

Enfield Equality Impact Assessment (EqIA)

Introduction

The purpose of an Equality Impact Assessment (EqIA) is to help Enfield Council make sure it does not discriminate against service users, residents and staff, and that we promote equality where possible. Completing the assessment is a way to make sure everyone involved in a decision or activity thinks carefully about the likely impact of their work and that we take appropriate action in response to this analysis.

The EqIA provides a way to systematically assess and record the likely equality impact of an activity, policy, strategy, budget change or any other decision.

The assessment helps us to focus on the impact on people who share one of the different nine protected characteristics as defined by the Equality Act 2010 as well as on people who are disadvantaged due to socio-economic factors. The assessment involves anticipating the consequences of the activity or decision on different groups of people and making sure that:

- unlawful discrimination is eliminated
- opportunities for advancing equal opportunities are maximised
- opportunities for fostering good relations are maximised.

The EqIA is carried out by completing this form. To complete it you will need to:

- use local or national research which relates to how the activity/ policy/ strategy/ budget change or decision being made may impact on different people in different ways based on their protected characteristic or socio-economic status;
- where possible, analyse any equality data we have on the people in Enfield who will be affected eg equality data on service users and/or equality data on the Enfield population;
- refer to the engagement and/ or consultation you have carried out with stakeholders, including the community and/or voluntary and community sector groups and consider what this engagement showed us about the likely impact of the activity/ policy/ strategy/ budget change or decision on different groups.

The results of the EqIA should be used to inform the proposal/ recommended decision and changes should be made to the proposal/ recommended decision as a result of the assessment where required. Any ongoing/ future mitigating actions required should be set out in the action plan at the end of the assessment.

The completed EqIA should be included as an appendix to relevant EMT/ Delegated Authority/ Cabinet/ Council reports regarding the service activity/ policy/ strategy/ budget change/ decision. Decision-makers should be confident that a robust EqIA has taken place, that any necessary mitigating action has been taken and that there are robust arrangements in place to ensure any necessary ongoing actions are delivered.

SECTION 1 – Equality Analysis Details

Title of service activity / policy/ strategy/ budget change/ decision that you are assessing	Clean Air Route
Lead officer(s) name(s) and contact details	Petros Ximerakis
Team/ Department	Healthy Streets / Place
Executive Director	Sarah Cary
Cabinet Member	Cllr Rick Jewell
Date of EqIA completion	16th June 2022

SECTION 2 – Summary of Proposal

Please give a brief summary of the proposed service change / policy/ strategy/ budget change/project plan/ key decision

Please summarise briefly:

What is the proposed decision or change?

What are the reasons for the decision or change?

What outcomes are you hoping to achieve from this change?

Who will be impacted by the project or change - staff, service users, or the wider community?

Enfield Council are developing a series of interventions on and around Grove Street N18 and St. John & St. James' Church of England Primary School as part of a wider regeneration project around Fore Street, Angel Edmonton. The project is funded by the Greater London Authority (GLA) through the Good Growth Fund (GGF).

Angel Edmonton town centre sits at the heart of a long-term programme of major regeneration. It is located adjacent to the Joyce & Snells estate regeneration programme, which is proposed to deliver 2,130 new homes and is a short walk to Meridian Water, where the Council will deliver 10,000 new homes over the next 25 years.

The Clean Air Route forms part of a suite of projects, which is funded through the Good Growth Fund (GGF), to improve spaces along and around Fore Street, Angel Edmonton.

GGF is Mayor of London's £70 million regeneration programme to support growth and community development in London. Funded by the London Economic Action Partnership (LEAP) and managed and delivered by the Mayor of London's Regeneration and Economic Development team, the programme is underpinned by three strategic and interrelated delivery themes:

- Empowering London's people;
- Strengthening London's places; and
- Growing London's prosperity.

The Clean Air Route project is also delivered in the context of local, regional and national policies and strategies that seek to respond to the climate emergency, reduce traffic congestion and increase levels of physical activity, and post-pandemic, to enable a green recovery. Nationally the government has committed to achieving net zero carbon emissions by 2050 and is supporting local authorities to encourage sustainable transport through its Active Travel Fund and the 2020 national walking and cycling strategy, Gear Change.

