

Creative Health: UK State of the Sector Equality, Diversity & Representation Report

Report by Jonathan Tang, University of Sheffield
For the Culture, Health & Wellbeing Alliance
February 2024



Aims & Objectives:

The Culture, Health & Wellbeing Alliance is committed to understanding more about and improving equity in creative health. The aim of the State of the Sector Equality, Diversity, and Representation Survey is to help us better understand the current landscape of the creative health sector in the UK. This survey was conducted in conjunction with the UK State of the Sector Survey between February and April 2023.

Thank you for taking the time to view these results. We welcome all feedback to our findings.

This survey was conducted in partnership between:



Arts Care



Arts Culture Health & Wellbeing Scotland

Executive Summary

The Culture, Health & Wellbeing Alliance (CHWA) is committed to becoming a more inclusive, diverse, and representative organisation. An important step of our Equality Action Plan involves gathering information. This State of the Sector Equality, Diversity, and Representation Survey represents a pivotal step in achieving that goal, allowing us to gain insights into the current landscape of the creative health sector in the UK.

In this report, we compared our sector findings with the Arts Council England’s (ACE) data report on equality, diversity and inclusion (workforce data) between 2020-2021 and the Office for National Statistics’ (ONS) Census 2021 data. The findings from this survey revealed areas where we may be doing well in terms of diversity and representation, including gender identity, sexual orientation, disability, and neurodiversity. Simultaneously, the results also underscored areas that require attention, such as gender, ethnicity or heritage, and religion.

The results from this report will provide invaluable insights as we embark on the next phase of our Equality Action Plan.



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Introduction

Respondents were invited to complete this Equality, Diversity, and Representation Survey after the Creative Health: UK State of the Sector Survey. In this survey, respondents were asked about their age, gender identity, sexual orientation, relationships, ethnicity, religious affiliation, disability status, caring responsibilities, and socio-economic background.

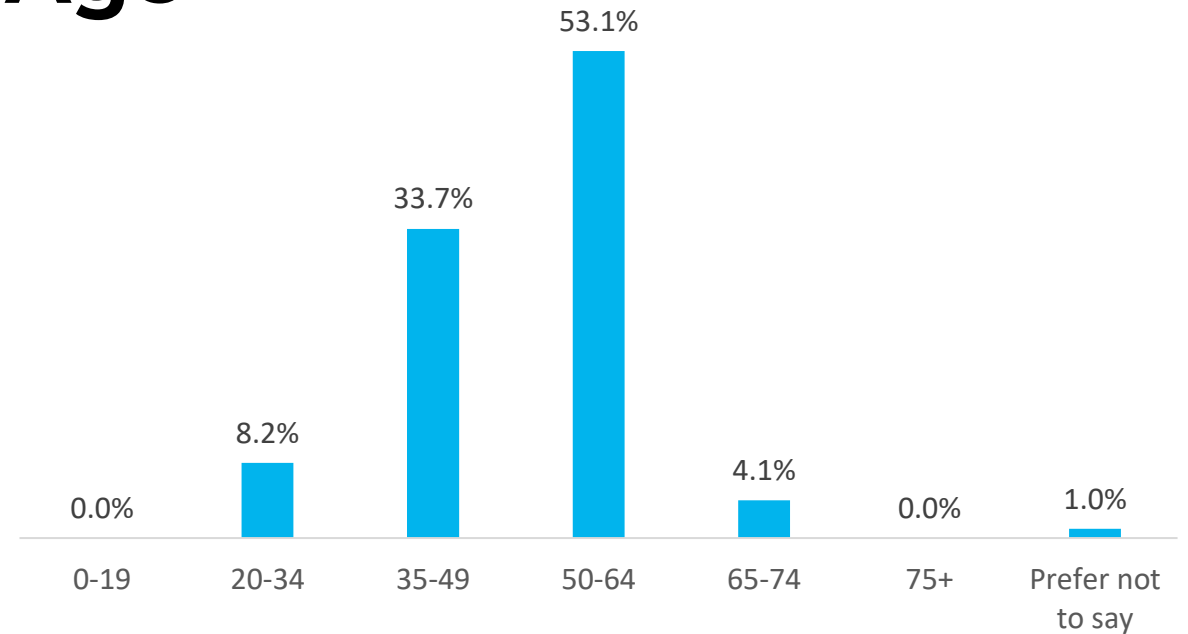
We compared our sector findings against the Arts Council England's (ACE) data report on equality, diversity and inclusion (workforce data) between 2020-2021 and the Office for National Statistics' (ONS) Census 2021 data. This comparison provides a snapshot of the creative health sector vis-à-vis the broader arts and cultural sector and the UK population.



