Equality Impact and Outcome Assessment (EIA) Template - 2015

EIAs make services better for everyone and support value for money by getting services right first time.

EIAs enable us to consider all the information about a service, policy or strategy from an equalities perspective and then action plan to get the best outcomes for staff and service-users. They analyse how all our work as a council might impact differently on different groups. They help us make good decisions and evidence how we have reached these decisions.

See end notes for full guidance. Either hover the mouse over the end note link (eg: Age) or use the hyperlinks (‘Ctrl’ key and left click).

For further support or advice please contact the Communities, Equality and Third Sector Team on ext 2301.

1. Equality Impact and Outcomes Assessment (EIA) Template

First, consider whether you need to complete an EIA, or if there is another way to evidence assessment of impacts, or that an EIA is not needed.

<table>
<thead>
<tr>
<th>Title of EIA</th>
<th>EIA for the 2015 Air Quality Action Plan</th>
<th>ID No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Team/Department</td>
<td>Environmental Protection / Environmental Health and Licencing</td>
<td></td>
</tr>
</tbody>
</table>

The Air Quality Action Plan is a local authority statutory duty (under part IV of the Environment Act 1995) that is required following the declaration of an Air Quality Management Area (AQMA). The AQMA is declared for non-compliance with legally binding limits for nitrogen dioxide that are for the protection of human health and outdoor air. Brighton’s main AQMA covers the urban centre. A smaller area includes the High Street in Rottingdean village. The city’s AQMAs include residential and retail areas with a varied range of deprived and affluent groups.

The purpose of the Equalities Impact Assessment is to ensure that no group is disadvantaged in any way due to the proposals in the air quality action plan and to identify health benefits that will be inclusive across the population. Air pollution affects the population disproportionately. The most vulnerable are the; elderly, neonatal infants and babies, those with occupational history of working with asbestos and coal dust, adults with history of smoking and drug use and those in sedentary, care, less active lifestyles and people that have lived next to a confined road for a long duration.
The quality of housing; façade and fenestration at roadside (a few feet / metres from a road carriageway or junction) may also be an influence on in-home dose and exposure to road traffic pollution. Rent and property prices are high for much of the city’s AQMA. Poor ambient air quality due to emissions from road traffic is not exclusive to deprived areas. Varied groups including affluent people are exposed to airborne pollution that they breath in whilst in their homes, cars and on the street.

List of measures highlighted with potential impact on protected groups:

- Anti-Idling signs on all taxi ranks in around the AQMA. Avoid fuel consumption and emissions when not moving.
- Extra no engine idling signs to be considered for loading areas applicable for all vehicle types
- Encourage domestic solid fuel burning to use smokeless fuels and exempt appliances
- Households not to use fires to dispose of waste in the AQMA
- Consider impact of pedestrian crossing points on traffic flow and impact on emissions and air quality have regard to implications for disabled groups
- Review Central parking spaces that attracts traffic into the AQMA  Consider disable parking to ensure appropriate to people’s needs
- Seek Opportunities for new Taxi Ranks, consider proximity to residential and ambient air quality when selected appropriate sites
2. **Update on previous EIA and outcomes of previous actions**

