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Introduction and recommendations

Introduction

Public Health Wales is the national public health organisation for Wales. With its partners, it aims to increase healthy life expectancy, improve health and well-being, and reduce inequalities for everyone in Wales, now and for future generations.

This is the seventh year that Public Health Wales has reported its gender pay gap under the statutory duty. This report examines pay gaps at Public Health Wales based on data for 31 March 2023 using key explanatory factors such as area of work, employee age, length of service and other characteristics as appropriate to better understand the causes and issues that give rise to the gender pay gap.

Main points

The main points are as follows:

- Public Health Wales employed 2,181 staff on 31 March 2023. Women account for 73% of the workforce and outnumber men at all levels of the organisation but yet the gender pay gap persists.
- The mean¹ gender pay gap is 13.8%, and the median² gender pay gap is 6.4%. The mean pay gap is notably higher than the median and this is because of a small number of high-paid men.
- The mean gender pay gap has almost halved since reporting began, down from 22.6% in 2017 to 13.8% in 2023. While this indicates that efforts to address and reduce pay gaps are having a positive impact, the latest figures show that the gender pay gap has widened from 11.8% in 2022, which we explore in this report.

¹This is the average value of all salaries and is influenced more by the highest and lowest salaries in the organisation.

²This is the middle value when all the values are arranged from highest to lowest, so is often considered the best and most representative measure of any gap.

- The mean gender pay gap at Public Health Wales is higher than that currently for the UK, in the public sector and for Wales.
- The greatest proportion of men are in the highest-paying quarter, while the greatest proportion of women are found in the lowest-paying quarter. There is a higher proportion of men in higher paid jobs than women.
- Analysis of pay gaps by directorate shows that many gaps are in favour of men, due to a concentration of men in senior roles.
- Analysis of pay gaps by pay band shows that the gender pay gap is in favour of women at lower grades but changes to be in favour of men at pay band 7 and then widens with seniority. A gender pay gap evident only at managerial levels can indicate potential biases in promotion and hiring practices.
- Analysis by length of service shows wider pay gaps between men and women with longer continuous service. A large gender pay gap despite long service suggests women are not progressing in their careers at the same rate as their male counterparts. It can be an indication of underlying systemic issues, such as unequal opportunities in the workplace, gender bias or discrimination.
- The gender pay gap is in favour of women among younger staff but shifts in favour of men after age 35, providing a further indication that women are potentially not progressing in their careers at the same rate as men.
- Allowances have a significant effect on the mean gender pay gap: the gap based on spinal salaries only (ie basic pay) is 9.3% but when we include other elements of ordinary pay the gap widens to 13.8%.
- The overall mean (average) disability pay gap at Public Health Wales is 1.5% and the median disability pay gap is 3.8%.
- The overall mean (average) LGB+ pay gap at Public Health Wales is 11.0% and the median LGB+ pay gap is 13.4%.
- The overall mean (average) ethnicity pay gap at Public Health Wales is in favour of ethnic minority staff at -8.5%, while the median ethnicity pay gap is 2.3%. However, further analysis by ethnic group shows variations among different ethnic groups.

- Efforts to improve ethnicity and disability declaration rates within the organisation have had a positive impact, providing larger samples for analysis of the ethnicity, disability and sexuality pay gaps.

Recommendations

- We recommend a **review of promotion and recruitment policy and practice** to ensure Public Health Wales provides transparent and fair career advancement for all employees.
- Stereotyping and gender bias can impact candidate selection. We recommend managers and others involved in the recruitment and/or promotion process **undergo unconscious bias training**.
- We recommend a **review of potential language bias in job descriptions**, which may be discouraging women or those from other protected groups from applying for certain roles.
- We also recommend **analysing recruitment and promotion data** to produce detailed insights on the numbers and types of candidates to identify key trends in support of an inclusive talent strategy.
- The organisation may also need to **tackle perceptions** about roles which women are less attracted to apply for. The use of case studies of women in senior and managerial roles could be useful here.
- During the interview process, **evaluating candidates comparatively** (i.e., not just individually) and hiring/promoting in batches, if at all possible, can support inclusive recruitment practices. Structured interviews with balanced recruitment panels who have undertaken unconscious-bias training is a key process change that can help improve access to external and internal roles for women and other marginalized groups.
- A **mentorship programme** or providing ‘stretch’ assignments or secondments could prove useful in encouraging more women into leadership roles.
- Public Health Wales has already implemented initiatives to address and reduce gender pay gaps, such as the ‘Women’s Network’ aimed at awareness-raising and developmental activities, ‘Work How it Works Best’ aimed at enabling more choice and flexibility in working patterns and other initiatives aimed at improving women’s experience at work; however the organisation should consider **establishing a set of KPIs** so that it can make informed

decisions on the effectiveness of such strategies. Examples of areas that can be measured and monitored include:

- Time series data on pay gaps
 - Proportion of women in managerial and leadership positions
 - Rate at which men and women are promoted
 - Employee perception of equality and fairness via employee engagement surveys
 - Retention rates for men and women
- We recommend Public Health Wales review **this gender pay gap report alongside results alongside the recent organisation-wide survey** to pinpoint wider cultural issues that are impacting diversity, equality and inclusion.
 - We recommend Public Health Wales **examines access to flexible working, training, and development opportunities across the organisation.**
 - The organisation may also wish to undertake **analysis of trends in maternity and adoption leave**, including examining rates of return and working patterns upon return, in order to better understand how children affect women’s careers. Opportunities to improve maternity and care leave arrangements could also be explored, as well as promoting shared parental leave and flexible working arrangements.
 - Gender pay gaps in Public Health Wales are found to be wider when based on ‘ordinary pay’ (which includes extra payments) compared to the pay gaps calculated on spinal point salaries only. Therefore, we recommend that Public Health Wales **examines the allocation of allowances by gender.**
 - The organisation might also consider setting up networks across the health or public sector to learn from others’ experiences and **share best practice.**
 - We recommend the organisation continues to work to **improve declaration rates on ethnicity, disability and sexual orientation.**

Gender pay gap reporting

The Equality Act 2010 (Gender Pay Gap Information) Regulations 2017 require employers with 250 or more employees to annually publish information on their gender pay gap, and the distribution of men and women in each pay quarter.

Table 1 Gender pay gap: what to report

Key statistics
<p>The gender pay gap reporting regulations state that employers with 250 or more employees must provide statistics on:</p> <ul style="list-style-type: none">• the percentage of men and women in each pay quarter• mean (average) gender pay gap for hourly pay• median gender pay gap for hourly pay• percentage of men and women receiving bonus pay• mean (average) gender pay gap for bonus pay• median gender pay gap for bonus pay

Source: [Gov.UK](https://www.gov.uk)

Key terms
<p>Gender pay gap figures show the difference between the average earnings of men and women, expressed as a percentage of men's earnings. Where men's pay is higher on average than women's the result is a positive percentage; where women's pay is higher the result is a negative percentage.</p> <p>Equal work is work rated as equivalent under the NHS points-based analytical job evaluation scheme.</p> <p>The effective date for the information on pay on which we conducted analysis is 31 March 2023.</p> <p>Each contract of employment with Public Health Wales is counted separately. The hourly rate is based on all relevant pay divided by total hours worked.</p> <p>Pay data is the anonymised dataset used for analysis.</p> <p>Hourly pay equals all gross cash payments before deductions but after salary sacrifice divided by the number of hours worked.</p> <p>Ordinary pay includes basic pay, allowances, holiday pay and shift premium pay.</p> <p>Spinal point salary is the value of the basic annual NHS salary.</p> <p>Length of service is defined as continuous length of service.</p> <p>Mean is the total sum of all salaries per hour divided by the number of salaries.</p> <p>Median is the middle value when all values are ordered in numerical order from smallest to largest.</p> <p>Pay quarter refers to a quarter of the workforce, ranked by their hourly pay.</p>

Gender pay gap

The gender pay gap is the difference in average earnings between men and women expressed as a percentage and we report on both the mean and median. The mean and median are two measures of central tendency used to describe the average value of a dataset. The mean is calculated by adding up all the values in a dataset and then dividing them by the total number of values. It is sensitive to outliers, in this case very high or very low pay, and can be skewed by them, pulling the mean in their direction. The median is the middle value and is therefore less sensitive to extreme values.

