

The top half of the cover features the year '2019' in a large, white, sans-serif font. The numbers are partially obscured by several overlapping orange geometric shapes, including triangles and trapezoids, which create a layered, dynamic effect. The background is a solid dark blue.

2019

British Sikh Report 2019

AN INSIGHT INTO THE BRITISH SIKH COMMUNITY

The bottom half of the cover features the numbers '19' in a large, white, sans-serif font. Similar to the top section, the numbers are partially obscured by overlapping orange geometric shapes. The background is a solid dark blue.

19

Contents

| | |
|---|----|
| 1. Executive summary | 3 |
| 2. Article: Organ donation and the sikh community | 4 |
| 3. British sikh report 2019: Survey introduction | 13 |
| 4. BSR 2019: Demographics of the survey | 14 |
| 5. Observance of sikhi and sewa | 14 |
| 6. Identity and ethnicity | 15 |
| 7. Adoption and fostering | 17 |
| 8. Employment and education | 20 |
| 9. Disability and caring | 25 |
| 10. Mental health and suicide | 29 |
| 11. Drugs and alcohol | 31 |
| 12. Major anniversaries of 2019 | 35 |
| 13. Acknowledgements | 42 |



Executive summary

Welcome to the British Sikh Report 2019. This is the seventh in our series of strategic documents created by Sikhs about Sikhs, and for everyone with an interest in the lives of Sikhs in Britain.

Over the last seven years, we have developed robust and unrivalled statistical information about Sikhs living in Britain. This highly influential annual document has been quoted by MPs and Peers, referred to in several pieces of research and white papers regarding faith in modern society, and used by a multitude of public authorities and private companies in identifying the needs of British Sikhs.

Our experienced team has worked with a large and diverse group of Sikh organisations throughout the country to create the questionnaire and collect the data. This year's team has included research analysts, academics, social workers, senior consultants, teachers and managers amongst many others who have volunteered their valuable time and expertise to the project. We are deeply grateful to everyone who has helped us along the way, including those who went out within the Sikh community to gather responses.

The findings from this year's report include:

- 93% of Sikhs would respect the wishes of a family member wanting to donate their organs after they die
- 85% believe that events such as the Jallianwala Bagh massacre should be taught at school
- 42% would consider adopting Sikh children, and 29% would consider adopting non-Sikh children
- 42% believe that the British Sikh community should focus on financial assistance for victims and families of the events of 1984 in India.
- 76% of Sikhs believe that Sikhs uphold the human rights of others in society
- 11% of Sikh households have somebody living with dementia or Alzheimer's, and 62% of Sikhs with dementia or Alzheimer's are looked after by family members
- 64% believe that their Gurdwara is equipped to deal with the needs of the disabled
- 86% would like to visit Gurdwaras in Pakistan

British Sikhs are a strongly proud community with a distinct identity, as can be seen across these pages. Some of their concerns are unique to Sikhs, whilst others quite clearly reflect national sentiments and sensibilities. As such, this document provides a snapshot of what it means to be Sikh in Britain today.

We hope that you find the British Sikh Report 2019 fascinating, thought-provoking, and most of all, insightful.



Jasvir Singh OBE

Article: Organ donation and the Sikh community



NHS organ donor card with an image of the Sikh *Khanda*¹

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Organ donation is the process of surgically removing an organ or tissue from one person (the organ donor) and placing it into another person (the recipient). It is often the only treatment for end-stage organ failure, such as liver and heart failure and is the preferred treatment choice for a number of other diseases such as end stage renal disease. It offers significant benefits in terms of improved quality of life and longer-term survival for sick patients, and reduces the need for long-term organ maintenance treatments. Some organs are donated after the donor has died, either after brain death or after circulatory death, while healthy friends or relatives, who make the decision to help a loved one who is experiencing organ failure, make other organ donations. People of all ages can consider themselves potential donors. Many organs can be transplanted including heart, lungs, liver, cornea, kidney, pancreas, connective tissue, small bowel and bone.

As a result of the implementation of the Organ Donation Taskforce (ODT) recommendations in 2008², organ donation rates in the United Kingdom have

improved in the last few years. Unfortunately, the problem of organ shortage remains as the demand for transplants far outstrips the supply. In 2018, despite performing a record number lifesaving transplants, 411 patients died while on the active list waiting for their transplant and a further 755 were removed from the transplant list. The removals were mostly because of deteriorating health and ineligibility for transplant and many of these patients would have died shortly afterwards.³

The problem is more serious in black, Asian, and other minority ethnic (BAME) communities. While they represent 11% of the UK population, the proportion of opt-in registrations from BAME communities⁴ added to the Organ Donor Register (ODR) in 2017/18 was only 7.2%. In the 2019 BSR Survey⁵ only 40% of respondents overall stated that they were registered for organ donation or carry an organ donor card (Figure 1 and Table 1). This figure is similar amongst most age groups although Sikh females showed a higher rate of registration compared to males.

Figure 1: Are you registered for organ donation or carry an organ donor card?

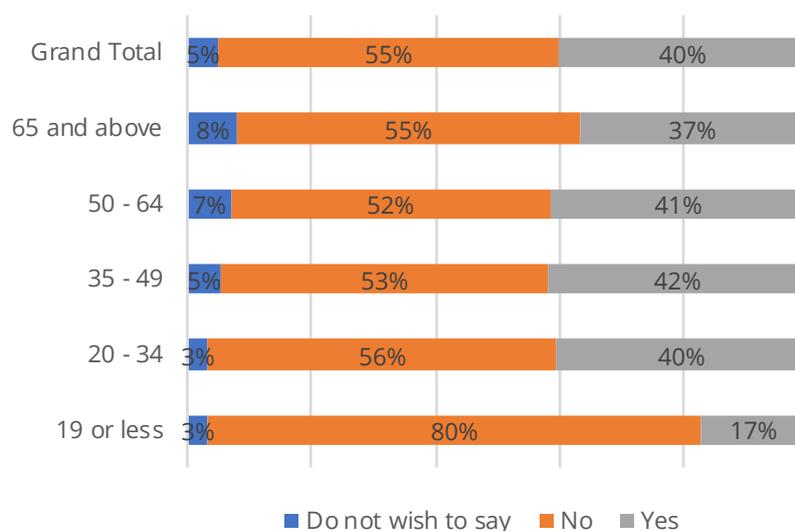


Table 1: Are you registered for organ donation or carry an organ donor card? By gender

| | Female | Male | Grand Total |
|--------------------|--------|------|-------------|
| Do not wish to say | 5% | 5% | 5% |
| No | 51% | 60% | 55% |
| Yes | 44% | 35% | 40% |

The severity of the situation is further compounded by over representation of BAME groups on kidney transplant waiting lists. At the end of the 2017/18 financial year, 35% of the total number of patients on the waiting list for a kidney transplant were BAME, reflecting a demand for kidney transplantation in excess of that for white patients.⁶ This can be attributed to the higher prevalence of diabetes and kidney disease associated with the BAME communities. Additionally, tissue type compatibility and blood group matching is more difficult across racial groups, resulting in longer waiting times for kidney transplant for BAME patients (approx. 2½ years, compared with 2 years for White patients).⁷ For other organs, waiting times are not longer than for White patients.

To address the current situation the UK Government commissioned NHS Blood and Transplant to deliver

a campaign with support from the National BAME Transplant Alliance (NBTA) to raise awareness and support to local groups. In January 2019 a funding boost to help promote organ donation among black and Asian communities was announced with the aim of spreading the message about the gift of organ donation in England and Wales at a community level.

Sikhs, like other BAME members, have not shown the willingness to take part in organ donation in the numbers that are required. Although there is a paucity of studies that have been conducted amongst Sikhs specifically, empirical studies of BAME populations suggest that, apart from cultural, social and educational issues and language barriers, religious beliefs may be an important influence in deterring Sikhs from donating their organs.⁹ However, one must be careful about ascribing reasons for the low rate of organ

procurement from Sikhs and further studies are required to delineate the causes. The only study identified as specifically looking at Sikh attitudes towards organ transplantation concluded that while there were some misgivings about notions about mutilation and re-incarnation, the prevailing view amongst the 22 Sikhs interviewed for the study was supportive of transplantation and organ donation was seen as a way of demonstrating the *seva* (selfless service) tradition within the Sikh Dharam.¹⁰ From the BSR Survey 2019, of the 183 respondents who gave some reason as to why they were not registered for organ donation, only 7% stated reasons of belief or ethics for not wishing to donate; 26 % had not thought of or considered organ donation while 28% said that they would consider organ donation at some point in the future. The other main reasons for non-registration included medical reasons (9%) and a lack of understanding of the organ donation process (12%).

What does Sikh philosophy and teaching say on the topic of organ transplantation? Guru Nanak, the founder of the Sikh Dharam, emphasized spiritual wisdom, righteous living, and responsibility towards God and its creation. Guru Nanak advocated for a sense of 'duty' and 'way of life' achieved through practicing three core principles: *naam japna* (recitation of God's name), *kirat karna* (earning an honest living) and *vand chakana* (selfless service). These core practices are both internal and external practices that enable spiritual growth and facilitate moral and ethical living. They emphasize an individual's social responsibility to ensure the well-being of society. The last core teaching, *vand chakana*, is most pertinent here to highlight how the Sikh teachings should be seen as a strong advocate for organ donation.

The religious teachings within the Guru Granth Sahib, the holy scripture, can be interpreted to suggest that there is no prohibition on the issue of post-mortems and organ transplantation. This is for two reasons. Firstly, we can understand the issue through the concept of *seva* - one should give without expectation of reward - and secondly, because Sikhs fundamentally believe that the body and organs are simply mechanisms to allow the eternal soul to experience life during this stage of existence.

Sikh teachings place great emphasis on *seva* and altruism and Sikhs engage in three forms of *seva* (selfless service): "*seva* rendered through one's body (*tan*), *seva* rendered through one's mind (*man*), and *seva* rendered through giving of one's material wealth (*dhan*). While all three forms of *seva* are considered equally important, the Sikh Gurus stressed that all *seva* should be a labour of love performed without desire (*nishkam*), without intention (*nishkapat*), and with humility (*nimarta*)."¹¹

There are many references to service in the Guru Granth Sahib to selfless service.

ਵਿਚਿ ਦੁਨੀਆ ਸੇਵ ਕਮਾਈਐ

In this world, conduct selfless service. (Guru Nanak, GGS, ANG 26)¹²

ਜਿਸੁ ਮਸਤਕਿ ਭਾਗੁ ਸੁ ਲਾਗਾ ਸੇਵ

The one with good fortune inscribed on their forehead does selfless service. (Guru Arjan, GGS, ANG 1142)

There are also many examples of selfless giving and sacrifice in Sikh teachings by the ten Gurus. Guru Tegh Bahadur, the ninth Guru, gave his head to protect the freedoms of others to practice their religion, while Guru Har Krishan, the eighth Guru, gave his life helping sufferers during a smallpox epidemic. Today we see countless Sikhs all over the world carrying out volunteer charity works, sometimes at considerable risk to themselves. This ethos is firmly embedded within Sikh philosophy and is entirely consistent with the service of donating organs after death to give life to others.

For Sikhs, organs may be viewed as the machinery which allows the physical body to function but unlike the soul, they perish once death occurs and the soul moves on to its next journey. The soul, a divine entity, is taken back to join *Waheguru*, the Creator, when a person is finally released from the cycle of rebirth or is reborn as another living creature on earth. Therefore, for Sikhs, death is not the end, it is the soul that imbues the body with the life force and which is indestructible. Death merely marks the release of the 'knot' between body and soul, and once this happens the body and all its constituents no longer serve any purpose and may be discarded.

ਮਾਟੀ ਕੋ ਪੁਤਰਾ ਕੈਸੇ ਨਚਤੁ ਹੈ ॥
 ਦੇਖੈ ਦੇਖੈ ਸੁਨੈ ਬੋਲੈ ਦਉਰਿਓ ਫਿਰਤੁ ਹੈ ॥੧॥ ਰਹਾਉ ॥
 How does the puppet of clay dance?
 He looks, listens, speaks and runs around. (1) Con-
 template. (Bhagat Ravidas, GGS, ANG 487)¹³

ਧੌਲੁ ਧਰਮੁ ਦਇਆ ਕਾ ਪੂਤੁ
 Righteousness is the son of compassion. (Guru
 Nanak, GGS, ANG 3)

ਪਹਿਲਾ ਮਰਣੁ ਕਬੂਲਿ ਜੀਵਣ ਕੀ ਛਡਿ ਆਸ ॥
 ਹੋਹੁ ਸਭਨਾ ਕੀ ਰੇਣੁਕਾ ਤਉ ਆਉ ਹਮਾਰੈ ਪਾਸਿ ॥੧॥
 First accept death and give up your hope on life.
 Become the dust of the feet of all and then come to
 me. (Guru Arjan, GGS, ANG 1102) ¹⁴

ਆਪਣ ਹਥੀ ਆਪਣਾ ਆਪੇ ਹੀ ਕਾਜੁ ਸਵਾਰੀਐ
 With our own hands, allow us resolve our own af-
 fairs. (Guru Nanak, GGS, ANG 474) ¹⁵

ਜੇ ਮਿਰਤਕ ਕਉ ਚੰਦਨੁ ਚੜਾਵੈ ॥ ਉਸ ਤੇ ਕਹਹੁ ਕਵਨ ਫਲ ਪਾਵੈ ॥
 ਜੇ ਮਿਰਤਕ ਕਉ ਬਿਸਟਾ ਮਾ ਹਿ ਰੁਲਾਈ ॥ ਤਾਂ ਮਿਰਤਕ ਕਾ ਕਿਆ ਘਟਿ ਜਾਈ ॥੩॥
 If a corpse is rubbed with sandalwood oil. What good
 does it do [to the body]?
 If a corpse is rolled in dung. What does it lose? (Guru
 Arjan, GGS, ANG 1160)

From a religious perspective, there appears to be no straightforward explanation for why Sikhs do not partake in organ donation when they are alive or after death.¹⁶ Results from the 2019 BSR Survey¹⁷ suggest that ‘religiosity’ makes little difference to organ donation registration rates amongst Sikhs with numbers reasonably consistent across different categories such as the numbers of Ks a person wears or whether someone is *Amritdhari*¹⁸ or not (Figure 2 and Table 2). The reason may be less to do with religion and more to do with misconceptions about donor transplantation, such as believing doctors may not try as hard to save somebody who has agreed to organ transplantation after death or the fear of being left disfigured after a transplant has occurred.

Figure 2: Registration for organ donation registration or carrying of an organ donor card, split by how many of the Ks a person wears

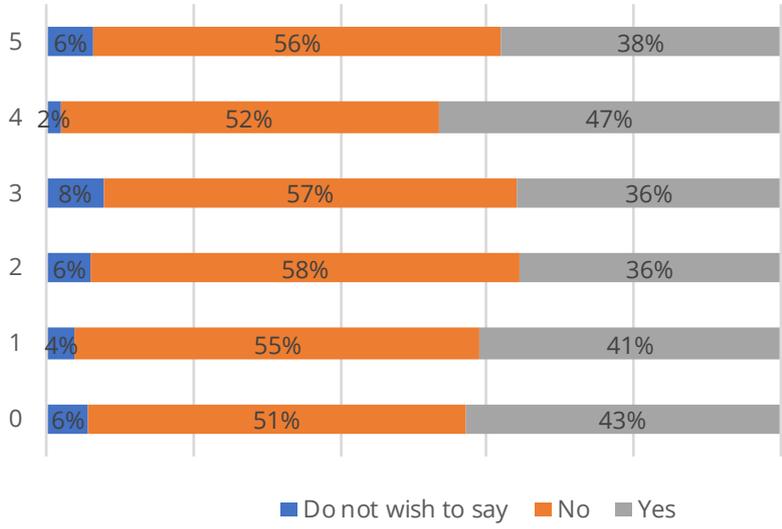


Table 2: Registration for organ donation or carrying of an organ donor card split by whether someone is *Amritdhari* or not

| | Non- <i>Amritdhari</i> | <i>Amritdhari</i> | Grand Total |
|--------------------|------------------------|-------------------|-------------|
| Do not wish to say | 4% | 6% | 4% |
| No | 56% | 56% | 56% |
| Yes | 40% | 38% | 40% |

In recent years, a number of faith-based public education campaigns and donor registration initiatives have played a vital role in trying to improve the uptake of registering for organ donation in the Sikh community.

In 2013, leaders from all the UK's major faiths united to launch a new action plan aimed at boosting organ donation rates among religious communities. The Faith Engagement and Organ Donation Action Plan, authored by Gurch Randhawa, Professor of Diversity in Public Health at the University of Bedfordshire, was developed by religious leaders in partnership with NHS Blood and Transplant, and sets out a series of initiatives to tackle faith-related barriers to organ donation and urge followers to actively support donation. The Plan is being used as a blueprint approach for Equality Delivery Systems in the UK and worldwide.

Sikh TV channels, such as Sangat TV¹⁹ and Akaal Channel²⁰ have reported and discussed the issue, as have organisations such as Basics of Sikhi,²¹ SikhPA²² and Network of Sikh Organisations.²³ A number of foundations have been set up to promote organ donation among Sikh and other minority communities. One that stands out is the Mandip Mudhar Memorial Foundation.²⁴

Bobby Mudhar the Chair of the Foundation said:

One of the core elements of the Sikh Faith is selfless service (help others) known as SEVA, at the time of making our decision to donate we were comforted knowing that we would be able to help others through this selfless act of donation. For us it was the ultimate act of seva and not only was it a human decision to donate but the values of Sikhism supported this. Furthermore, it helped us to deal with the tragedy of losing Mandip in a positive way. Since 2001, our family ethos has been "Positivity out of Tragedy" and it is the basis of the foundation we set up in Mandip's memory and how we promote awareness around organ donation. Another thing that made our family decision to donate easier was that my brother had expressed his wishes to donate his organs should anything happen to him. Knowing that he had this conversation with my sister Kiran further supported our decision and that we were honouring his wishes.²⁵

Professional organisations such as British Sikh Nurses²⁶ led by Rohit Sagoo work to raise the issue. For example, Rohit has been working directly with families affected to raise awareness. Such organisations have harnessed the power of social media whether it is via twitter, Facebook or Instagram to raise awareness. Currently we have seen campaigns such as Hope4Anaya²⁷ @Hope4Anaya, Meena²⁸ @Match-4meena; Swab4Harj²⁹ @Swab4H; SikhOrganDonor³⁰ @SikhOrganDonor.