Across London, the 2018 Mayor's Transport Strategy (MTS) sets the overall direction and citywide objectives for transport. The MTS set a target for 80% of all trips to be made on foot, by bicycle or by public transport by 2041.

The 2019 Enfield Transport Strategy sets out how the council will deliver the MTS locally. Key objectives of the Enfield Transport Strategy include firstly the delivery of measures that encourage more walking and cycling, and secondly the promotion of safe, active and sustainable journeys to school. The council's emerging Health and Wellbeing Strategy aims to reduce health inequalities and prioritises enabling active lifestyles. Creating an environment in which people feel comfortable walking and cycling for everyday journeys will help more people to be physically active.

The Clean Air Route project forms part of the Enfield Healthy Streets programme, which is delivering projects to enable walking and cycling across Enfield. Major components of the programme include the creation of high-quality routes for cycling, connecting neighbourhoods that feel safe for walking and cycling along with school streets and a range of community events and activities.

Currently a number of issues in the area where the project is located have been identified as follows:

- Air and noise pollution caused by motor traffic.
- Road danger outside the school gates.
- Lack of infrastructure suitable for all active travel modes.
- Limited active travel connectivity at the southeast of the Borough.
- Less attractive public space and minimal green environment.

Building on the issues and problems described above, the following objectives have been set for this project:

- Improve air quality and road safety outside the school gates.
- Contribute towards a long-term increase in the levels of active travel, both along the route and as part of a wider borough network.
- Make public space seem more welcoming and provide opportunities for social interaction and children's play.

The proposed interventions feature:

- A School Street on Grove Street outside St. John & St. James' Primary School,
- An active travel route between the junction of Grove Street with Fore Street and the railway overbridge at Joyce Avenue, and
- Public realm improvements on Grove Street between the proposed garage yard workspaces, St. John and St. James' Primary School, and Mount of Praise Church.

The authority does not currently have data specifically for people passing through the project area and any protected characteristics they may have. Therefore, the ward profile for the Upper Edmonton Ward has been used as the basis for the demographic data considered in the EqIA.

Information has been gathered regarding groups with protected characteristics in Enfield. London Travel Demand Survey (LTDS) and Census 2011 data have been the two primary data sources, though other data sources have been used, and are referenced throughout. For each protected characteristic, data has been collected and analysed, with comparisons made at borough, regional and national level where relevant.

It should be noted that due to the ward boundary changes which came into effect in May 2022, some of data references from the 2021 Upper Edmonton ward profile may not be entirely accurate or representative. However, this is the latest available data and provides useful insights for each protected characteristic.

SECTION 3 – Equality Analysis

This section asks you to consider the potential differential impact of the proposed decision or change on different protected characteristics, and what mitigating actions should be taken to avoid or counteract any negative impact.

According to the Equality Act 2010, protected characteristics are aspects of a person's identity that make them who they are. The law defines 9 protected characteristics:

1. Age
2. Disability
3. Gender reassignment.
4. Marriage and civil partnership.
5. Pregnancy and maternity.
6. Race
7. Religion or belief.
8. Sex
9. Sexual orientation.

At Enfield Council, we also consider socio-economic status as an additional characteristic.

“Differential impact” means that people of a particular protected characteristic (eg people of a particular age, people with a disability, people of a particular gender, or people from a particular race and religion) will be significantly more affected by the change than other groups. Please consider both potential positive and negative impacts, and, where possible, provide evidence to explain why this group might be particularly affected. If there is no differential impact for that group, briefly explain why this is not applicable.

Please consider how the proposed change will affect staff, service users or members of the wider community who share one of the following protected characteristics.

Age

This can refer to people of a specific age e.g. 18-year olds, or age range e.g. 0-18 year olds.

Will the proposed change to service/policy/budget have a **differential impact [positive or negative]** on people of a specific age or age group (e.g. older or younger people)?

Please provide evidence to explain why this group may be particularly affected.

Evidence base

The mean age of Enfield's wards tends to vary by location within the borough. The southern and eastern wards have some of the lowest mean ages in Enfield.

Figure 1 represents the spatial distribution of the mean age across Enfield's wards. The trend outlined above is evident in the figure below. Upper Edmonton, located in the southeast of Enfield, have some of the youngest mean ages in the borough.