<table>
<thead>
<tr>
<th>What actions did you plan since the 2010 AQAP EIA? (List them from the previous EIA)</th>
<th>What improved as a result?</th>
<th>What further actions do you need to take? (add these to the Action plan below)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010 Auto Oil Programme to encourage cleaner vehicles with lower emissions</td>
<td>Limited Improvement as a result because tail pipe testing tended not be realistic of driving conditions in urban areas such as the Brighton and Portslade AQMA</td>
<td>More accurate real world and track testing to represent real world drive cycles</td>
</tr>
<tr>
<td>Clear zone open to pedestrians and restricted for vehicles</td>
<td>Good progress areas such as New Street can help the AQMA and the urban realm where there are high pedestrian counts</td>
<td>Comments on new schemes or changes to the urban realm in the AQMA</td>
</tr>
<tr>
<td>Behavioural change in the way people travel especially in the AQMA. Encourage use of walking and cycling and mass use of public transport.</td>
<td>Excellent progress</td>
<td>Simon Hickmotts team are carrying out proactive door knocking.</td>
</tr>
<tr>
<td>Education Initiatives schools and universities</td>
<td>Excellent progress Lectures or interactive talks to local school, universities, sustainability conference.</td>
<td>More of the same ongoing improvement to webpages</td>
</tr>
<tr>
<td>Protected characteristics groups from the Equality Act 2010</td>
<td>What do you know$^9$? Summary of data about your service-users and/or staff</td>
<td>What do people tell you$^{10}$? Summary of service-user and/or staff feedback</td>
</tr>
<tr>
<td>---</td>
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</tr>
<tr>
<td><strong>Age$^{13}$</strong></td>
<td>More vulnerable are elderly people and those in care living by roadside in the AQ Management Area. Sedentary lifestyles are more vulnerable to pollution than active ones.</td>
<td>OAPs and young people tend to be more concerned about air pollution than people of working age.</td>
</tr>
<tr>
<td><strong>Disability$^{14}$</strong></td>
<td>Taxis are offering increased mobility assistance to those with disability needs. In the city centre where space is very limited this service may be more affective in providing travel for those with a disability than on street disabled parking bays.</td>
<td>More taxi ranks in the city centre woven into new transport schemes and developments but not so close to residential that this may cause complaints for fumes and engine noise.</td>
</tr>
<tr>
<td><strong>Gender reassignment$^{15}$</strong></td>
<td>Potentially vulnerable to inhalation of pollutants if on a prescribed course of medication / rehabilitation.</td>
<td></td>
</tr>
<tr>
<td><strong>Pregnancy and maternity$^{16}$</strong></td>
<td>Local mothers have expressed concern regarding roadside pollution in their homes.</td>
<td>Some have requested relocation to better areas or an improvement to fenestration or ventilation in the residence.</td>
</tr>
<tr>
<td>Protected characteristics groups from the Equality Act 2010</td>
<td>What do you know? Summary of data about your service-users and/or staff</td>
<td>What do people tell you? Summary of service-user and/or staff feedback</td>
</tr>
<tr>
<td>----------------------------------------------------------</td>
<td>---------------------------------------------------------------</td>
<td>---------------------------------------------------------------</td>
</tr>
<tr>
<td><strong>Race</strong>&lt;sup&gt;17&lt;/sup&gt;</td>
<td>The City Centre AQMA is racially mixed and more diverse than both BHCC and England’s average.</td>
<td>The AQMA is more ethnically diverse than both England and Brighton and Hove as a whole.</td>
</tr>
<tr>
<td><strong>Religion or belief</strong>&lt;sup&gt;18&lt;/sup&gt;</td>
<td>Health impacts of airborne pollution in The AQMA affect those with; no religion, Christian, Buddhist, Muslim and others.</td>
<td>Rottingdean Parish Council tends to feel neglected within the wider Unitary Authority. Taxi driver lifestyles are common amongst the Egyptian Muslim community.</td>
</tr>
<tr>
<td><strong>Sex/Gender</strong>&lt;sup&gt;19&lt;/sup&gt;</td>
<td>May influence lifestyle and travel choices.</td>
<td>Woman, mothers and older men tend to be more concerned about airborne pollution.</td>
</tr>
<tr>
<td><strong>Sexual orientation</strong>&lt;sup&gt;20&lt;/sup&gt;</td>
<td>Thought to be most diverse in East Brighton and Kemp Town which is part of Brighton’s Air Quality Management Area.</td>
<td>Concern about air pollution, health and traffic in confined spaces is high amongst residence of Kemp Town and St James Street.</td>
</tr>
<tr>
<td><strong>Marriage and civil partnership</strong>&lt;sup&gt;21&lt;/sup&gt;</td>
<td>Parts of the AQMA have more co-habitation than married couples.</td>
<td>Partners likely to encourage early doctor visits for their spouses.</td>
</tr>
<tr>
<td>Protected characteristics groups from the Equality Act 2010</td>
<td>What do you know? Summary of data about your service-users and/or staff</td>
<td>What do people tell you? Summary of service-user and/or staff feedback</td>
</tr>
<tr>
<td>----------------------------------------------------------</td>
<td>-----------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------</td>
</tr>
<tr>
<td>Community Cohesion&lt;sup&gt;22&lt;/sup&gt;</td>
<td>Main roads, traffic and pollution can cause community severance.</td>
<td>This can influence the number of friends and social interactions.</td>
</tr>
<tr>
<td>Other relevant groups&lt;sup&gt;23&lt;/sup&gt;</td>
<td>Air pollution affects people with varied financial means. Rent and Property prices are very high in the AQMA. People are exposed to pollutants in their homes and cars and to a lesser extent walking and cycling.</td>
<td>Pollution is inhaled by a broad spectrum of the population that includes deprived and affluent individuals.</td>
</tr>
<tr>
<td>Cumulative impact&lt;sup&gt;24&lt;/sup&gt;</td>
<td>Cumulative impacts of air pollutants with smoking, drug use and occupational hazards such as past or present working with asbestos or coal dust. Poor diet and a lack of exercise.</td>
<td>Poor respiratory and circulatory health can be linked with a lack of activity.</td>
</tr>
</tbody>
</table>