One of the most visible campaigns on social media and in Sikh gurdwaras has been @Hope4Anaya.³¹

#Hope4Anaya
Could you be her superhero?



Anaya needs a kidney urgently!
Save a life, become a living Donor
Are you aged between 28-42?



Hope4Anaya@gmail.com

Please contact the transplant team regarding Anaya Kaur Kandola on

The campaign Hope4Anaya has been very emotive because it is for a two year old child in need.

"Anaya Kaur Kandola was born with little chance of survival and has fought battle after battle to be here. Anaya has Autosomal Recessive Polycystic Kidney Disease (ARPKD) a condition in which growing cysts leave little room for other organs and create serious difficulties such as underdeveloped lungs, vulnerability to infections and heart conditions. This left the doctors with no choice but to remove Anaya's kidneys soon after birth. Dialysis helps to cleanse Anaya's blood by being on a machine

*10-12 hours every day and right now it is the only thing keeping her alive. Anaya is coming up to 2 years of age. The difficulties of her condition and being attached to a machine for almost half the day has severely impacted her growth and development. This is all Anaya has known in her short life."*³²

Whilst families who are waiting for an organ donation have gone into the public arena to raise awareness and understanding of the issue, so have celebrities. For example, Monty Panesar, the Sikh England cricketer, together with kidney recipient Akash Suryavansi has been involved in raising the awareness of organ donation particularly in Asian communities.

Social media has been shown to be a powerful tool to spread awareness and motivate action. These families who require transplants have put themselves in the public eye to raise their profiles in the hope that they will find a donor, but most importantly they manage to educate the public and provide individuals access to information so that they can make better informed decisions.

These initiatives have raised awareness of the organ donation issue among Sikhs and the wider BAME communities, but it is not clear if they are having any significant impact on organ procurement from BAME donors. The number of BAME deceased donors has increased from previous years, but numbers are still small and only half as many BAME families support organ donation relative to families of white potential donors. In terms of living organ donation, the figures show a fall in both Asian and Black living donors, both in terms of absolute numbers of donors and as a proportion of all living organ donors.³³

Given the slow pace of change within the Sikh community on attitudes to organ donation, it may be appropriate to move away from the assumption that people are using faith and religion as primary barriers to organ donation and consider other reasons for slow uptake, after all there is no Sikh theological argument against organ donation and it is unlikely that any Sikh would object on religious or cultural grounds if they or their child needed an organ trans-

plant. The elephant in the room, therefore, may be that there is simply a problem of apathy or so-called free riders - people who are happy to receive an organ but not to donate.³⁴ It has been suggested that a different approach should be taken; prioritisation for transplantation to be given to previous actual donors or those registered for at least three years.³⁵ However, this raises certain ethical considerations that must be tackled if this kind of allocation system is to be implemented.

The passing of legislation known as Max and Keira's Law earlier this year, in which consent will be presumed unless people have opted out may help

increase organ procurement rates from BAME communities as well as the general population. However, it will still be open to relatives to block a donation so it is vital that campaigns to raise the awareness of organ donation needs and benefits in the Sikh community continue. In the BSR survey over 90% of respondents in most age groups and across gender stated that if a family member dies and wished to donate their organs, they would respect their wishes (Figure 3 and Table 3).³⁶ This figure was slightly lower for the 65 years and above group. However, it is not clear how these figures would be translated in a world where presumed consent is the norm.

Figure 3: If a family member dies and wished to donate their organs, would you respect their wishes?

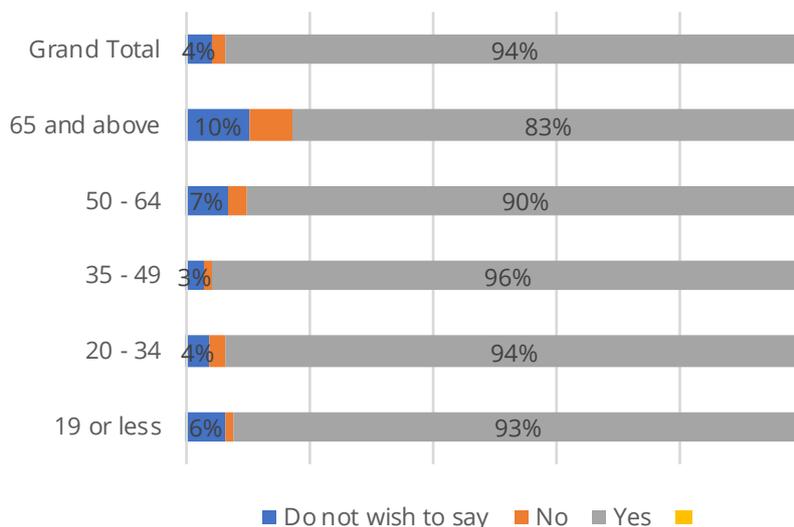


Table 3: If a family member dies and wished to donate their organs, would you respect their wishes? By gender

| | Female | Male | Grand Total |
|--------------------|--------|------|-------------|
| Do not wish to say | 3% | 4% | 4% |
| No | 2% | 3% | 2% |
| Yes | 95% | 93% | 94% |

The Sikh dharam therefore is no barrier to organ donation. Organ donation is an act that exhibits the quality of altruism and selfless service that is so integral to the faith. However, despite concerted campaigns to increase organ donation registrations and to raise awareness there are still relatively low rates of organ donations amongst Sikhs. This has implications on waiting times to transplant, particularly for patients with end stage renal disease. Culture and religion may not play as much a prohibitive part in determining the level of organ donation and thus further studies are required to ascertain the true barriers to donation registration and acceptance by families.³⁷ It is likely that a multifaceted approach is required to raise awareness around organ donation and persuade more Sikhs to comply, including the

continued commitment of UK government to improve organ donation rates in BAME communities and the increased use of media, particularly to outline personal stories within the community. There is also still a role for Sikh leaders at gurdwaras in the dissemination of information regarding donation among congregations. It is also important to note that because Sikhs are not a distinct ethnic group in the context of blood and tissue compatibility, issues of low rates of organ donation should be considered in the context of rates in the wider South Asian populations in the UK. If organ donation rates from Sikhs and other ethnic minority communities do not substantially improve in the next few years, then other systems of allocation may need to be looked at.

Notes

- ¹ Organ donation card image reproduced from <https://www.organdonation.nhs.uk/about-donation/organ-donation-and-my-beliefs/sikhism/> [Accessed 14th January 2019]. The *Khanda* is a Sikh symbol which 'reflects some of the fundamental concepts of Sikhism. The symbol derives its name from the double-edged sword (also called a *Khanda*) which appears at the center of the logo. This double-edged sword is a metaphor of Divine Knowledge, its sharp edges cleaving Truth from Falsehood. The circle around the *Khanda* is the *Chakar*. The *Chakar* being a circle without a beginning or and end symbolizes the perfection of God who is eternal. The *Chakar* is surrounded by two curved swords called *Kirpans*. These two swords symbolize the twin concepts of *Miri* and *Piri* - Temporal and Spiritual authority introduced by Guru Hargobind. They emphasize the equal emphasis that a Sikh must place on spiritual aspirations as well as obligations to society <https://www.sikhs.org/khanda.htm> [Accessed 14th January 2019].
- ² Department of Health (2008). *Organs for transplant: a report from the organ donation taskforce*. London: Department of Health, 2008
- ³ *Organ Donation and Transplantation Activity Report 2017/18* <https://www.organdonation.nhs.uk/supporting-my-decision/statistics-about-organ-donation/transplant-activity-report/> [Accessed 4th March 2019].
- ⁴ For more information see Ebrahim, S., Bance, S. and Bowman, K.W., (2011). Sikh perspectives towards death and end-of-life care. *Journal of palliative care*, 27(2), pp.170-174; Joshi, M.S., (2011). Whose Decision is it? Organ Donation Attitudes Among Young UK South Asians. *Psychological Studies*, 56(1), pp.86-97; Karim, A., Jandu, S. and Sharif, A., (2013). A survey of South Asian attitudes to organ donation in the United Kingdom. *Clinical transplantation*, 27(5), pp.757-763; and Randhawa, G., Brocklehurst, A., Pateman, R., Kinsella, S. and Parry, V., (2012). Religion and organ donation: the views of UK faith leaders. *Journal of religion and health*, 51(3), pp.743-751.
- ⁵ Sample size for BSR 2019 was 2487. According to the 2011 Census, there are 432,429 Sikhs throughout the United Kingdom, with the vast majority of them in England alone. The number of Sikhs in the nations forming the United Kingdom are: England 420,196; Wales 2,962; Scotland 9,055; NI 216.
- ⁶ Organ Donation and Transplantation data for Black, Asian and Minority Ethnic (BAME) communities. Report for 2017/2018 (1 April 2013 – 31 March 2018) <https://nhsbtdbe.blob.core.windows.net/.../bame-organ-donation-and-transplantation-d.> [Accessed 5th March 2019].
- ⁷ Organ Donation and Transplantation data for Black, Asian and Minority Ethnic (BAME) communities. Report for 2017/2018 (1 April 2013 – 31 March 2018) <https://nhsbtdbe.blob.core.windows.net/.../bame-organ-donation-and-transplantation-d.> [Accessed 5th March 2019].
- ⁸ <http://www.nbta-uk.org.uk/>
- ⁹ Randhawa, G., (1998). An exploratory study examining the influence of religion on attitudes towards organ donation among the Asian population in Luton, UK. *Nephrology, dialysis, transplantation: official publication of the European Dialysis and Transplant Association-European Renal Association*, 13(8), pp.1949-1954. And Davis, C. and Randhawa, G., 2006. The influence of religion on organ donation and transplantation among the Black Caribbean and Black African population-A pilot study in the United Kingdom. *Ethnicity and Disease*, 16(1), p.281.
- ¹⁰ Exley, C., Sim, J., Reid, N., Jackson, S. and West, N., (1996). Attitudes and beliefs within the Sikh community regarding organ donation: a pilot study. *Social Science & Medicine*, 43(1), pp.23-28
- ¹¹ Virdee, G.S. (2005, p.13). Labour of love: Kar seva at Darbar Sahib's Amrit Sarover, Sikh Formations: *Religion, Culture and Theory*, 1:1, pp. 13-28.
- ¹² Translations from the Guru Granth Sahib (GGS) provided by

- translator Parminder Singh Davgun.
- 13 Quote is stating that the body is dirt – using clay as an analogy.
 - 14 Giving an organ to save someone should not be something to be afraid of, even if it leads to one's own death; this would in fact be seen as the 'ultimate sacrifice'.
 - 15 The idea of *Hukam* does not mean to be complacent, as we are still told to do the best that we can.
 - 16 Some have suggested that there may be issues for *Amritdhari Sikhs* (initiated Sikhs) e.g. having to remove Kesh (hair) to remove an organ or receive an organ. However, this is very unlikely, and *Amritdhari* Sikhs have said that this should not be of concern when an individual's life can be saved. Thus, it depends on interpretation and one's own understanding and conviction.
 - 17 Sample size for BSR 2019 was 2487. According to the 2011 Census, there are 432,429 Sikhs throughout the United Kingdom, with the vast majority of them in England alone. The number of Sikhs in the nations forming the United Kingdom are: England 420,196; Wales 2,962; Scotland 9,055; NI 216.
 - 18 The diversity within the Sikh tradition is reflected in the degrees of its practitioners' adherence to the faith. For example, *Amritdhari*, or *Khalsa*, Sikhs are practitioners who are initiated through an official ceremony referred to as *Khande di Pahul* or *Amrit Sanskar/Amrit Pahul*. The *Keshdhari* Sikhs - who keep their hair unshorn and wear the outward symbols of the Sikh faith (i.e., the turban)—are born into the tradition, but are not initiates. Lastly, the *Sehajdhari/Mona* Sikhs retain an affiliation to the *Khalsa* but choose to remove the outward symbols of the Five Ks. The five articles of faith (*Panj Kakars*) worn by initiated Sikhs are *Kesh* (uncut hair), *Kara* (a steel bracelet), *Kangha* (a wooden comb), *Kirpan* (sword or dagger), and *Kachera* (pair of shorts).
 - 19 <http://sangattelevision.org/sangat-projects/organ-donation/>; Sangat Television 19 December 2013 Organ Donation -- let's make a difference - Episode 5 <https://www.youtube.com/watch?v=uzM8R91XYbw> [Accessed 14th February 2019].
 - 20 The One Show: Organ Donation, Akaal Channel 20th March 2018. https://www.youtube.com/watch?v=EF9Y_rCBn6M; Akaal Channel – Sky 843 15th March 2019, 7.45pm, a discussion about organ donation in the Asian community.
 - 21 Sikhi and Organ Donation, 20th December 2015. <https://www.basicsofsikhi.com/sikhi-and-organ-donation/>
 - 22 <https://www.sikhpa.com/organ-donation-in-the-sikh-community/>
 - 23 See 2013 <http://nsouk.co.uk/organ-donation/>; <http://www.nbta-uk.org.uk/sikhism-and-organ-donation/>; https://nhsbtdbe.blob.core.windows.net/umbraco.../sikhism_and_organ_donation.pdf [Accessed 15th March 2019].
 - 24 <http://mmmf.org.uk/>
 - 25 The work of people like Bobby Mudhar and Rohit Sagoo, guided by the concept of selfless service *sewa* performed without desire (*nishkam*), without intention (*nishkapat*), and with humility (*nimarta*).
 - 26 <http://www.sikhnurses.co.uk/>; <https://twitter.com/nursesikh?lang=en>; and <https://twitter.com/RohitSagoo>
 - 27 <https://twitter.com/Hope4Anaya>
 - 28 <https://twitter.com/Match4meena>
 - 29 <https://twitter.com/Swab4H>
 - 30 <https://twitter.com/SikhOrganDonor>
 - 31 <https://twitter.com/Hope4Anaya>. Image reproduced with permission of Anaya's family.
 - 32 SikhPA. 5th December 2018. 'Organ Donation in the Sikh Community' <https://www.sikhpa.com/organ-donation-in-the-sikh-community/> [Accessed 20th February 2019]. Permission also gained from Anaya's parents, Rohit Sagoo and Sandie Shokar to use information from this article.
 - 33 Organ Donation and Transplantation data for Black, Asian and Minority Ethnic (BAME) communities. Report for 2017/2018 (1 April 2013 – 31 March 2018) <https://nhsbtdbe.blob.core.windows.net/.../bame-organ-donation-and-transplantation-d>. [Accessed 5th March 2019].
 - 34 Sharif, A., (2013) We need more organ donation from ethnic minorities. *BMJ*, 347(7922) [Accessed 5th March 2019].
 - 35 Sharif, A., (2013) We need more organ donation from ethnic minorities. *BMJ*, 347(7922) [Accessed 5th March 2019].
 - 36 This is reflected by the story of Dr Jasjot Singhota who was killed by a driver when she was crossing a zebra crossing. Her family said she saved 'give precious lives' through organ donation. Davies, Barney. 15 January 2019. 'Doctor killed on zebra crossing by careless driver saves five lives with her organs.' *Evening Standard* <https://www.standard.co.uk/news/uk/doctor-killed-on-zebra-crossing-by-careless-driver-saves-five-lives-with-her-organs-a4039126.html> [Accessed 20th January 2019].
 - 37 Randhawa, G., (1998). An exploratory study examining the influence of religion on attitudes towards organ donation among the Asian population in Luton, UK. *Nephrology, dialysis, transplantation: official publication of the European Dialysis and Transplant Association-European Renal Association*, 13(8), pp.1949-1954.

British sikh report 2019: Survey introduction

This is the seventh annual British Sikh Report (BSR), which has now become an established snapshot describing the lives of Sikhs in Britain, and collecting their views on topical issues. This year's questionnaire has been completed by nearly 2,500 respondents spread across the United Kingdom, making this our largest sample to date. The survey was primarily conducted online, as in previous years, but there was a concerted effort to supplement that sample with a paper questionnaire to reach those without internet access. Responses were monitored and particular areas of shortfall were targeted to ensure that the overall sample is representative of Sikhs in Britain in terms of age group, gender, marital status and region. All responses were scrutinised and validated by applying a range of checks, and several were rejected because they were assessed to be false. The resultant sample of nearly 2,500 is considered to be a very robust and reliable representation of all British Sikhs. The sample has also been assessed against the information on British Sikhs available from the 2011 Census. After allowing for expected changes between 2011 and 2018, the sample distributions by age and region are very close to the Census. There has been an increase in responses from women this year, which is welcome. There is a small shortfall in the sample of the elderly, but this is not considered to have any significant effects on the results more widely.

The BSR aims to collect British Sikhs' views on various aspects of life. This year's questionnaire has again focused on a range of issues that are particularly affecting the lives of British Sikhs now, asking questions about topics such as organ donations, adoption and fostering, disabilities and carers, mental health and suicide, and drugs and alcohol consumption. We also asked questions related to the major anniversaries occurring this year that are important for Sikhs – 100th anniversary of Jallianwala Bagh, 35th anniversary of the events of 1984, 40th anniversary of Bandi Chhor, and Guru Nanak Dev Ji's 550th Prakash Gurburab (birth anniversary).

The survey again sought data on identity, ethnicity, and observance of the five Kakaars, wearing of the Dastaar, and about whether respondents are Amritdhari Sikhs. The BSR continues to collect basic demographic information on age, gender, marital status, disability and place of residence, as well as on employment and qualifications. We now also collect information on place of birth and first arrival to Britain if not born here every year. We have this year also asked about how many generations live together in Sikh households, and also about British Sikhs' language abilities.

