

London School of Hygiene & Tropical Medicine

Equality, Diversity & Inclusion Annual report - 2018/19

# Contents

Introduction	3
An Overview of LSHTM in 2018/19	3
Strategy	4
Events and networks	5
LGBTQ+ network	5
Decolonising Global Health	5
Other events	5
Training and development	6
EDI Training	6
Leadership and management training	7
Mental health & Wellbeing	8
Gender Pay Gap	8
Staff and Student Demographic Data analysis	10
Overview	10
Age	11
Disability	11
Ethnicity and nationality	13
Gender	19
Gender Identity	24
Religion and belief	25
Sexual Orientation	26
Students	27
Mode of study	27
Age	28
Disability	29
Ethnicity	
Gender	
Gender Identity	41
Religion and belief	41
Sexual orientation	42

# Introduction

This report highlights London School of Hygiene & Tropical Medicine (LSHTM)'s activities aimed at progressing equality, diversity and inclusion during the academic year 2018/19 as well as staff and student equality data.

Under the Equality Act 2010 all public bodies must have due regard to the need to<sup>1</sup> -

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

The Equality Act 2010 (Specific Duties and public authorities) Regulations which came into force on 31 March 2017 requires LSHTM to publish the following in a manner that is accessible to the public<sup>2</sup>:

- information relating to people who share a relevant protected characteristic who are employees and other people affected by policies and practices (this report, annually)
- <u>gender pay gap report</u> (annually)
- <u>equality objectives (at least every four years)</u>

# An Overview of LSHTM in 2018/19

The London School of Hygiene & Tropical Medicine (LSHTM) is a world leading centre for research and postgraduate education in public and global health. With global presence and collaboration at its heart, LSHTM is uniquely qualified to make a difference.

Equity is at the heart of LSHTM's mission:

Our mission is to improve health and health equity in the UK and worldwide; working in partnership to achieve excellence in public and global health research, education and translation of knowledge into policy and practice.

The Equality, Diversity and Inclusion (EDI) programme at LSHTM has a varied remit including charter marks such as Athena SWAN (LSHTM holds two Bronze faculty awards, one Silver faculty award and a Bronze institutional award), memberships

<sup>&</sup>lt;sup>1</sup> Section 149, Public sector equality duty, The Equality Act 2010

<sup>&</sup>lt;sup>2</sup> Section 3, The Equality Act 2010 (Specific Duties and Public Authorities) Regulations 2017

to Stonewall, achieved commitment level of the London Healthy Workplace Charter, and LSHTM signed the Time to Change pledge in 2017.



### Strategy

In 2017, the new <u>institutional strategy</u> was launched with a priority area commitment to develop a "Talented, Diverse & Inclusive Staff and Student Community" bringing EDI to the core of LSHTM's activities.

The objectives of the strategy are:

- a) To foster a thriving, inclusive staff and student community, built on our shared values of free-thinking and collaborative working. To set this within an ethical and healthy environment built on respect, equal opportunities, excellence and creativity.
- b) To provide training, supervision and mentoring support to enable all staff to achieve their full potential through opportunities to develop expertise and skills.
- c) To recruit, develop and retain outstanding and diverse researchers and educators who produce excellent science and can influence the public and global health agenda, providing equal opportunity for progression. We will continue our recruitment drive, and ensure succession planning.
- d) To make sure the expectations and responsibilities of our community are clearly expressed and widely communicated.

As the LSHTM's EDI strategy ran from 2016-2019, this academic year falls within the last year of its action plan. We are pleased to be able to report progress under this action plan and look forward to building on this in the next few years and subsequent action plan.

#### **Events and networks**

There were a number of EDI related events held in 2018/19.

#### LGBTQ+ network

The LGBTQ+ network runs via a specific mailing list with a core group of members leading the organisation of events. The network organises events including a LGBTQ+ reception for new students in welcome week, film screenings / discussion events and led the School's participation in Pride 2019. There is inclusion of global LGBT seminars and talks in sexual health modules though this is limited to specific programmes and is an area the network would like to see developed. The network has identified other areas for development related to student pastoral issues for students coming to the UK for the first time or coming out for the first time and increasing the network's visibility more consistently across the School.

### Decolonising Global Health

A number of consultation events were initiated and organised by staff and students to enable a space to discuss issues related to decolonising global health. This included discussions about racial hierarchies experienced within LSHTM and its broader operational environment, through teaching, research and employment. These events took the form of open consultations for all staff and students and were organised by a volunteer group between March and July 2019. Further, as part of the LSHTM Week in September 2019, an Ideation Lab was held to collate issues and priorities, again led by the staff / student volunteer group.

It is important to note that during 2018/19, this work was led by a group of staff and students who volunteered to gather information on experiences of racial hierarchies. The volunteers were responding to a noticeable gap in terms of tackling racial equality issues at LSHTM. The work of this group has highlighted the necessity for greater institutional focus in this area. This necessity is also reflected in the staff and student data analysis later in this report in relation to recruitment, progression and awarding levels.

A number of areas for development within the School have been identified to tackle racial inequities. Following the DGH group highlighting this need for greater institutional support, it is anticipated that the next key step will be consultation with senior management to agree how to progress and ensure buy-in at all levels.

### Other events

An EDI session was included with LSHTM week in Sept 2018: "Athena SWAN Review: Gender equality and intersectionality at LSHTM – What the data tells us

and how we can move forward". As well as presenting an intersectional picture of EDI at the School, the session invited colleagues to consider their individual roles.

LSHTM hosted the Women Leaders in Global Health Conference in November 2018 (see <a href="https://wlghconference.org/2018">https://wlghconference.org/2018</a>)

Women in Health Lecture 2019: LSHTM welcomed Mahima Datla, Managing Director of Biological E Limited in Hyderbad, India, to coincide with International Women's Day. This annual lecture is given by women who have made a significant contribution to global health research and policy during their careers.

### Training and development

LSHTM has undertaken significant work to foster a more inclusive working environment and ensure EDI principles are embedded into all of LSHTM's training provision.

### EDI Training

A number of specific EDI workshops and online modules are core to the staff learning and development offer.

All new members of staff are required to complete EDI training as part of their first six-month mandatory training which includes Moodle modules on:

- Equality and Diversity Essentials which introduces the concepts of equality, diversity and inclusion, and provides an overview of the main legislation and its practical implications.
- Disability Confident a learning resource which provides the practical steps you need to take in order to serve disabled customers, and to work with disabled colleagues and staff.
- Challenging Unconscious Bias Featuring innovative discovery learning interactions and scenarios, the course enables staff to recognise and overcome their biases, and provides them with a practical, nonconfrontational framework for challenging biased thinking and decisions effectively.

Confirmation of completion is required as part of the Induction and Probation Checklist.

Additional half-day sessions and webinars are offered to all staff at several points throughout the year. These include:

- "Equality and Diversity in LSHTM - Addressing Issues Confidently" – offered as either a webinar or half-day in-person session.

- "Respectful Working Cultures" – aimed at improving the perceived working culture in LSHTM and create an environment within which all feel they are treated with dignity and respect.

The "Recruitment and Selection Skills" course covers EDI aspects including understanding the implications of equalities legislation. This course is available throughout the year as it is a policy requirement that all staff taking part in interviews, whether appointment boards or within Departments, have undertaken training in interview and selection skills.

A review of the above EDI development offer is planned for 2019/20 to ensure the content and format remains up to date, fit for purpose and engaging for staff.