**Assessment of overall impacts and any further recommendations<sup>25</sup>**
Analysis using the Community Insight tool shows that compared to the whole of Brighton & Hove (and England) the BHCC AQMA (Air Quality Management Area) has demographic differences with a higher proportion of some protected characteristics. Findings as follows for the main Brighton, Hove and Portslade AQMA:

- The area has one of the highest population densities in England i.e. 100 people per hectare: (even though approximately half of the area comprises road carriageway, concourses and traffic gyratory)
- Population of the area is 9,000 with many residential dwellings adjacent to transport corridors including bus and taxi routes
- The AQMA has 34% overcrowded housing a much higher proportion than for the whole City and England
- Net migration into the AQMA with a sharp increase in population to the area from 2012/13
- Excellent public transport links with high visitor numbers and through traffic
- Higher than average property prices and rents
- High percentage of residents of working age and a lower than average proportion of pensioners and children
- People in the AQMA have achieved above average educational attainment and 72.4% of adults are economically active which is above the City average
- 62% of households in the AQMA do not own a car which is exceptional for England
- Lower than average obesity (possibly linked with higher than average active movement, walking and cycling)
- The highest rates of residential turnover are amongst young adults
- Old people and infants are more vulnerable to airborne pollution and are more likely to settle in the AQMA for a number of years and are therefore more likely to be exposed to pollutants over longer durations
- Better than average diets (excellent access to food choice)
- Higher incidence of smoking and binge drinking compared to BHCC and England averages
- Higher proportion of deaths due to lung cancer, circulatory disease and stroke compared to BHCC and England averages
- Higher likelihood of hospital admission for all causes including; chronic obstructive pulmonary disease and stroke
- Community Insight shows the AQMA is a health deprivation hotspot
- Male life expectancy two years lower than for the whole City and three years less than the average for England
- Lower proportion of deaths expected for respiratory diseases may relate to young adult population profile in the AQMA
- The AQMA is Ethnically diverse with a higher than average percentage Black and Minority Ethnic (BME) Population
Rottingdean High Street AQMA

- Traffic emissions in a confined space with retail and residential
- Relatively few bus and taxi movements
- Very high private car usage
- Ancient Parish Council
- A Heritage Building Conservation area
- Mostly a White British population

Measures to improve air quality are inclusive of a diverse population that lives in a range of affluent and deprived private and public sector housing.