The following sections summarise the results of the BSR questionnaire.



BSR 2019: Demographics of the survey

The BSR 2019 survey received nearly 2,500 valid responses, which is a significant increase from last year's total of just over 2,000 responses. There was a high response this year from females (55% of the total), which is the main factor behind the overall increase. There is some under representation in the older age group compared with the Census. Subject to the above, the sample gives a good representation of the distributions of British Sikhs by age, marital status and region of residence.

Around 28% of Sikhs responding live in London, and a similar percentage in West Midlands. The regions

with the next largest Sikh population are the South East, with 17%, and East Midlands with 10%.

About two thirds of respondents are married, and a quarter are single. About 4 per cent of Sikhs in Britain are divorced.

For the first time, the BSR survey asked respondents how many generations lived together in their household. 19% said that they lived in a single-generation household, 55% in a two-generation household and 22% in three-generation households. 2% of respondents lived in a four-generation household.

Observance of Sikhi and Sewa

9% of respondents said that they were Amritdhari Sikhs, 88% said that they were not, and the remaining 3% preferred not to answer this question. 12% of men and 6% of women said that they were Amritdhari.

About a quarter of respondents said that they wore a Dastar (turban). Half of men said that they wore a Dastar, whereas just 3% of women do so.

One third of respondents said that they perform sewa at their Gurdwara, and a quarter said that they volunteer elsewhere. About two thirds of respondents aged 65 or more perform sewa at their Gurdwara, whereas under a third of those in younger age groups do so. About two thirds said that they did not do any sewa or volunteering, either at their Gurdwara or elsewhere. However, around 90% of respondents said that they regularly donate money to both their Gurdwara and to other charities.

Identity and ethnicity

Place of Birth

At 71% England remains the most popular birthplace of Britain's Sikhs, and significantly higher than second-placed India (17%). Africa, South East Asia and mainland Europe are all still represented in small

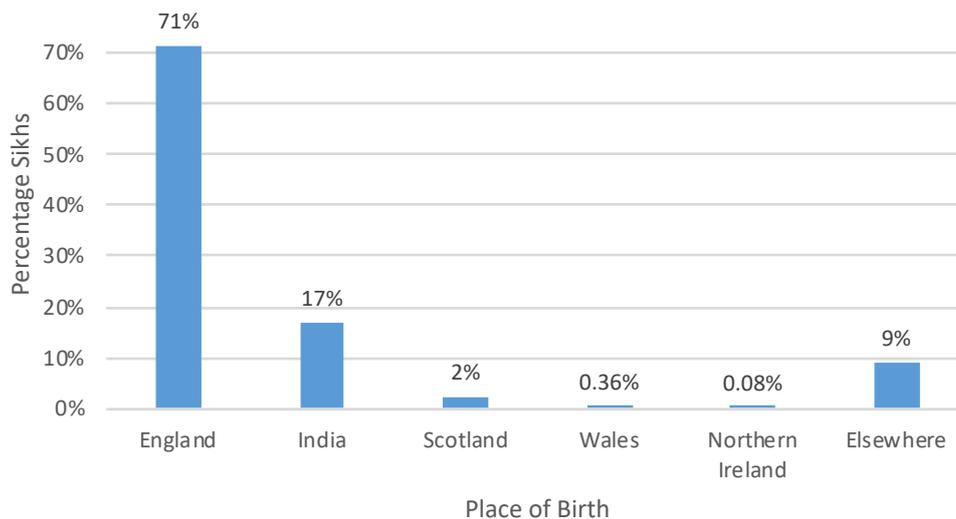
numbers under "Elsewhere". In the same category, Afghanistan is now the place of birth for nearly 1% of Sikhs in this year's BSR.

Arrival in the UK

In the third year of its inclusion, the question of when non-British-born Sikhs arrived attracted a large response. Over 26% of British Sikhs came to Britain

between 1950 and 2018. About a third of these have arrived since 2000.

Figure 4: Place of birth



Sexual Orientation

98% of those who responded to this question stated that they are heterosexual. Of the 2% who said they are gay, lesbian or bisexual, 71% are females and

29% are males. 85% of these maintain at least one of the Five Ks.

Ethnic Group

At 88%, "Asian/Asian British - Indian" remains the most popular reply to the question of Sikh ethnic group identification. Next popular was a write-in option at 7%. Within this latter percentage a major

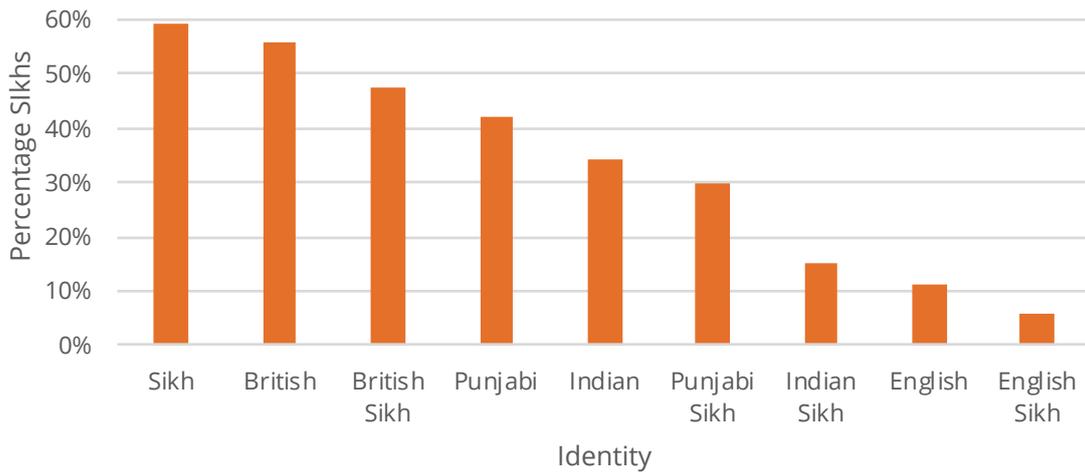
proportion (35%) of respondents chose "Sikh" whilst all combinations of "Sikh" together with other words totalled 74%.

How do you describe your identity?

As Figure 3.2 shows, Sikhs continue to be attached to both heritage and contemporary categories. Closely linked to the ethnic group question, the prominence of “Sikh” over “British” and “British Sikh” may indicate

the community’s uncertainty on Sikh identity categories. In previous years, “British Sikh” has garnered the majority of responses.

Figure 5: Self-Identity



Looking at two British identities when compared to a heritage one, Sikh also shows the complexity which Sikhs face when describing themselves. As is the case with many migrant communities, multiple categories apply to them as shown in Table 4.

However, as the age group analysis shows, important differences are emerging between younger and older Sikhs. For example when “British” is compared with “English” as an identity, the former attracts older Sikhs whilst the latter has a younger following. Sikh continues to be a default identity, irrespective of the respondent’s religious adherence.

Table 4: Self-Identification

| Self-Identification | | | |
|---------------------|---------|---------|------|
| Broad age group | British | English | Sikh |
| 19 or less | 5% | 9% | 5% |
| 20 - 34 | 38% | 45% | 37% |
| 35 - 49 | 41% | 36% | 40% |
| 50 - 64 | 14% | 9% | 14% |
| 65 and above | 3% | 1% | 4% |

National Census and Ethnic Category

The Office for National Statistics has announced that the 2021 Census of Population will not feature “Sikh” as a separate ethnic category. In this year’s BSR, the community was asked their opinion on this decision. About half of respondents said that Sikhs should be classified as an ethnic group, about a third said no, and the rest either preferred not to say or were unsure.

An analysis of the responses by broad age group offers us an interesting perspective to this emotive aspect of the community’s identity. The age profiles of those responding “Yes” or “No” to a Sikh ethnic tick box vary from each other, with the “No” respondents tending to be younger than the “Yes” respondents.

Adoption and fostering

Not all children can remain with their birth families for one reason or another. Fostering is where somebody looks after children for a temporary period whilst the children are in the care system. Adoption

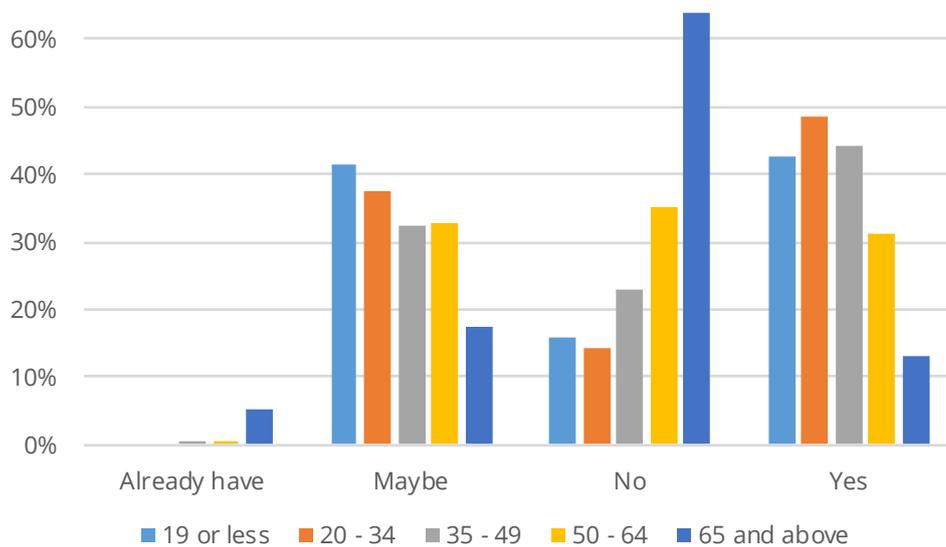
is where somebody decides to take on the full care of a child and becomes that child's legal parent. The survey asked respondents for their views on fostering and adoption.

Fostering

43% of respondents said that they would consider fostering Sikh children, with a further 34% replying 'Maybe'. There was a definite age difference, with

48% of respondents aged 20 to 34 stating they would foster Sikh children compared to just 13% of those aged 65 and over.

Figure 6: Would you consider fostering Sikh children?

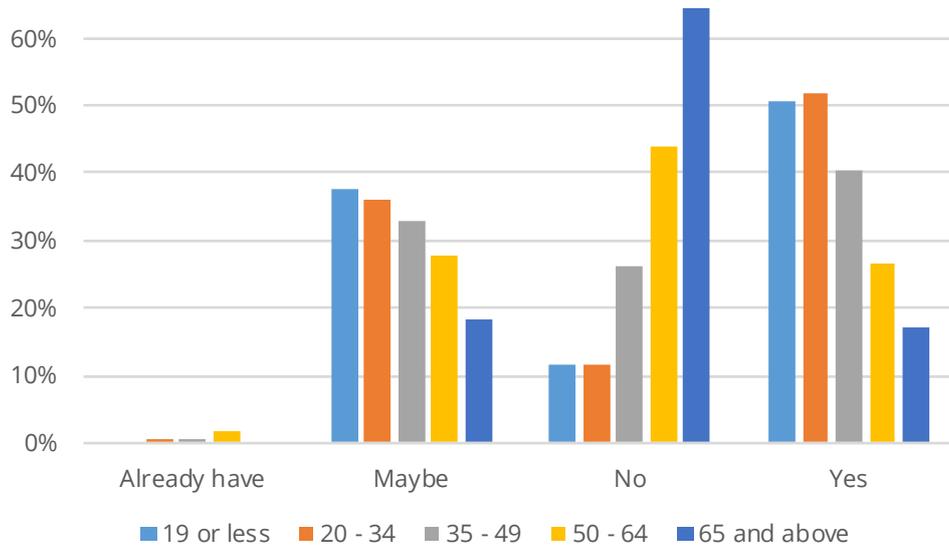


Women were more likely to consider fostering children than men, with almost half of the female respondents (47%) saying they would consider it, whilst just over a third of male respondents (37%) said the same.

The general pattern of responses was similar when it came to considering fostering non-Sikh children, but the numbers were much lower, with just 32%

responding 'Yes'. Again there was a distinct gender difference here, with one in three females (36%) and one in four males (26%) answering 'Yes'. Whilst this shows that there is a preference for Sikh rather than non-Sikh children when it comes to fostering, it is clear that about one-third of Sikhs would consider fostering children regardless of their religious background.

Figure 7: Would you consider fostering non-Sikh children?

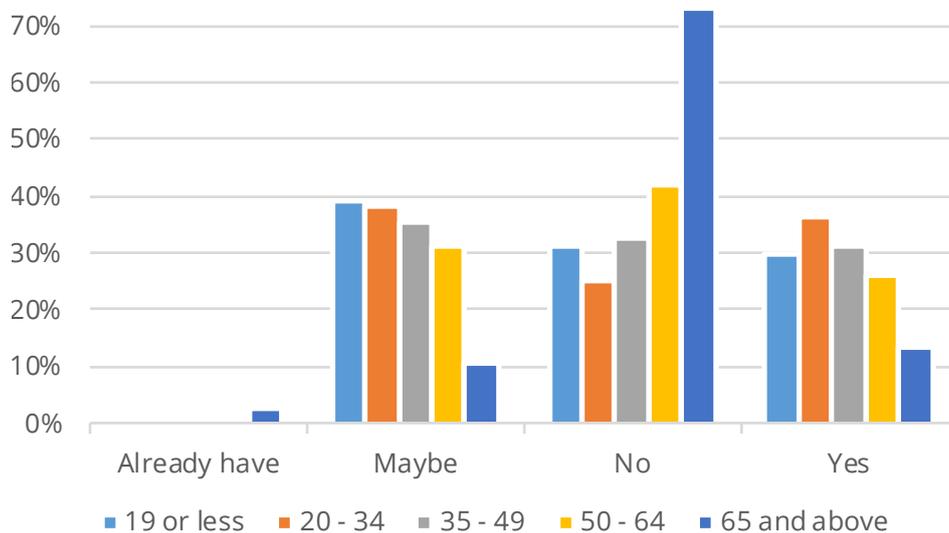


Adopting

42% of respondents said that they would consider adopting Sikh children, with a further 33% answering 'Maybe'. Once more, the age difference was pronounced, with younger Sikhs more likely to consider

adoption. 51% of those aged 34 or under would consider adopting Sikh children, compared to just 27% of respondents aged 50 to 64.

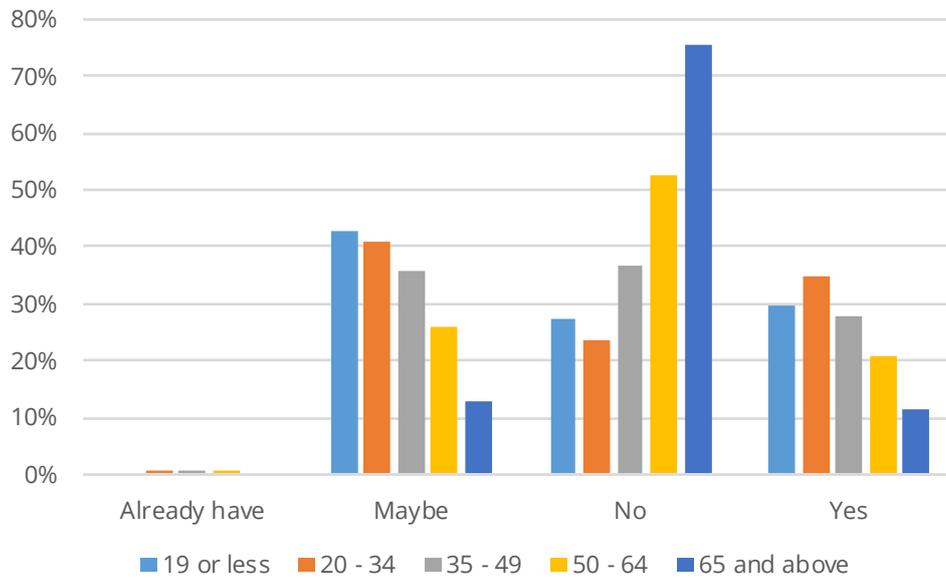
Figure 8: Would you consider adopting Sikh children?



Women were again more likely to consider adopting Sikh children compared to men, but the difference between the two groups had narrowed somewhat, with 45% of females and 38% of males stating they would consider it.

When it came to the number of respondents who would consider adopting non-Sikh children, there was an evident drop which very much reflected that seen for the fostering question. Just 29% of respondents (namely 31% of females and 25% of males) said they would consider adopting non-Sikh children.

Figure 9: Would you consider adopting non-Sikh children?



Concerns Regarding Fostering and Adoption

The reasons given for not wanting to foster or adopt fell broadly into the following categories:

- Wanting to have own biological children
- Not wanting any more children
- Financial or time constraints
- Being too young or too old
- Fear of getting emotionally attached to a child if fostering

For those who specifically did not want to foster or adopt non-Sikh children, the concerns were focussed on the potential conflict of raising such children in a Sikh family and household. In particular, the general issues were:

- Not wanting to force children to be brought up in a household where the faith being practised is different to that of the children

- Difficulties in ensuring that the children are aware of their own religious background
- The impact of being raised in a culturally distinct family
- Practical and spiritual issues, such as:
 - Feeling deeply uncomfortable taking a child for a haircut when everyone in the family keeps *kesh* (uncut hair)
 - Feeling unable to meet the child's religious dietary needs in a vegetarian or meat/egg-free household.

Although there can anecdotally be fears about the stigma against adopting children within South Asian families, only three respondents specifically referred to that stigma in their free-text responses.