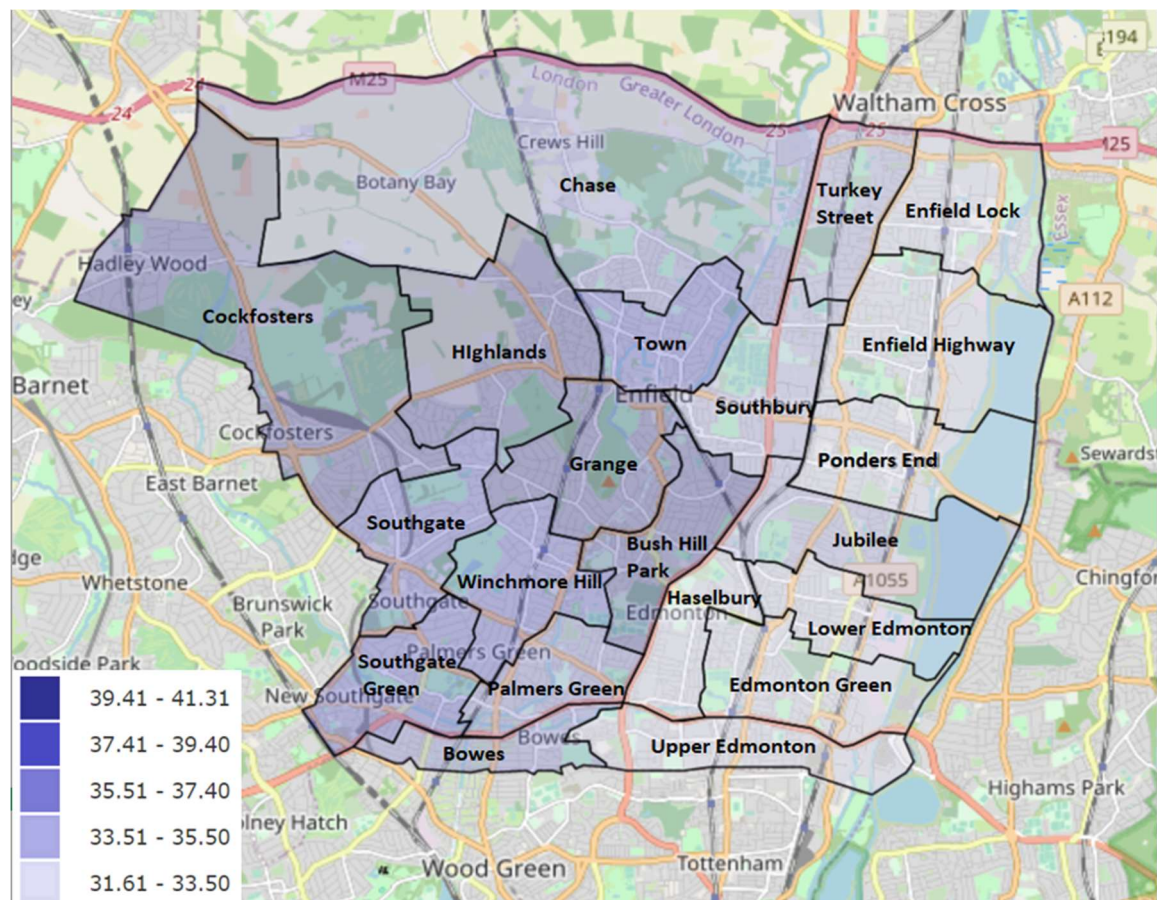


Figure 1: Mean age by ward in Enfield

Source: Census 2011

Table 1 presents the age distribution of the ward which covers the project area. This shows the ward generally follows the trend outlined above across Enfield with notable differences in the percentages of residents in the 5-14 age bracket higher than the Borough average, and the percentages of residents in the 65-74 and 75+ age bracket lower than the Borough average.