Respondents

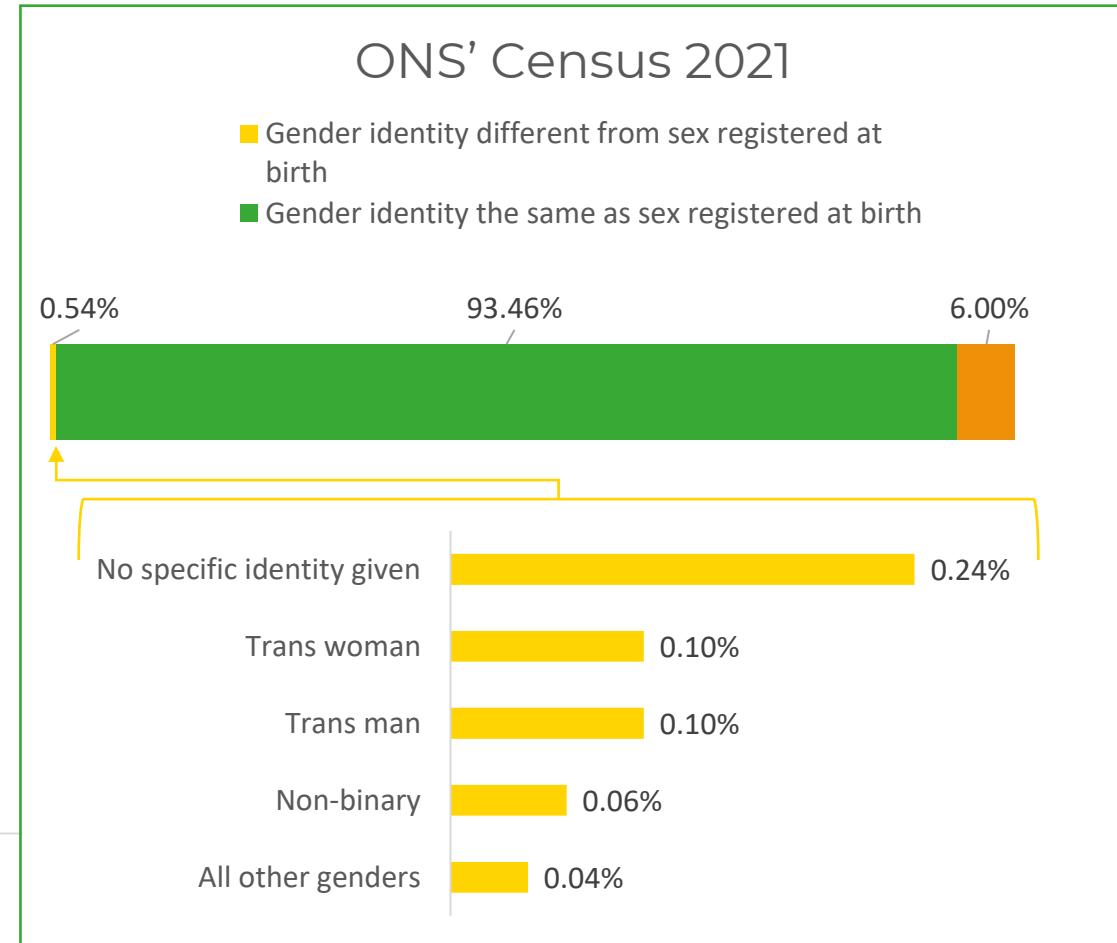
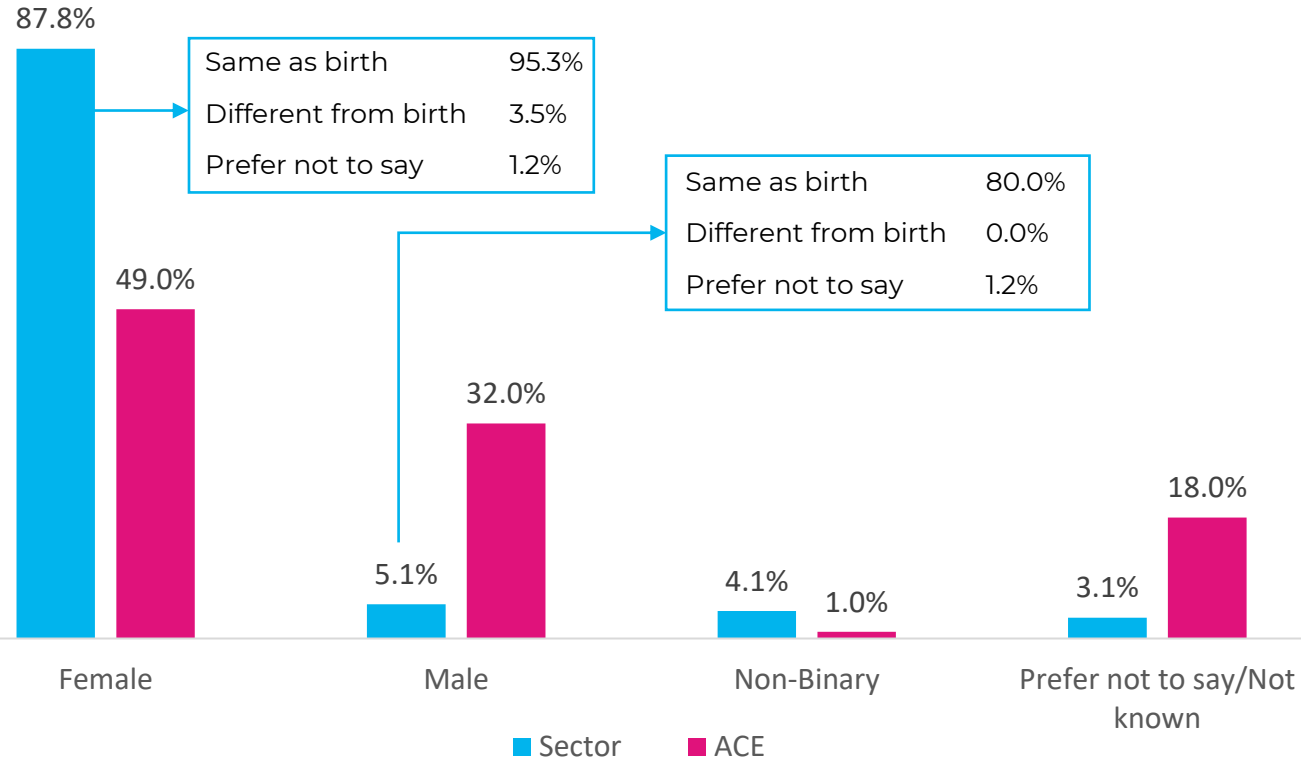
A total of 98 respondents participated in the State of the Sector Equality, Diversity, and Representation Survey. Due to the limited sample size, caution must be exercised when interpreting this data in comparison to the ACE's data and the ONS' census data.