### Leadership and management training

LSHTM continues to support Advance HE's Aurora Women's Leadership Programme. Each year, we support 8 women to take part in the programme (usually 4 academic and 4 Professional Services (PS) members of staff). There is a competitive application process and we usually receive more than double the number of applicants for the 8 places. As a result, we have developed our in-house programme Future Female Leaders. This is an action learning based programme, which takes place over six months. It is now in its third cohort and can take a maximum of 9 women each year.

To develop our next generation of research leaders we have developed the **Pathway to Academic Leadership Programme** for Research Fellows and Assistant Professors who are in the early stages of establishing themselves as an independent researcher and starting to build a research team.

We run an accredited Management Development programme called **Management in Practice**. It is accredited as a CMI Award at level 4 and covers a range of operational management topics from personal effectiveness, coaching and teamwork to negotiation, performance management and decision making. This has been run twice in the past two years. EDI is embedded within the programme, particularly in the case studies and scenarios used, which reflect some of the current situations managers are faced with in the workplace.

This year we will support the StellarHE programme (a leadership programme for BAME staff in HE) by funding one place with a view to increasing numbers in future years. We also support the Calibre Programme – a development programme for disabled staff in HE.

#### Mentoring

At the start of 2019 we relaunched a revised school-wide mentoring scheme. This is open to all members of staff at all levels and has three application points during the year (January, April; and September). In 2019, **229 applications** for a mentor were received over the year; **156 volunteer mentors** came forward; **122 mentoring pairs** were matched.

# Mental health & Wellbeing

A Wellbeing working group was set up in 2018/19 and worked on a number of areas such as identifying mechanisms for student and staff wellbeing support and the promotion of these. LSHTM signed up to the national programme, Time to Change and officially signed the "pledge" at an event in October 2017. As part of this work, LSHTM now has approximately 60 members of staff trained as Mental Health First Aiders. We currently have one MHFAider per 48 members of LSHTM (Staff and Students) of which, 65% women / 35% men. Guidance on How to Triage a Mental Health Crisis has been launched and a Buddy Support System was made available for MHFAiders. Further information on signposting to both internal and external support is now on the new Mental Health First Aid Intranet site. Throughout 2019/2020 further training, refresher training and network events will be organised to support our MHFAiders.

# **Gender Pay Gap**

As required LSHTM, submitted gender pay gap figures in March 2019. The results in summary are as follows:

- Mean gender pay gap: 18.3%
- Median gender pay gap: 12.5%

Bonus pay

- Mean bonus pay gap: 93.9%
- Median bonus pay gap: 60.4%

Proportion of staff group who received a bonus

- 1.2% of women
- 1.3% of men

Analysis of staff data over time suggest that career progression has improved for women. The School identified a number of actions to tackle the gender pay gap:

- **Promotions and Recruitment Processes**: each year, a review of LSHTM's academic promotions and staff review procedures takes place with the intention of refining procedures to keep them in line with best practice and to ensure these processes are fair and accessible to all staff. Staff are proactively encouraged to apply for promotion when they are ready. We continue to review how we recruit externally to ensure wide search pools and encouragement for underrepresented groups.
- **Bonus Review Exercise**: we will continue the work of monitoring the provision of bonuses to ensure that this is equitable and that there are no barriers to staff being fairly rewarded for their hard work.
- **Continued focus on positive cultural change**: we will champion the work of our Athena SWAN and other EDI groups as they work to identify and address the root causes of imbalances where they exist, and expand the range of equality, diversity and inclusion activities across LSHTM with the addition of new and representative staff networks.

LSHTM also completed an Equal Pay Audit in 2018 which did not highlight pay differentials by grade. Further, progress has been made in applying consistent and fair salaries for senior academic staff with the introduction of professorial salary banding in 2016. A review of the Higher Education Role Analysis (HERA) process was undertaken in 2018 to ensure this process is robust and effective in the role grading for Professional Services staff. Both processes place a strong focus on fairness and transparency in the setting of salary. We will continue this work by monitoring impact and regular benchmarking.

It should be noted that the School is planning to undertake an ethnicity pay gap also in 2019/20.

# Staff and Student Demographic Data analysis

### Overview

LSHTM is comprised of three Faculties (Epidemiology and Population Health, Infectious and Tropical Diseases and Public Health and Policy), the MRC Unit The Gambia and the MRC/UVRI Uganda Research Unit and the Professional Services (PS) departments. The MRC Units joined LSHTM in 2018 and have equivalent status to that of faculties. Additionally, the London International Development Centre (LIDC) is a collaboration of several University of London Colleges, whose staff are employed by LSHTM.

Table 1 shows a breakdown of academic, PS staff and students in Epidemiology and Population Health (EPH), Infectious and Tropical Diseases (ITD), Public Health and Policy (PHP), Professional Services and 'other'. Other includes Division of Education, LIDC, the MRC Unit The Gambia and the MRC/UVRI Uganda Research Unit. Across LSHTM, academics account for 61% (n=1002) of all staff, and most academic staff are based in the three faculties.

	Academic	Professional	Student
		Support	(Face to
			Face)
Epidemiology and Population Health	338	96	327
Infectious and Tropical Diseases	344	136	254
Public Health and Policy	277	42	544
MRC Unit The Gambia	1355	(LESO)	
MRC/UVRI Uganda Research Unit	459 (	(LESO)	
Professional Support Services	8	250	NA
Other	34	98	NA
Grand Total	1001	622	

Table 1 – Staff by unit and staff type (academic or professional services)

The majority of staff in the MRC Units are Locally Employed Staff Overseas (LESO staff) who do not have an employment contract with LSHTM. Equality legislation is different in Uganda and the Gambia with some differences in terms of protected characteristics and limited requirements on organisations to collect equality data for their staff. Equality data on MRC Units, therefore, have not been included in the analysis in this report.

LSHTM run a number of distance learning programmes via the International Programmes of the University of London which are facilitated by Distance Learning (DL) Tutors. DL Tutors have not been included in the analysis below, however, as their records do not provide an accurate representation of currently active DL tutors. DL Tutor contracts have no finishing date and individuals are not removed if inactive. The oldest start date for a DL Tutor is 01/09/1991. As a snapshot, currently there are 529 DL members of staff. Of all DL staff on record 69% are female and 31% male; 64% are white and 22% BME (Unknown 14%); 51% are from the UK, 43% Non-UK and 6% unknown. Distance Learning students are also not reported here, however, going forward it is anticipated that we include EDI analysis for DL students where possible.

# Staff

Staff data has been analysed using a staff point in time of 31<sup>st</sup> July each year.

# Age

Table 2 shows an analysis of staff population by age in comparison to benchmark.

	Academic	Professional Support	Benchmark <sup>3</sup>
30 and under	11%	18%	17%
31-40	37%	35%	29%
41-50	27%	26%	25%
51-60	15%	17%	22%
61 and over	9%	4%	7%

Table 2 – Staff by age

# Disability

Figure 1 represents the staff by those who have stated that they have a disability or not for both professional support staff and academic staff<sup>4</sup>. For academic staff the percentage of staff who have declared a disability is 4.5% which is slightly above the benchmark and increased from last academic year. The percentage of professional support staff is also higher than benchmark at 7.2%.