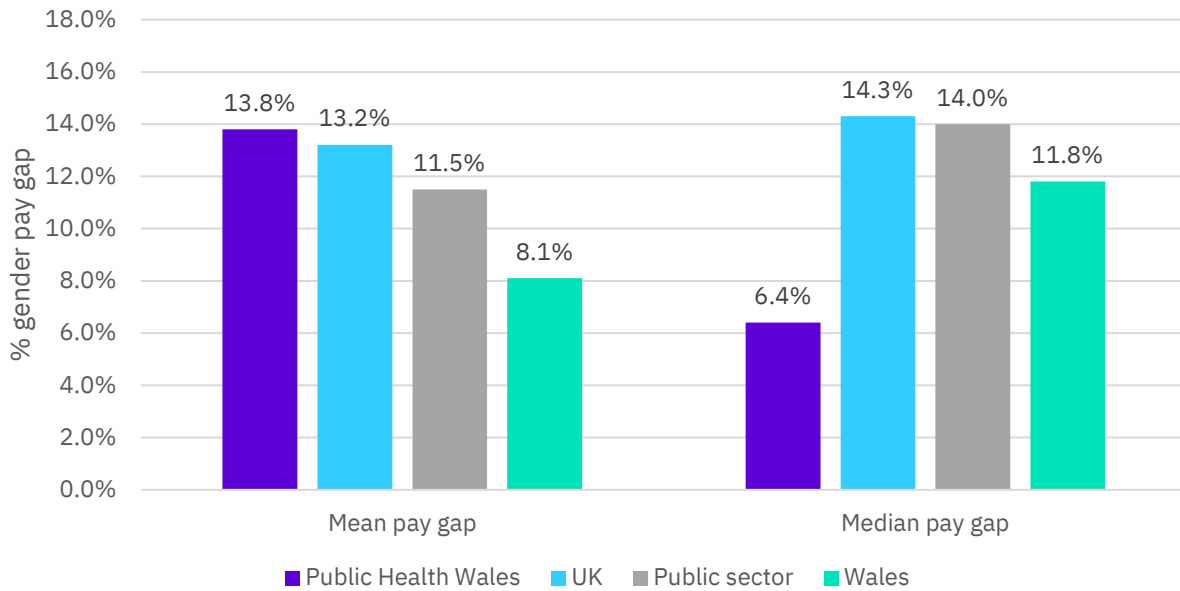
The overall mean (average) gender pay gap at Public Health Wales is 13.8% and the median gender pay gap is 6.4% (Table 2). It is evident that a small number of very high salaries among men has skewed mean hourly pay, resulting in a substantially wider pay gap at the mean, compared to median hourly pay.

Table 2 Public Health Wales gender pay gap at 31 March 2023

	Mean	Median
Men	£23.47	£18.41
Women	£20.24	£17.24
£ difference	£3.23	£1.18
Gender pay gap	13.8%	6.4%

National statistics on the gender pay gap in the UK, produced by the Office for National Statistics, serve as a useful benchmark. Figure 1 shows how the gender pay gap at Public Health Wales compares nationally. The mean gender pay gap at Public Health Wales (13.8%) is higher than the mean currently for the UK (13.2%), in the public sector (11.5%) and for Wales (8.1%). However, the median is substantially lower than all three benchmarks, at 6.4%. While the median compares favourably, the higher mean gender pay gap means that the difference between high pay for men and women is greater than national and public sector benchmarks.

Figure 1 Public Health Wales compared to national statistics on the gender pay gap



Source: Annual Survey of Hours and Earnings 2023, Office for National Statistics (all employees).

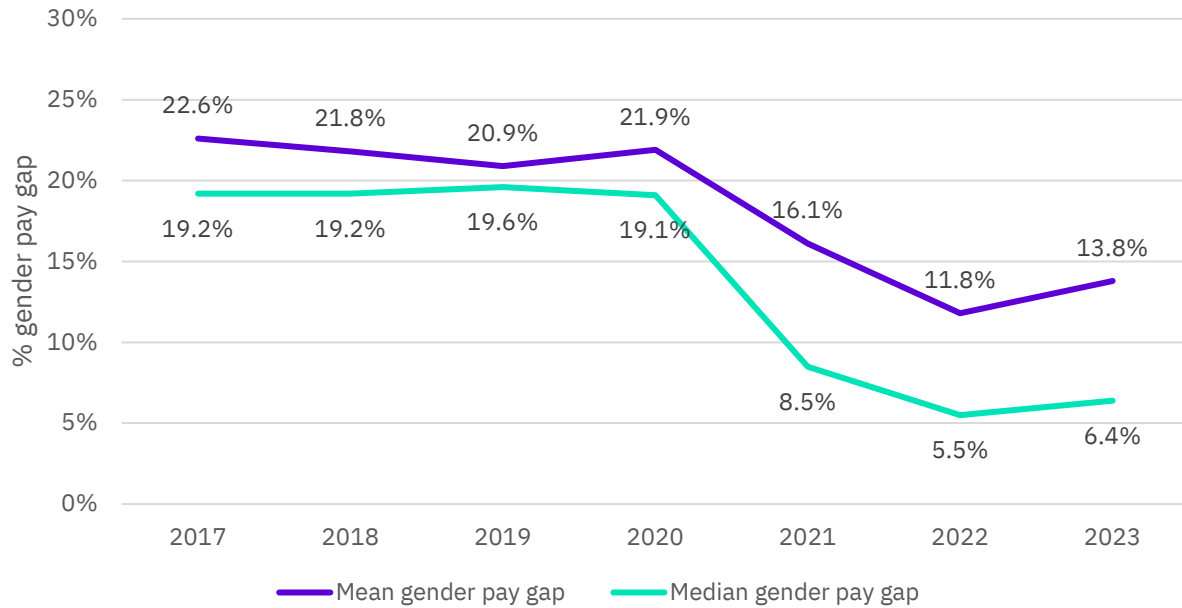
Public Health Wales has been monitoring its gender pay gap internally and annually publishing statistics under the UK’s reporting regulations since 2017. Over that time, significant progress has been made and the mean gender pay gap has almost halved. While this indicates that efforts to address and reduce pay gaps are having a positive impact, the latest figures show that the gender pay gap has widened again in 2023.

As Figure 2 shows, in 2017 the mean gender pay gap was 22.6%. There was a gradual decline over the following years, with a sharp decline in 2021 – explained by temporary changes to working practices during the pandemic which had the impact of raising women’s pay. Thereafter, there was a continued decline again to reach its lowest level in 2022 at 11.8%. However, this has ticked up to 13.8% in the latest analysis for 2023.

The median gender pay gap has followed a similar trend, although it fell more dramatically in 2021 and is notably lower than the mean gender pay gap.

The recent rise in the gender pay gap can be attributed, in part, to a change in the gender composition of the workforce.

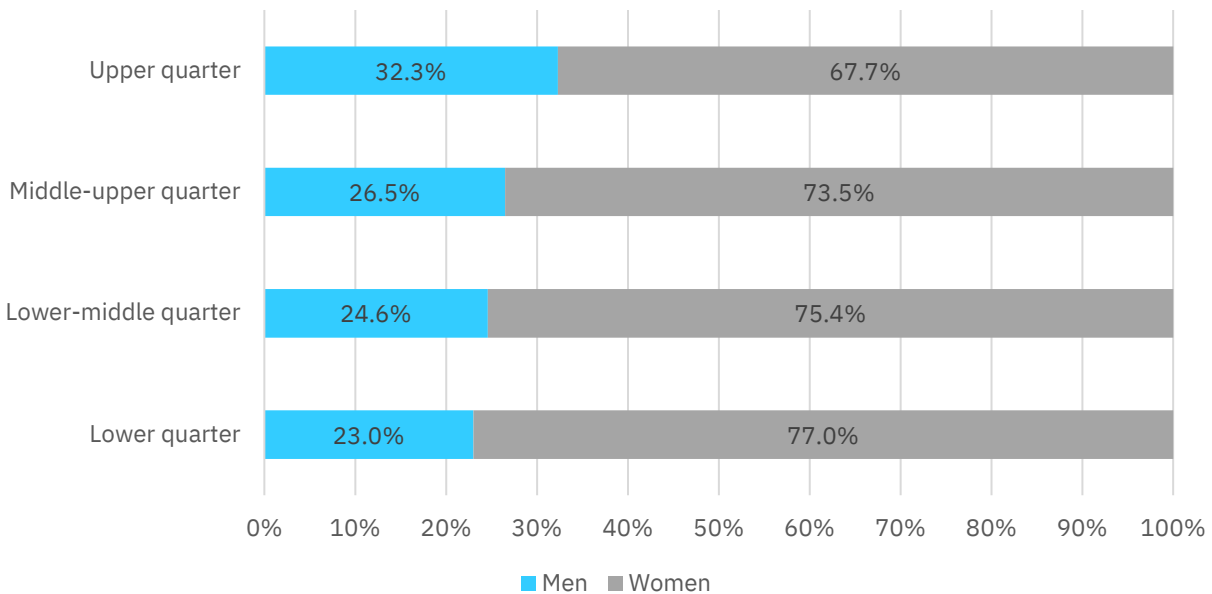
Figure 2 Public Health Wales gender pay gap 2017 to 2023



