

Equality Screening and Impact Assessment

PART 1: Equality screening

1. Context, and aims and purpose of the policy/proposal

This equality screening and impact assessment (ESIA) focuses on the equality and diversity implications of our draft 2023 fees. To meet Section 149 of the Equality Act 2010 we have due regard to each of the statutory objectives:

- eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
- advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
- foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

Conducting an analysis of the equality and diversity implications of our proposals also helps to ensure that we are not acting in a way that is incompatible with a Convention right¹.

The ESIA aims to help ensure that our proposals do not unfairly affect groups who share protected characteristics².

Assessing the equality, diversity and inclusion impact of our policy development work is about being proactive in facilitating opportunities for people with the widest possible range of experiences and perspectives to engage with and influence our values, our culture, our strategy and the work we do.

We aim to take an inclusive approach to working with users of pharmacy services, registrants, stakeholders, and people affected in any way by our policy decisions.

In preparing this analysis, we have considered all the statutory objectives under Section 149 of the Equality Act 2010. At all stages of the process, we have considered how best to engage with equality groups, and equality and diversity issues have informed our proposals from the outset. We have sought

¹ **The Human Rights Act 1998**, Section 6

² **The Equality Act 2010**, prohibits direct or indirect discrimination, or harassment on the basis of a protected characteristic (age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex and sexual orientation).

to identify and mitigate any adverse impact on groups of people with one or more protected characteristics, including pharmacy owners and employers of pharmacist prescribers and pharmacy professionals, and people using pharmacy services. We have also considered how the proposed changes can help make a positive impact on these groups. The ESIA has been informed by our quantitative and qualitative analysis of responses to the consultation and the available data and/or evidence relating to groups of people who share protected characteristics. The analysis is intended to assist Council in considering whether the proposals should be approved and/or subject to further amendment before introduction.

Policy context

Every year we review our fees, to consider whether we need to change them to make sure we have the income we need for the year ahead. We consider fees as part of an overall analysis of the organisation, looking at ways to reduce costs, make efficiencies and prioritise our work. We also review our income and reserve levels and consider other possible sources of income.

When considering what fees to charge, we look at how much it costs to regulate each registrant group. We then set separate fees for each group, based on those costs.

To make sure the fees are appropriate, we use a 'cost allocation model'. This makes it clear how much our individual activities cost and gives us a framework for discussions about setting fees. We used this model to set the present fee levels.

Despite efficiency savings our operating costs across the organisation have increased. This increase has mainly been caused by a significant rise in the rate of inflation.

Our proposed cost increase is in proportion to the work we do to regulate all registrant groups. This is why we are proposing an equal percentage increase on all the registration fees we charge.

As a result, we are proposing a 7.5% increase in all the fees we charge for:

- pharmacist and pharmacy technician registration
- pharmacy premises registration, and
- the foundation training year

We are proposing to keep fees at the present level during 2023, and not to introduce these new fees until April 2024.

2. Review of available information/data to support the screening decision

To assess the potential impact of these proposals from an equality, diversity and inclusion perspective, we considered a range of information and evidence, including those set out below.

Legal framework

We are responsible for making sure we have the finances to carry out our regulatory role and fulfil our statutory duties. Under the Pharmacy Order 2010 ('the Order'), Parliament has given us the authority to:

- charge fees, and
- change the level of these fees, and
- make rules for our fees, so that the cost of pharmacy regulation is paid by the people and organisations we regulate

The proposed 2023 rules seek to increase the current fees by 7.5% as set out in appendix 3

GPhC long-term financial strategy

As part of our long-term financial strategy, we are looking at ways to:

- reduce our costs
- become more efficient
- use our reserves more effectively, and
- make sure that the people and organisations we regulate are paying an appropriate amount in fees

Differential fees

As part of our consultation on fees in March 2021, we looked into the option of charging reduced fees to specific groups of professional registrants such as people who work part-time. We set out the work and costs involved and asked for feedback on this option. The responses we received were largely in favour of keeping a flat-fee structure. Most respondents felt that this was both the fairest and simplest approach to adopt for both the GPhC and for registered pharmacy professionals.