3. List detailed data and/or community feedback which informed your EIA

<table>
<thead>
<tr>
<th>Title (of data, research or engagement)</th>
<th>Date</th>
<th>Gaps in data</th>
<th>Actions to fill these gaps (add these to the Action plan below)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mapping of pollution levels and declaration of the Air Quality Management Area</td>
<td>2010 to 2014</td>
<td>Can depend on location of Traffic Counts</td>
<td>Liaise with Transport Authority to Determine which traffic counts continue</td>
</tr>
<tr>
<td>Arc GIS (Geographical Information System) Address Gazetteer can counts the number of residential dwellings</td>
<td>Early 2015</td>
<td>Archive data prior to 2014 not available</td>
<td>N/A</td>
</tr>
<tr>
<td>Local Community Insight <a href="https://www.communityinsight.org/">https://www.communityinsight.org/</a></td>
<td>2015</td>
<td>Census is March 2011, with updates to 2013</td>
<td>More accurate analysis of the declared AQMA</td>
</tr>
<tr>
<td>Enquires and Complaints about air pollution</td>
<td>2008 to 2015</td>
<td>N/A</td>
<td>Could be more proactive and less reactive</td>
</tr>
</tbody>
</table>
Local Action Teams and community engagement

| 2009 to 2015 | Some community groups are more engaged with the air quality action plan than others | Each area dealt with equally in the air quality action plan having regard to the monitoring evidence |

4. Prioritised Action Plan identified with implications for the Equality Impact Assessment

<table>
<thead>
<tr>
<th>Impact identified and group(s) affected</th>
<th>Action planned</th>
<th>Expected outcome</th>
<th>Measure of success</th>
<th>Timeframe</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complaints from residents about idling engines can affect taxi drivers from a variety of backgrounds</td>
<td>Anti-Idling signs on all taxi ranks in around the AQMA. Avoid fuel consumption and emissions when not moving.</td>
<td>Signs</td>
<td>Signs are visible and recognised in the city</td>
<td>2015</td>
</tr>
<tr>
<td>Complaints from residents about idling engines no engine idling signs to be considered for loading areas applicable for all vehicle types and high density residential areas with mixed population</td>
<td>Extra no engine idling signs to be considered for loading areas applicable for all vehicle types</td>
<td>Signs</td>
<td>Fewer complaints more awareness about not idling in high density residential areas</td>
<td>Ongoing</td>
</tr>
<tr>
<td>Higher Oxide of nitrogen and particulate emission from fireplace solid fuel burning in the cosmopolitan urban area</td>
<td>Encourage domestic solid fuel burning to use smokeless fuels and exempt appliances</td>
<td>Pamphlet and internet information available to those that want to install domestic stoves</td>
<td>Informative sent out to households especially in the Autumn</td>
<td>Ongoing</td>
</tr>
<tr>
<td>Complaints about bonfires used to dispose of waste influence builders and their impact on neighbourhoods</td>
<td>Households encouraged not to use fires to dispose of waste in AQMA where air quality is worse</td>
<td>Household advice when complaints received and linked with pamphlet and webpage information</td>
<td>Avoid complaints about fires in the AQMA</td>
<td>Ongoing</td>
</tr>
</tbody>
</table>