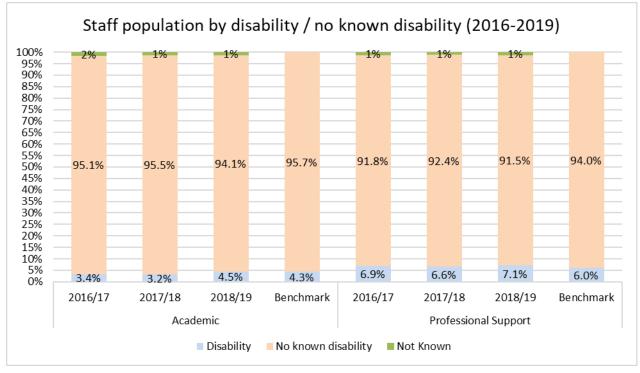
Despite the slightly higher declaration rates, further activities could be undertaken to increase declaration rates as nationally, 16 % of work age have a disability.<sup>5</sup> Further, the School's disability policy is due to be reviewed. The School is signed

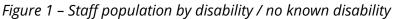
<sup>&</sup>lt;sup>3</sup> All 'benchmark' data are taken from <u>Advance HE, Equality in higher education: staff statistical report 2019</u>

<sup>&</sup>lt;sup>4</sup> The category 'No known disability' includes both those who indicated that they are not disabled, and those have chosen not to answer the question; this aligns with changes made to HESA reporting standards in 2012.

<sup>&</sup>lt;sup>5</sup> https://www.gov.uk/government/publications/disability-facts-and-figures/disability-facts-and-figures#fn:3

up to the Disability Confident Scheme and a staff disability network is in the early stages of being set up. It is anticipated that review of the policy and increased engagement through the disability staff network will enable raising awareness of disability related issues and actions during 2019/20.

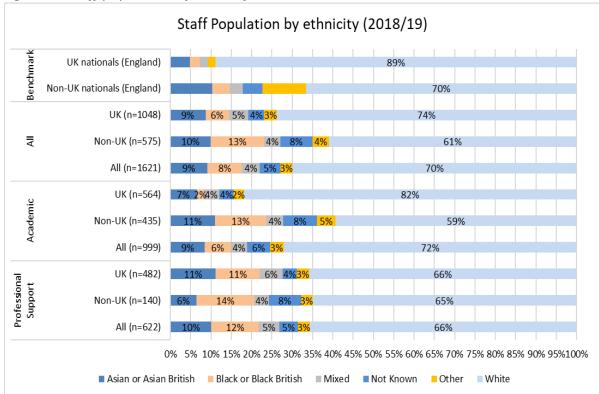




# Ethnicity and nationality

Across LSHTM 25% identified as BME, 70% as White and 5% are unknown (Figure 2). This is higher for professional support staff than academics, 30% and 22% respectively.

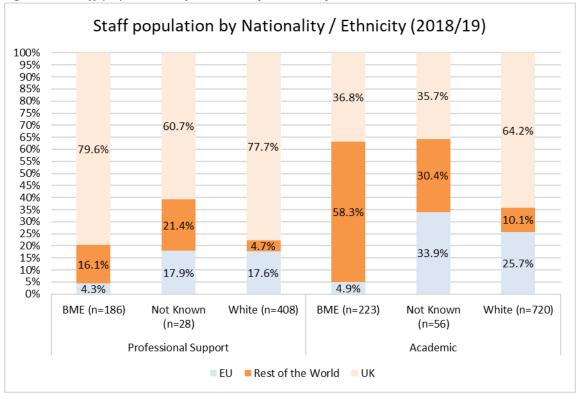
Figure 2 also shows LSHTM staff proportions as UK and non-UK intersecting with ethnicity and against benchmark data<sup>6</sup>; showing that the School has a higher proportion of ethnic minority staff than the benchmark. This may be due to the global remit of LSHTM.



*Figure 2 – Staff population by ethnicity (2018/2019)* 

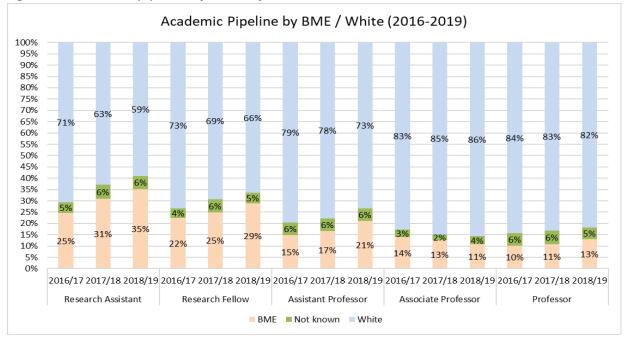
<sup>&</sup>lt;sup>6</sup> All 'benchmark' data are taken from <u>Advance HE, Equality in higher education: staff statistical report 2019</u>

When considering nationality and ethnicity, the highest proportion (58.3%) of academic BME staff come from outside the UK and the EU with BME staff accounting for 58.3% of non-UK or EU academic staff (Figure 3). This is not the case for PS staff where only 16% of BME staff are from outside the UK/EU.

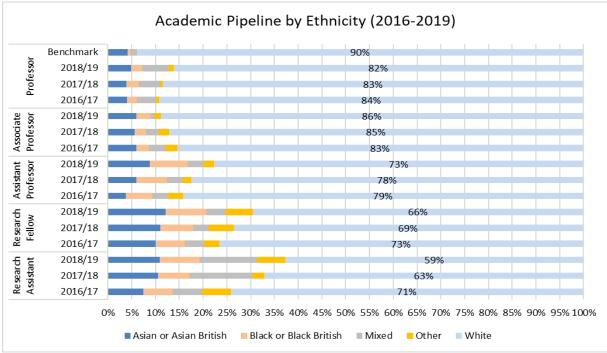


*Figure 3 – Staff population by nationality / ethnicity (2018/19)* 

At research assistant level 35% of academic staff identify as BME, this decreases to 13% at professorial level (Figure 3). However, it is positive that there has been an increase in the proportion of BME academic staff at all grades over the past three years except for Associate Professor. The transition from Assistant Professor to Associate Professor is a key career transition point especially as this has been to some extent also linked to a corresponding (although not automatic) transition from fixed term to permanent contract. This transition therefore needs more investigation. Figure 5 shows analysis of data by ethnic group and grade.

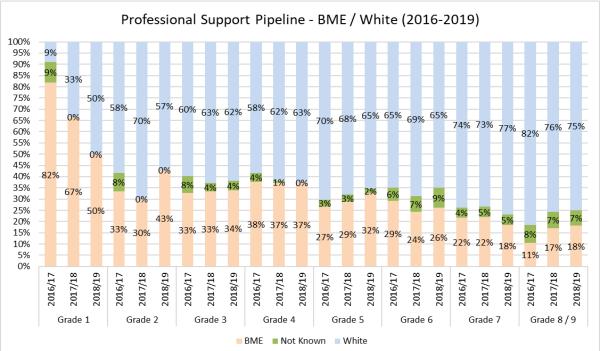






*Figure 5 – Academic pipeline by ethnic group (2016 – 2019)* 

A similar trend is seen among professional services staff. In grades 1-3 39% of professional services staff identify as BME but in grades 8-9 this is 18.2% although this has increased over the last three years (Figures 6&7). It should be noted that the numbers of staff are very small for grades 1 and 2. Figure 7 shows that a key transition point and drop is from grades 5 to 7 for professional support staff which perhaps corresponds to transitions through increasing management responsibility.