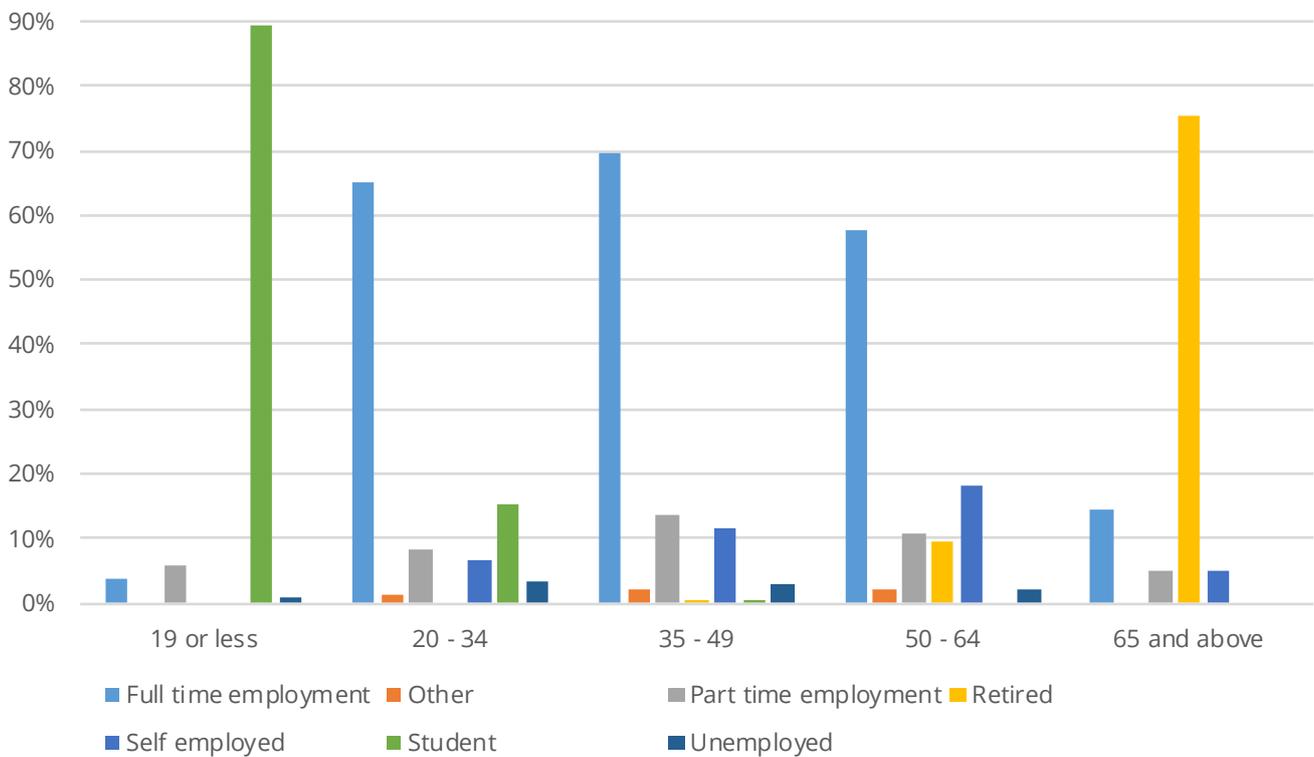
Employment and education

Employment Type by Age

According to the BSR 2019 survey, British Sikhs have an 84% employment rate, compared to 76% for the country as a whole (based on the ONS' Labour Force Survey). The majority of respondents were in full-time employment (61%), with this being the most popular option for all age groups between 20 and 64. It was most highly represented in the 35-49

age group, with 70% being in full-time employment. Self-employment and part-time employment are almost at equal levels (10%, and 11% respectively). As expected, the most popular option for those aged 19 and under was "Student," with almost 90% falling under this. Similarly, as expected, the 65+ age group was most represented by "Retired" (76%).

Figure 10: Employment type by age group

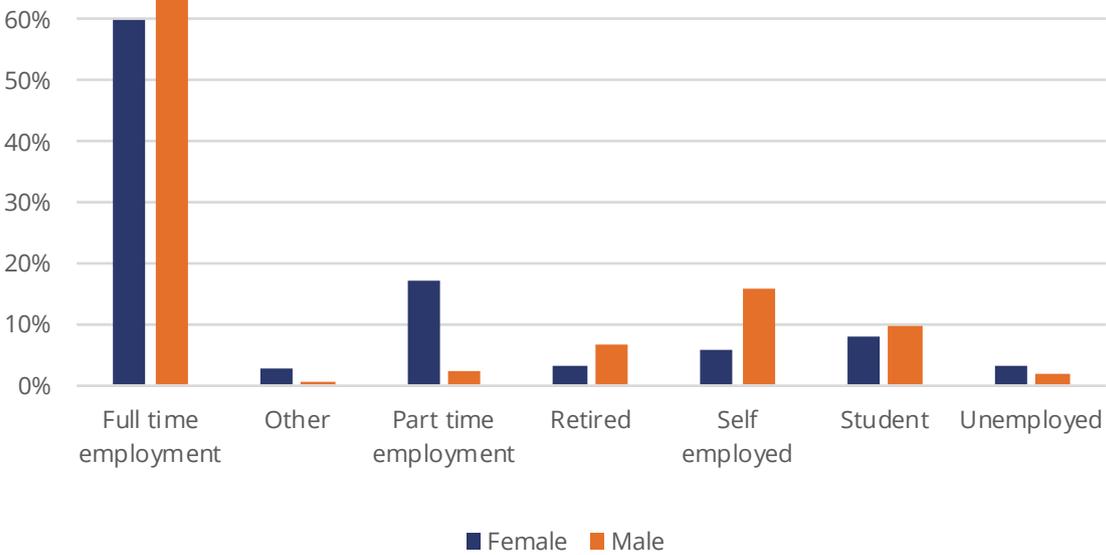


Employment Type by Gender

Overall, 86% of women and 84% of men who responded were likely to be working. This compares to national figures of 72% and 81% respectively. Wom-

en were more likely to be working part-time (17%) than men (2%).

Figures 11: Employment type by gender



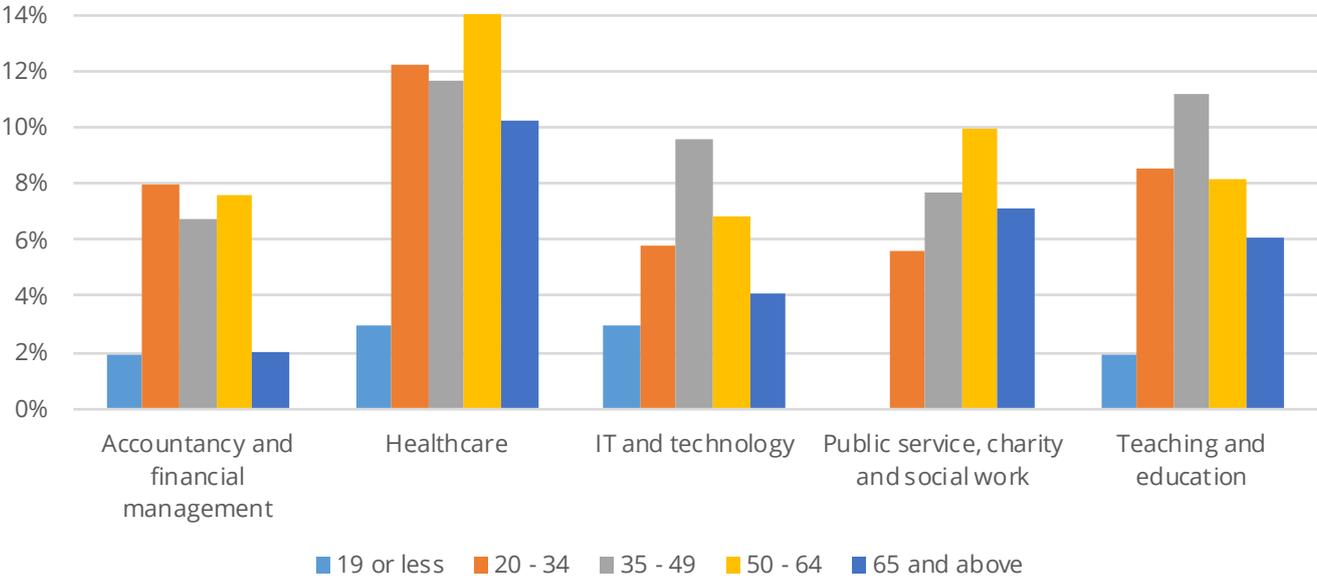
Employment Sector by Age

The top sectors in employment for British Sikhs are Public Service, Charity and Social Work (7%); Healthcare (12%); Teaching and Education (9%); Accountancy and Financial Management (7%); and IT and Technology (7%). Human Health and Social Work accounts for 13% of the UK workforce, but 19% of respondents to the survey, indicating Sikhs are more likely than the average Briton to work in the care sector. Sikhs are also more likely to work in the finance

sector, and about the same as the national average for the education sector.

Those most likely to work in Accountancy and Financial Management are aged 20-34; those most likely to work in IT and Technology, or Teaching and Education are aged 35-49; and those most likely to work in Healthcare, or Public Service, Charity and Social Work are aged 50-64.

Figures 12: Top employment sectors by age

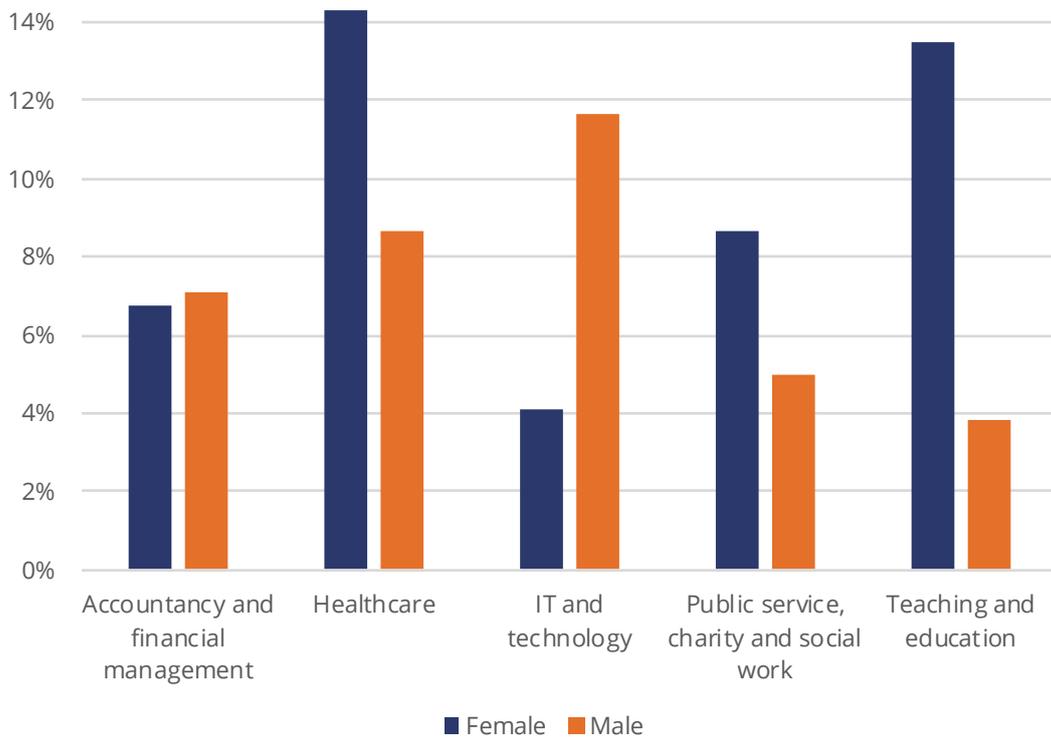


Top Employment Sectors by Gender

Women were more likely than men to work in Healthcare (14% vs 9%), Teaching and Education (13% vs 4%), and Public service, Charity and Social Work (9% vs 5%), while men were more highly represented in IT and Technology (12% vs 4%). In Accountancy and Financial Management, the two genders were approximately equal at 7%.

Compared to national data, both Sikh men and women were more likely to work in Accountancy and Financial Management. Sikh men were more highly represented in Healthcare, while Sikh women approximately matched the national rates. Both genders approximately matched the national rates for representation in Teaching and Education.

Figures 13: Top Employment sectors by gender



Qualifications

65% of respondents have a graduate level qualification or above, with this figure reaching 75% for those aged 20-34, then dropping for each older age category. Those aged 35-49 were most likely to have a Masters degree (21%).

With regards to pre-university qualifications, the genders are fairly equally matched, but more women (44%) had university degrees than men (39%). Men were however slightly more likely to have higher degrees, such as Masters (20% vs 18%), and PhD (3% vs 2%).

Figure 14: University degree or above by age

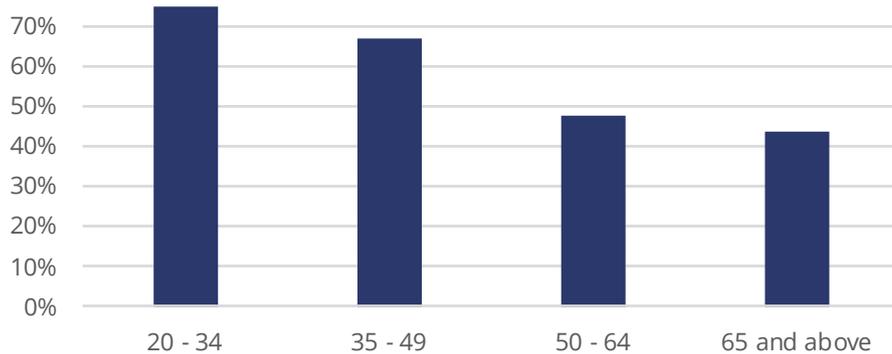
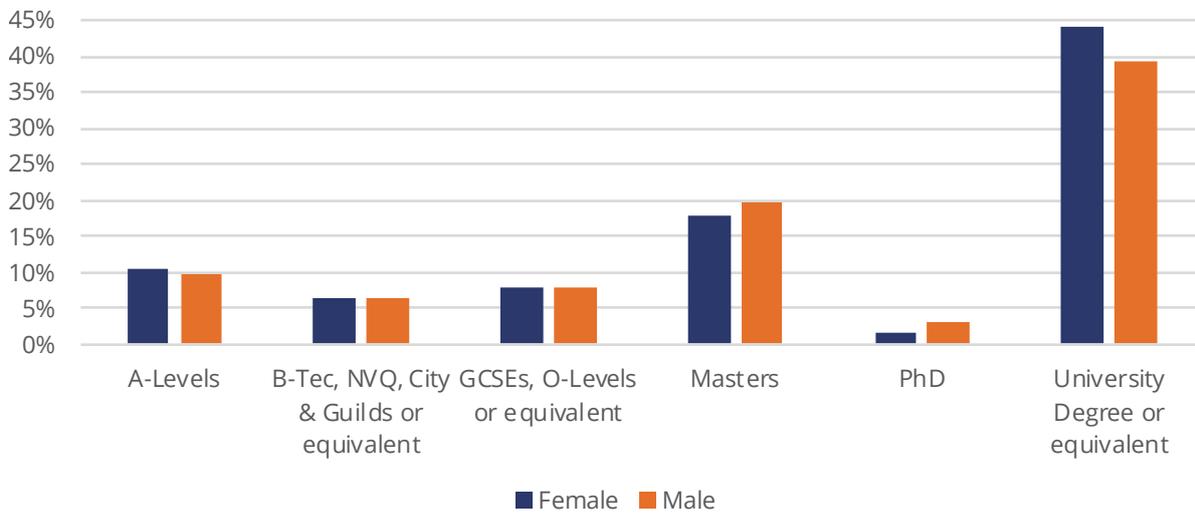


Figure 15: Qualifications by gender



Language skills

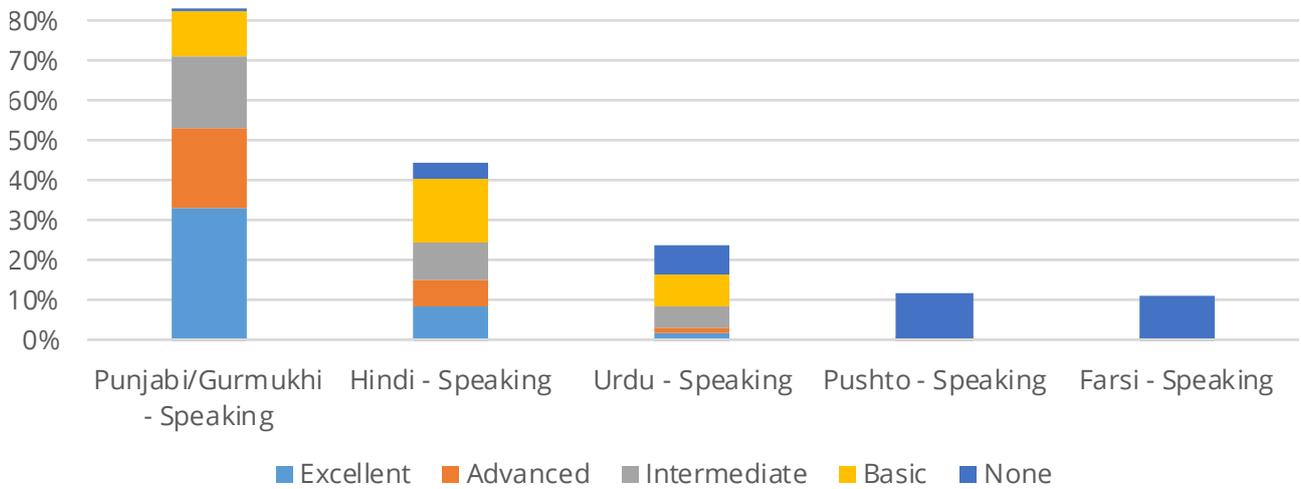
Non-European Languages

Language skills are key for employability, especially in a job market which is becoming increasingly globalised. The majority of Sikhs are originally from Punjabi-speaking regions, and this is the major non-European language spoken by this group. Gurmukhi is the script associated with the Punjabi language, and is the language of the Guru Granth Sahib (Sikh holy scriptures). UK-born Sikhs are able to learn Punjabi/Gurmukhi up to A-Level standard through various institutions such as universities, Sikh colleges/schools and some Gurdwaras. It does not, however, make it into the top ten most spoken languages in the world; this is dominated by Mandarin, then Spanish, with Hindi coming fifth. Employment dependent on

Punjabi language skills is predominately working as an interpreter, or in care provision in centres where there are Punjabi-speaking clients; for example, care homes.