NB: These actions must now be transferred to service or business plans and monitored to ensure they achieve the outcomes identified.
<table>
<thead>
<tr>
<th>Emissions from stop-start road traffic on vulnerable people near roadside</th>
<th>Consider impact of pedestrian crossing points on traffic flow and impact on emissions and air quality have regard to implications for disabled groups</th>
<th>Consultation on development and crossing points be aware of disabled need and modal interchange</th>
<th>Less stop start traffic</th>
<th>Ongoing as the opportunity arises for comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trip generation through the AQMA contributes to nitrogen dioxide reconsider the need for ~4,000 centralised car parking spaces</td>
<td>Review Central parking spaces that attracts traffic along polluted transport corridors Consider disable parking to ensure appropriate needs are met. Taxis drivers trained to assist with disability transport and many minibuses have wheelchair access.</td>
<td>Proposal to review the amount of parking in the centre</td>
<td>Dialogue with Parking</td>
<td>2015/16</td>
</tr>
<tr>
<td>Provision of taxi ranks in the City Centre needs to grow in line with population growth and have regard to residents where there is high population density with protected characteristics</td>
<td>Seek Opportunities for new Taxi Ranks, consider proximity to residential and prevailing ambient air quality when appropriate sites are selected</td>
<td>Ranks at central locations where there is a need but not adjacent to sensitive residential site in order to minimise the risk for complaints for fumes and noise</td>
<td>Brought forward with new developments and the planning process</td>
<td>From 2014 Onwards</td>
</tr>
</tbody>
</table>

**EIA sign-off:** (for the EIA to be final an email must sent from the relevant people agreeing it or this section must be signed)

**Lead Equality Impact Assessment officer:**

Samuel Rouse  
Date: 29/10/2016

**Directorate Management Team rep or Head of Service:**

Annie Sparks / Roy Pickard  
Date: 29/10/2016

**Communities, Equality Team and Third Sector officer:**

Sarah Tighe-Ford  
Date: 16/10/2015
The following principles, drawn from case law, explain what we must do to fulfil our duties under the Equality Act:

- **Knowledge**: everyone working for the council must be aware of our equality duties and apply them appropriately in their work.
- **Timeliness**: the duty applies at the time of considering policy options and/or before a final decision is taken – not afterwards.
- **Real Consideration**: the duty must be an integral and rigorous part of your decision-making and influence the process.
- **Sufficient Information**: you must assess what information you have and what is needed to give proper consideration.
- **No delegation**: the council is responsible for ensuring that any contracted services which provide services on our behalf can comply with the duty, are required in contracts to comply with it, and do comply in practice. It is a duty that cannot be delegated.
- **Review**: the equality duty is a continuing duty. It applies when a policy is developed/agreed, and when it is implemented/reviewed.
- **Proper Record Keeping**: to show that we have fulfilled our duties we must keep records of the process and the impacts identified.

NB: Filling out this EIA in itself does not meet the requirements of the equality duty. All the requirements above must be fulfilled or the EIA (and any decision based on it) may be open to challenge. Properly used, an EIA can be a tool to help us comply with our equality duty and as a record that to demonstrate that we have done so.

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1 Our duties in the Equality Act 2010

As a council, we have a legal duty (under the Equality Act 2010) to show that we have identified and considered the impact and potential impact of our activities on all people with ‘protected characteristics’ (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, sexual orientation, and marriage and civil partnership).

This applies to policies, services (including commissioned services), and our employees. The level of detail of this consideration will depend on what you are assessing, who it might affect, those groups’ vulnerability, and how serious any potential impacts might be. We use this EIA template to complete this process and evidence our consideration.

The following are the duties in the Act. You must give ‘due regard’ (pay conscious attention) to the need to:

- **avoid, reduce or minimise negative impact** (if you identify unlawful discrimination, including victimisation and harassment, you must stop the action and take advice immediately).
- **promote equality of opportunity**. This means the need to:
  - Remove or minimise disadvantages suffered by equality groups
  - Take steps to meet the needs of equality groups
  - Encourage equality groups to participate in public life or any other activity where participation is disproportionately low
  - Consider if there is a need to treat disabled people differently, including more favourable treatment where necessary
- **foster good relations between people who share a protected characteristic and those who do not**. This means:
  - Tackle prejudice
  - Promote understanding

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3 EIAs are always proportionate to:
• The size of the service or scope of the policy/strategy
• The resources involved
• The numbers of people affected
• The size of the likely impact
• The vulnerability of the people affected

The greater the potential adverse impact of the proposed policy on a protected group (e.g. disabled people), the more vulnerable the group in the context being considered, the more thorough and demanding the process required by the Act will be.