Multi-year fees cycle

In our 2021 consultation on fees, we said we intended to consult on introducing a ‘multiyear’ fee cycle. This would be part of a broader fee’s strategy, which would involve setting registrant fees over a longer period, two-to-three-years, for example. We expected that this would benefit registrants by:

- giving them more certainty about the future costs of registration, allowing them to budget more effectively
- allowing us to plan our work over a longer period and potentially spread costs over more than one fee period, so that we could make fee changes more gradual
- reducing the number of fee consultations we would need to carry out, and so reducing consultation costs, and the time and effort registrants would need if they were to consider and respond to proposals

Since we developed this proposal, we have seen economic conditions change quite considerably. Over the last 12 months, inflation has risen significantly, and economic conditions in general are more variable. This means that currently we are unable to accurately forecast our operating costs over a two-to-three-year period, and set fees based on this.

Consultation responses and analysis on draft changes to fees 2023

Details of the consultation are included in section 5 of this paper. As part of this, we asked respondents to complete an equality monitoring form and to assess the type of impact the proposals will have on individuals or groups who share any of the protected characteristics. Please refer to the analysis report for further information.

Consultation responses and analysis on draft 2021 fee proposals

In 2021 we consulted on proposals to help us develop our fees strategy/our overall approach to fee setting. As part of this, we proposed to retain a flat fee structure, rather than introduce differential fees, for registered pharmacy professionals. This would mean that all pharmacists and pharmacy technicians would continue to pay the same fee as others in their respective registrant group. We also proposed to introduce a multi-year fees cycle rather than the current annual cycle, to allow for better forward

financial planning for individual registrants and the GPhC. We carried out an equality impact assessment to assess the implications of our proposals on those who share protected characteristics. In developing our proposals for the draft 2023 fees we considered the findings from the 2021 EIA and analysis.

Consultation responses and analysis on draft 2020 fee proposals

In 2020 we consulted on our draft 2020 fees rules and our long-term fees strategy. As part of this, we proposed to increase the registration and renewal fees for pharmacy premises and asked for views on whether the fees for pharmacy premises should be charged according to how much it costs to regulate them. We carried out an equality impact assessment to assess the implications of our proposals on those who share protected characteristics. In developing our proposals for the draft 2023 fees we considered the findings from the 2020 EIA and analysis.

Comparison with other regulators

As a comparison, we also considered how other regulators have set their fees. Regulators charge different types of fees and have different renewal periods, so it is not always possible to make a direct comparison. Our proposed fees would still be among the lowest of similar regulators.

Other available information and evidence considered

We looked at a number of different resources and evidence when developing our proposals, including:

- [Gender pay gap in the UK:2022](#)
- [GPhC Survey of registered pharmacy professionals 2019:Equality, Diversity and Inclusion report](#)
- [GPhC Vision 2030](#)
- [GPhC Strategic plan](#)

3. Screening for relevance to equality

Table 1: Relevance to equality issues

Issue	Yes/No	Comments
Age	<input checked="" type="checkbox"/> <input type="checkbox"/>	See below
Disability	<input checked="" type="checkbox"/> <input type="checkbox"/>	See below
Sex	<input checked="" type="checkbox"/> <input type="checkbox"/>	See below
Gender reassignment	<input type="checkbox"/> <input checked="" type="checkbox"/>	
Marriage or Civil Partnership	<input type="checkbox"/> <input checked="" type="checkbox"/>	
Pregnancy or maternity	<input checked="" type="checkbox"/> <input type="checkbox"/>	See below
Race	<input checked="" type="checkbox"/> <input type="checkbox"/>	See below
Religion or belief	<input type="checkbox"/> <input checked="" type="checkbox"/>	
Sexual orientation	<input type="checkbox"/> <input checked="" type="checkbox"/>	
Welsh Language Scheme	<input type="checkbox"/> <input checked="" type="checkbox"/>	

Issue	Yes/No	Comments
Other identified groups or issues	<input type="checkbox"/> <input checked="" type="checkbox"/>	

4. Decision on impact

Based on the answers above, does this policy/proposal require a full impact assessment?

Yes No

PART 2: Engagement and assessment

5. Consultation and stakeholder engagement

Overview

The consultation was open for 12 weeks, beginning on 16 May 2023 and ending on 8 August 2023. To make sure we heard from as many individuals and organisations as possible:

- an online survey was available for individuals and organisations to complete during the consultation period. We also accepted postal and email responses.
- we promoted the consultation through a press release to the pharmacy trade media, and through our social media platforms.
- we sent emails to all registrants and key stakeholders when the consultation opened, and again nearer the closing date.

Survey

We received a total of **7130** written responses to our consultation. **7057** of these respondents identified themselves as individuals and 73 responded on behalf of an organisation.