Information on language skills has been collected for the first time in this year's survey. As expected, Punjabi was the most spoken non-European language, with 83% of respondents having some level of proficiency; it was also the language most written, and read. The next in line were Hindi (40% speaking), and Urdu (17% speaking). A small number of respondents were able to speak, read, and write in Pushto, and Farsi, both Indo-Iranian languages more commonly associated with Sikhs of Afghan origin.

Figure 16: Self-Rated Competencies In Non-European Languages

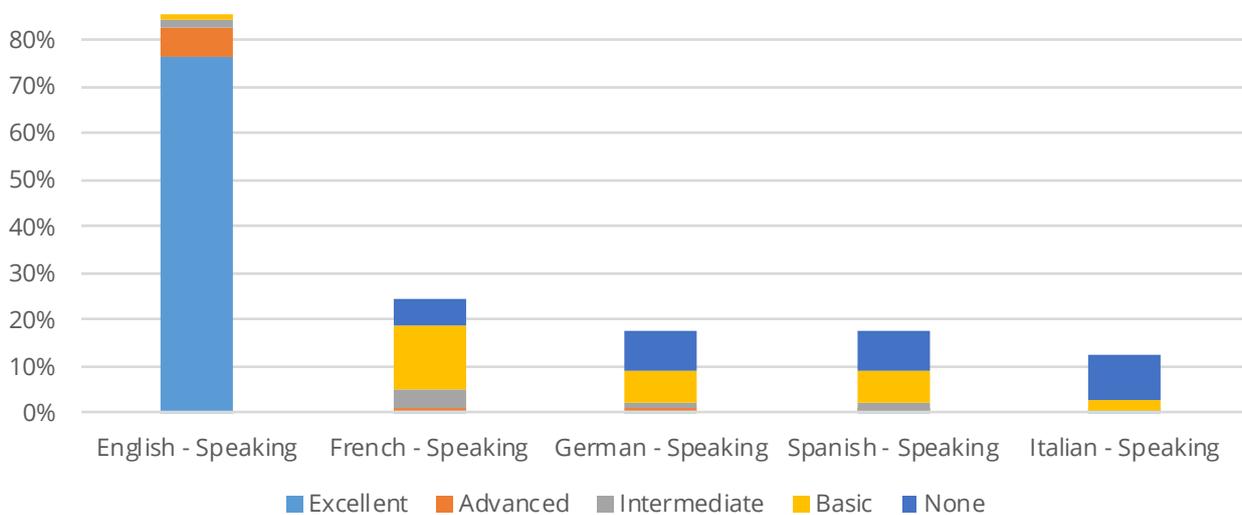


European Languages

85% of respondents to the survey as a whole were able to speak English to some degree, 98% were able to read the language, and 77% to write it. In the UK as a whole, 17% of adults are considered to have very poor literacy, a factor strongly associated with unemployment. The discrepancy between speaking and reading the language may reflect an issue of confidence, and the additional time one has to understand any language when reading in one's own time; older Sikhs, and those who have recently moved to the UK may well fall under this category. In terms of the lower figure for writing, there is likely to be a

number of older Sikhs who did not learn to write at all, but particularly in the English language. The idea that some of those responding to an English-language survey were unable to speak, read, or write English may be explained by the fact that people were encouraged to help those who could not speak the language, or were unfamiliar with technology, to fill it out; for example, elders in care homes, and at Gurdwaras. Skills in other European languages were much more scarce, the next in line being French, with 19% of respondents able to speak it to some extent.

Figure 17: Self-Rated Competencies in European Languages

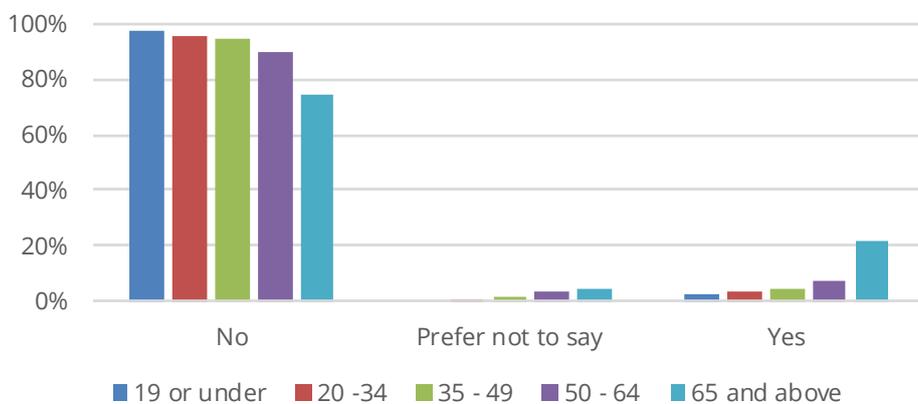


Disability and caring

The BSR survey asked respondents whether they considered themselves to be disabled, whether others in their household are disabled, and further questions about the issues that affect them due to disabilities. There are various issues that affect people who have disabilities and people who care for

those individuals. As can be seen from the data, the large majority of disabled are aged 65 and above but there are some in all age groups, and a small proportion of the respondents preferred not to say whether they have disabilities.

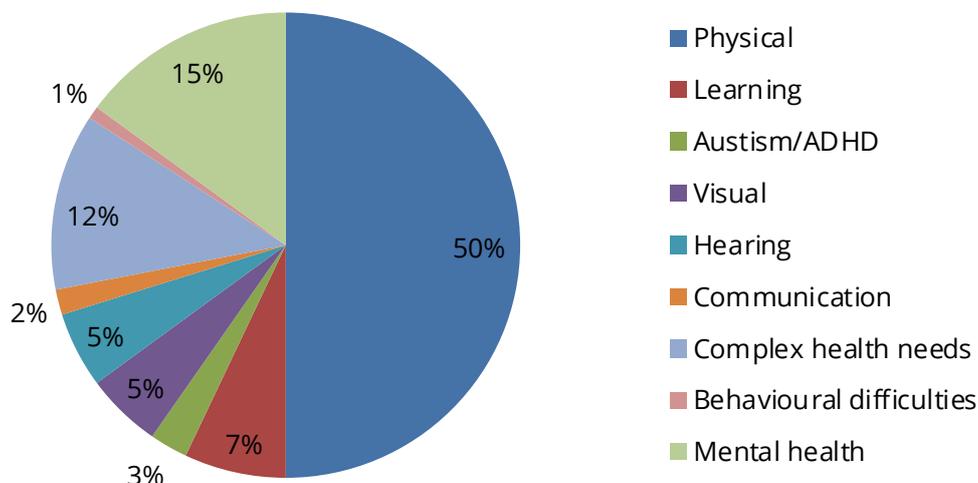
Figure 18: Do you consider yourself to be disabled?



There is a broad spectrum of disabilities and impairments which affect the Sikh community such as but not limited to physical, learning, Autism, Attention Deficit Hyperactivity Disorder (ADHD), visual, hearing, communication, complex health needs, be-

havioural difficulties and mental health. For those respondents who indicated that they have some form of disability, 50% stated that they have physical disabilities compared to the 1% who have behavioural difficulties.

Figures 19: Types of disabilities



For those who care for family members who are disabled and/or have impairments, the majority (77%, from under 19 to 65 and above age ranges) of the respondents have stated that there are no arrangements in place for them to have a break from their caring duties. Whereas 10% of respondents preferred not to say whether any such arrangements are in place and 13% of respondents confirmed that

they do receive respite from their caring duties. A few disabled respondents reported that they received support in the form of financial assistance and benefits, NHS and GP support, Mobility and Blue Badge scheme, Outpatient and Community Care support, Educational support for the young disabled, housing support and support from their family. However, many reported getting no support at all.

Figure 20: Are Gurdwaras equipped to deal with the needs of the disabled?

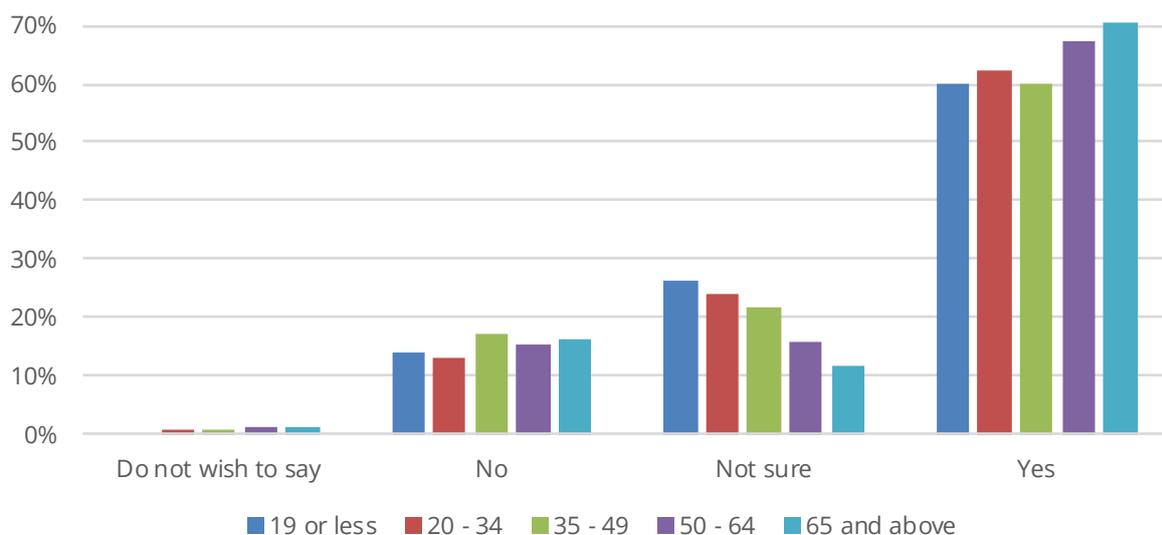


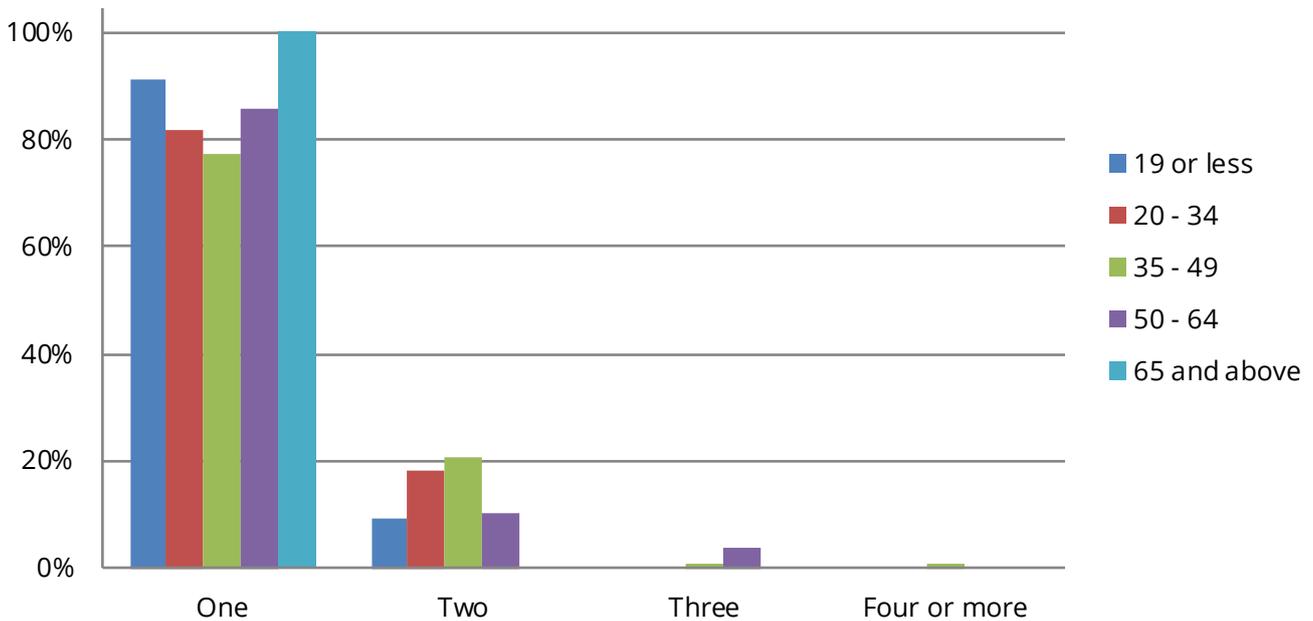
Figure 7.3 above shows that the majority of respondents in the various age groups have stated that their Gurdwaras are equipped to deal with the needs of disabled persons compared to less than half the respondents either stating that the Gurdwaras are not equipped to deal with such needs or the respondents stating that they are not sure as to whether the Gurdwaras are equipped.

72% of all respondents stated that they would like their local Gurdwara to support disabled persons and/or their carers with caring responsibilities. Nearly 6% said that they did not need support whilst 20% of the respondents stated that they were not sure how the Gurdwaras could support them. There is a

clear indication that assistance is required with disabled persons, families and carers.

Nearly 86% of the respondents stated that they do not consider any other members within their households to be disabled. However, over 12% of the respondents stated that they do have other members within their households who have a disability whilst nearly 2% stated that they do not wish to say. For those respondents who said yes, the illustration below captures the number of persons in households who have a disability. This shows that while most disabled persons live in households where there is only one disabled person, there are some households that have 2, 3 or even 4 disabled persons.

Figure 21 How many members of your households are disabled?



Respondents were also asked to provide their views on various issues about disability in a free text section. There were many answers to these questions, but they can broadly be summarised as follows:

What change would you like to see happen to improve the support you receive and improve disability inclusion?

- Better local support and resources from within the Sikh community
- Improved levels of awareness and understanding of the ranges of disability
- Stigma and discrimination within the community
- The need for inclusive and accessible Gurdwaras

Selected quotes:

'More support from the Sikh community and not turn their nose up at you when you go to the [Gurdwara].'
 'Some respite care for my family who look after me.'
 'Have services make themselves known so people who need them know they exist.'
 'The Sikh community to not write me off completely just because I have physical issues.'
 'An understanding of my disability is needed.'

Can you tell us of any barriers and challenges you have experienced?

- Accessibility issues at Gurdwaras, including parking, lifts and ramps
- Discrimination at work and from other Sikhs
- Difficulties with applications for benefits or accessing local services.
- Lack of understanding or recognition
- Difficulties in communication
- Lack of resources

Selected quotes:

'Stigma against mental health within the Sikh & Asian community. I do not like many Sikhs because of the way they have judged and treated me.'

'Our community talking about how my disability is affecting me and what I might have done in my past life or present life to get that way.'

'People thinking, I am using a blue badge that belongs to someone else because visually I look fit and well.'

Can you provide more information on what type of support you would like your Gurdwara to provide to support disabled persons and/or their carers?

- Practical and emotional support, such as drop in centres or support groups
- Signposting by way of information and advice regarding available support, including translation services and advice in Punjabi
- Fun activities
- Transport to/from Gurdwaras
- Providing home visits to the elderly
- Trained sewadars (Gurdwara volunteers) to help the disabled
- Improving accessibility around the Gurdwara
- Gurdwaras leading by example on issues regarding disabilities
- Helping and assisting disabled children and the families
- Creating quiet rooms and sensory rooms for people of all ages to sit in
- Making sewa (religious volunteering) at the Gurdwara more accessible

Selected quotes:

'The Gurdwara I attend is brilliant and accommodates all the needs to disabled persons - seating is provided in the Darbar at the front, middle and back - a lift is available to use and there is wheelchair access and everyone is made to feel welcome with no problem at all.'

'Be allowed to do sewa in the kitchen without restrictions (safely of course), more understanding/education for the sangat to understand that not all disabilities are physical and the sangat to be educated to be mindful to both those with disabilities and their carers... how to help rather than assume or target. Be less judgemental.'

'Prayers that are being recited during ceremonies and daily should be accessible to sangat members who are visually impaired or have hearing difficulties.'

'I'd like them to be more inviting and supportive to carers of children/adults with special needs and disabilities.'

'Including and welcoming people with disabilities. Many don't allow those in wheelchairs in and demand they sit in a separate room. This is discrimination.'

'Acceptance is key. People with disabilities are always frowned upon which is disgusting. Treat them equally.'

'For the committee to raise more awareness by speaking up on such issues in order to normalize the experience instead of it remaining a taboo.'

'Ensure disabled people are visible part of the community, and are included visibly in the congregation.'

'Just to have the facility available for disabled people. The gurdwara by me locks the key away for the chair lift so my elderly mother doesn't go as often.'

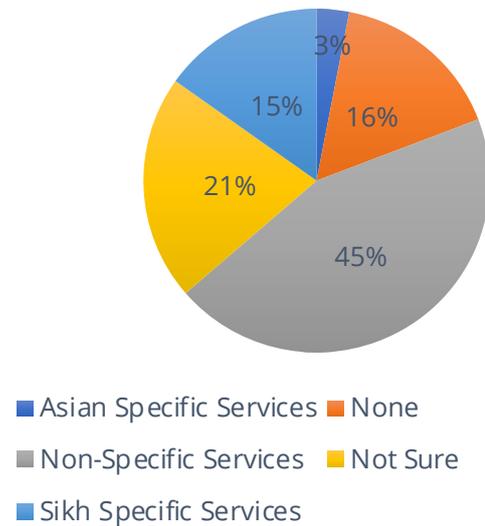
Mental health and suicide

In 2018, the British Sikh Report included mental health as one of its key areas of focus and asked a number of questions to participants to prompt reflection on a topic which is often shrouded in silence. Subsequently, BSR 2018 was able to present carefully considered reflections on the prevalence of mental ill-health as well as levels and sources of stress for Sikh communities in Britain.