4 When to complete an EIA:
• When planning or developing a new service, policy or strategy
• When reviewing an existing service, policy or strategy
• When ending or substantially changing a service, policy or strategy
• When there is an important change in the service, policy or strategy, or in the city (eg: a change in population), or at a national level (eg: a change of legislation)

Assessment of equality impact can be evidenced as part of the process of reviewing or needs assessment or strategy development or consultation or planning. It does not have to be on this template, but must be documented. Wherever possible, build the EIA into your usual planning/review processes.

Do you need to complete an EIA? Consider:
• Is the policy, decision or service likely to be relevant to any people because of their protected characteristics?
• How many people is it likely to affect?
• How significant are its impacts?
• Does it relate to an area where there are known inequalities?
• How vulnerable are the people (potentially) affected?

If there are potential impacts on people but you decide not to complete an EIA it is usually sensible to document why.

5 Title of EIA: This should clearly explain what service / policy / strategy / change you are assessing

6 ID no: The unique reference for this EIA. If in doubt contact Clair ext: 1343

7 Team/Department: Main team responsible for the policy, practice, service or function being assessed

8 Focus of EIA: A member of the public should have a good understanding of the policy or service and any proposals after reading this section. Please use plain English and write any acronyms in full first time - eg: ‘Equality Impact Assessment (EIA)’
This section should explain what you are assessing:

- What are the main aims or purpose of the policy, practice, service or function?
- Who implements, carries out or delivers the policy, practice, service or function? Please state where this is more than one person/team/body and where other organisations deliver under procurement or partnership arrangements.
- How does it fit with other services?
- Who is affected by the policy, practice, service or function, or by how it is delivered? Who are the external and internal service-users, groups, or communities?
- What outcomes do you want to achieve, why and for whom? Eg: what do you want to provide, what changes or improvements, and what should the benefits be?
- What do existing or previous inspections of the policy, practice, service or function tell you?
- What is the reason for the proposal or change (financial, service, legal etc)? The Act requires us to make these clear.

Data: Make sure you have enough data to inform your EIA.

- What data relevant to the impact on protected groups of the policy/decision/service is available?9
- What further evidence is needed and how can you get it? (Eg: further research or engagement with the affected groups).
- What do you already know about needs, access and outcomes? Focus on each of the protected characteristics in turn. Eg: who uses the service? Who doesn’t and why? Are there differences in outcomes? Why?
- Have there been any important demographic changes or trends locally? What might they mean for the service or function?
- Does data/monitoring show that any policies or practices create particular problems or difficulties for any groups?
- Do any equality objectives already exist? What is current performance like against them?
- Is the service having a positive or negative effect on particular people in the community, or particular groups or communities?
- Use local sources of data (eg: JSNA: http://www.bhconnected.org.uk/content/needs-assessments and Community Insight: http://brighton-hove.communityinsight.org/#) and national ones where they are relevant.

10 Engagement: You must engage appropriately with those likely to be affected to fulfil the equality duty.

- What do people tell you about the services?
- Are there patterns or differences in what people from different groups tell you?
- What information or data will you need from communities?
- How should people be consulted? Consider:
  (a) consult when proposals are still at a formative stage;
  (b) explain what is proposed and why, to allow intelligent consideration and response;
  (c) allow enough time for consultation;
  (d) make sure what people tell you is properly considered in the final decision.
- Try to consult in ways that ensure all perspectives can be considered.
- Identify any gaps in who has been consulted and identify ways to address this.
Your EIA must get to grips fully and properly with actual and potential impacts.