Age



The majority of respondents reported being within the age range of 50-64 years old ($n = 52$; 53.1%), followed by 35-49 years old ($n = 33$; 33.7%). This data suggested that people come into creative health work at a later life and/or career stage.

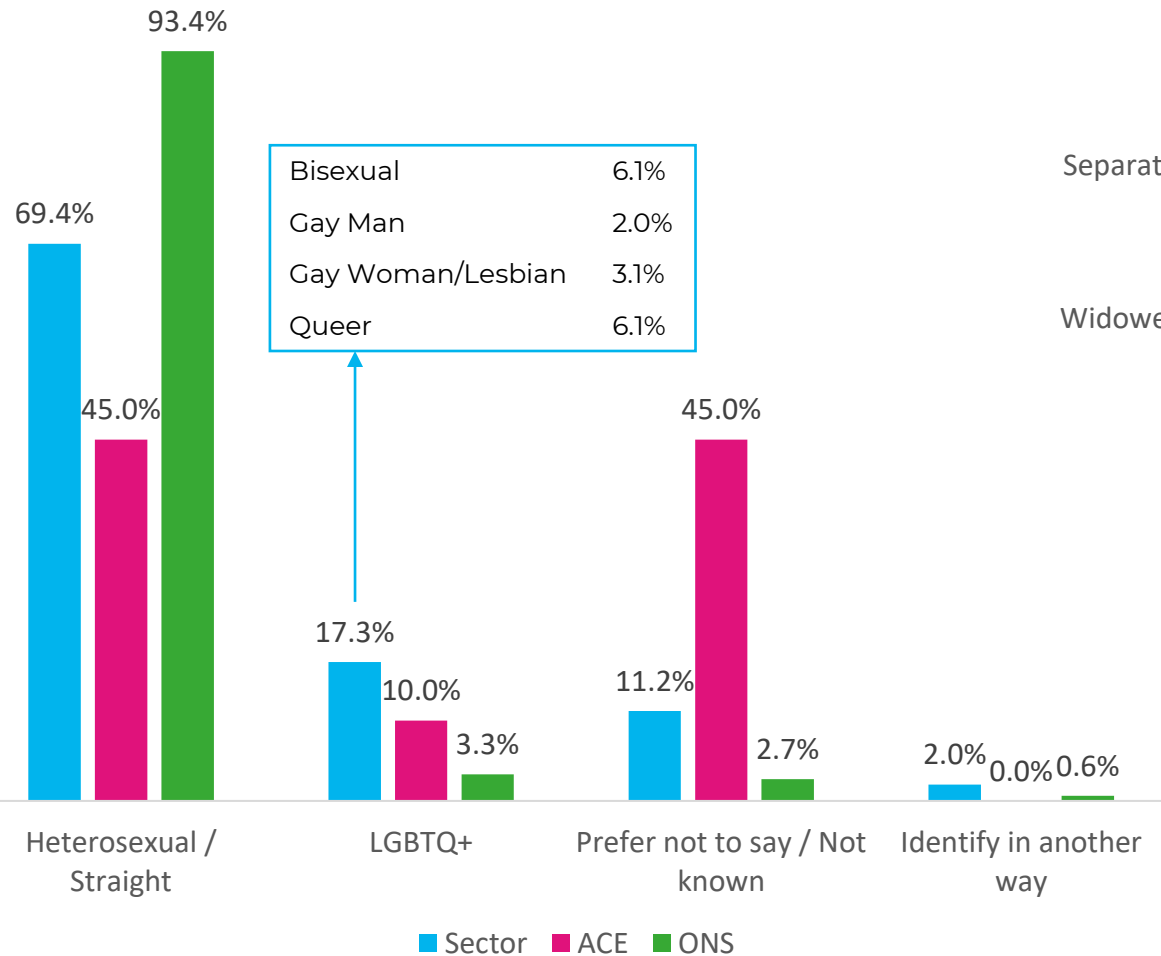
Gender & Gender Identity



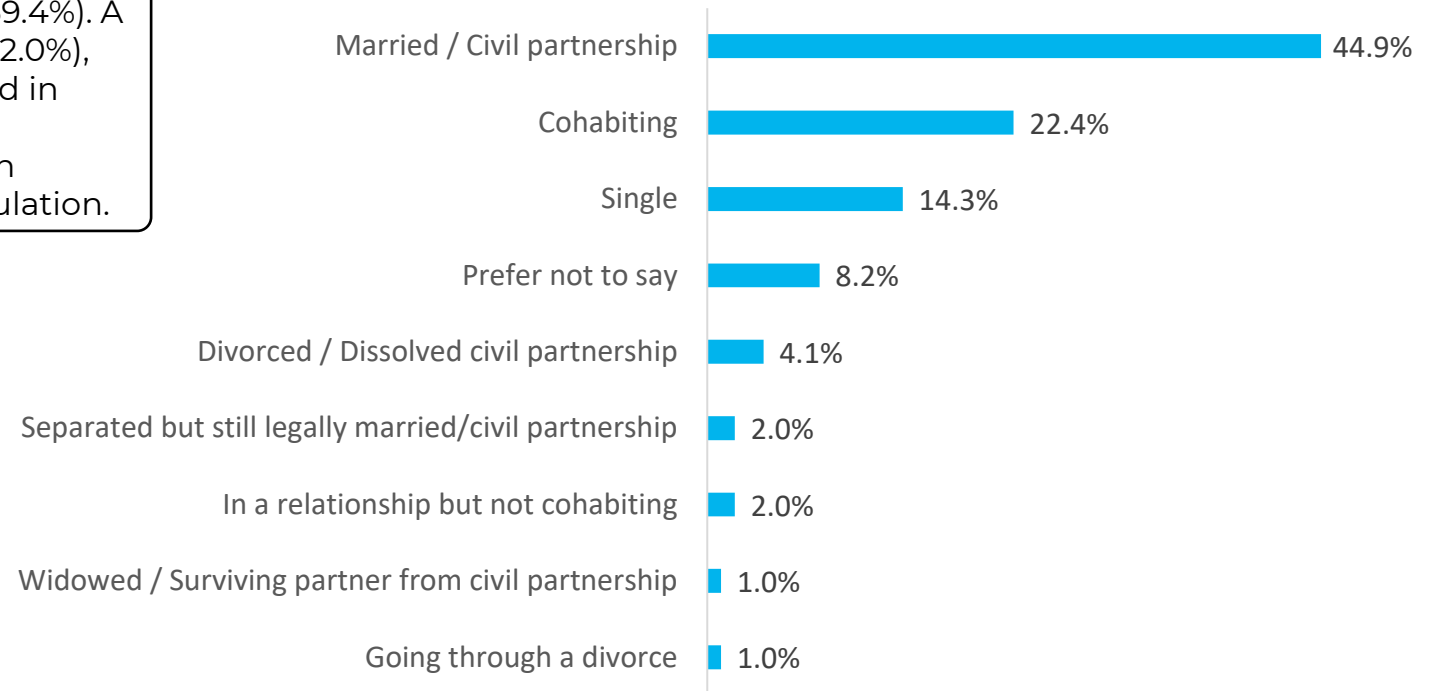
The majority of respondents identified as cisgender female ($n = 82$; 84.5%), while a small proportion identified as cisgender male ($n = 4$; 4.1%) and non-binary ($n = 4$; 4.1%). Comparing this data with ACE's and ONS' data proved challenging due to differences in how gender and gender identity were reported. Nevertheless, it is encouraging to note that non-binary and other gender identities appeared to be more represented among creative health sector respondents ($n = 7$; 7.1%), compared to the ACE's data report (1.0%) and the ONS' census (0.54%).