This year, the British Sikh Report has included questions relating to mental health, dementia, and Alzheimer's, in order to develop a fuller, more detailed understanding of Sikh communities in Britain.

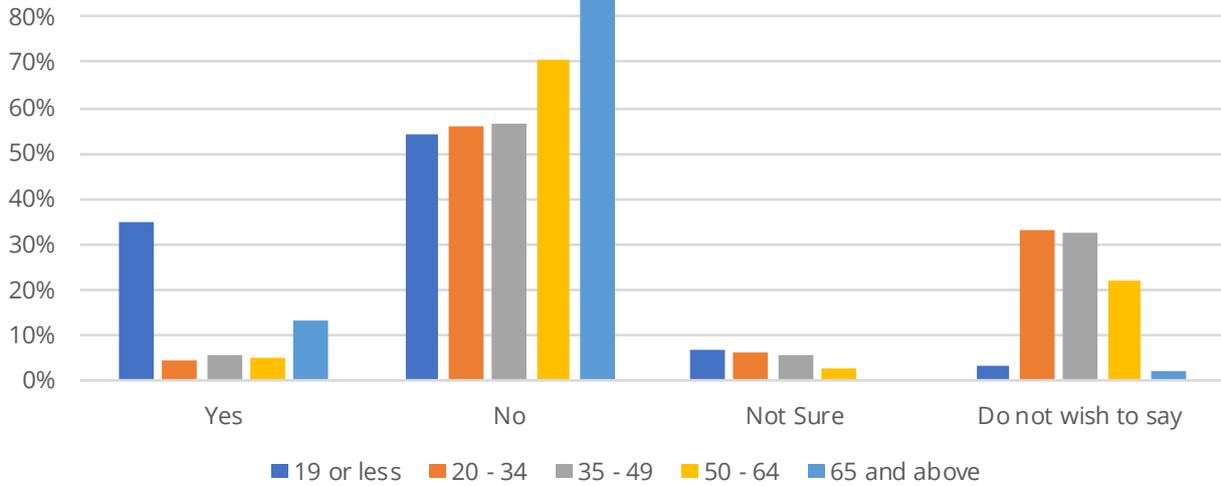
Crafting suitable, effective and trustworthy services for diverse communities with a range of life experiences can sometimes prove complex and difficult for healthcare professionals. Therefore, BSR 2019 looks to platform Sikh voices and their preferences as to service provision for those living with anxiety or depression. BSR 2019 found that 18% of respondents would be more likely to use a service perceived to be Asian/Sikh specific, indicating the importance of choice and cultural diversity within mental health interventions. However, 16% of participants responded that if experiencing anxiety or depression, they would still most likely not access the types of service listed. To compound this, 21% of those who answered listed that they were 'not sure' about which services they would be more likely to use in such circumstances. With such a range of responses, it is evident that Sikh communities in Britain have different relationships with knowledge of mental health services, and, moving forwards, this indicates that community-facing approaches to mental health interventions need to be aware of such disparities.

Figure 22: If you had depression or anxiety issues, which of these services would you be more likely to use?



Over the last year, there has been heightened discussion of suicide within British popular culture and news media. This has not been without reason, however, as suicide has been identified as the most common cause of death for males between the ages of 25 and 40. Within Sikh populations, however, statistics on suicide are scarce. BSR 2019 indicates that 31% of respondents know someone who has shown signs of being suicidal, demonstrating the prominence of suicidal ideation within British Sikh populations, similar to the 30% of respondents that know someone who has died of suicide. There is a distinct generational divide apparent when spotting signs of suicide as only 13% of participants aged '65 and above' answered 'yes' to someone they know showing signs of suicide compared to 35% of those aged '19 or less' who answered 'yes'. It is also interesting to note that over 30% of those aged 20-34 and 35-49, and over 20% of those aged 50-64, did not wish to say if they knew anyone showing signs of being suicidal. This may be symptomatic of the stigma and discomfort of many to talk about mental health issues

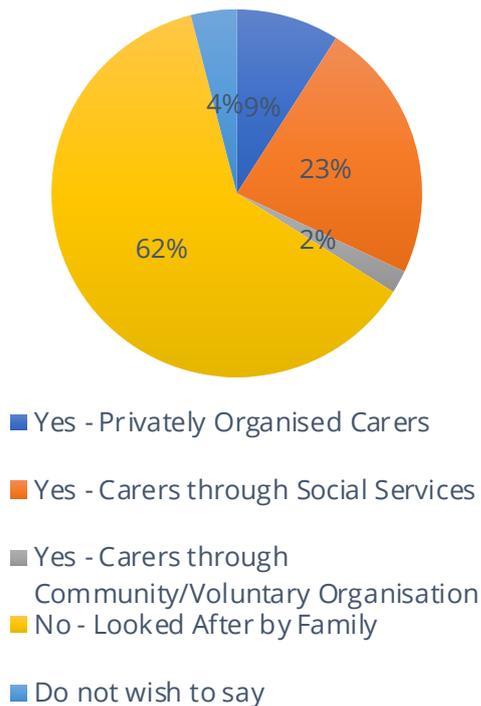
Figure 23: Has anyone you know shown signs of being suicidal? By age



Partly due to advances in technology, more and more people are living into old age. With this, however, comes the prominence of issues such as Alzheimer’s and dementia, within the broader context of caring for the elderly. This year, 11% of participants stated that someone in their household suffers from dementia or Alzheimer’s. With those who are suffering from dementia or Alzheimer’s, 62% of respondents outline that family members undertake caring re-

sponsibilities, compared to 23% of carers organised through social services and 9% of carers organised privately. Such statistics reflect the BSR 2018 in which over half of participants stated that their extended families would provide housing support when they move into old-age. Evidently, the structure provided by extended families is framed as both a responsibility to house, and care for, elderly relatives.

Figure 24: For the person that suffers from Dementia or Alzheimer's, do you receive any assistance to look after them from social services or carers?



Mental illness and difficulties into elderly life is certainly experienced in British Sikh communities. Regarding mental health and suicide, we can see a diverse range of preferences as to service accessibility. There is a stark generational difference in spotting the signs of suicide within their familial and social circles. Regarding elderly communities, familial support is shown to extend into provision of care for those living with dementia and Alzheimer’s, with a small percentage relying on social services, and even less on private care.

To gauge a longer-term understanding and to identify trends in these two areas, it is necessary to undertake further research in understanding British Sikh attitudes and behaviours to best inform existing and future service provision.

Drugs and alcohol

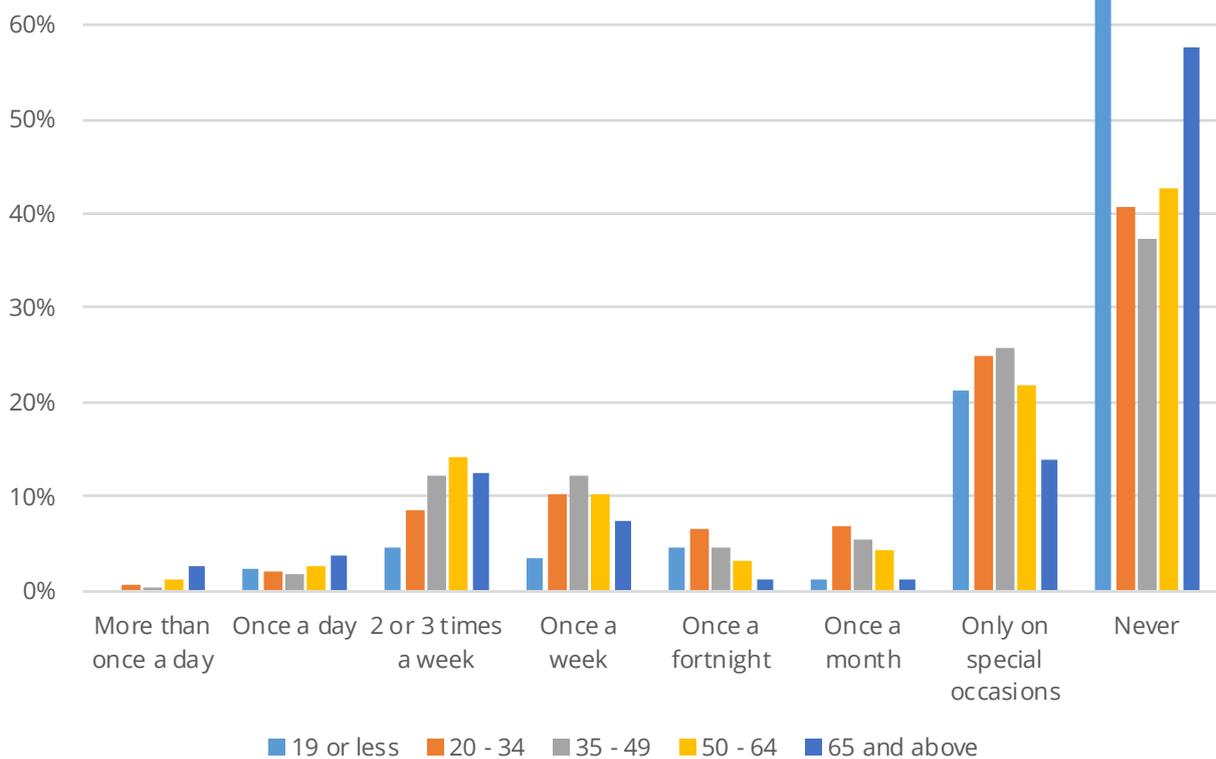
Frequency of Alcohol Consumption

While consumption of alcohol is strictly prohibited in Sikhi, Punjabi culture often promotes diametrically opposite views through social interaction, media and entertainment. For this reason, alcohol is one of the most prevalent drugs in use by the Punjabi community in the UK.

41% of respondents said they never drink alcohol; this compares to a national figure of 20% of adults

who do not drink alcohol. The figure remained consistent for those aged between 20 and 64, but was higher for those aged 19 and under, and those 65 or over (totalling 65%). Drinking only on special occasions was the next most popular option, with 24%; this remained consistent across the age groups as well, but dropped to 14% for those over 64. Only 3% of respondents drank at least once per day, with 22% drinking up to three times per week.

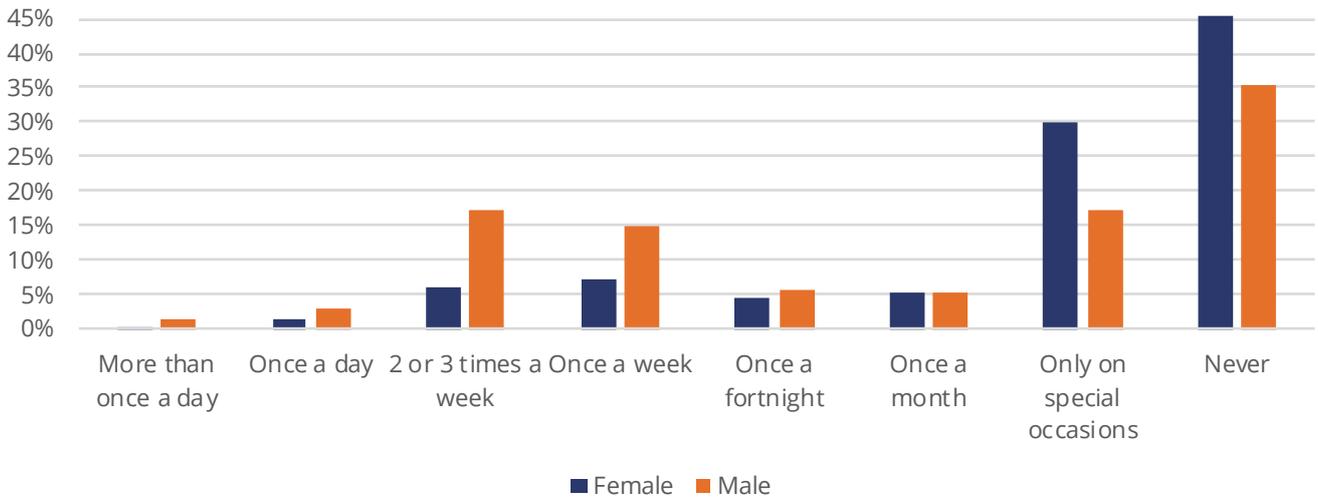
Figure 25: Frequency of alcohol consumption by age group



Women were more likely than men not to drink at all (45% vs 35%), or to drink only on special occasions (30% vs 17%); this correlates with trends for England as a whole. 32% of men drank up to three times per

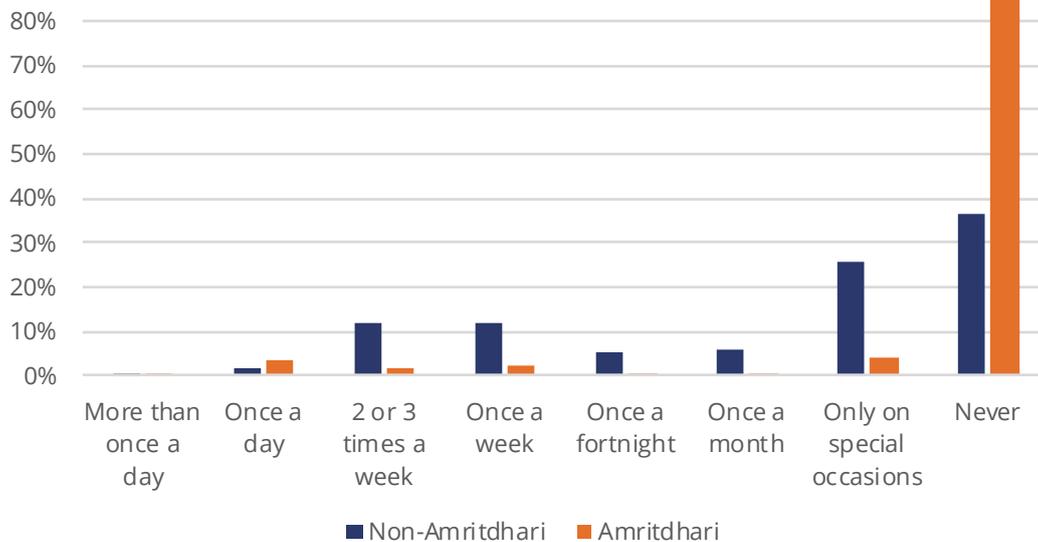
week, compared to only 13% of women. In England as a whole, 63% of men and 53% of women are likely to have drunk at least once in any given week.

Figure 26: Frequency of alcohol consumption by gender



The most surprising finding of the results was that 13% of Amritdhari respondents drank alcohol at some frequency. 4% drank on special occasions only, and 4% drank up to three times per week.

Figure 27: Frequency of alcohol consumption by religious status



Health Concerns/Effect on Others of Alcohol

75% of respondents were happy that nobody in their household drank enough alcohol to be detrimental to their health. However, a significant 20% did believe this to be the case; women were more likely than men to hold this view, as were Amritdhari Sikh vs non-Amritdhari Sikhs.

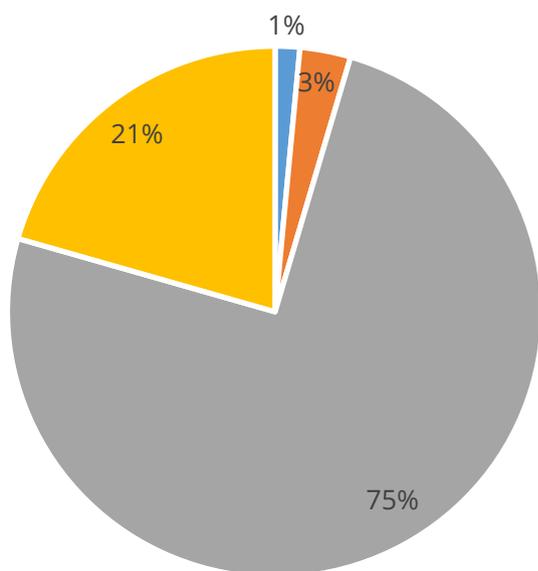
70% of respondents were happy that nobody in their household drank enough to affect another member

of the household in a serious way. 24% thought the opposite. It is interesting that while three-quarters of respondents did not think any member of their household drank enough to affect their own health, there was a 4% drop in this figure when considering the effect on others; coincidentally, there was a 4% rise in this category for those that did consider a member of their household was drinking too much

for their own health. This may be explained by the fact that while a drinker's own health may not be affected by the amount of alcohol consumed, his/her behaviour may change, thus affecting those around

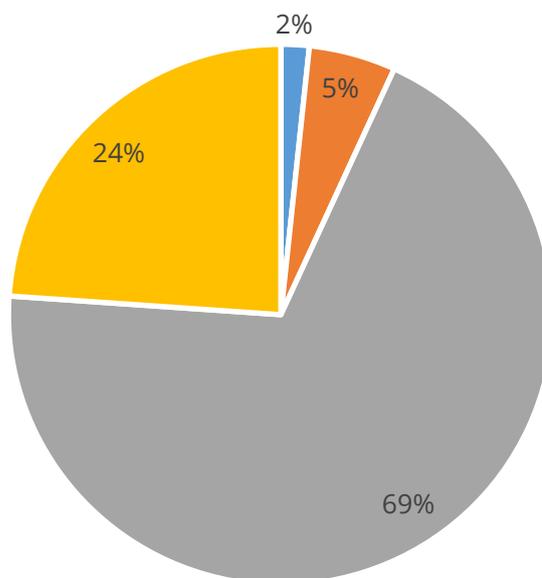
him/her. As with the category above, women were more likely than men to think that someone's drinking affected others in the household, as were Amritdhari Sikhs vs non-Amritdhari Sikhs.

Figure 28: Does anyone in household consume too much alcohol for their own health?



■ Do not wish to say ■ Don't know ■ No ■ Yes

Figure 29: Does alcohol consumption by any household member seriously affect other household members negatively?