*Figure 6 – Professional Support pipeline by ethnicity (2016 – 2019)* 

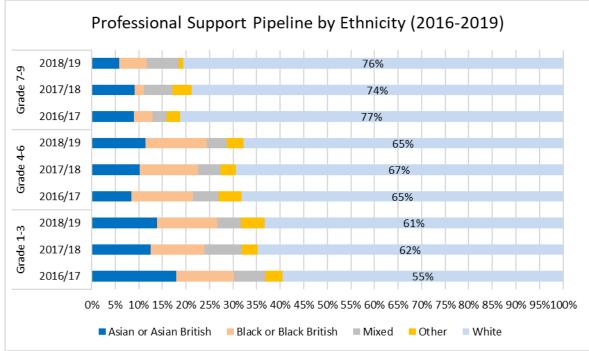


Figure 7 – Professional Support pipeline by ethnic group (2016 – 2019)

In recruitment of both academic and professional services staff (Figures 8-9), applicants who are white are more likely to be appointed than BME applicants. In recruitment of both academic and professional services staff (Figures 8-9), applicants who are white are more likely to be appointed than BME applicants.

The absolute difference gap between the % BME applicants among those shortlisted and the % BME among those who have been shortlisted and appointed seems to have dropped substantially for academic staff (from 13% in 2017/18 to 3% in 2018/19). The gap was smaller for professional support staff recruitment, nearly disappearing in 2018/19 (from 13% in 2017/18 to 2% in 2018/19 and from 7% in 2017/19 to 13% in 2018/19) respectively. The gap between the proportions of white and BME applicants shortlisted remains.

Actions based on previous EDI analysis has included a recommendation that all staff responsible for recruitment should undertake both recruitment and unconscious bias training. It is recognised that more needs to be done to ensure this is the case. The School aims to ensure recruitment panel composition includes representation of BME staff. The introduction of anonymous shortlisting by the HR team is currently planned for 2019/20 for professional support staff recruitment.

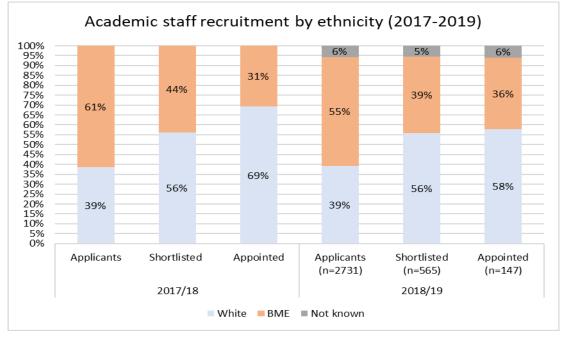
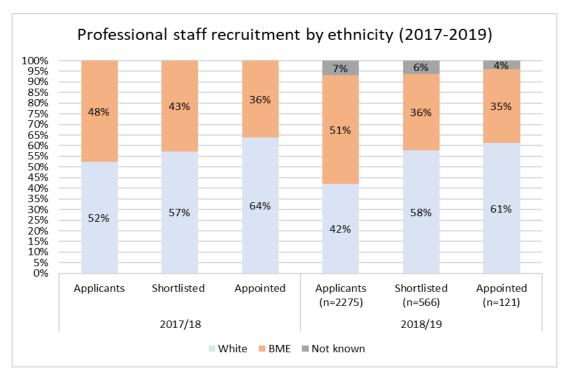


Figure 8 – Recruitment percentage at each stage for academic staff by ethnicity

*Figure 9 – Recruitment percentage at each stage for professional staff by ethnicity* 



# Gender

LSHTM has a majority female population for both academics and professional services staff at all career stages except the most senior grades (Figures 10). Across all staff groups 61% identify as female and 39% as male, for academic staff 58% are women and for professional services staff 66% are women.

In 2017/18 LSHTM successfully submitted an Institutional Athena SWAN application and will be working through our action plan to improve gender equality across all levels, which includes improving support for the progression of women to senior posts for both academic and professional services staff. Analysis by working patterns also shows a higher proportion of women work part time.

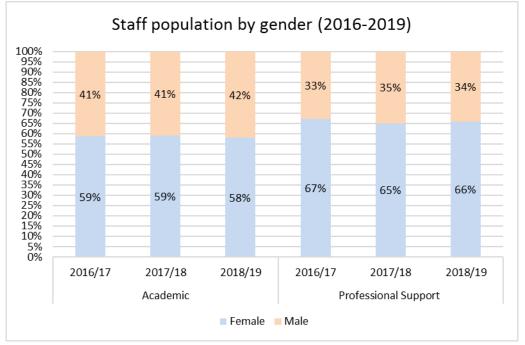
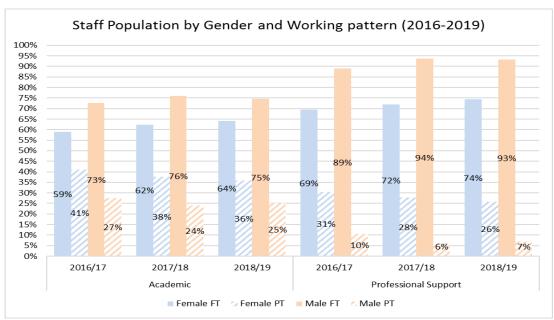
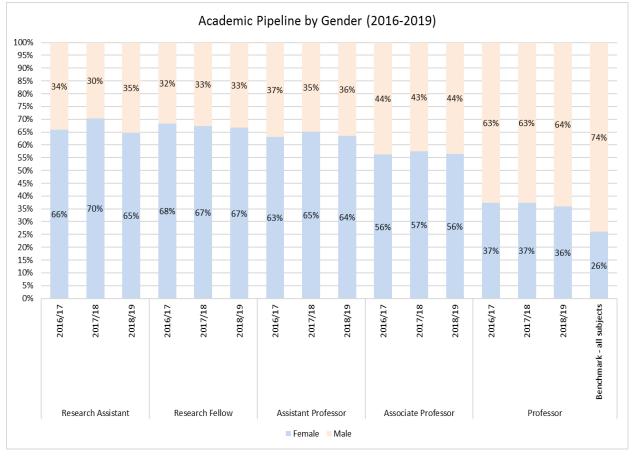


Figure 10a&b – Staff population by gender



Analysis of the academic pipeline by gender shows there have not been significant changes over the last couple of years (Figure 11). This is following fairly significant change at Professor grade between 2015/16 and 2016/17 – as shown in figure 12a&b.



*Figure 11 – Academic pipeline by gender* 

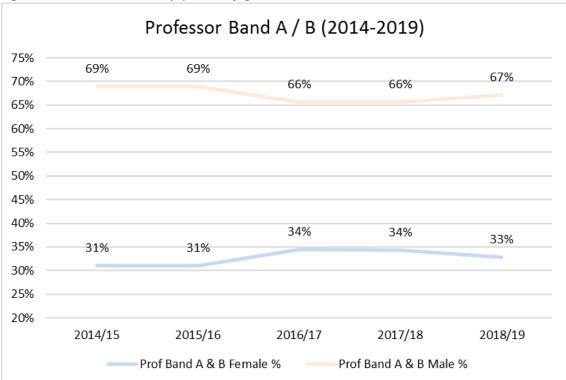
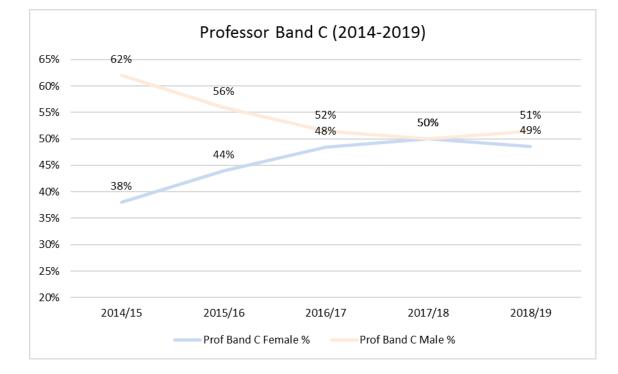


Figure 12 a&b – Academic pipeline by gender



For professional services staff, the pipeline shows a decrease in women at the most senior grades (Figures 13), however, this has improved in the last three years with an increase in the proportion of women at grade 9, though caution is advised with interpreting this change as numbers are small at this grade. This will continue to be an areas of focus via the School's Athena SWAN action plan.