Of these responses, **7129** had responded to the consultation survey. The vast majority of these respondents completed the online version of the survey, with the remaining respondents submitting their response by email, using the structure of the consultation questionnaire. Alongside these, we received **1** response from an organisation writing more generally about their views.

Analysis

The full details of what we heard through our consultation are set out in our analysis report which will be presented to Council alongside this ESIA. An overview of the impact questions is set out below.

As part of the online survey, we asked two questions to further develop our understanding of the impact of our proposals. The first question was targeted at understanding the impact on individuals or groups who share protected characteristics. The second question was a broader one to understand the impact on each of these groups.

6. Full Equality Impact Assessment

We have used the data we gathered through our online survey to carry out a full impact analysis. Respondents were asked to assess the impact a proposed increase in fees would have on those who share protected characteristics. A breakdown of the key themes to emerge for each of the relevant equality areas are outlined below.

To make sure the fees we charge are appropriate, we use a 'cost allocation model', which sets out how much our individual activities cost, and gives us a framework for discussions about setting fees. This model was used to set the present fees level.

Our justification for introducing an 'across the board' increase in fees is due to the increase operational costs which have equally affected our cost of regulation, across the organisation. Despite this, respondents raised several concerns about how the current flat fee structure for individual registrants could impact on those who share protected characteristics and suggesting that a differential fee structure was preferable. These concerns are addressed in this ESIA.

A breakdown of the key themes to emerge for each of the relevant equality areas are outlined below.

Age

Different age groups have distinct healthcare needs and concerns. As part of our research and engagement activity, we sought to assess the impact of our proposal on people of different ages.

Our increase in registration fees is the same for pharmacy professionals of all ages, however reflected in the feedback, 61% of respondents felt that our proposals would have a negative impact on someone based on their age.

A few respondents expressed their concerns that those new to entering the profession would be faced with a high cost which could, in the long term, deter those from entering the profession. Many respondents highlighted that the increase in registration fees is said to directly affect younger pharmacists who have just finished university and pre-reg trainees, therefore are faced with student loans and rent/mortgage, without much financial stability. On a similar note a few respondents to our consultation highlighted that those from the elderly age bracket and close to retirement may decide to leave the profession, rather than pay the 7.5% increase in registration fees. A few respondents highlighted how this in turn would have a negative effect on pharmacy staff retention and therefore have a negative knock-on effect for patients and the public, thus compromising patient safety.

Respondents also raised concerns about the knock-on effects the increase of registration fees could have on elderly people, who are more likely to be heavily dependent on pharmacy services and could be considered the most vulnerable in society. Nevertheless, a small group of people felt that the increase of fees was manageable and that there would be no discernible impact on those with those share protected characteristics.

Action to mitigate potential negative impact (where this has been identified):

Respondents raised some important points on how the proposals could impact on pharmacy professional of different ages. This is something we specifically considered as part of the 2021 fee review when we consulted on the merits of introducing differential fees for individual registrants. However, the feedback from registrants at the time during the consultation was they they did not

support the introduction of differential fees. There was a number of points raised including for example if we reduced fees for newly qualified registrants, or older registrants and those approaching retirement it would mean that we would have to increase the fees for others, to cover the cost of regulation, which may also negatively impact other groups or individuals who share protected characteristics. It is important to highlight that we offer the ability for registrants of any and all ages to pay their registration fee on a quarterly basis to help manage the cost involved.

We are committed to providing equality, valuing diversity and being inclusive in all our work as a health professional regulator, a public service provider and an employer. We will continue to monitor the feedback we received as part of this consultation to improve our understanding of inequalities in pharmacy.

Lead: Jonathan Bennetts

Disability

Consider social and attitudinal barriers, as well as physical and mental disabilities. Is there a need to provide reasonable adjustments? Please note: not all disabilities are visible.

Our percentage increase in fees is the same for all pharmacy professionals whether they have a disability or not. Government statistics show that people with disabilities are more likely to be in part-time work than people without disabilities. It was noted by some respondents that those with a disability would be impacted disproportionately by our increase in fees in comparison to other groups.

We recognise that people with disabilities can face many barriers when accessing healthcare. Many respondents thought that our proposal to increase fees for everyone would affect those unable to work full-time, including pharmacy professionals with disabilities and many respondents felt it was unfair/disproportionate for registrants with disabilities who are unable to work full time, face the same increase in fees as everyone else.