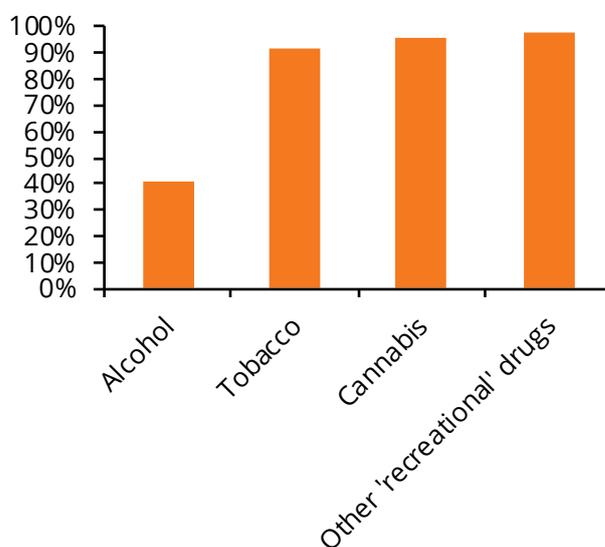


■ Do not wish to say ■ Don't know ■ No ■ Yes

Tobacco and recreational drugs

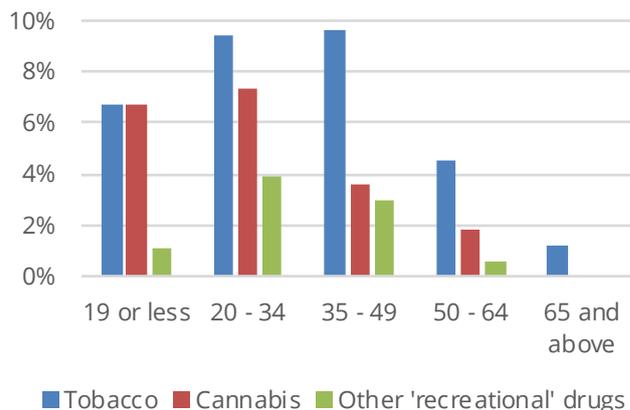
In addition to alcohol, tobacco and other recreational drugs are also prohibited within Sikhi, though it is noted that some may be used for medicinal purposes. The survey suggests that alcohol is by far the most prevalent drug in use by the British Sikh community, and over 90% of respondents have never tried tobacco, cannabis, or any other recreational drugs. Tobacco has a particular stigma attached within Punjabi culture as well, which suggests it would always be less prevalent than alcohol within the community.

Figure 30: Respondents who have never consumed these drugs



The 20-34 age group was the most likely to have consumed any of the drugs overall, with 9% having tried tobacco, 7% having tried cannabis, and 4% having taken other drugs. The only group saying that they had never tried cannabis or other drugs was the 65+ age group. According to a Royal College of General Practitioners report, cannabis use is overtaking tobacco use in young people; the survey showed the two to be equal for those aged 19 or under, indicating a similar trend.

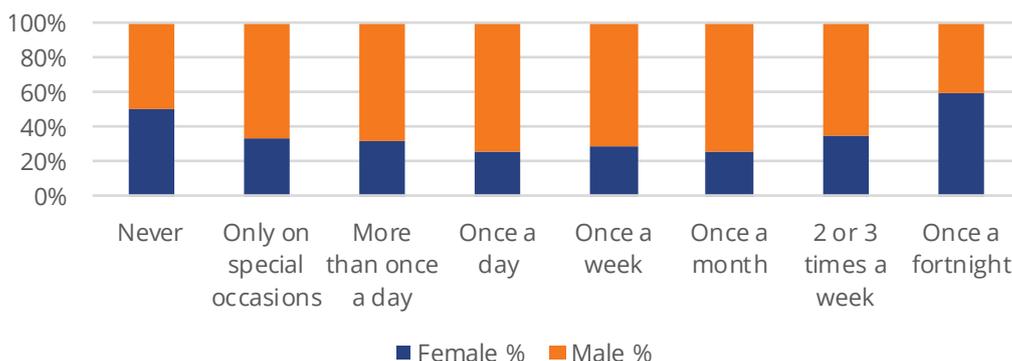
Figures 31: Drug consumption by age



Sikh men are more likely to have consumed drugs than women, with the largest difference in the tobacco category (11% vs 6%); these figures are lower than

the national average though, in which 17% of men, and 13% of women are smokers.

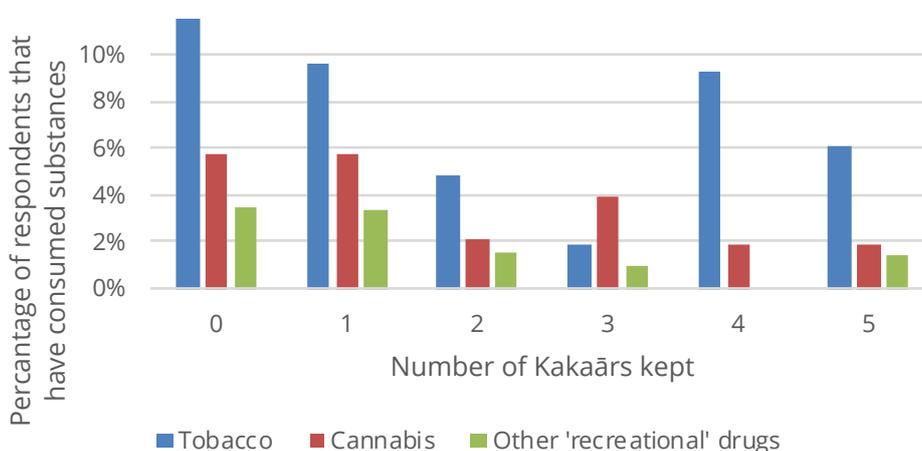
Figure 32: Drug consumption by gender



The most surprising data, as with alcohol, showed that there are some Amritdhari Sikhs that regularly consume the various types of drug. Amritdhari Sikhs wear the five Ks, which are the five articles of faith

that Guru Gobind Singh requested all Khalsa Sikhs to wear at all times. They represent an individual's commitments to the Sikh way of life, which includes the prohibition of intoxicants.

Figure 33: Drug Consumption by number of Kakaars kept



Major anniversaries of 2019

The year 2019 will mark four significant anniversaries for Sikhs. BSR 2019 has asked questions related to these, namely the 100th anniversary of the Jallianwala Bagh massacre, the 35th anniversary of the

pogroms of 1984 in India, Guru Nanak Dev Ji's 550th Prakash Gurburab (birth anniversary), and the 400th anniversary of Bandi Choor.

The Jallianwala Bagh Massacre

The Jallianwala Bagh Massacre took place in Amritsar, Punjab, India on April 13th 1919. Men, women, and children had gathered for a variety of reasons, including celebration of Vaisakhi, peaceful protest against the deportation of two nationalist leaders (Kitchlew, and Satyapal), and simply to use the bagh as a picnic spot. Brigadier General Dyer, who had assumed command in the city entirely outside the bounds of civil or military law, arrived at Jallianwala Bagh with his men. They blocked the only entrance/exit and, without warning, began firing indiscriminately on the crowd, killing and wounding without prejudice. Official estimates put the death toll at 379, but the historian Kim Wagner estimates that between 500 and 600 men, women, and children were murdered; approximately three times as many were injured.

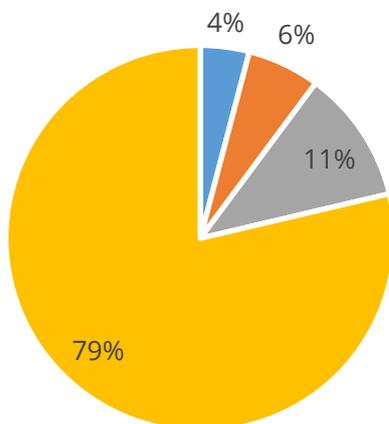
The government of India ordered an investigation into the massacre in 1920 (The Hunter Commission),

which ordered Dyer to resign his position in the army. The reaction to the massacre in Britain was mixed; Sir Winston Churchill, then Secretary of War, condemned Dyer's actions in a speech to the House of Commons in 1920, but the House of Lords praised Dyer. A large fund was also started by Dyer's sympathisers, and presented to him.

79% of respondents to the British Sikh Report survey believe that the British government should apologise for the Jallianwala Bagh Massacre. This view was shared across the age groups, with those aged 19 and under, and those aged 65 or more, most likely to want an apology.

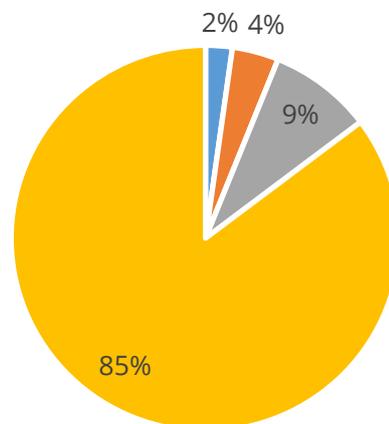
The belief that the Jallianwala Bagh Massacre should be a part of the UK school syllabus follows a similar pattern to the question above, but a greater proportion of respondents (85%) believe that it should be included.

Figure 34: Should the British Government apologise for the Jallianwala Bagh massacre?



■ Do not wish to say ■ No ■ Not sure ■ Yes

Figure 35: Should the Jallianwala Bagh massacre be included in the school syllabus?



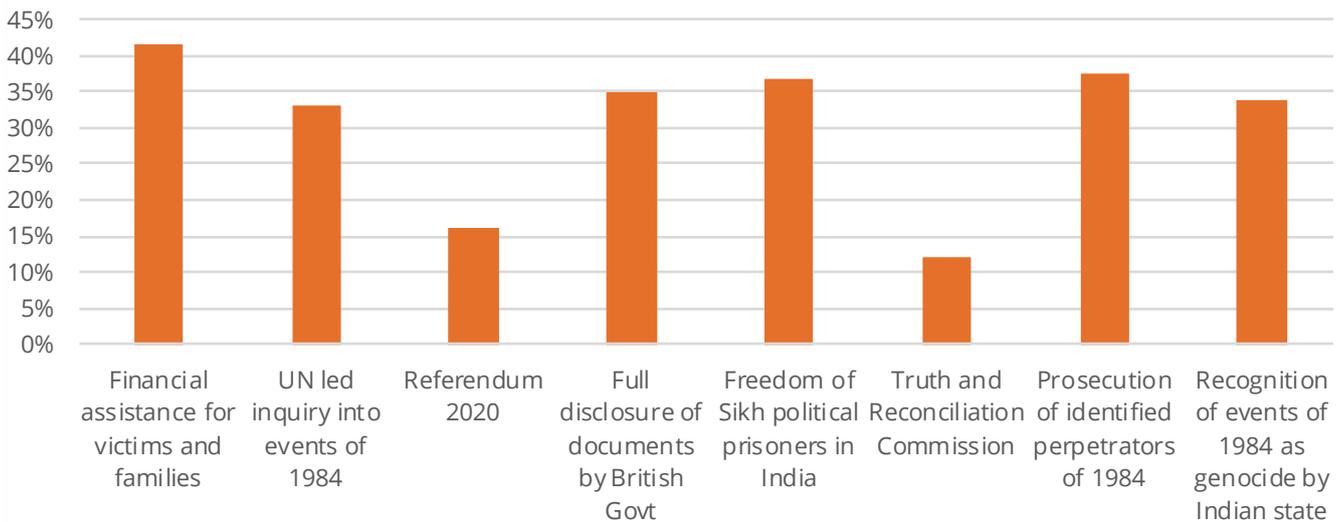
■ Do not wish to say ■ No ■ Not sure ■ Yes

1984

To quote the Wiener Library, “The genocidal pogroms against the Sikh people in India in November 1984 left thousands dead. In many of the outer areas of the capital, New Delhi, whole neighbourhoods were wiped out. Women were raped in large numbers. Senior politicians of the Congress party led mobs, assisted by the police and administration.” The Delhi Supreme Court labelled these acts as a genocide in November 2018. The genocide was in response to the assassination of Indira Gandhi by two of her Sikh bodyguards, in retaliation for Operation Bluestar, the Indian army’s attack on Sikh’s holiest shrine, Harmandir Sahib (The Golden Temple).

Respondents were asked to pick three of eight possible options for actions on which British Sikhs should focus in respect of the 1984 pogroms. The most popular outcome was to provide financial assistance for victims and families. Prosecution of the perpetrators, and freedom for Sikh political prisoners were the next most popular options, with the least popular being the Punjab 2020 Referendum, and establishment of a Truth and Reconciliation Commission (as in South Africa). Popularity of other options was fairly even across the board. Under the “Other” section, “all of the above,” and “education” were listed many times.

Figure 36: In respect of 1984, on which actions should the British Sikh community focus? (respondents asked to select 3 options)



Guru Nanak Dev Ji’s 550th Prakash Gurpurab

In November 2019, Sikhs from around the world will be celebrating the 550th Prakash Gurpurab (birth anniversary) of Guru Nanak Dev Ji, the first Sikh Guru and the founder of Sikhism.

Guru Nanak Dev Ji was born on 29 November 1469 at Rai-Bhoi-Di-Talwandi, which is now known as Nankana Sahib, having been renamed as a sign of respect

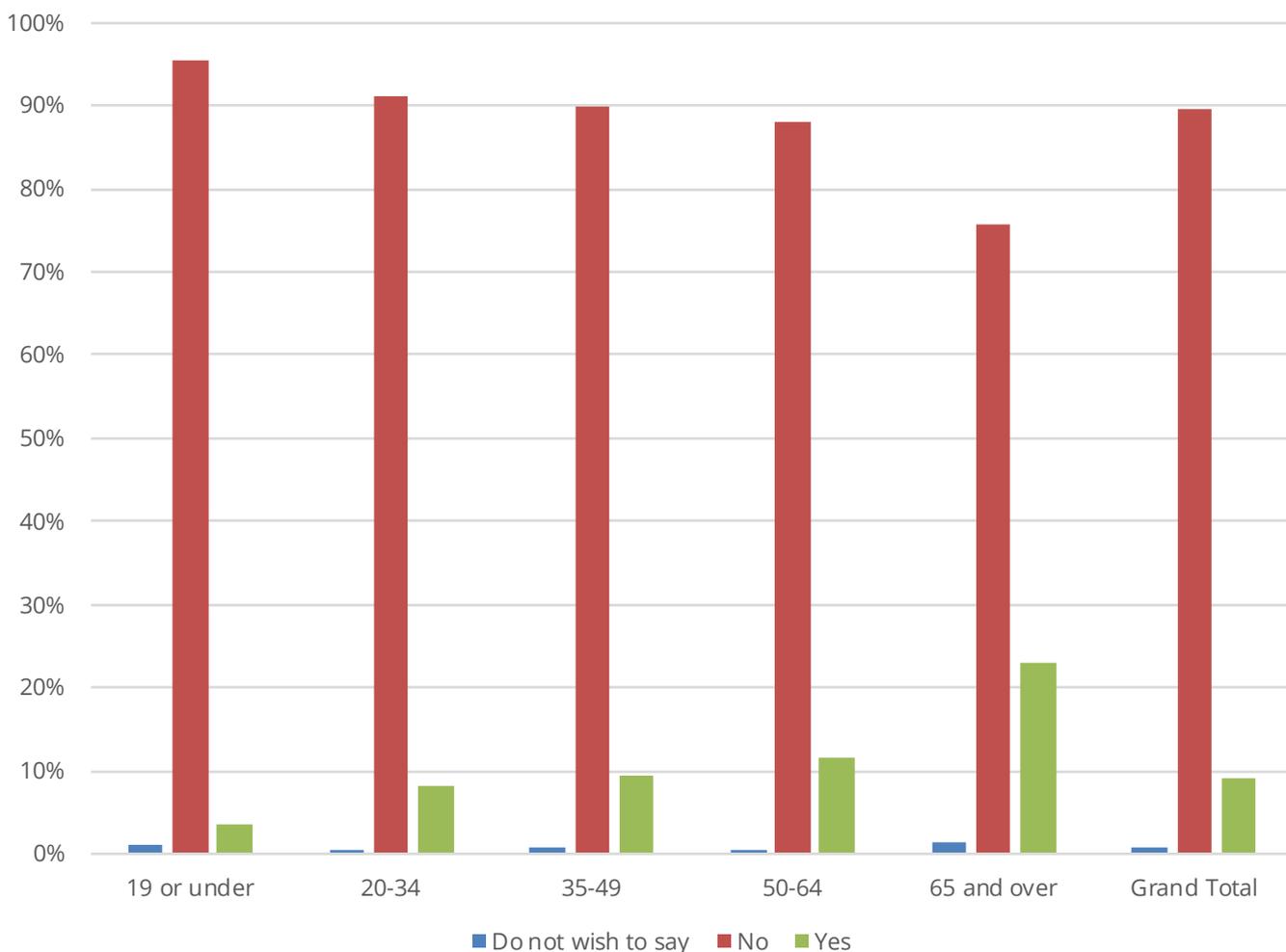
to the first Guru. Nankana Sahib, like a number of historical Gurdwaras, is located in modern day Pakistan. At Gurdwara Panja Sahib in Hasan Abdal, Pakistan, a handprint belonging to Guru Nanak Dev Ji is preserved on a boulder. In Narowal, Pakistan, Gurdwara Darbar Sahib Kartar Pur is believed to mark the site where Guru Nanak Dev Ji died.

Respondents were asked: Have you ever visited Guru Nanak Dev Ji's birthplace, Nankana Sahib, or other historical Gurdwaras in Pakistan?

For this question, across the age groups; 19 or under, 20-34 and 35-49, the percentage of respondents who answered "No" in the survey was very high, at 90% and above. For the age group 50-64, 12% of people answered "Yes", with 23% of the 65 and over making up the largest group of respondents who had visit-

ed Guru Nanak Dev Ji's birthplace, Nankana Sahib, or other historical Gurdwaras in Pakistan. The results here were as expected, with a likelihood that many of the first generation of the elder Sikh population of the UK possibly having already visited these sites before migrating to the UK.