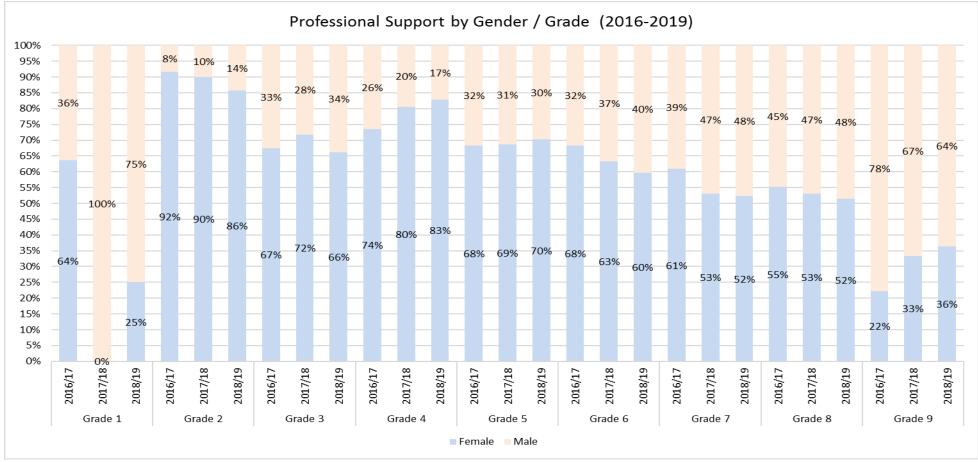


Figure 13 – Professional Support pipeline by gender

When looking at recruitment (Figures 14 to 15), women are more likely to be appointed then men in both academic and professional roles. However, analysis by grade suggests relatively fewer women apply to higher grades (Figure 16) suggesting the need to do more to attract female applicants to higher grades.

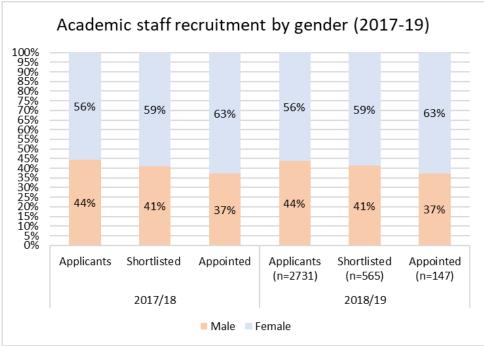
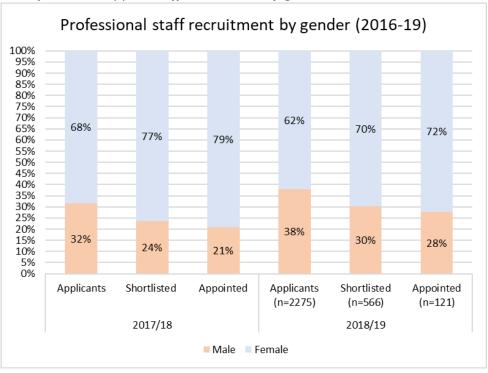


Figure 14 – Academic staff recruitment by gender

Figure 15 – Professional support staff recruitment by gender



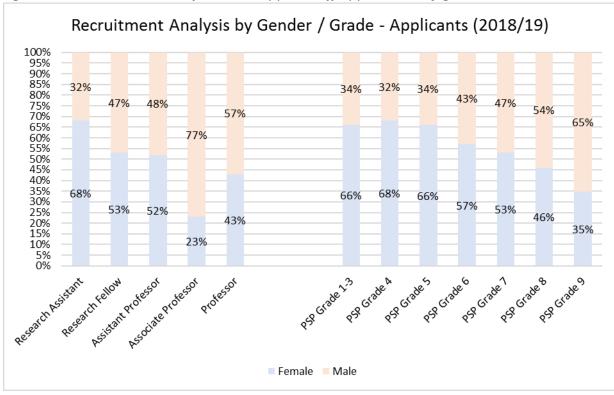


Figure 16 – Academic and Professional support staff applications by gender

Based on the analysis undertaken in our most recent Athena SWAN application, and reinforced by the data in this report, action is being taken to improve gender balance in recruitment.

As described above, all staff responsible for recruitment have undertaken both recruitment and unconscious bias training. The School aims to ensures recruitment panel composition are gender balanced. The introduction of anonymous shortlisting is currently planned for 2019/20 by the HR Director for professional support staff recruitment.

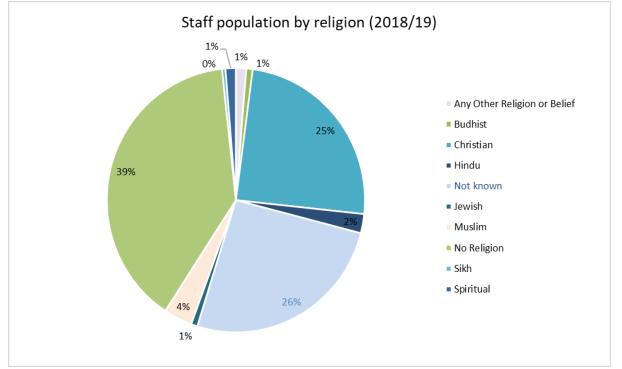
The Athena SWAN action plan also includes plans to engage recruitment agencies to help search out female applicants for senior professional services posts. This needs to be supported by ensuring the information on recruitment pages are attractive to women as well as men especially for senior grade roles.

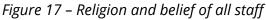
### **Gender Identity**

Whilst staff are asked a question on gender identity, the number of respondents is small. Very few state that their gender identity is not the same as that identified at birth and this is therefore not represented in this report to maintain anonymity.

# **Religion and belief**

No religion (39%) and information unknown (26%) are the two largest percentages for staff religion and belief. The three largest religious groups represented among LSHTM staff are Christian (25%), Muslim (4%) and Hindu (2%) (Figure 17). LSHTM does collect this data and it is mandatory for new staff and students. There was an initiative to increase disclosure in 2017/18-2018/19 which has resulted in a reduced proportion of 'unknown'. The percentage of information unknown has reduced from 29% in 2017/18, however, remains significantly above the benchmark of 12.2%.





### **Sexual Orientation**

65% of staff identify as heterosexual and 6% as bisexual, gay man, gay woman/lesbian or other (Figure 18). The percentage of staff whose sexual orientation is 'unknown' has reduced to 28% (from 31.7% in 2016/2017) which compares to a benchmark figure of 12.4%.

As with religion and belief, continuing work should be taken to decrease the amount of 'unknown' within this category.

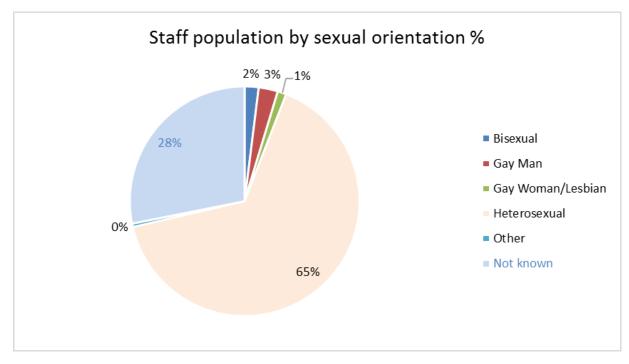


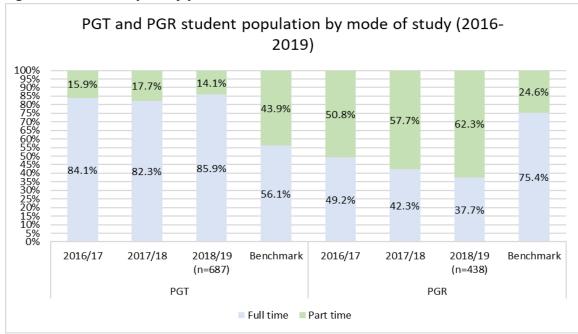
Figure 18 – Sexual orientation of all staff

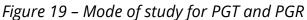
### Students

LSHTM offers postgraduate degrees via MSc courses (PGT) and in Research (PGR) there are MPhil/PhD and DrPH options. MSc courses are offered in London and by distance learning. The latter are admitted by the International Programmes of the University of London and are not reported here.

### Mode of study

For the 2018/19 year there were 687 postgraduate taught students (PGT) on our London based programmes and 438 doctoral students (PGR). These courses are undertaken on a full time and part time basis, 85.9% of PGT student are enrolled full time compared to 37.7% of PGR students (Figure 19). We have a higher proportion of full time PGT and lower proportion of full time PGR students than sector benchmark.





Age

Compared to the sector LSHTM has a greater proportion of PGT students in the 26-35 category, 55.7% compared to 30.8%. At PGR level only 5.7% of students are aged 25 or under compared to 37.9% across the sector (Figure 20).

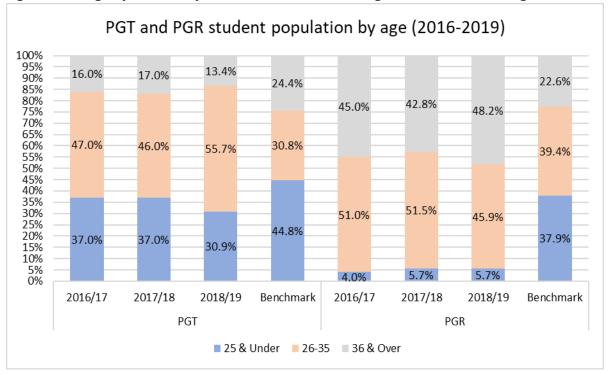
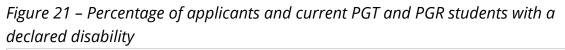
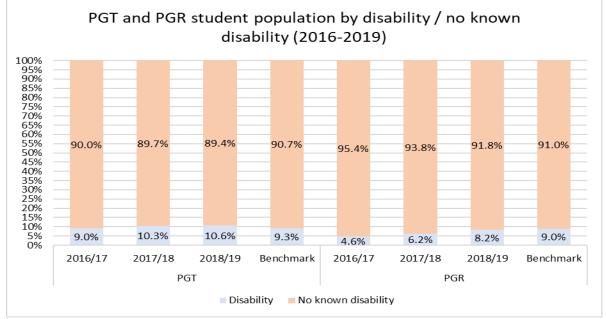


Figure 20 – Age of students for PGT and PRG including HESA benchmarking

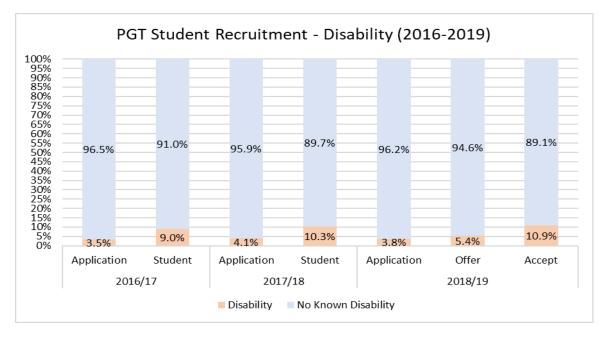
# Disability

At PGT level the percentage of those disclosing a disability is 10.6% which is slightly higher than the sector average of 9.3% and has increased in the last year. However, for PGR students it is slightly lower than the sector average at 8.2% in comparison to 9.0% but has increased by 2% since last year (Figure 21).



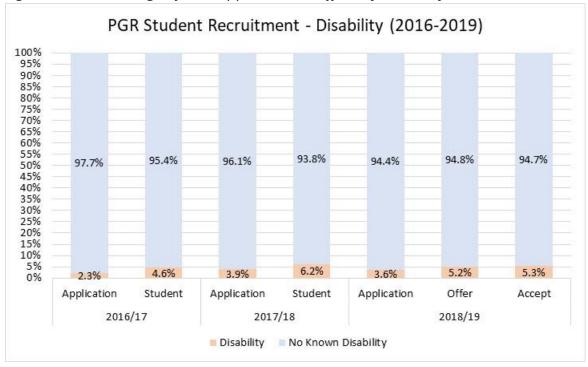


At both PGT and PGR levels a higher percentage of students are known to have a disability when compared to applicants. For 2018/19 we have analysed by application / offer / accept which shows that a higher proportion of disabled applicants were offered and accepted a place (Figures 22-23).

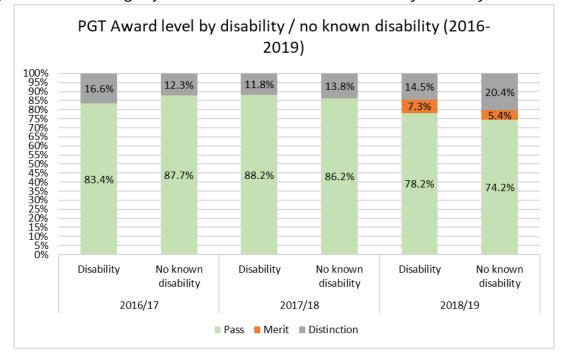


*Figure 22 – Percentage of PGT applications / offers by disability marker* 





When looking at the percentage of PGT students graduating with distinctions by disability marker there is a slight gap which is higher than last academic year; of those with known disabilities 14.5% achieve a distinction and of those with no known disability 20.4% achieve a distinction (Figure 24)<sup>7</sup>.