Pay quarters

Overall, women account for 73% of the workforce and they outnumber men at all levels of the organisation. Women occupy 68% of the highest-paid jobs and a woman currently holds the highest-paying position, however, the gender pay gap persists. This is because the greatest representation of men is in the highest-pay quarter. This distribution of gender affects pay averages by lowering average hourly pay for women, while boosting average hourly pay for men, thereby producing an overall gender pay gap in favour of men.

Figure 3 Proportion of men and women in each pay quarter



Over the period 2017 to 2023 the proportion of women in the highest pay quarter has grown by 3.3 percentage points, while the proportion of women in each of the other (lower) pay quarters has fallen, notably so, for the lowest pay quarter where the proportion of women has fallen by 7.4 percentage points since 2017. This helps explain the overall downward trend on the gender pay gap shown in Figure 2.

Looking specifically for explanations as to why the gender pay gap widened in 2023, data on pay quarters shows that the representation of women in the upper half of the earnings distribution has fallen, while their representation in the lower half has grown. This will have shifted the position of median pay for women downwards. Mean pay will also be affected, although to lesser extent, as there are fewer outliers at the top affecting mean pay for women, as demonstrated by the relatively close mean and median pay averages for women compared to men. [The difference between the median and mean hourly pay for men is £5.06, while that for women is £3.00.]

Figure 4 Proportion of men and women in each pay quarter 2017 to 2023

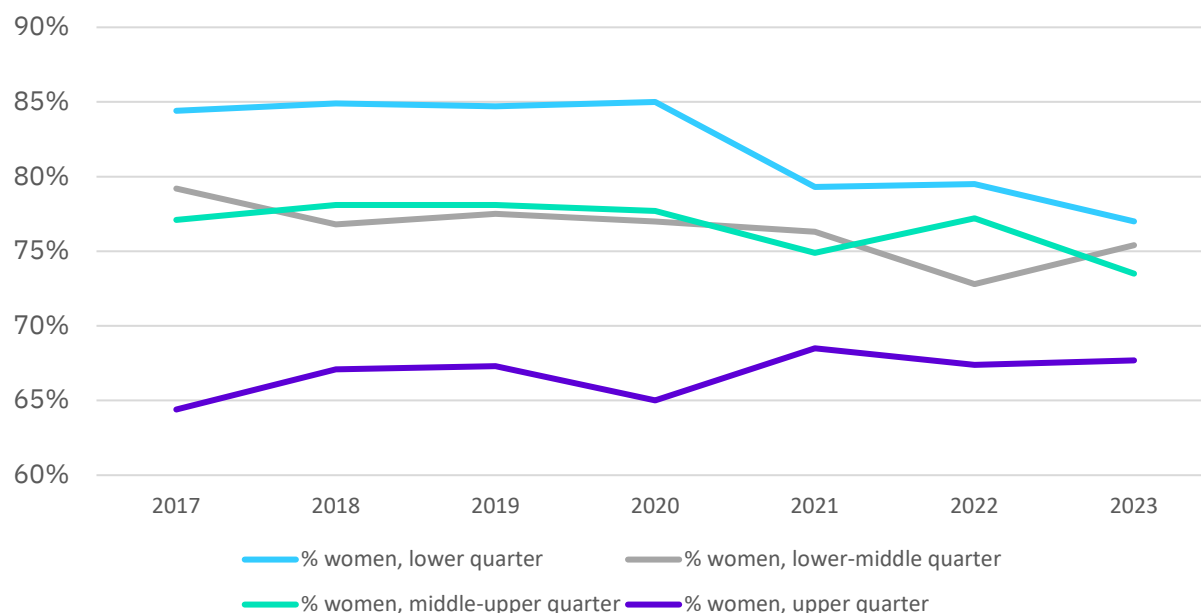


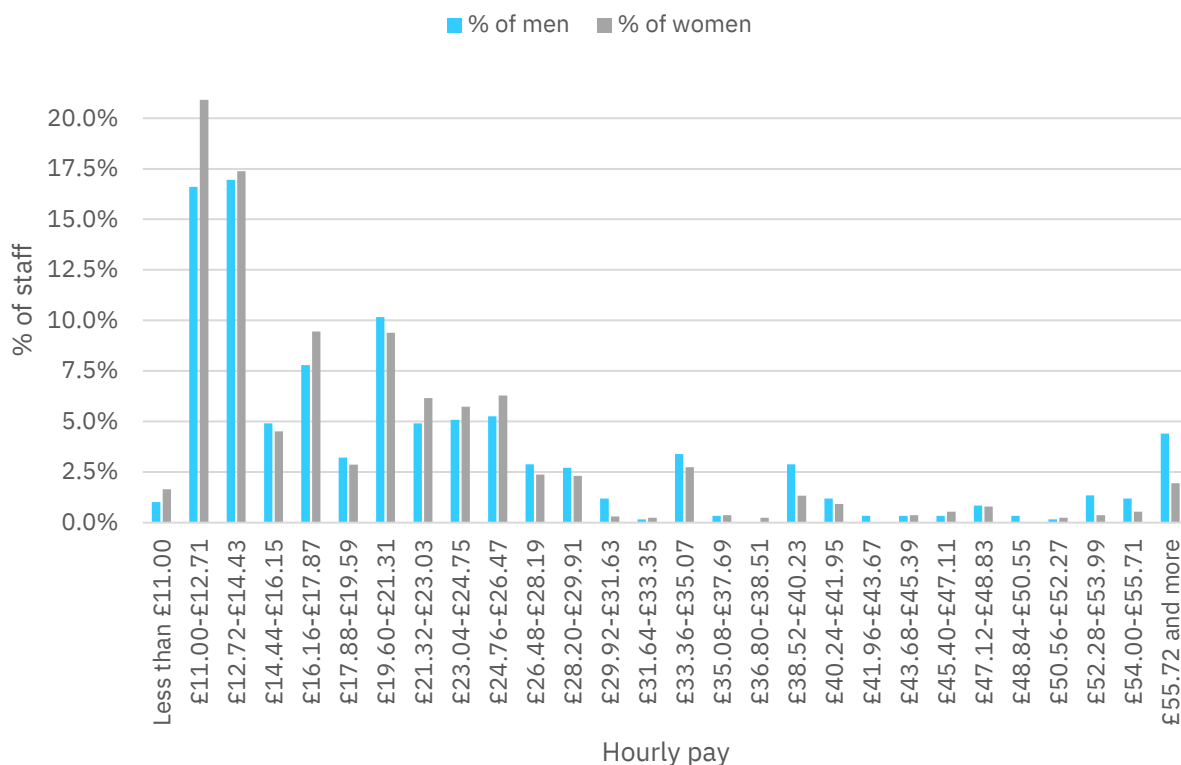
Table 3 Proportion of men and women in each pay quarter 2017 to 2023

Year (as at 31 March)	% women, upper pay quarter	% women, middle-upper pay quarter	% women, middle-lower pay quarter	% women, lower pay quarter
2017	64.4%	77.1%	79.2%	84.4%
2018	67.1%	78.1%	76.8%	84.9%
2019	67.3%	78.1%	77.5%	84.7%
2020	65.0%	77.7%	77.0%	85.0%
2021	68.5%	74.9%	76.3%	79.3%
2022	67.4%	77.2%	72.8%	79.5%
2023	67.7%	73.5%	75.4%	77.0%
Change (ppt)	3.3	-3.6	-3.8	-7.4

Earnings distribution

The distribution of hourly pay for men and women at Public Health Wales shows a clear spike in the proportion of men at the very top of the earnings distribution (see Figure 5). This is a clear driver of the high mean gender pay gap as compared to the low median gender pay gap. The proportion of men with the highest earnings (of £55.72 an hour and more) is 4.4%; this is more than double the 2.0% of women with earnings at this level. This is also the largest difference in the proportions of men and women across the entire distribution.

Figure 5 Earnings distribution for men and women at Public Health Wales



The gender pay gap in detail

Headline gender pay gap reporting figures are useful for providing a broad indication of average pay gaps, but they are not designed to reveal whether employers might be discriminating against women either directly or indirectly. On their own these headline statistics are not enough to establish the causes of pay gaps. For this, employers must undertake a more detailed assessment of their pay gaps to understand where and why the gaps arise. This section explores the gender pay gaps at Public Health Wales using key explanatory factors such as pay band, area of work, employee age and length of service.

Gender pay gaps by pay band

A useful way of analysing gender pay gaps is by pay band. Public Health Wales operates more than one grading system, with some staff on the NHS Agenda for Change pay structure and others covered by the Doctors' and Dentist' Review Body pay scales. For this analysis we have grouped staff from the separate pay structures into combined pay bands based on previous work which assessed the relative size of jobs found across the NHS, covering both medical and non-medical roles.³ This results in 10 groups in total, from pay band 2 to pay band 11 for the CEO.

This analysis shows that the gender pay gap at Public Health Wales is in favour of women until pay band 7. Pay band 7 represents the lower of two professional and managerial levels and includes professionals such as accountants, scientists and middle managers. From this level onwards, a gender pay gap in favour of men emerges and widens with seniority (with the exception of band 10, which includes experienced consultants and directors).

The largest gap is found at pay band 9, where the mean gender pay gap is 12.3%, and this difference is clearly driving the organisation-wide pay gap. This band contains the largest

³The combined pay bands are as follows: '2' Review Body (RB) Band 2, Non-Review Body (NRB) Band 2; '3', RB/NRB Band 3; '4', RB/NRB Band 4; '5', RB/NRB Band 5; '6', RB/NRB Band 6; '7', RB/NRB Band 7, Specialist Registrar; '8', RB/NRB Band 8A/B, GPs; '9', RB/NRB Band 8C/D, Consultant; '10', RB/NRB 9, Consultants and Directors.

proportion of men and includes primarily key managerial roles, such as heads of function, as well as junior consultant.

Figure 6 Gender pay gaps by pay band

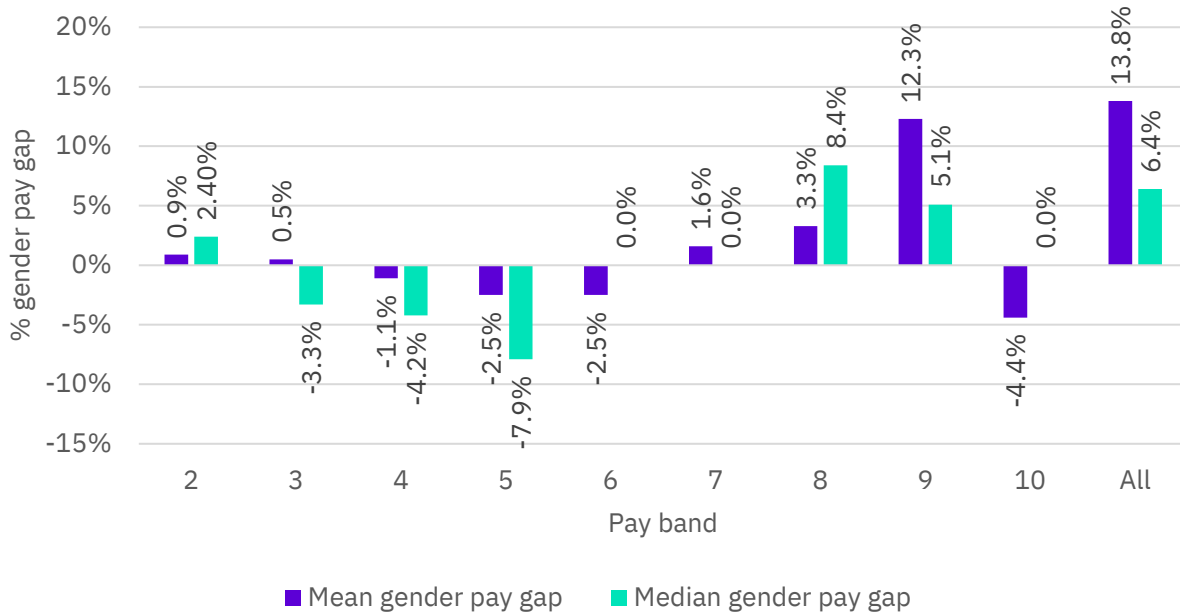
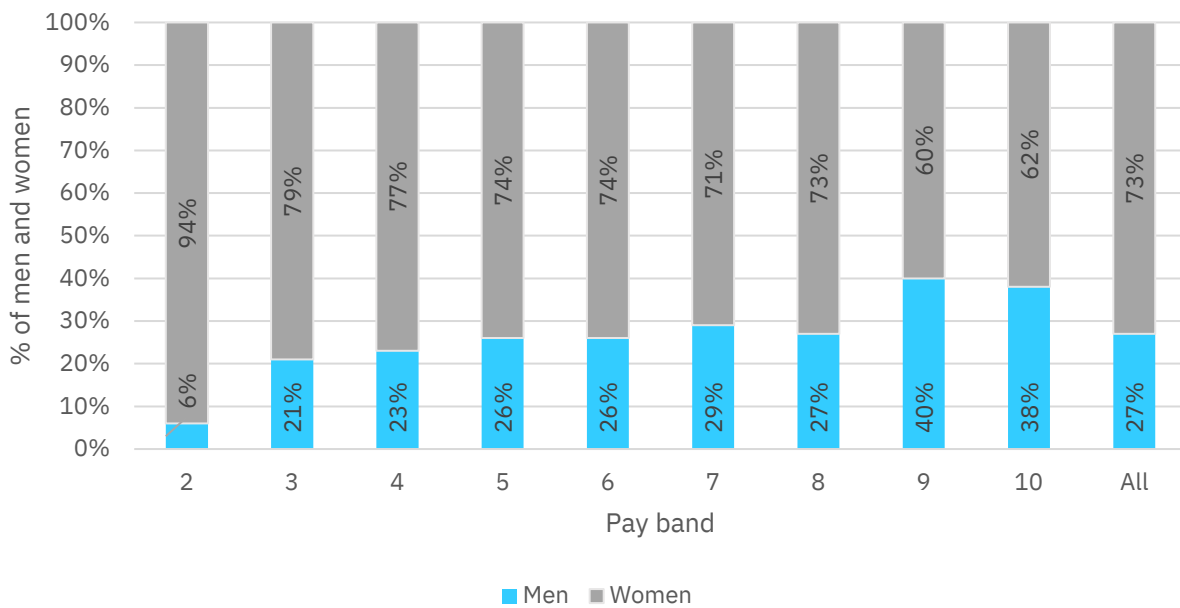


Figure 7 Proportion of men and women in each pay band



Further analysis explores the impact of additions to basic pay on the gender pay gap by pay band. This analysis shows that other elements of pay contribute to the gender pay gap as the gap is wider when we compare pay for men and women including such additions, than on basic pay alone. This effect is found more significantly on the mean measure and particularly for bands 9 and 10.