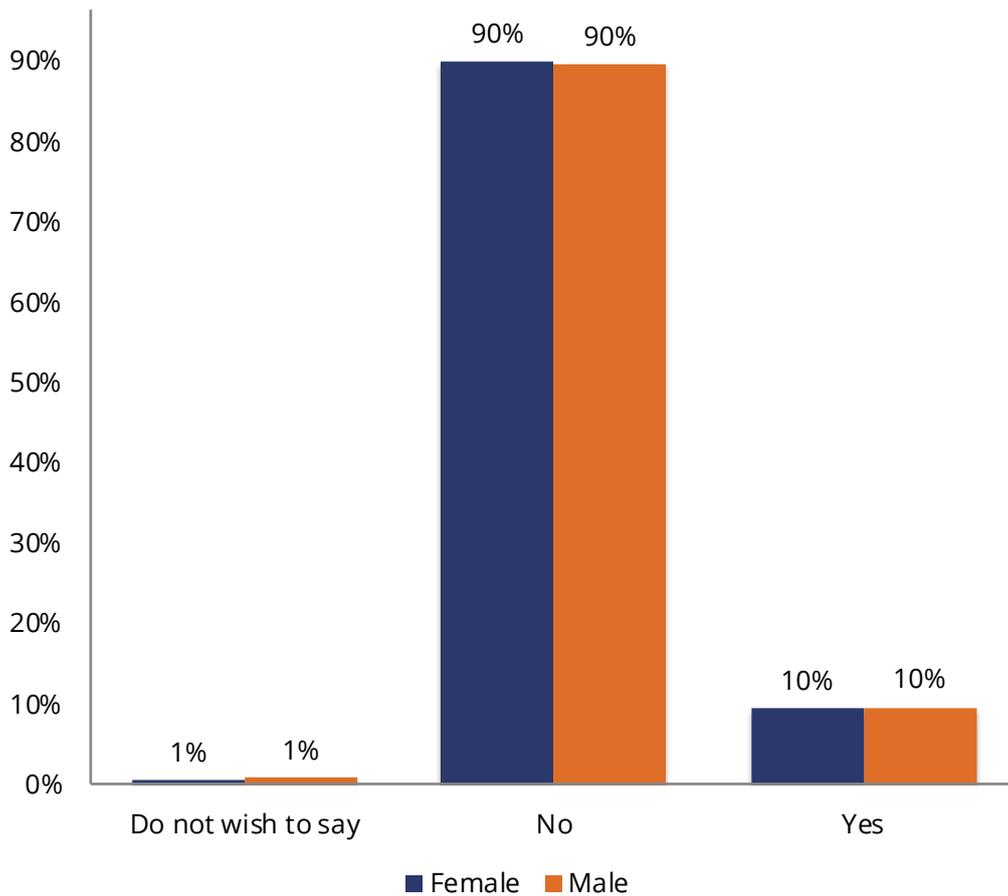
Figure 37: Have you ever visited Guru Nanak Dev Ji's birthplace, Nankana Sahib, or other historical Gurdwaras in Pakistan? By age



The results across both genders were almost identical, revealing that almost 90% of both females and

males had not visited any of the historical Gurdwaras in Pakistan.

Figure 38: Have you ever visited Guru Nanak Dev Ji's birthplace, Nankana Sahib, or other historical Gurdwaras in Pakistan? By gender

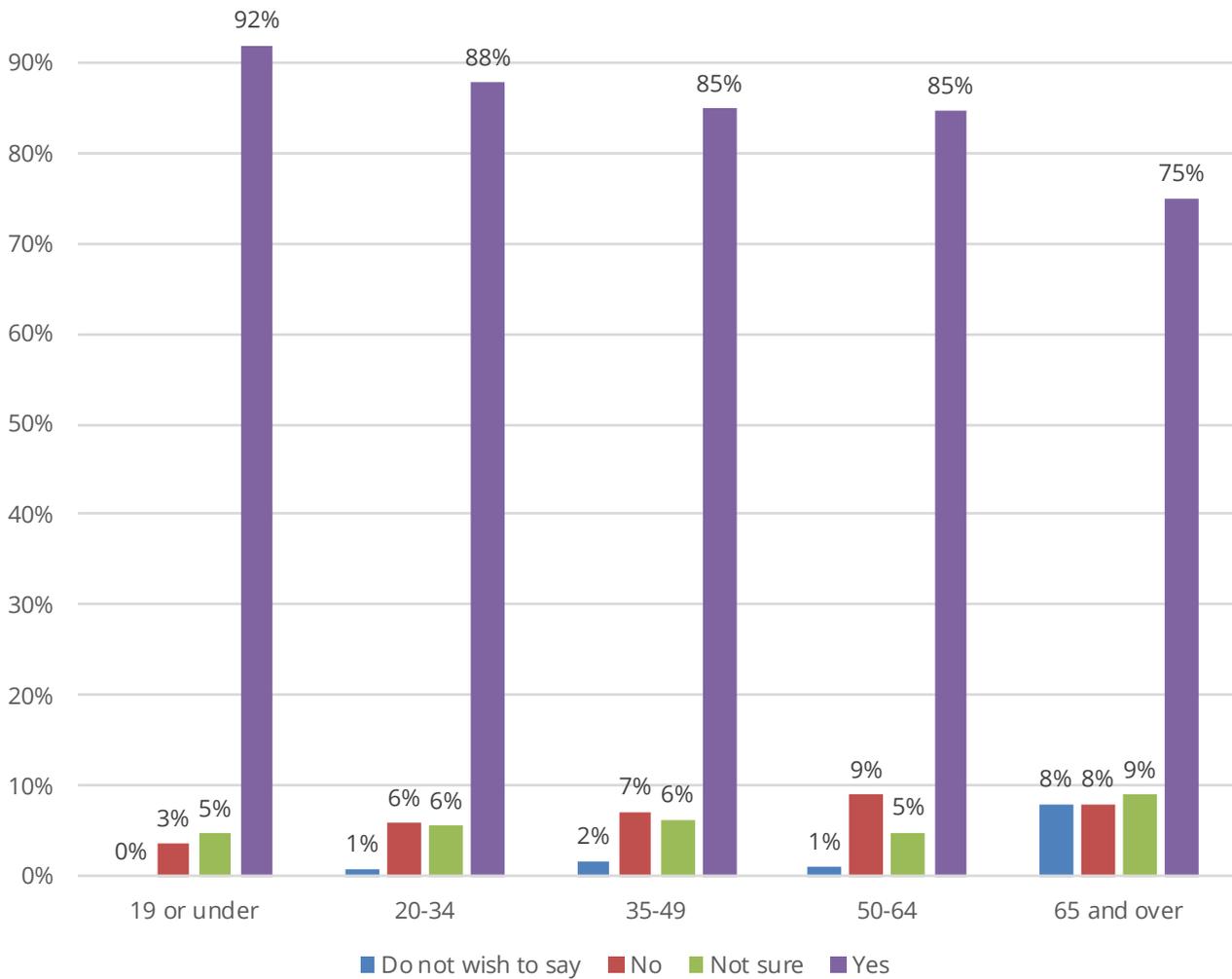


Respondents were asked: Would you like to visit Nankana Sahib, or other historical Gurdwaras in Pakistan?

What was most interesting to note from the results amongst the different age groups, was that the younger the respondent was, the more of a desire they had in wanting to connect with the history of Sikhism, with 92% of the 19 or under age group answering "Yes" to this question. This probably cor-

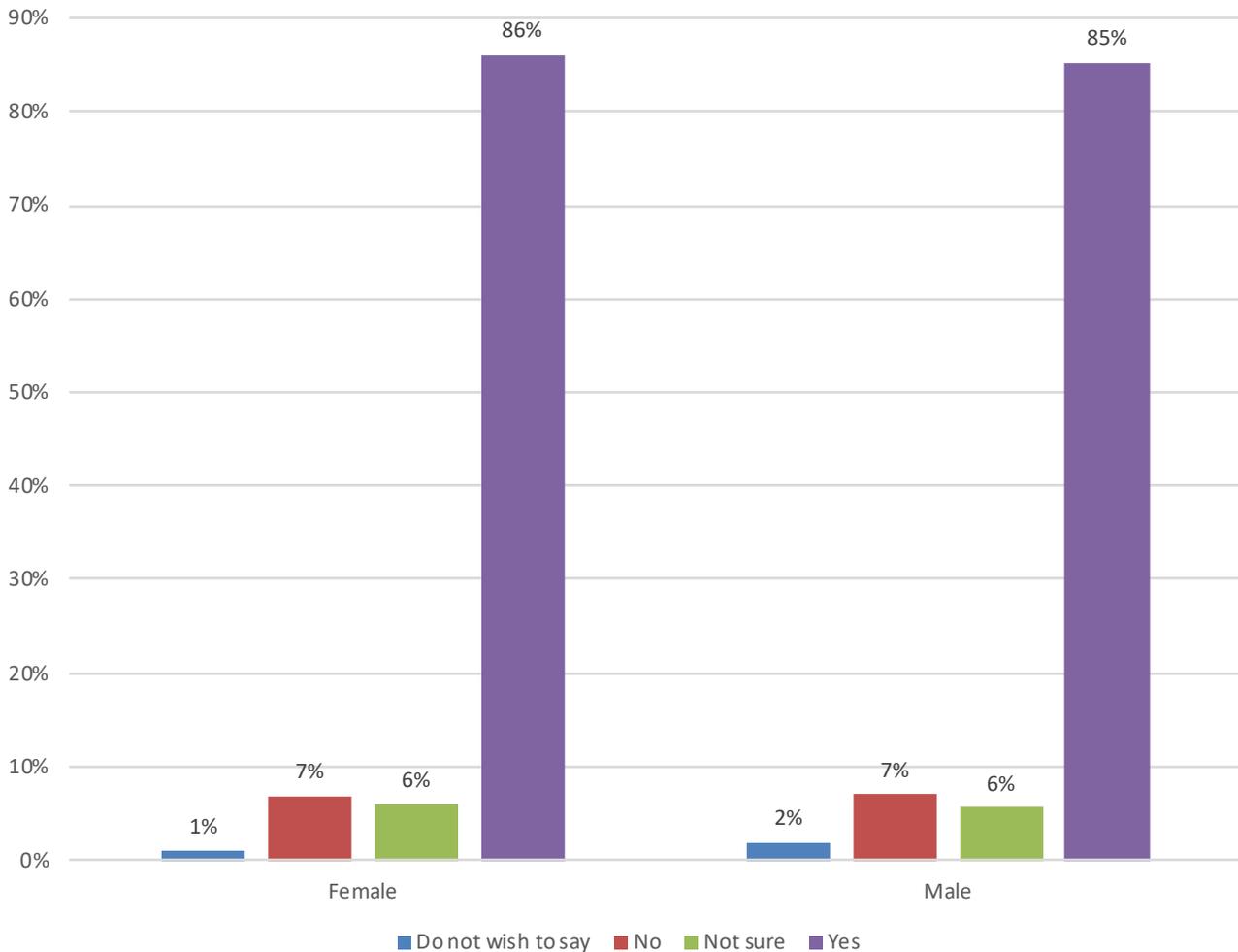
relates to the older generation of 65 and over having already visited many of the historical Gurdwaras in Pakistan in their lifetime and therefore this making up the lowest age group proportion that had answered "Yes" here, although still fairly high at 75%.

Figure 39: Would you like to visit Nankana Sahib, or other historical Gurdwaras in Pakistan? By age



The results here were again almost the same for both genders; with around 85% of both females and males expressing a wish to make a visit to the historical Gurdwaras.

Figure 40: Would you like to visit Nankana Sahib, or other historical Gurdwaras in Pakistan? By gender



Bandi Chhor 400th Anniversary

It will be the 400th Anniversary of Bandi Chhor this year. Bandi Chhor Divas (Day of Liberation) falls on 27th October this year and commemorates the day when the sixth of the ten Sikh Gurus, Guru Hargobind, was released from Gwalior Prison, having been unlawfully imprisoned as a teenager by the Mughal

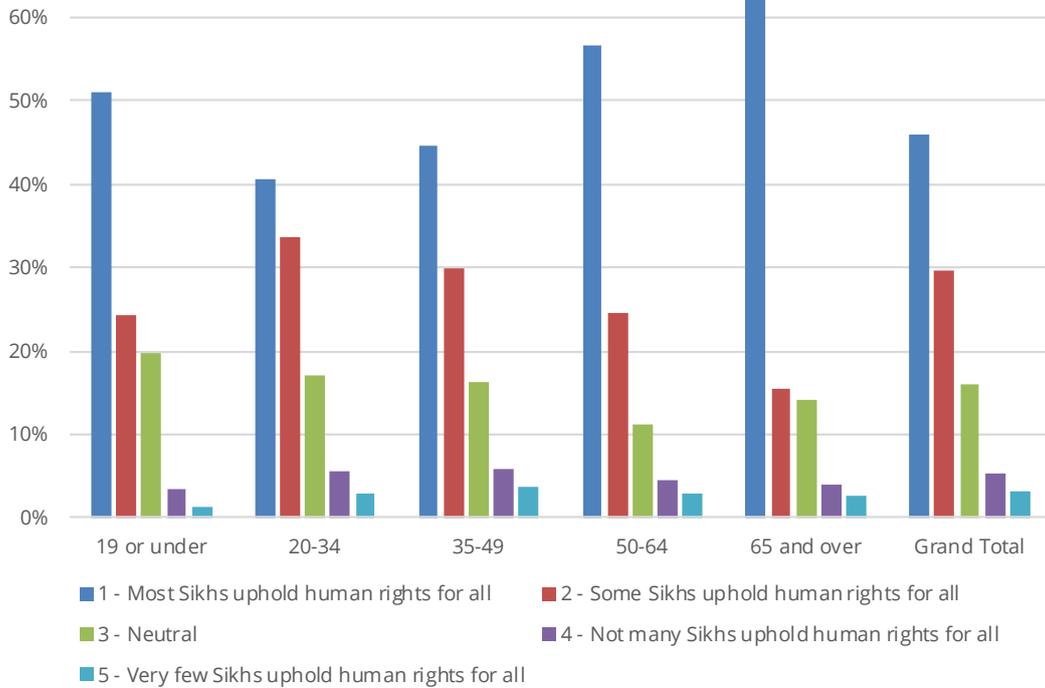
Emperor Jahangir. With his release from prison, Guru Hargobind managed to secure the release of 52 political prisoners, all of who were Rajas (Kings) that had also been falsely and unfairly imprisoned against their wishes, without a trial, for simply being leaders of their communities.

Respondents were asked: To what extent do you feel that Sikhs uphold the human rights of non-Sikhs in Society?

It was positive to see that across all the age groups, the majority of respondents felt that most Sikhs upheld the human rights of non-Sikhs; with 51% of 19 or under age group, 41% of 20-34, 45% of 35-49, 57%

of 50-64 and 64% of the age group 65 and over. At the other end of the spectrum, less than 5% across all age groups were of the view that very few Sikhs uphold human rights for all.

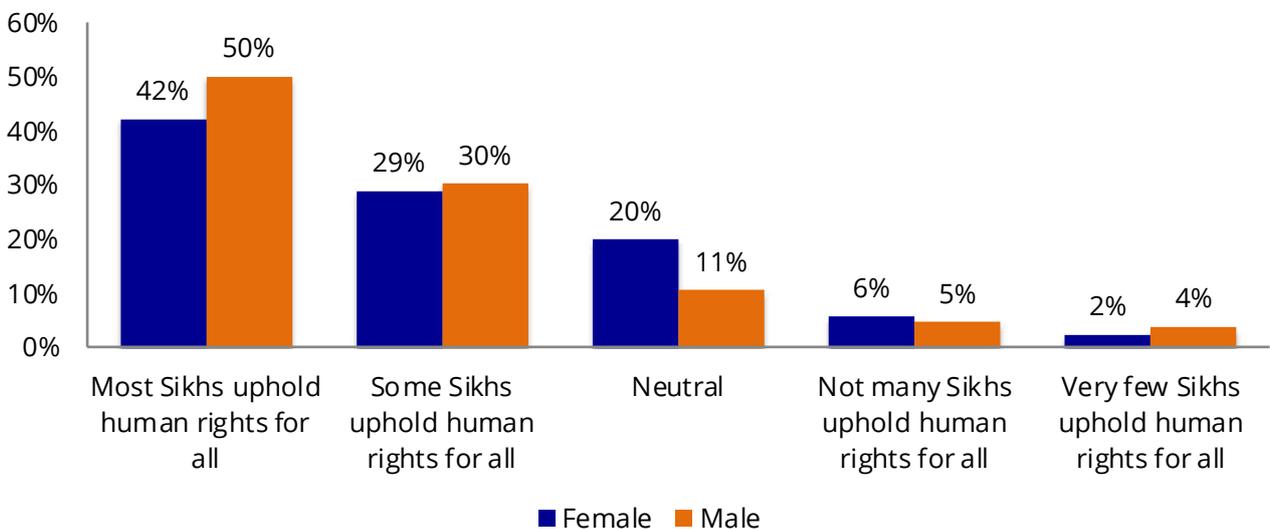
Figure 41: To what extent do you feel that Sikhs uphold the human rights of non-Sikhs in Society? By age



Separating the results between females and males showed that the responses were again fairly similar, with the biggest, albeit minor difference, being for those who said “Most Sikhs uphold human rights for

all” (with 42% of females compared 50% of males) and for those who held a “Neutral” view (with 20% of females compared to 11% of males).

Figure 42: To what extent do you feel that Sikhs uphold the human rights of non-Sikhs in Society? By Gender



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British Sikh Report 2019

The British Sikh Report (BSR) has been published annually since 2013. It is based on a survey of Sikhs living in the UK, gathering information about views on their faith, and on topical British issues – political, economic, social and cultural.

British Sikh Report website: <http://www.britishsikhreport.org>

Previous reports:



