

# Equality Impact Assessment (EIA)

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## 1. Purpose of this Assessment

This Equality Impact Assessment evaluates the accessibility, experience, and outcomes of CRASAC's core rape crisis services, including therapeutic services and advocacy provision.

The purpose of this assessment is to:

- Identify whether services are equitable across protected characteristics
- Understand where barriers to access may exist
- Assess whether outcomes are consistent across different groups
- Inform actions to improve equity within existing resources

This assessment applies to:

- Service users (adults and children)
- Staff and volunteers
- Governance (Board of Trustees)

## 2. Data and Evidence Base

This assessment is informed by the following data sources:

- Internal monitoring data (demographics and service uptake)
- Outcome data (April 2025–March 2026)
- Referral and assessment information
- Workforce HR data

### Key Findings

Outcome data demonstrates consistently positive impact across all key measures.

For example:

- **Resilience (coping):** 119 improved vs 16 deteriorated (82% improvement rate)
- **Feeling informed/empowered:** 123 improved vs 8 deteriorated (88% improvement rate)
- **Safety:** 101 improved vs 11 deteriorated (79% improvement rate)
- **Health & wellbeing:** 132 improved vs 2 deteriorated (97% improvement rate)

Across all protected characteristics, the majority of service users report improvement, with very low levels of deterioration.

Analysis by protected characteristic indicates that:

- Outcomes are broadly equitable across groups where access occurs
- No significant disparities in improvement rates are evident

However, limitations include:

- Outcomes are not currently analysed alongside dropout rates
- Limited ability to track differences across the full service journey

### 3. Impact Assessment by Protected Characteristic

#### a. Race / Ethnicity

##### **Current Provision:**

- Interpretation budget
- Multilingual staff
- Anti-racism policy and public statement
- Inclusive resources and training

##### **Key Issue:**

Asian/Asian British service users account for approximately 10% of service users, compared to an estimated 16–18% of the local Coventry population, indicating underrepresentation.

##### **Impact:**

- Outcomes for this group are strong: Health & wellbeing: 15 improved, 0 deteriorated (~94%+ positive direction)

##### **Conclusion:**

- Inequalities are present at the point of access rather than within service delivery.

##### **Actions:**

- Analyse service user demographics annually against local population data
- Strengthen referral pathways with organisations supporting Asian communities
- Review accessibility of service messaging and entry points
- Explore opportunities for translation of key information and referral

#### b. Disability (including Neurodiversity)

##### **Current Provision:**

- Accessible premises and PEEPs
- Online counselling options
- Staff training on disability and neurodiversity
- Links with specialist services

##### **Impact:**

- Approximately 38% of service users identify as having a disability

- Positive outcomes for service users with disabilities: Health & wellbeing: 48 improved vs 1 deteriorated (~96% improvement rate)

**Actions:**

- Continue staff training and development
- Monitor outcomes for disabled service users annually
- Create accessible therapy room on the lower ground floor

### c. Mental Health

**Current Provision:**

- Trauma-informed model embedded across services
- Strong partnership working with health services

**Impact:**

- Positive outcomes across all measures.

**Actions:**

- Maintain partnership working
- Continue to monitor outcomes

### d. Age

**Current Provision:**

- Specialist children and young people's services
- Age-appropriate materials and environments

**Impact:**

- The majority of service users are aged 18–54 (approx. 70%+ of cohort).
- Strong outcomes for adults aged 18–54
- Older adults (55+) represent a much smaller proportion (under 10%), indicating potential unmet need despite positive outcomes where accessed.
- Positive outcomes for children and young people

**Key Issue:**

- Underrepresentation of older survivors.

**Actions:**

- Monitor age-related access trends
- Strengthen referral pathways where opportunities arise

#### e. Sex (Women)

##### **Current Provision:**

- Single sex female-only spaces and groups
- Gender-based violence focus

##### **Impact:**

- Strong positive outcomes across all measures

#### f. Sex (Men)

##### **Current Provision:**

- Single sex male-only groups
- Gender-neutral environments
- Targeted messaging and groups

##### **Impact:**

- Male service users represent a small proportion of the total cohort (approx. 8–10%).
- Outcomes are positive for male service users, with no deterioration identified in key measures:  
Health & wellbeing: 14 improved, 0 deteriorated (100% positive direction)

##### **Key Issue:**

- Very low representation of male service users.