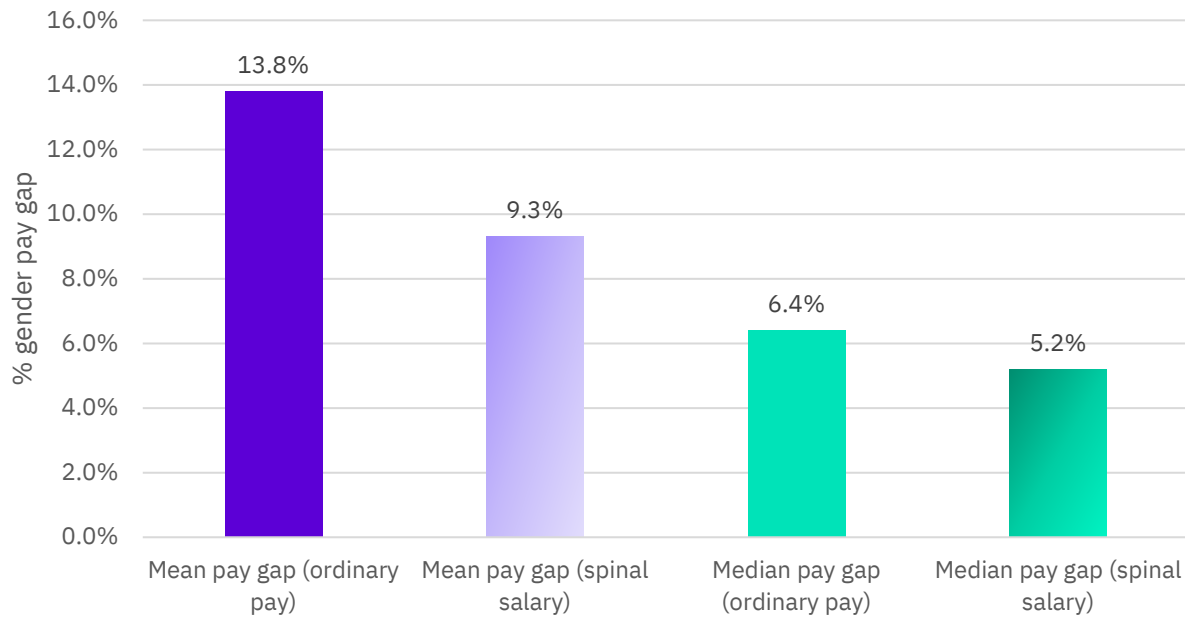
Table 4 provides gender pay gap calculations on the basis of spinal point salaries, or basic pay only, and 'ordinary pay', which includes allowances and other regular pay. The latter is the main measure for calculating the headline gender pay gap figures. The table shows that gender pay gaps calculated using basic pay are broadly similar to those based on ordinary pay – most are negative, in favour of women, with the exceptions of bands 9 and 10 which are very different.

The mean pay gap is significantly larger for band 9 using ordinary pay than when based on basic pay only. This illustrates the impact of allowances on the pay gap between men and women at this level. At band 10 the median pay gap is significantly larger than the mean, but in favour of women. The data shows that men and women in this band are typically employed in different roles.

Table 4 Gender pay gaps by pay band

Pay band	Ordinary pay		Spinal point salary	
	Mean pay gap	Median pay gap	Mean pay gap	Median pay gap
2	0.9%	2.4%	1.5%	2.6%
3	0.5%	-3.3%	-1.9%	-6.7%
4	-1.1%	-4.2%	-1.3%	0.0%
5	-2.5%	-7.9%	-3.6%	-7.9%
6	-2.5%	0.0%	-1.3%	0.0%
7	1.6%	0.0%	-0.1%	0.0%
8	3.3%	8.4%	2.2%	11.2%
9	12.3%	5.1%	0.9%	13.3%
10	-4.4%	0.0%	-25.3%	-15.1%
Pay gap	13.8%	6.4%	9.3%	5.2%

Figure 8 Gender pay gaps for ordinary and basic pay



Gender pay gaps by directorate

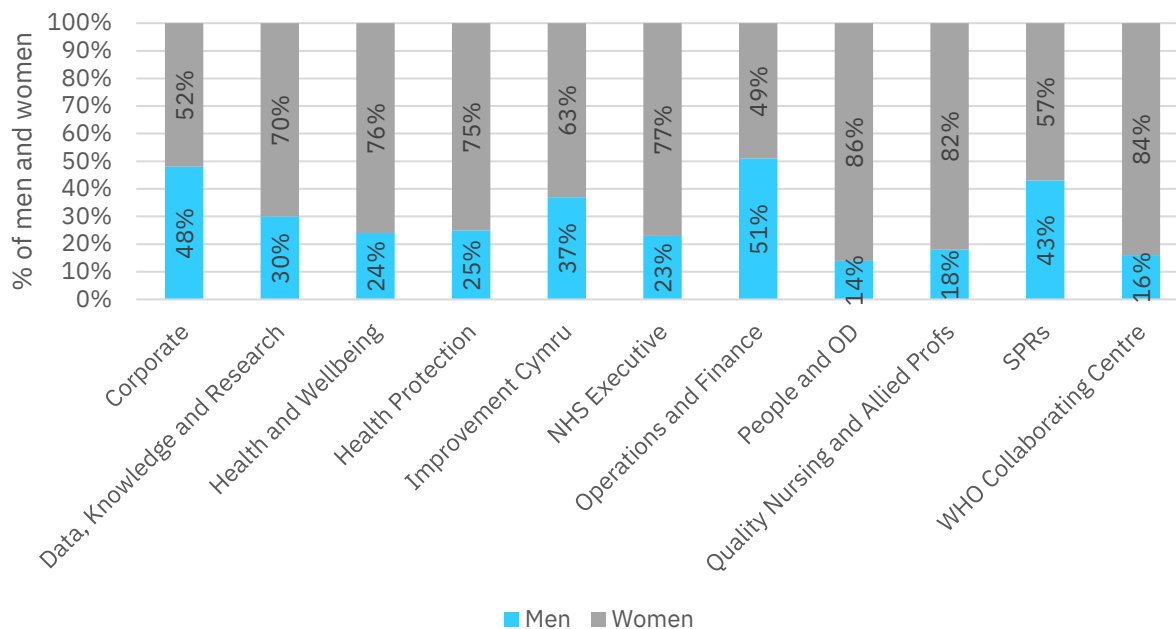
Analysis of gender pay gaps by directorate shows a varied picture. The People and Organisational Development (OD) directorate has the largest pay gap in favour of women. This directorate also has the largest proportion of women of any directorate. The SPRs directorate also has a pay gap in favour of women, and again the proportion of women in this directorate is far larger than the proportion of men.

The largest pay gap in favour of men is in the Corporate directorate and at the median. At 62.2% the gender pay gap is extremely wide. The next largest pay gaps occur in the NHS Executive, and Health Protection and Screening directorates, where the mean pay gaps are 20.7% and 19.3% respectively. In both these directorates men are concentrated in the higher-paying roles, raising average pay for men relative to that for women.

Table 5 Gender pay gaps by directorate

Directorate	Mean gender pay gap	Median gender pay gap
Corporate	-9.2%	62.2%
Data, Knowledge and Research	4.3%	13.9%
Health and Wellbeing	5.6%	-14.1%
Health Protection and Screening	19.3%	13.3%
Improvement Cymru	2.0%	-5.2%
NHS Executive	20.7%	14.2%
Operations and Finance	-2.7%	0.0%
People and OD	-40.7%	-39.6%
Quality Nursing and Allied Profs	-3.6%	16.9%
SPRs	-5.2%	-28.1%
WHO Collaborating Centre	7.9%	0.0%

Figure 9 Proportion of men and women in each directorate

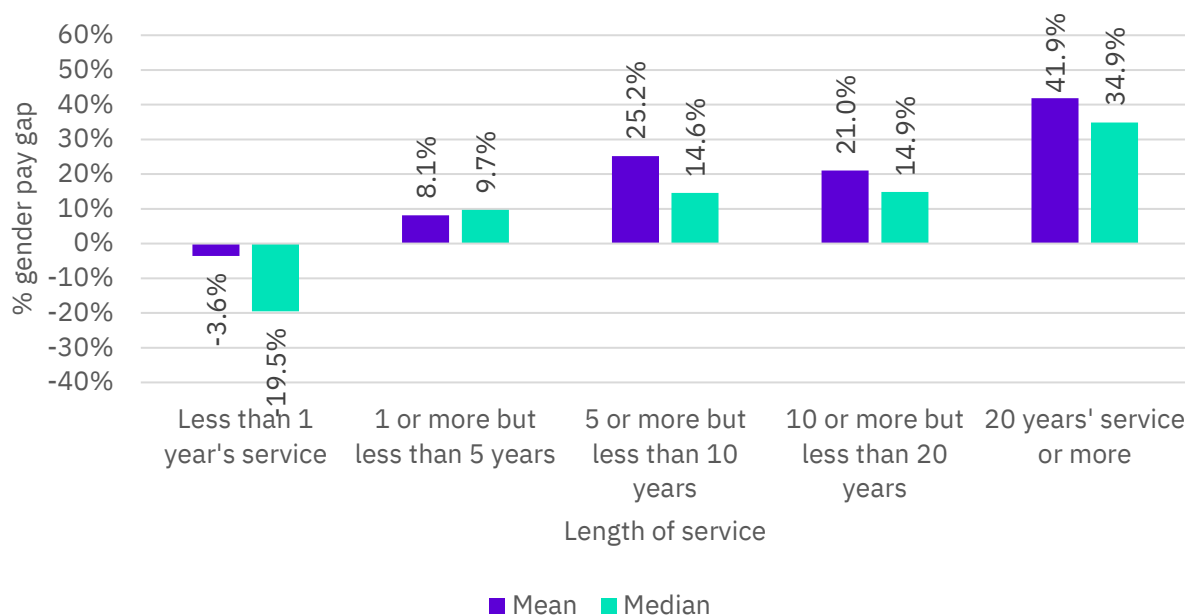


Length of service

Analysis of gender pay gaps by length of service shows that gaps are wider between men and women with longer continuous service, indicating that the difference in average pay between the genders is **not due to men having longer average service than women**. Rather, pay gaps by length of service appear to indicate there are differences in progression and career development opportunities for men and women, the same factors that affect the gender pay gap by age (see further on).

The gender pay gap among employees with less than one years' service is in favour of women. But beyond this, the gender pay gap is in favour of men, typically widening with service and is widest among men and women with 20-plus years' service. This pay gap between men and women with the longest continuous service is due to the greater representation of men with 20 years+ service in senior and therefore higher-paid roles. Women with this level of long service are employed in roles across a wider range of salary levels. This suggests a possible focus for improvement could be on women's progression and/or promotion opportunities within Public Health Wales.

Figure 10 Gender pay gaps by length of service



Pay gaps by length of service and pay band show that the widest gaps are between men and women with longer service in pay bands 8 and 9.

Figure 11 Gender pay gaps by length of service and pay band

Band	Less than 1 year's service	1 or more but less than 5 years	5 or more but less than 10 years	10 or more but less than 20 years	20 years' service or more
Mean gender pay gap					
3	4.1%	0.1%	0.5%	2.3%	-
4	0.1%	-0.7%	-0.5%	0.9%	-
5	-3.4%	-1.1%	0.7%	-2.4%	-20.7%
6	-4.7%	-3.8%	1.7%	-1.0%	4.6%
7	2.2%	2.6%	-1.9%	4.0%	1.7%
8	6.0%	-7.6%	7.5%	8.9%	-3.6%
9	-59.6%	12.5%	31.6%	5.2%	28.9%
10	11.2%	2.5%	5.4%	-29.5%	0.0%
Median gender pay gap					
3	0.0%	-3.5%	0.0%	0.0%	-
4	0.0%	-2.0%	0.0%	0.0%	-
5	0.0%	-2.4%	2.2%	-9.8%	-21.7%
6	0.0%	-2.0%	1.9%	0.0%	0.0%
7	0.0%	0.0%	0.0%	0.0%	0.0%
8	0.0%	-12.6%	11.2%	12.4%	0.0%
9	0.0%	16.8%	7.9%	15.5%	32.4%
10	13.1%	7.8%	0.0%	0.0%	0.0%

Separate analysis of gender pay gaps by length of service also indicates that women are not progressing in their careers at the same rate as men. Average pay for women with five to ten years' service in the same grade is significantly lower than men's average pay. This is because women with longer service are in lower-paid roles (Figure 13).

Figure 12 Gender pay gaps by length of service in grade

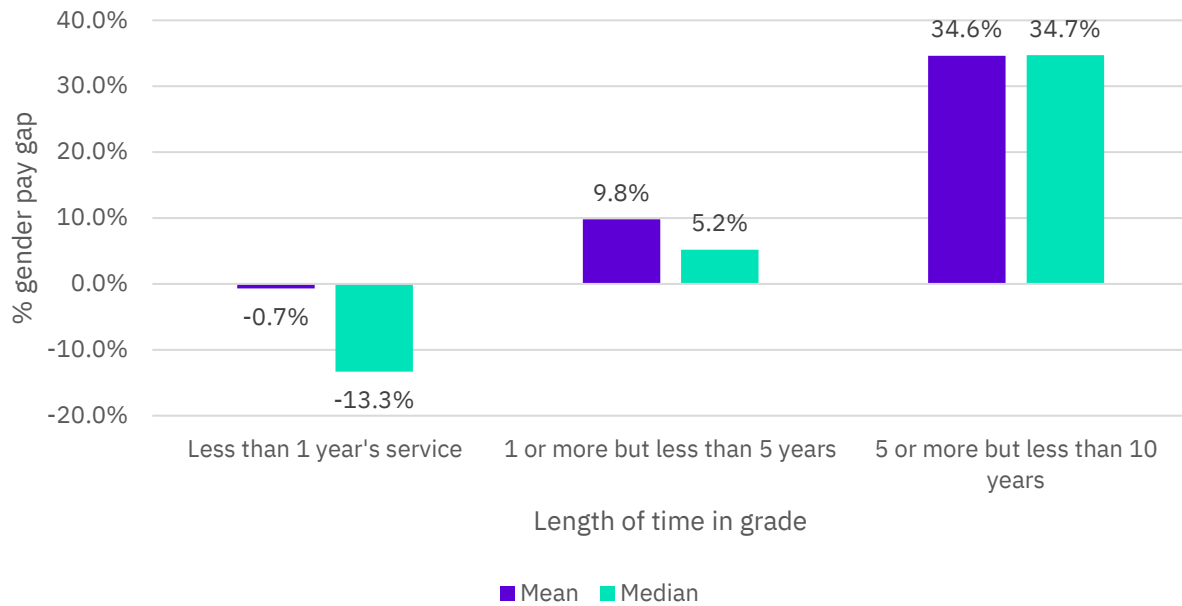
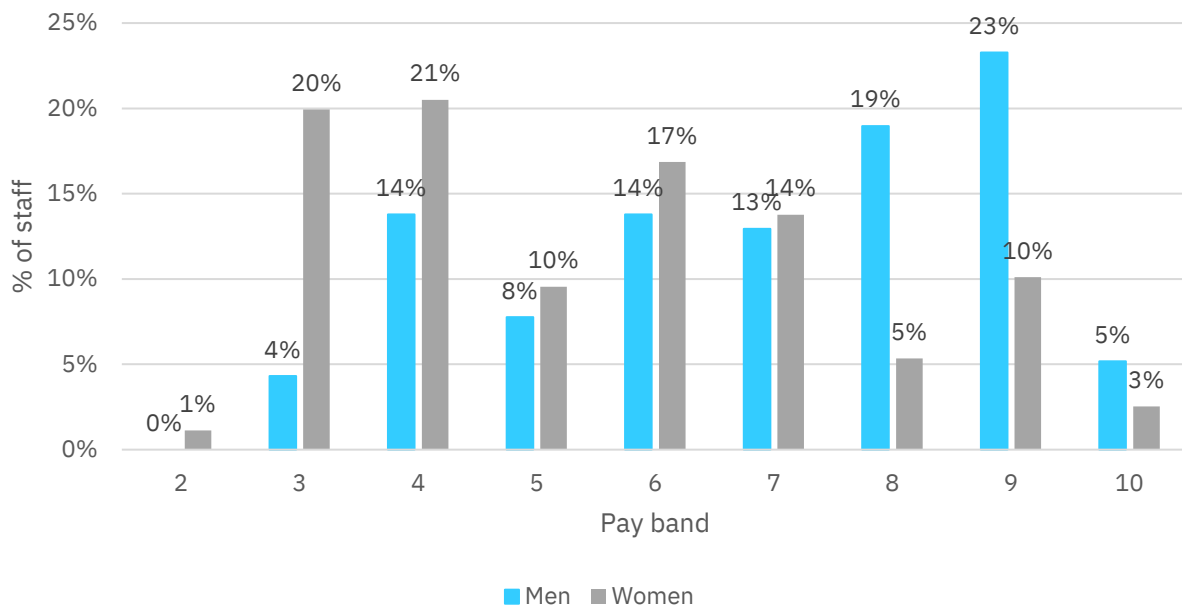


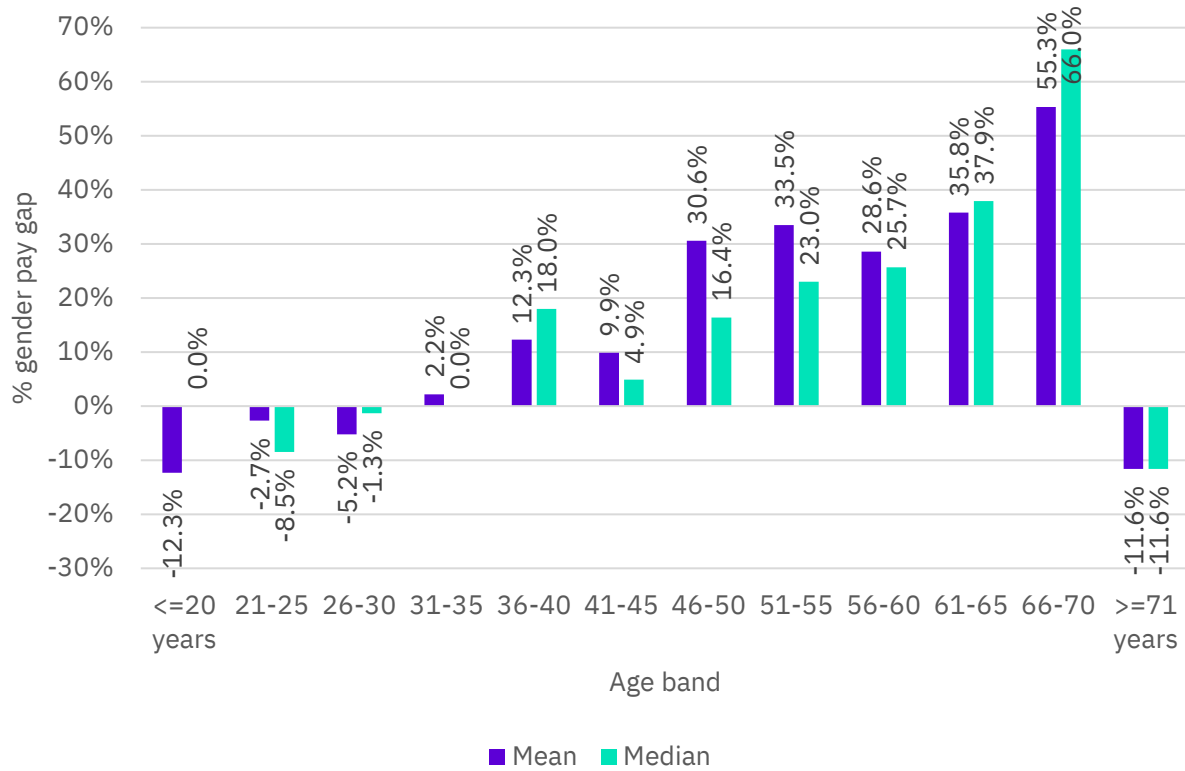
Figure 13 Proportion of men and women with 5-10 years' service in grade by pay band



Gender pay gaps by age

Analysis of gender pay gaps by age shows that the gaps are in favour of women for younger staff but shift after age 30, where the gender pay gap emerges and continues to widen until age 70. The widest pay gap is between men and women aged 66 to 70.

Figure 14 Gender pay gaps by age

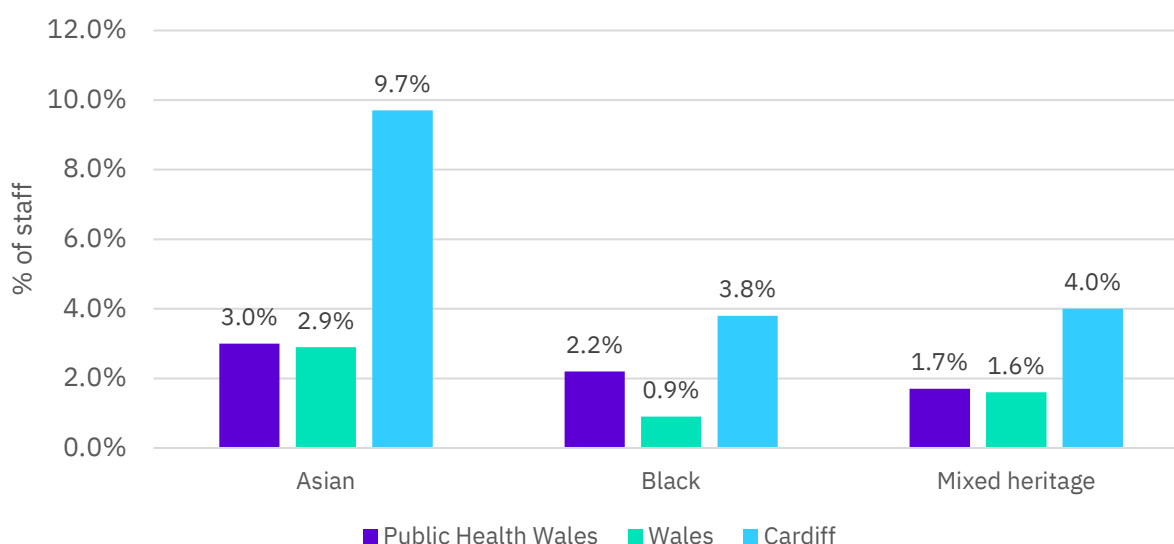


Pay gaps for other protected characteristics groups

Ethnic minority groups

A total of 182 staff (8.3%), comprising 122 women and 60 men, at Public Health Wales identify with an ethnic minority group and 1,776 staff (81.4%) identify as White. According to data from the 2021 Census, the Public Health Wales workforce broadly mirrors the ethnic demographic for Wales as a whole. However, ethnic demographics can vary significantly between rural and urban areas and the data shows that the workforce at Public Health Wales poorly reflects the cultural diversity of the capital city, Cardiff.

Figure 15 Ethnic demographics

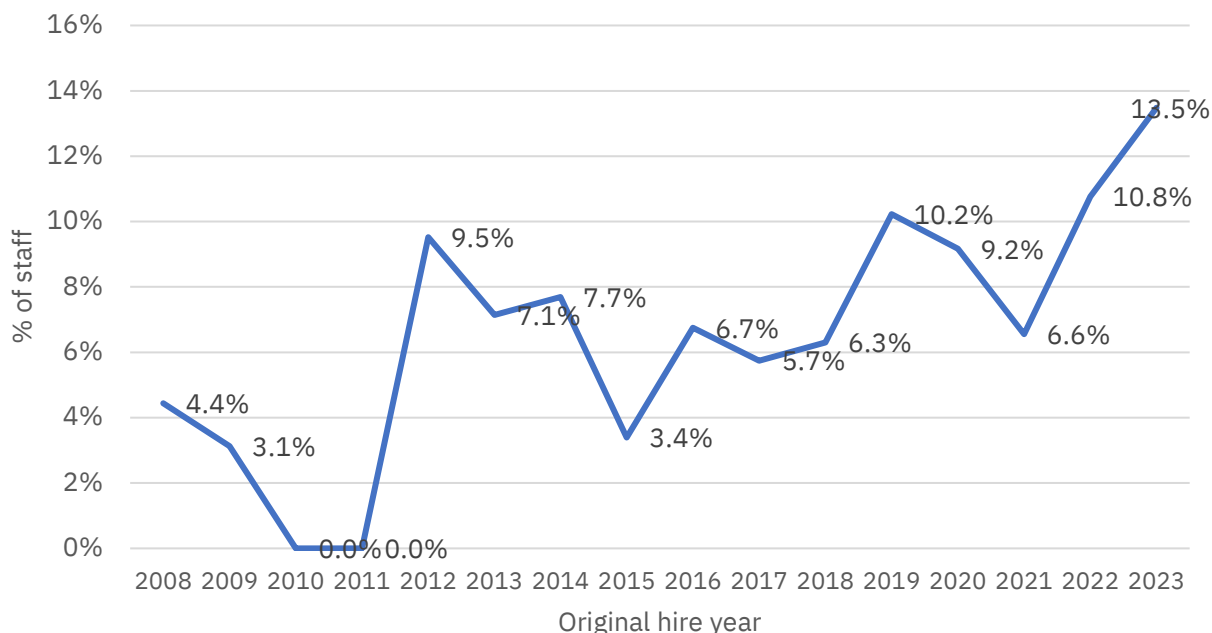


Source: Census 2021, ONS (Wales and Cardiff figures only).