In addition, respondents felt that certain registrants with a disability were also more likely to be on a lower income based on the fact that they are not able to work full time and the demanding on-going associated costs they have to face due to their health care, such examples include hospital appointments, medications etc. It was expressed by several respondents that fees for disabled people should therefore reflect this and that there should not be an increase in fees for these protected group of people.

Action to mitigate potential negative impact (where this has been identified):

We are aware that with limited data we cannot fully assess whether our proposals are likely to have differing impacts in relation to disability. We have noted the concerns and will continue to monitor. We do not envisage any other significant equalities impact of the proposals in relation to disability, but we will continue to monitor any issues raised with us about the impact of our proposals in relation to those with a disability.

Lead: Jonathan Bennetts

Sex (Gender)

Consider the impact on men and women, for example working arrangements (part time/full time), shifts, caring responsibilities, etc.

Our fees are the same for registrants no matter their sex or gender identity however, a few respondents mentioned that female pharmacy professionals could be adversely affected by the increase in fees compared to male counterparts in organisations where equal pay does not exist or if they are on maternity pay.

The latest ONS data shows that the gender pay gap for full time employers is at 8.3%. It was suggested that these disparities in earning could be exacerbated if there is an increase in registration fees.

A few respondents felt there would be a negative impact for pharmacy professionals on maternity or parental leave. It was stated that pregnant women, and those on maternity leave, will be on a reduced income yet there is nothing in the consultation that addresses this group, even though the proposed increase would burden them more.

Action to mitigate potential negative impact (where this has been identified):

We are committed to promoting equality, valuing diversity and being inclusive in all our work as a health professions regulator, a public service provider and an employer. As part of this we aim to ensure our fees do not directly negatively impact people based on their gender. We do not envisage any significant equalities impact of the proposals in relation to gender however we will take on feedback when developing a future long-term fee strategy. In previous consultations we assessed whether we should introduce differential fees however our conclusion was that differential fees were not viable as reducing fees for particular groups would mean an increase in fees for other groups, as we must cover the cost of regulation. This is unfair to people not eligible for differential fees and it would take extra time and resources if we introduced differential fees.

Lead: Jonathan Bennetts

Gender reassignment

Consider the impact on transgender people including discrimination, bullying and harassment, as well as privacy of data to avoid disclosure of gender history. Also consider the impact on those who are considering or undergoing transitioning.

We do not anticipate, nor have any evidence or information to suggest, any disproportionate impact an increase in fees may have in relation to gender reassignment.

Lead: Jonathan Bennetts

Marriage or Civil Partnership

Consider the impact on married couples or people in a civil partnership, of all ages, sexes and gender identities and expressions. Remember that civil partners must be treated as a married couple.

We do not anticipate, nor have any evidence or information to suggest, any disproportionate impact an increase in fees may have in relation to marriage or civil partnership.

Lead: Jonathan Bennetts

Pregnancy/maternity

Consider the impact on pregnant people, and those breastfeeding/chestfeeding, and on maternity leave.

Please refer to the section on gender (sex) as the issues brought up during the consultation are similar for both protected characteristics.

Lead: Jonathan Bennetts

Race

Consider the impact of people of different ethnic groups and nationalities, gypsies and travellers, migrant and refugees. Consider also language barriers and remember that British nationals from black and ethnic minority groups may also experience disadvantage.

Respondents to our consultation felt that that the proposed changes would have a negative impact on pharmacy professionals from diverse backgrounds.

Several respondents felt that race was strongly linked to socio-economic status and indicated that owners from black, Asian and ethnic minority backgrounds earned less than their white counterparts, therefore, there was a belief amongst some respondents that an increase in registration fees may proportionately disadvantage pharmacy professionals from minority ethnic backgrounds.

Our most recent registrant survey showed that 39% pharmacists identified as White British, as did 76% of pharmacy technicians. The next largest group was Asian or Asian British – Indian (16%); this was higher amongst pharmacists (19%) than pharmacy technicians (8%).

Action to mitigate potential negative impact (where this has been identified):

We are committed to promoting equality, valuing diversity and being inclusive in all our work as a health professions regulator, a public service provider and an employer. As part of this we aim to ensure our fees do not directly negatively impact people based on their race. We do not envisage any significant equalities impact of the proposals in relation to race however we will take on feedback when developing a future long term fees strategy.

Lead: Jonathan Bennetts

Religion or belief

Consider the impact on people with different religions or philosophical beliefs, or none. This includes festivals, prayer times, dress codes, dietary requirements, culture and heritage, etc.