*Figure 24 – Percentage of PGT students awarded distinction by disability marker* 

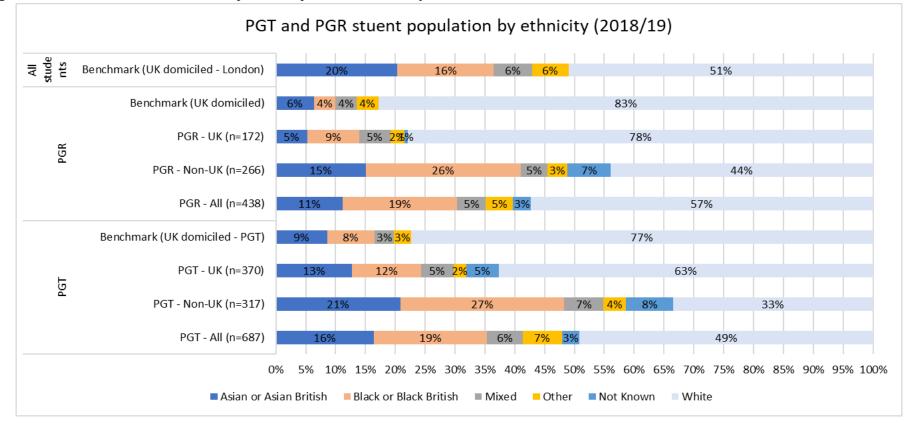
<sup>&</sup>lt;sup>7</sup> Note that 'merit' grades were introduced across all programmes in 2018/19.

# Ethnicity

As with staff, due to the global remit of LSHTM we have a large proportion of BME students enrolled across the institution. At PGT 48% of students are BME which has increased in the last couple of years (41% in 2016/17 and 44% in 2017/18 – Figures 25-27). At PGR it is 40%, the same as 2017/18 and slightly lower than the previous year.

The chart below shows we have a higher proportion of non-UK BME students than UK which is not unexpected given the School's global remit. Compared to the sector, we have a higher proportion of BME PGT and PGR students. However, this sector data is based on UK rather than London and UK domiciled only. We have approximately 32% UK PGR students and 21% UK BME PGR students compared to 23% and 17% as the benchmark (UK domiciled). Comparison between our PGR and PGT UK BME students with the demographic of **all** students in London shows a lower proportion of BME students to post-graduate study which is also reflected across the sector and requires attention.

As a global institution, LSHTM has PGT students from 84 countries. The four countries with the largest number of students after the UK are the USA (12.5%), Canada (2.9%), Germany (3.9%) and Nigeria (3.6%). PGR students come from 73 countries, the five largest after the UK being the USA (11%), Canada (5.7%), Uganda (3.0%), France (3.2%) and India (2.1%).



*Figure 25 – PGT and PGR students by ethnicity & UK / Non-UK for 2018/19* 

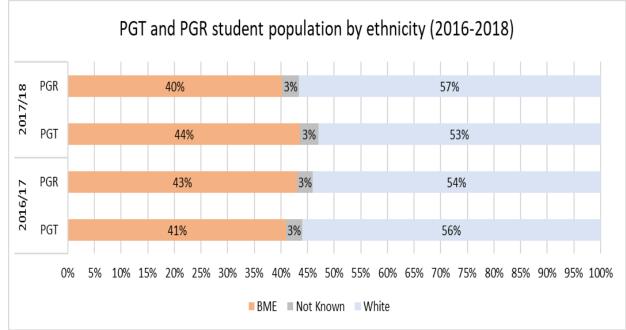
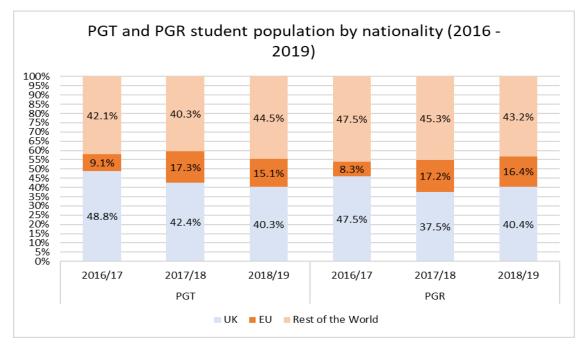
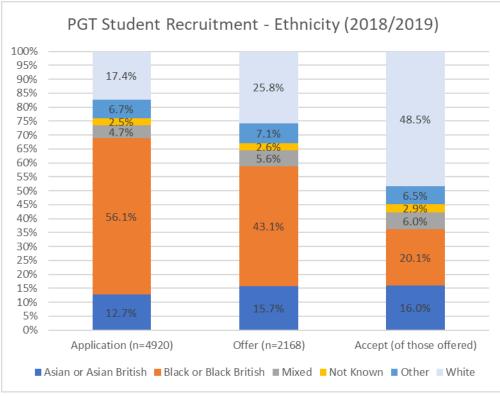


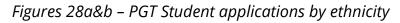
Figure 26 – PGT and PGR students by ethnicity & UK / Non-UK for 2016-18

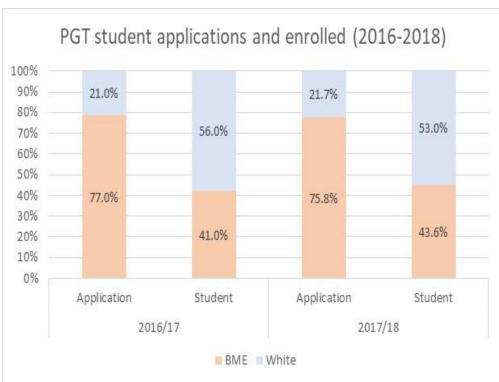
Figure 27 – PGT and PGR students by nationality (2016-2019)



Analysis of applications shows a drop between the percentage of BME applications and those offered both for PGT (Figure 28) and PGR (Figure 29). In 2018/19, 80.2% of PGT applications came from BME applicants compared to 71.6% offered. A higher proportion of BME applicants do not accept the offer especially Black or Black British applicants.

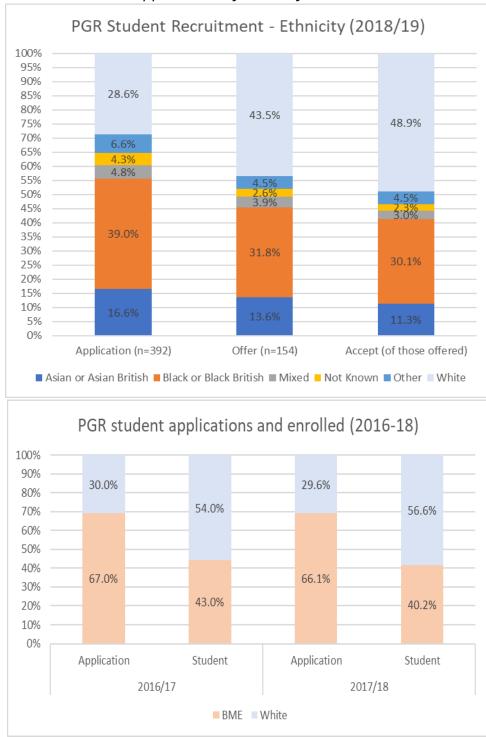






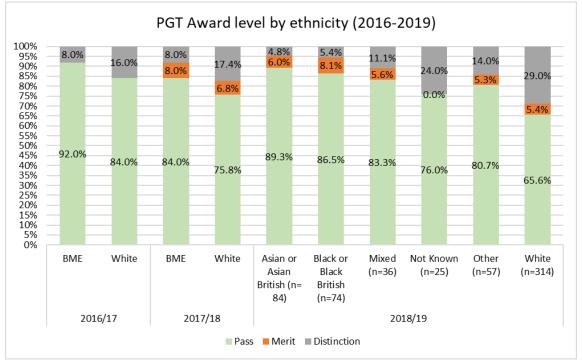
There is a similar picture for PGR applications (Figures 29a&b) with 67.1% of applications coming from BME applicants compared to 53.9% offered students.