- The equality duty does not stop decisions or changes, but means we must conscientiously and deliberately confront the anticipated impacts on people.
- Be realistic: don’t exaggerate speculative risks and negative impacts.
- Be detailed and specific so decision-makers have a concrete sense of potential effects. Instead of “the policy is likely to disadvantage older women”, say how many or what percentage are likely to be affected, how, and to what extent.
- Questions to ask when assessing impacts depend on the context. Examples:
  - Are one or more protected groups affected differently and/or disadvantaged? How, and to what extent?
  - Is there evidence of higher/lower uptake among different groups? Which, and to what extent?
  - If there are likely to be different impacts on different groups, is that consistent with the overall objective?
  - If there is negative differential impact, how can you minimise that while taking into account your overall aims?
  - Do the effects amount to unlawful discrimination? If so the plan must be modified.
  - Does the proposal advance equality of opportunity and/or foster good relations? If not, could it?

Consider all three aims of the Act: removing barriers, and also identifying positive actions we can take.

- Where you have identified impacts you must state what actions will be taken to remove, reduce or avoid any negative impacts and maximise any positive impacts or advance equality of opportunity.
- Be specific and detailed and explain how far these actions are expected to improve the negative impacts.
- If mitigating measures are contemplated, explain clearly what the measures are, and the extent to which they can be expected to reduce / remove the adverse effects identified.
- An EIA which has attempted to airbrush the facts is an EIA that is vulnerable to challenge.

Age: People of all ages

Disability: A person is disabled if they have a physical or mental impairment which has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities. The definition includes: sensory impairments, impairments with fluctuating or recurring effects, progressive, organ specific, developmental, learning difficulties, mental health conditions and mental illnesses, produced by injury to the body or brain. Persons with cancer, multiple sclerosis or HIV infection are all now deemed to be disabled persons from the point of diagnosis.

Gender Reassignment: In the Act a transgender person is someone who proposes to, starts or has completed a process to change his or her gender. A person does not need to be under medical supervision to be protected.

Pregnancy and Maternity: Protection is during pregnancy and any statutory maternity leave to which the woman is entitled.

Race/Ethnicity: This includes ethnic or national origins, colour or nationality, and includes refugees and migrants, and Gypsies and Travellers.
18 **Religion and Belief:** Religion includes any religion with a clear structure and belief system. Belief means any religious or philosophical belief. The Act also covers lack of religion or belief.

19 **Sex/Gender:** Both men and women are covered under the Act.

20 **Sexual Orientation:** The Act protects bisexual, gay, heterosexual and lesbian people.

21 **Marriage and Civil Partnership:** Only in relation to due regard to the need to eliminate discrimination.

22 **Community Cohesion:** What must happen in all communities to enable different groups of people to get on well together.

23 **Other relevant groups:** eg: Carers, people experiencing domestic and/or sexual violence, substance misusers, homeless people, looked after children, ex-armed forces personnel, people on the Autistic spectrum etc

24 **Cumulative Impact:** This is an impact that appears when you consider services or activities together. A change or activity in one area may create an impact somewhere else.

25 **Assessment of overall impacts and any further recommendations**
   - Make a frank and realistic assessment of the overall extent to which the negative impacts can be reduced or avoided by the mitigating measures. Explain what positive impacts will result from the actions and how you can make the most of these.
   - Countervailing considerations: These may include the reasons behind the formulation of the policy, the benefits it is expected to deliver, budget reductions, the need to avert a graver crisis by introducing a policy now and not later, and so on. The weight of these factors in favour of implementing the policy must then be measured against the weight of any evidence as to the potential negative equality impacts of the policy.
   - Are there any further recommendations? Is further engagement needed? Is more research or monitoring needed? Does there need to be a change in the proposal itself?

26 **Action Planning:** The Equality Duty is an ongoing duty: policies must be kept under review, continuing to give ‘due regard’ to the duty. If an assessment of a broad proposal leads to more specific proposals, then further equality assessment and consultation are needed.