Sexual Orientation

The majority of respondents identified as heterosexual ($n = 68$; 69.4%). A smaller group identified as bisexual ($n = 6$; 6.1%), gay man ($n = 2$; 2.0%), gay woman or lesbian ($n = 3$; 3.1%), queer ($n = 6$; 6.1%), or identified in another way ($n = 2$; 2.0%). This suggested that diverse sexual orientations were represented among the sector respondents, in contrast to the broader arts and cultural sector and the UK population.



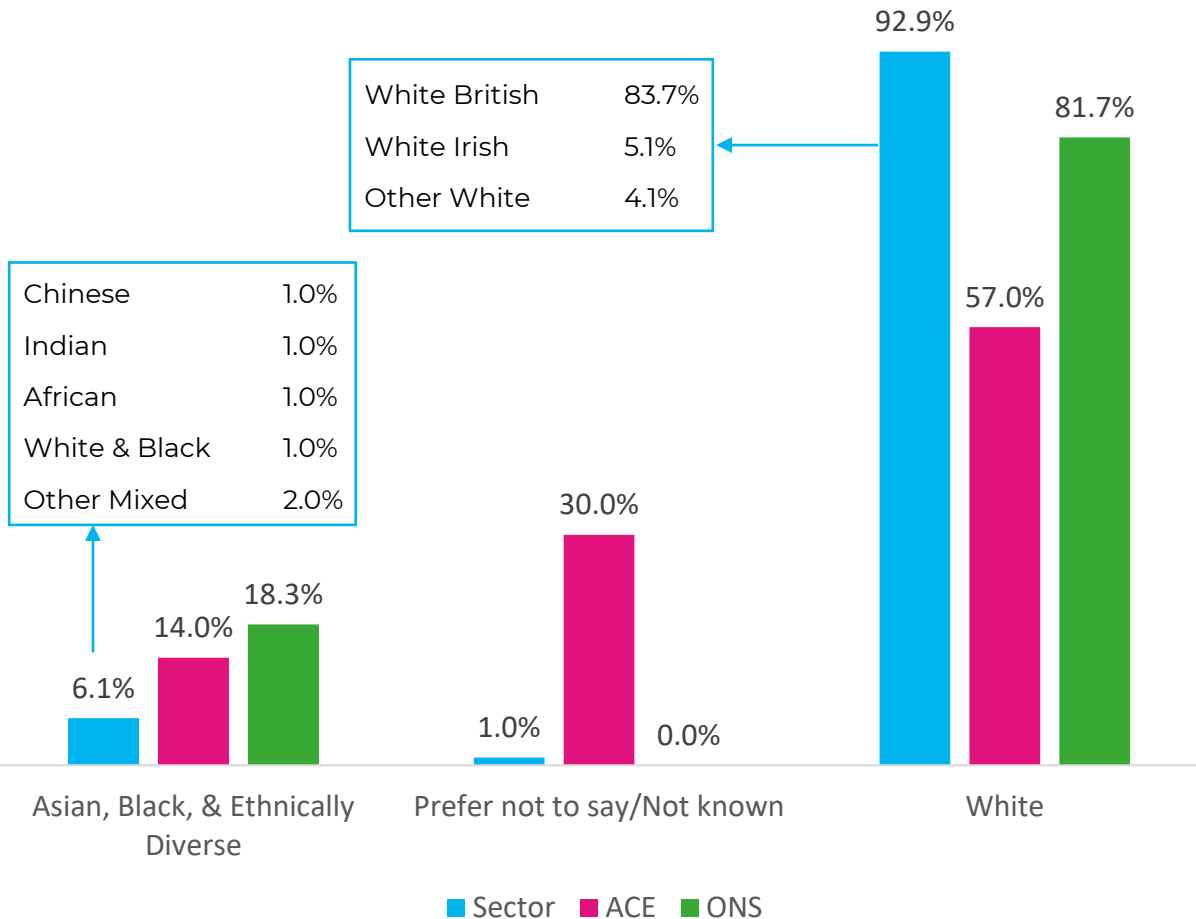
Relationships



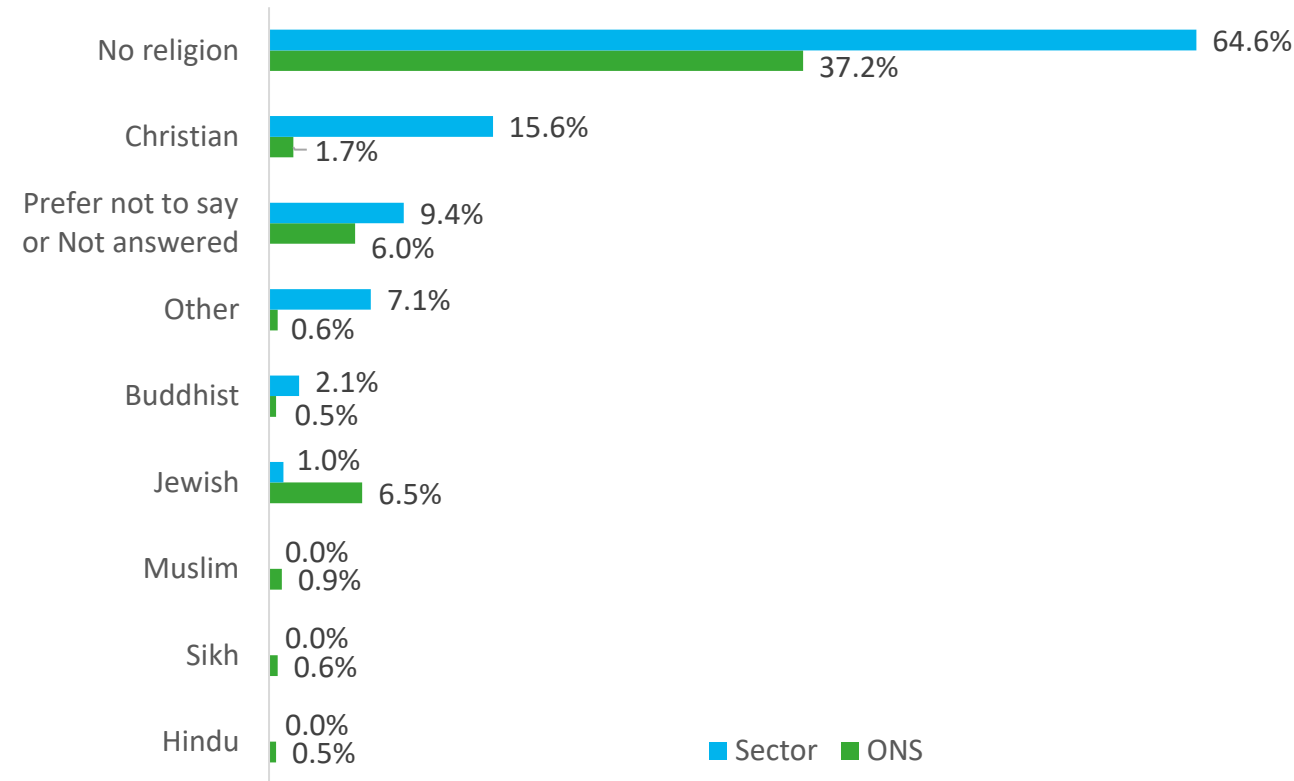
The majority of respondents reported being married or in a civil partnership ($n = 44$; 44.9%), followed by those cohabiting ($n = 22$; 22.4%). No comparisons were made because the ACE's report lacked information on relationships, and the ONS' census data only indicated actual number of marriages, civil partnerships, and dissolutions.

Ethnicity

The majority of respondents identified as White ($n = 91$; 92.9%). Only a small number identified as Chinese ($n = 1$; 1.0%), Indian ($n = 1$; 1.0%), African ($n = 1$; 1.0%), mixed White and Black African ($n = 1$; 1.0%), and other mixed or multiple ethnic backgrounds ($n = 2$; 2.0%). In comparison to the ACE's report and the ONS' census data, sector respondents appeared to be overwhelmingly White, with little representation from other global majority ethnicities.