We do not anticipate, nor have any evidence or information to suggest, any disproportionate impact an increase in fees may have in relation to religion or belief.

Lead: Jonathan Bennetts

Sexual orientation

Consider the impact on bisexual, gay, heterosexual, lesbian people, and others.

We do not anticipate, nor have any evidence or information to suggest, any disproportionate impact an increase in premises fees may have in relation to sexual orientation.

Lead: Jonathan Bennetts

Welsh language

Consider the linguistic requirements set out in the Welsh language scheme. Contact the Director of Wales for further advice and support.

The proposed changes do not raise any new issues or impacts in relation to the Welsh language scheme. Our current scheme (as published on our website [here](#)) sets out how we support and facilitate the needs of those who prefer to communicate in Welsh.

Lead: Jonathan Bennetts

Other identified groups or issues

Consider the impact on any other relevant group, e.g., carers, people from different socio-economic backgrounds, and other groups that are likely to experience disadvantage. Consider also how the policy/proposal will be communicated, adopted and implemented.

Through our consultation exercise, we heard from stakeholders on a number of broader equality, diversity and inclusion aspects to the proposals, including:

- Many respondents felt that as they were already facing a cost-of-living crisis, the increase in registration fees could cause them increased severe financial hardship, increased stress or no choice but to leave the profession.
- The most common theme observed through respondent's feedback revolved around the negative impact an increase in registration fees would have on workforce retention and recruitment, where fees may negatively impact professionals and premises, as well as deter people from joining the profession. Some respondents suggested that the public will be negatively impacted and that patients and the public's access to pharmacy services will adversely decrease due to many factors affected by the fee increase.

Action to mitigate potential negative impact (where this has been identified):

Our council will consider this ESIA when deciding what action to take. We will also consider the impacts raised by respondents during the consultation.

Lead: Jonathan Bennetts

7. Monitoring and review

a) How will the implementation of the proposal be monitored and by whom?

This analysis is intended to assist Council in considering our proposals to increase fees across the board by 7.5%

Once Council has made their decision, we will continue to gather feedback and data on all our fees as part of the wider review of our long-term fee's strategy. We will continue to monitor any other equality concerns that emerge and how we will mitigate against them

b) How will the results of monitoring be used to further develop this proposal and its practices?

We will monitor feedback during the implementation to ensure that no new negative impacts have been identified. The results of our monitoring activity will be used to develop further proposals for our long-term fees strategy.

We will continue to work with the GPhC's Equality, Diversity and Inclusion (EDI) Leadership group to update and review this impact assessment when appropriate

c) What is the timetable for monitoring, including key dates?

We will review our fees annually; any proposed changes are subject to a full consultation

8. Summary of the equality impact assessment

This section sets out what action will be taken as a result of the assessment.

No equality impact identified: no change to the policy/proposal

Equality and/or Welsh Language impact identified: continue the policy/proposal

Equality impacts have been identified. However, the policy is a justified and a proportionate means of achieving a legitimate aim.

Equality and/or Welsh language impact identified: adjust the proposal and continue

Equality impacts have been identified. However, action can be taken to reduce or mitigate any negative impacts.

Equality and/or Welsh language impact identified: stop and remove the policy/proposal

The policy, or certain proposals within it, have significant equality implications. It is likely to be challenged as the impact is likely to be negative or disproportionate on different groups of people and cannot be mitigated or justified.

The reasons for this decision are:

Give a brief explanations of the reasoning behind your decision, including reference to the evidence gathered and the assessment carried out above. There should be no new evidence or

information in this section, and you should refer to any action identified to mitigate negative impact.

When we set fees, we consider a range of factors including cost of regulation; relative risk factors where known; and comparable fees for other regulated professional groups. We are committed to considering these factors, but recognise that given the complexity of these issues, there is no perfect formula for decision making.

If we didn't increase our income to cover our costs, we would be forced to cut back on our regulatory work. We would no longer be able to offer the same level of assurance to patients and the public that the care they receive is safe and effective.

If the Council decides to adopt this proposal, we will continue to monitor the effects on equality once the fees increase across the board is set and implemented. We recognise that the impact of our fees more generally may be greater on some individuals or groups who share protected characteristics, including those mentioned in this paper. However, we believe it is justified because of the reasons outlined above, which outweigh these issues.

Factors that affect income such as socio-economic status and managing costs related to their protected characteristic are important areas that we will assess when we modify the fees and when we explore the feasibility of more flexible fee arrangements in the future. We will also consider the potential knock-on effect that an increase in fees could have on any individuals or groups who share protected characteristics, that are not immediately obvious. This was raised frequently as part of this consultation.

