes. Depression, bullying, fear of judgement, stress, anxiety, low self-esteem are some of the mental health challenges women are facing. Unhealthy and abusive relationship or domestic violence also lead to stress and other mental health issues. Disability, housing issues, financial crisis and

isolation are some of the causes of increasing mental health issues as recognised by the participants. Women also suffer from a 'we are to blame' attitude.

Identified support needs:

- Self-help group via Train the Trainer concept to empower
- Non-judgemental support from people who care
- Setting up of peer support group to reduce stigma and isolation
- Sessions to build life skills and coping tools of anxiety, stress, anger and depression
- Counselling service
- Home visits to assist women undergoing physical or psychological abuse
- Wellbeing course and sessions on mindfulness, meditation
- Women need to be able to come out of their home and have some 'me time' to enhance their wellbeing.

Education/Awareness:

"Women are not aware of what they are entitled to" - Community consultation participant

There is a definite need to raise awareness on available services and rights amongst women. Girls and women are not always aware of their financial rights, government benefits and rights over staying in the UK. Lack of language skills also make it difficult to access services for some of them. Promotion of a healthy lifestyle among girls is also missing as girls stop taking part in sports in large numbers as they move from primary to secondary school. Mode of information can create challenges, as some women may need a different means of gaining access to information to local services. Accessing information through websites needs specific skills to navigate the system.

Identified support needs:

- ESOL classes
- Life in UK test preparation session
- Training and education for homelessness for public and staff
- Awareness on support services/activities
- Access to interpreters to help women in the local services
- Parenting skill courses
- Mentoring in schools
- Diet and exercise
- Leadership and equipment projects
- Face to face talk/presentation by service providers

Marginalised groups:

Six marginalised groups, who are lacking support in general, have emerged from the consultation. Below the groups are listed in alphabetical order with their identified barriers.

Disabled women:

Limited help in accessing services for women with disabilities. Lack of female centric services and counselling support. They are also in need of employment support and advice on the services available to them and how to access those services. Culture, ethnicity and disability create multiple barriers for women.

Elderly women aged 75 and above:

Women generally who live alone for many years, become lonely and isolated, hence vulnerable and become victims of crime easily. White/British women of the older generation do not always have cultural support. Available local groups do not tend to meet their needs for fulfilling relations and usefulness. 'They don't just want to sit around and drinking coffee'. Many of them are under-confident due to lack of formal education, often they are unilingual so conversations are confined within a small controlled circle. Long-time caring responsibilities make them more isolated.

Ex-offenders:

Women offenders suffer from stigmatisation and discrimination. They are in definite need of practical support, advice and mentoring in learning new skills, finding employment, advice on childcare, accessing housing and benefits. At present not enough support is available for women offenders.

Homeless and rough sleepers:

Women are at risk of violence and assault on the street. There is also a risk of sexual abuse when they are sofa surfing. Inadequate feminine hygiene products and in general maintaining women's personal hygiene is difficult on the streets. Women do not feel safe in shelters or on the streets. They are also deprived of social networks and personal development.

South Asian and East European women:

Women from South Asian communities suffer from strict cultural constraints which discourage women from seeking employment and financial independence. There are several other barriers that include lack of language skills, lack of education and personal development, not respected in the family, financial inequality, social isolation, lack of confidence, lack of awareness about their rights, total dependency on male members of the family, low self-esteem, family expectation and pressure. Inter-family marriages and lack of consent are also seen as barriers. Male dominance also restricts women taking initiative, decision-making, vocalising their views and choices. Those who can work are restricted to roles in family restaurants, nail bars, beauty and

therapy salons. Young BAME women are underrepresented in most youth provisions across the county.

East European women's issues are similar to South Asian women's. They are not aware of the local services, lack of educational and social networks, and not knowledgeable about their rights. Usually, they migrate to deprived areas where resources are already stretched and don't get access to the services they need.

Women affected by domestic violence:

Financial problems – no access to funds, limited options for accommodation, isolated, lack of social support and fear of losing children. The overall impact causes physical and mental health problems.

Recommendations:

- 1 Setting up a social enterprise: A social enterprise should be set up for vulnerable women which can meet many of the identified barriers by bringing women's services together. It can start with an informal activity which allows a woman to have a legitimate reason to attend. For example, something based upon a craft activity. On the back of this, support agencies could be available to offer assistance if required in a low-key way. Agencies could be invited in to the group to talk about the services they offer to raise awareness if women need to access these services. Women could be encouraged to take 'ownership' of the group over time and be supported to take key roles within the governance structure.
- 2 Encourage/facilitate programmes of intergenerational good neighbourliness: An 'Adopt a Granny' type scheme where an older generation spends regular time with a younger neighbour through home visits, shopping expeditions, exercise classes, cinema and theatre etc. The swapping of life experiences and exchange of 'skills' across the generations would I believe benefit all generations and provide an outlet for shared female interaction.
- 3 Needs based support: Support should be led by need. Research should focus on different needs of groups, finding out specific needs. Project delivery should be driven by the services users on how they like to receive the support and what form. This has to match what is available/realistic and achievable.
- 4 Mapping of services: There should be a mapping initiative showing the support available within Buckinghamshire. Including groups available and who is providing what. This would enable service providers to deliver more bespoke services and intervention to meet the needs.
- 5 Dedicated fund: Women's fund for groups to improving the lives of, and supporting marginalised women

- 6 Engagement: Engage women with the ability to reach out to 'everyday' women on one level. Everyone should be able to engage with others irrespective of ability, race, ethnicity and/or cultural background. Projects to celebrate own culture and learn about the host culture and customs to develop and give back to society. The key is to engage the community at the outset and work together, on the same level to determine group needs and move forward to achieve desired goals.
- 7 LGBT groups: More work should be done on LGBT groups and women with complex needs
- 8 Events: Organise events to disseminate information as well as obtaining girl's/women's views. Bring together girls/women who are local/national young councillors, local volunteers, trustees, businesswomen, public and private female executives to speak and share their experiences of how they got there.

Future scope of work:

This current research enables us to identify further research scope for girls and women of Buckinghamshire. First of all there is a large amount of gender based data that is still not available at local level. Individual organisations may be working towards specific data but availability of statistics is the key. There should be a platform for accessible gender based countywide data.

There is certainly scope for further research on the effect of social media in different phases of women's lives in Buckinghamshire involving schools, colleges and the voluntary sector.

It was evident that Buckinghamshire girls are performing well, but there is no evidence of aspiration and gap in aspiration.

Working aged women's issues are highlighted with available statistics but the gender gap by age and job type is not available regionally. There is also not much information available on the gender gap for ethnic minority women.

Older women's issues are nationally identified in this research but there is a lack of gender-based data on older women in Buckinghamshire.

Finally, a countywide mapping exercise may help to solve many of the above-mentioned shortcomings.

Appendices

List of Charts

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Chart 21: Gross weekly pay in Buckinghamshire

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Chart 23: Personal Independence Payment July 2018

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