A total of 223 staff (10.2%) at Public Health Wales have not declared their ethnicity; a small improvement on 2022 when the figure was 311 (13.6%). However, at 223 there is still a large number of staff for whom ethnicity is either not stated or unspecified. The data also shows a growing proportion of new hires for whom ethnicity information is not stated. This finding is based on examining how many new hires have ethnicity recorded as either 'not stated' or 'unspecified' by the original hire year. This may be linked to administrative changes or indicate

a growing unwillingness among staff to declare their ethnic status, possibly driven by social factors. In any event, this needs to be better understood because low ethnicity declaration rates are a barrier to addressing ethnicity pay gaps.

Figure 16 Proportion of new hires where ethnicity is 'not stated' or 'unspecified' by year



Ethnicity pay gap

The ethnicity pay gap is the percentage difference in average pay of the reference group (White employees) and comparative ethnic groups. The overall mean (average) ethnicity pay gap at Public Health Wales is in favour of ethnic minority staff at -8.5%, while the median ethnicity pay gap is 2.3%. The mean pay gap is affected by a small number of highly-paid staff from ethnic minority groups.

Further analysis by ethnic group shows variations among different ethnic groups, notably:

- The pay gap is widest between staff from Mixed or Multiple ethnic groups and White staff, with a mean pay gap of 12.3% and a median pay gap of 17.5%.
- The mean pay gap between Black, Black Welsh and Black British ('Black') and White staff is 12.0% and the median pay gap is 4.1%.

- Those from Black and Mixed or Multiple ethnic groups have lower average pay than Asian, Asian Welsh and Asian British ('Asian') staff.
- The gap between mean hourly pay for Asian and White staff is in favour of Asian staff at -27.8%, driven by a small number of Asian staff with high pay. The median pay gap is 2.3%.

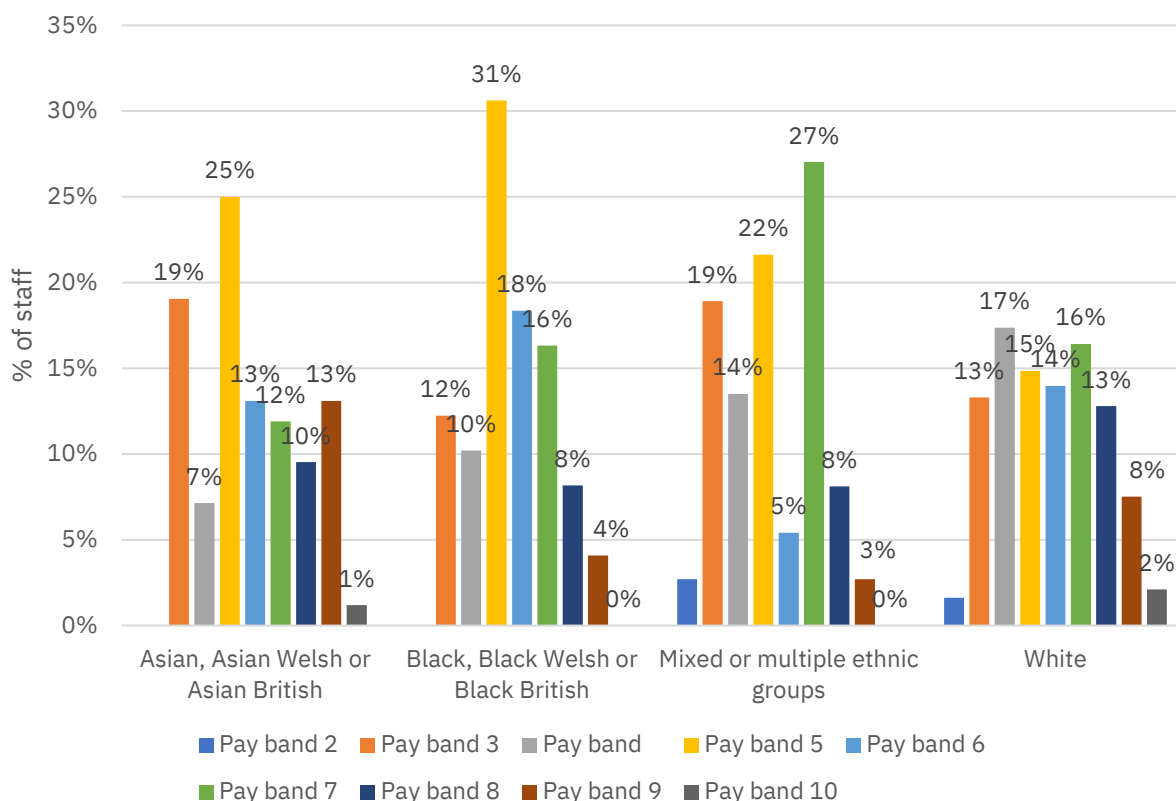
Table 6 Public Health Wales ethnicity pay gaps on 31 March 2023

	Mean	Median
White staff	£20.57	£17.24
Ethnic minority staff	£22.32	£16.84
- Asian, Asian British or Asian Welsh ('Asian')	£26.27	£16.84
- Black, Black British or Black Welsh ('Black')	£18.11	£16.53
- Mixed or Multiple ethnic groups ('Mixed')	£18.05	£14.22
Ethnicity pay gap	-8.5%	2.3%
- Asian/White pay gap	-27.8%	2.3%
- Black/White pay gap	12.0%	4.1%
- Mixed/White pay gap	12.3%	17.5%

Note: It is possible that these groupings, which combine ethnicities into broader groups, mask differences between specific ethnic minority groups but currently the numbers do not enable more granular analysis.

Ethnic minority staff are underrepresented at the highest levels at Public Health Wales with just one member of staff from an ethnic minority group in band 10 and in the leadership group. As Figure 17 shows, White staff tend to be more evenly distributed across the pay bands, whereas staff from ethnic minority groups are generally skewed towards the lower pay bands. The exception is for Asian staff in pay band 9, which primarily reflects consultants.

Figure 17 Distribution of ethnic minority staff by pay band



Disability pay gaps

In total 137 staff (6.3%) (93 women and 44 men) report having a disability or long-term condition. The disability pay gap refers to the difference in average hourly pay between disabled and non-disabled employees across the whole organisation. The overall mean (average) disability pay gap at Public Health Wales is 1.5% and the median disability pay gap is 3.8%.

Table 7 Disability pay gap at 31 March 2023

	Mean	Median
Non-disabled staff	£20.31	£17.24
Disabled staff	£20.01	£16.58
£ difference	£0.30	£0.66
Disability pay gap	1.5%	3.8%

LGB+ pay gap

In total 115 staff (5.3%) (58 women and 57 men) report their sexual orientation as being either lesbian, bisexual, gay or other sexual orientation. The LGB+ pay gap refers to the difference in average hourly pay between LGB+ and heterosexual employees across the whole organisation. The overall mean (average) LGB+ pay gap at Public Health Wales is 11.0% and the median LGB+ pay gap is 13.4%.

Table 8 LGB+ pay gap at 31 March 2023

	Mean hourly pay	Median hourly pay
Heterosexual	£20.40	£17.24
LGB+	£18.15	£14.92
£ difference	£2.25	£2.32
LGB+ pay gap	11.0%	13.4%