##### **Conclusion:**

- The service is effective when accessed. The primary barrier is engagement rather than impact.

##### **Actions:**

- Strengthen referral pathways (e.g. schools, social care)
- Continue targeted inclusion work within existing resources
- Improve communication on website

#### g. Gender Identity (Trans and Non-Binary)

##### **Current Provision:**

- Inclusive service offer
- Public-facing guidance on inclusion
- Open access to services

##### **Impact:**

- Positive outcomes for those accessing services
- Very positive outcomes

**Risks:**

- Small sample sizes
- Need for consistent staff practice

**Actions:**

- Maintain clear guidance for staff
- Continue reflective practice and supervision

## h. Sexual Orientation

**Current Provision:**

- Inclusive service offer
- Partnerships with LGBTQ+ organisations

**Impact:**

- Positive outcomes across all groups
- High levels of engagement

## i. Pregnancy and Maternity

**Current Provision:**

- Online access
- Flexible support
- Family-friendly spaces

**Impact:**

- Barriers reduced; no negative impact identified.

## 4. Single-Sex Services and Inclusion

The service maintains women-only spaces in line with the Equality Act, recognising the gendered nature of sexual violence.

At the same time:

- Services are inclusive and accessible to trans and non-binary individuals
- Clear information is provided publicly regarding service access

**Risks Identified:**

- Complexity in balancing inclusion and single-sex provision

**Actions:**

- Maintain clear written guidance

- Provide reflective supervision and support
- Monitor feedback from all service users

## 5. Accessibility Review

### **Strengths:**

- Physically accessible premises
- Online service delivery options
- Plain English communication
- Interpretation services available

### **Barriers Identified:**

- Cultural and community-based barriers to access (particularly for Asian communities)
- Limited outreach capacity due to funding constraints

### **Actions:**

- Focus on strengthening referral pathways rather than outreach
- Continue improving accessibility within existing resources

## 6. Groups with Lower Access or Poorer Outcomes

The following groups are identified as underrepresented:

- Asian/Asian British communities
- Boys and male survivors
- Older adults (55+)

### **Evidence:**

- Comparison of service user data with local population demographics.

### **Conclusion:**

- The primary equality issue relates to access rather than outcomes.

## 7. Workforce and Governance Equality

### **Strengths:**

- Diverse workforce broadly reflective of local population
- Inclusive recruitment practices
- Ongoing training and development

### **Areas for Development:**

- Board diversity

**Actions:**

- Continue efforts to diversify Board of Trustees

## 8. Partnership Working

Strong partnerships in place with:

- Health services (GPs, CAMHS, secondary care)
- Community organisations
- Specialist services

**Action:**

- Continue to strengthen partnerships, particularly those supporting underrepresented communities

## 9. Risk Summary

Risk	Impact	Likelihood	Mitigation
Underrepresentation of some communities	Inequitable access	High	Strengthen referral pathways
Lack of segmented dropout data	Limited insight into service journey	Medium	Introduce demographic breakdown in next cycle
Inconsistent practice in complex inclusion areas	Variable service experience	Medium	Staff guidance and supervision

## 10. Action Plan Summary

Action	Owner	Deadline	Success Measure
Analyse outcomes by ethnicity and gender annually	Data & Operations Manager	6 months	Report produced
Introduce demographic breakdown of dropout data	Data & Operations Manager	Next reporting cycle	Data available
Strengthen referral pathways for underrepresented groups	Advocacy & Outreach Manager /Service Leads	Ongoing	Increased referrals for underrepresented groups
Review accessibility of service entry points	Senior Team	6 months	Improvements implemented

## 11. Monitoring and Review

This EIA will be monitored through:

- Annual data review
- Ongoing performance monitoring

- Reporting to senior leadership and Board

**Review Cycle:**

- Annual full EIA update

## 12. Final Summary

This assessment demonstrates that the service delivers consistently positive outcomes, with improvement rates ranging from approximately **79% to 97% across key measures**.

Outcome data indicates that impact is broadly equitable across groups. The primary equality issue identified is inequitable access for certain communities, particularly Asian populations (approx. 10% of service users vs 16–18% locally) and male survivors (under 10% of service users).

Actions will therefore focus on improving access through strengthened referral pathways and improved use of existing data systems.