We are committed to promoting equality, valuing diversity and being inclusive in all our work as a health professions regulator and an employer. To make sure that EDI is fully integrated in everything that we do, we constantly refer to our EDI strategy. This will guide our work, including on the long-term fees strategy.

Table 2: Full Equality Impact Assessment record








Full assessment completed by:	Assessment signed-off by:	Referred to the Senior Leadership Group/Council on:	Published on:
Anita Adebola	Jonathan Bennetts	02/11/2023	09/11/2023

9. Appendix 1 Equality Monitoring




Consultation on draft changes to fees: equality monitoring

1. Equality monitoring

1. What is your age group? Please tick one box

Answer Choices			Response Percent	Response Total
1	Under 25		4.25%	135
2	25 - 34		37.61%	1196
3	35 - 44		25.13%	799
4	45 - 54		15.82%	503
5	55 - 64		9.21%	293
6	65 and over		2.04%	65
7	Prefer not to say		5.94%	189
			answered	3180
			skipped	137




2. Do you consider yourself to have a disability according to the definition in the Equality Act 2010? Please tick one box The Equality Act defines a disabled person as someone who has a mental or physical impairment that has a substantial and long-term adverse effect on the person's ability to carry out normal day-to-day activities. If you have a condition which fits the Equality Act definition, please tick 'Yes' even if you are not limited by your condition.

Answer Choices			Response Percent	Response Total
1	Yes		7.61%	240
2	No		80.37%	2535
3	Prefer not to say		12.02%	379
			answered	3154
			skipped	163












3. Is the gender you identify with the same as your sex registered at birth? Please tick one box

Answer Choices			Response Percent	Response Total
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3. Is the gender you identify with the same as your sex registered at birth? Please tick one box

1	Yes		86.19%	2715
2	No		2.57%	81
3	Prefer not to say		11.24%	354
			answered	3150
			skipped	167









4. What is your ethnic group? Please tick one box Choose the option that best describes your ethnic group/cultural background.

Answer Choices			Response Percent	Response Total
Asian/Asian British				
1	Bangladeshi		1.31%	41
2	Chinese		3.86%	121
3	Indian		10.19%	319
4	Pakistani		4.28%	134
5	Other Asian background (please fill in the box at the end of this section)		2.27%	71
Black/Black British				
6	African		5.37%	168
7	Caribbean		0.35%	11
8	Other Black background (please fill in the box at the end of this section)		0.13%	4
Mixed/Multiple ethnic groups				
9	White and Asian		0.89%	28
10	White and Black		0.32%	10
11	Other mixed background (please fill in the box at the end of this section)		0.61%	19
White				

4. What is your ethnic group? Please tick one box Choose the option that best describes your ethnic group/cultural background.

12	British/English/Northern Irish/Scottish/Welsh		46.50%	1456
13	Irish		1.44%	45
14	Gypsy or Irish traveller		0.00%	0
15	Roma		0.03%	1
16	Other White background (please fill in the box at the end of this section)		5.11%	160
Arab				
17	Arab		1.95%	61
Other				
18	Any other ethnic group (please fill in the box at the end of this section)		1.09%	34
Prefer not to say				
19	Prefer not to say		14.31%	448
			answered	3131
			skipped	186

5. What is your religion or belief? Please tick one box

Answer Choices			Response Percent	Response Total
1	Buddhist		1.03%	32
2	Christian		29.29%	907
3	Hindu		5.30%	164
4	Jewish		0.52%	16
5	Muslim		11.59%	359
6	Sikh		2.20%	68
7	Any other religion or belief		1.68%	52
8	No religion or belief		29.06%	900

5. What is your religion or belief? Please tick one box

9	Prefer not to say		19.34%	599
			answered	3097
			skipped	220

6. What is your sex? Please tick one box

Answer Choices			Response Percent	Response Total
1	Female		58.02%	1809
2	Male		31.24%	974
3	Other		0.22%	7
4	Prefer not to say		10.52%	328
			answered	3118
			skipped	199

7. What is your sexual orientation? Please tick one box

Answer Choices			Response Percent	Response Total
1	Heterosexual or straight		79.45%	2475
2	Gay or lesbian		3.08%	96
3	Bisexual		1.25%	39
4	Other sexual orientation		0.55%	17
5	Prefer not to say		15.67%	488
			answered	3115
			skipped	202