For both PGT and PGR student recruitment, this needs further exploration to identify actions required.

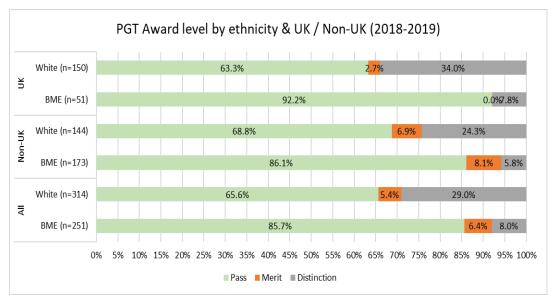


*Figures 29a&b – PGT Student applications by ethnicity* 

In terms of the percentage of PGT students graduating with distinctions by ethnicity, there is a gap between BME and White students. This has widened with an overall gap between White and BME students 8% in 2016/17, 9.4% in 2017/18 and 21% in 2018/19. Black or Black British and Asian or Asian British received the lowest % of distinctions 5.4% and 4.8% respectively (Figures 30a&b). When broken down further by UK / Non-UK, this gap is bigger between UK white and BME students. The degree awarding gap for undergraduate students is a sector wide issue, with postgraduate awards receiving less attention. These gaps warrant further investigation.



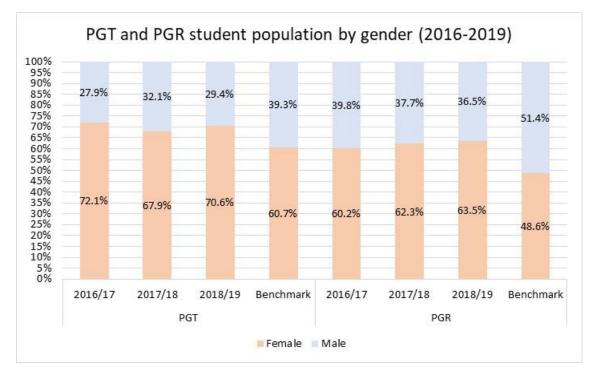
*Figures 30a&b – PGT Student awards by ethnicity* 



\* nationality not known = 47

# Gender

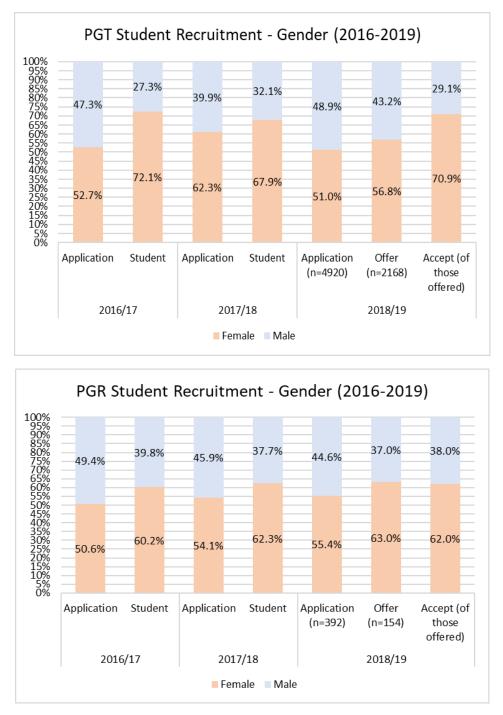
At PGT 70.6% of students are women, which is higher than the sector benchmark of 60.7%. At PGR this drops slightly to 63.5% but again this is still above the overall sector benchmark of 48.6%. (Figure 31)



*Figure 31 – Student population by gender* 

Female applicants are more successful at PGT and PGR level. Analysis for 2018/19 is shown as application, offer and acceptances. This shows for PGT that men are less likely to be offered and also of those offered, less likely to accept. For PGR applications men are less likely to be offered but a similar proportion accept. Our Athena SWAN charter work picks up on these trends within our student recruitment with actions to explore further and develop actions accordingly.

Figure 32a&b – Student applications by gender



When looking at the percentage of PGT students graduating with distinctions by gender there was almost no difference with 13.6% of women and 13.9% of men achieving a distinction in 2017/18 while there is a gap of 4% for 2018/19 (Figure 33).

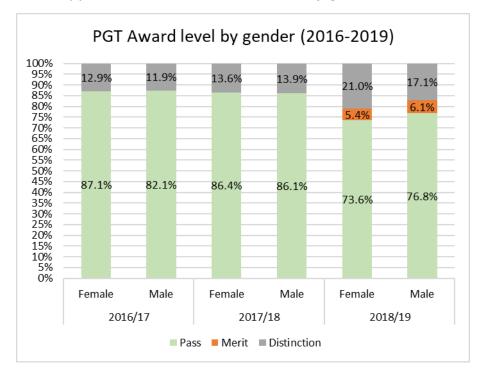


Figure 33 – Student applications and enrolled students by gender

# **Gender Identity**

While students are asked a question on gender identity, the number of respondents in general is small. Very few state that their gender identity is not the same as they were identified at birth and these are therefore not represented in this report.

# **Religion and belief**

The three largest religions and beliefs represented among students are Christian (33%), Muslim (7%) and Hindu (4%) (Figure 34). No religion accounts for 39% of students.

There has been a decrease in the percentage of missing data since the 2016/17 report when the percentage of unknown was 64%; it is now 9% which is below the sector – 10.4%.

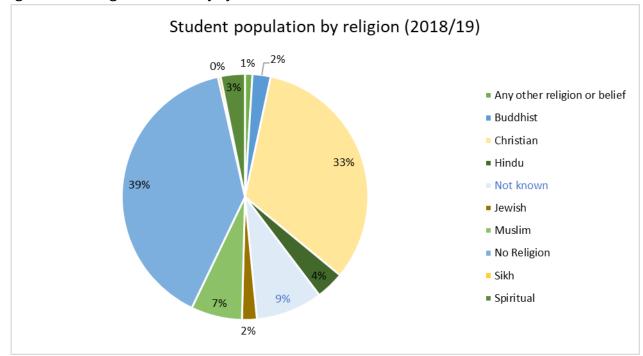


Figure 34 – Religion and belief of all students

# Sexual orientation

82% of students identify as heterosexual whereas 8% identify as bisexual, gay man, gay woman/lesbian or other (Figure 35).

As with staff the disclosure rate for sexual orientation has improved with a reduction of 'unknown' from 65% in 2016/17 to 10% in 2017/18, an improvement from last year (12.6%) though still above the sector – 7.8%.

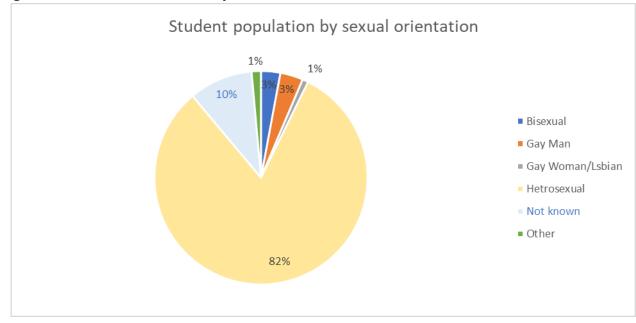


Figure 36 – Sexual orientation of all students