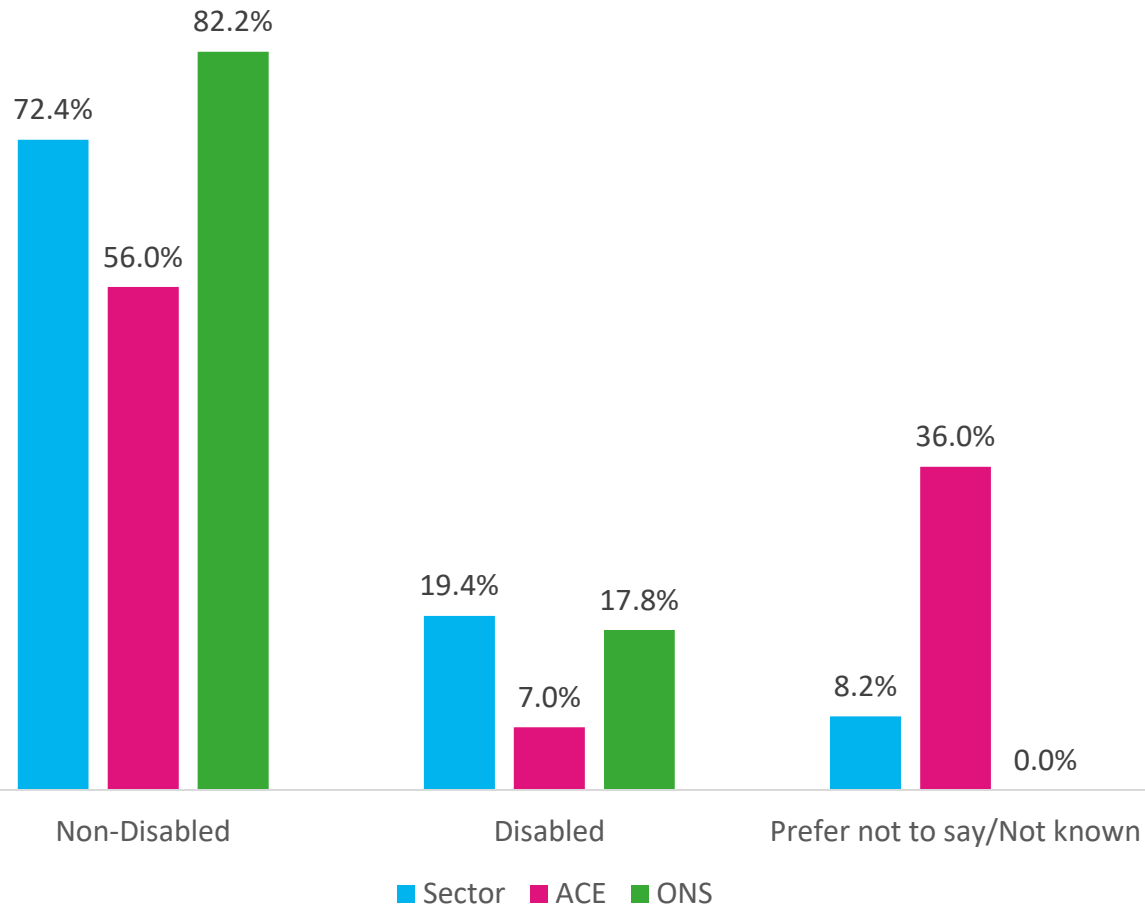
Religion



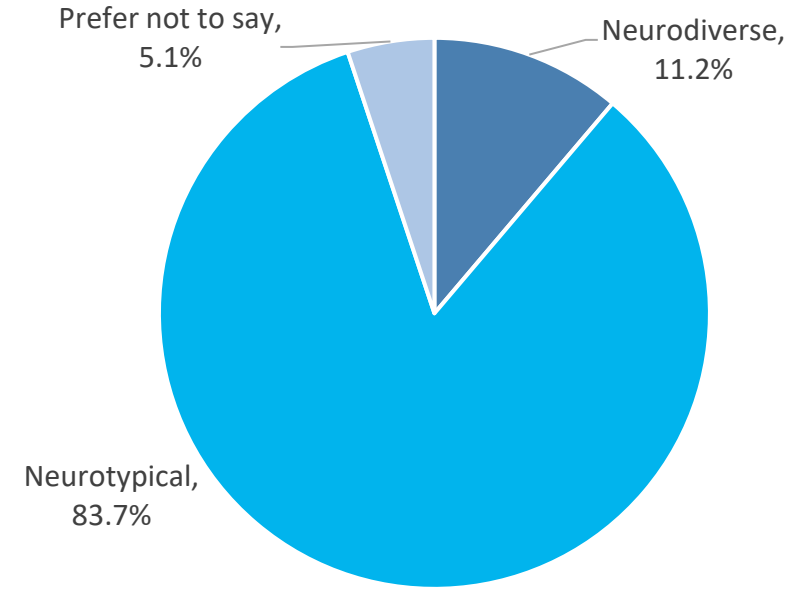
The majority of respondents reported having no religion ($n = 62$; 64.6%), which also included individuals who identified as agnostic or atheist. The next largest group was Christians ($n = 15$; 15.6%), encompassing Catholic, Protestant, and all other Christian denominations. Other reported religions included Pagan ($n = 3$; 3.1%), Spiritual ($n = 1$; 1.0%), Omnist ($n = 1$; 1.0%), Humanist ($n = 1$; 1.0%), and Quaker ($n = 1$; 1.0%). Religions such as Muslim, Sikh, and Hindu were not represented among the creative health sector respondents.

Disability

The majority of respondents identified as non-disabled ($n = 71$; 72.4%). The proportion of creative health sector respondents who identified as disabled ($n = 19$; 19.4%) was comparable to the ONS' census data and exceeded that indicated in the ACE's report. While this is an encouraging statistic, it also suggested that more work may be needed, considering that 21% of the working-age population in the UK identified as disabled.



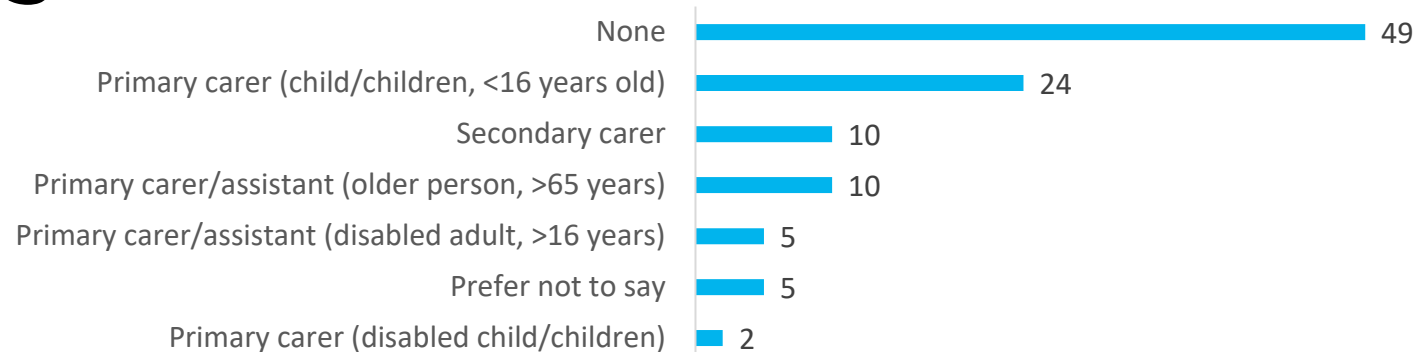
Neurodiversity



The majority of respondents identified as neurotypical ($n = 82$; 83.7%), while a smaller group identified as neurodiverse ($n = 11$; 11.2%). The ACE's report and the ONS' census data did not include any information regarding neurodiversity.

Caring Responsibilities

Almost half of the respondents indicated having at least one caring responsibility ($n = 44$; 44.9%). Among those with caring responsibilities, the majority reported being the primary carer of a child (or children) under 16 years old ($n = 24$; 22.9%). The range of caring responsibilities is depicted in the figure on the right.



Socioeconomic Background



These categories were developed by the Social Mobility Commission and this question was analysed using their guidance. The majority of respondents came from the professional or privileged background ($n = 42$; 42.9%), followed by the working class background ($n = 33$; 33.7%). This is comparable to the ACE's report which found that 81% of their respondents came from the professional or privileged, intermediate, and working class backgrounds combined.

Closing Remarks

Based on the data, the creative health practitioner tends to be:

- Within the age range of 50-64 years old
- White British
- Heterosexual cisgender female
- Married / in a civil partnership
- No religion
- Non-disabled & neurotypical

While this might represent a typical practitioner profile, there are nuances in relation to different intersecting characteristics.

Due to the limited sample size, caution must be exercised when interpreting this data in comparison to the ACE's report and the ONS' census data. Nevertheless, the results from this report will provide invaluable insights as we embark on the next phase of our Equality Action Plan.

For more information or if you would like to feedback on this report, please visit or contact us at:

Email: info@culturehealthandwellbeing.org.uk

Website: <https://culturehealthandwellbeing.org.uk/>

Twitter/X: @CHWAlliance

Instagram: @culturehealthwellbeingalliance

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