Table 1: Age distribution (2020) for study area and Borough average

Age distribution-2020	Upper Edmonton ward (%)	Borough of Enfield (%)
0-4	7.4	7.0
5-14	16.8	14.5
15-24	13.5	11.4
25-34	15.4	14.5
35-44	15.3	14.6
45-54	13.2	13.4
55-64	9.7	11.1
65-74	4.8	7.0
75+	3.9	6.4

Source: Ward Profile: Upper Edmonton 2022

Figure 2 presents London Travel Demand Survey (LTDS) data on how people travel around Enfield within each age category.

In general, younger people in Enfield walk and cycle more, and drive less than older people. The highest percentages of walking and cycling can be seen in those aged under 16, with 37 per cent of all trips made on foot or by bike. Those aged 65 and over have the lowest levels of walking and cycling, with 27 per cent of all trips, but the highest percentage of trips driven (or as a passenger in a car or van) at 52 per cent.

Public transport use is disproportionately higher in 16 to 19-year-old group, making up 37 per cent of all journeys. This is 15 per cent higher than the nearest age group (those aged under 16). Furthermore, as per the latest data from 2016, the average age to start driving in the UK was 26, and this is expected to have increased further over the previous five years¹.

¹ <https://www.insurancefactory.co.uk/news/August-2016/Average-age-to-start-driving-increases-to-26>

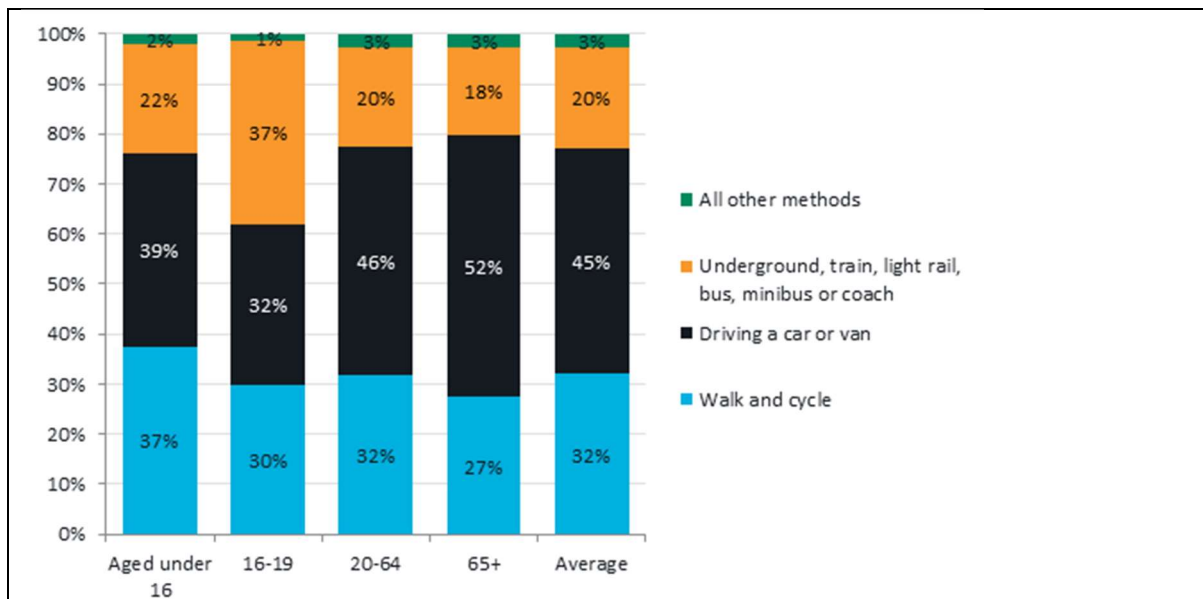


Figure 2: Mode share by Age in Enfield

Source: LTDS (2016/17, 2017/18 and 2018/19)

The proportion of Killed or Seriously Injured (KSIs) and Slightly Injured casualties per age category is shown in Figure 3 below. KSIs are higher than average for those age 60 and over (19 per cent) and those aged Under 16 (14 per cent). As such, this indicates that these age groups are disproportionately more likely to suffer more severe consequences if they are a casualty in a collision.

Across the UK, 10-14 age group road accidents make up over 50% of all external causes of death. 15-19 years olds experience almost double the risk of death from road traffic accidents (82.5 deaths per million population) in comparison to the general population (42.2 deaths per million population). For males in this age group the risk is higher still at 127.3 deaths per million population².

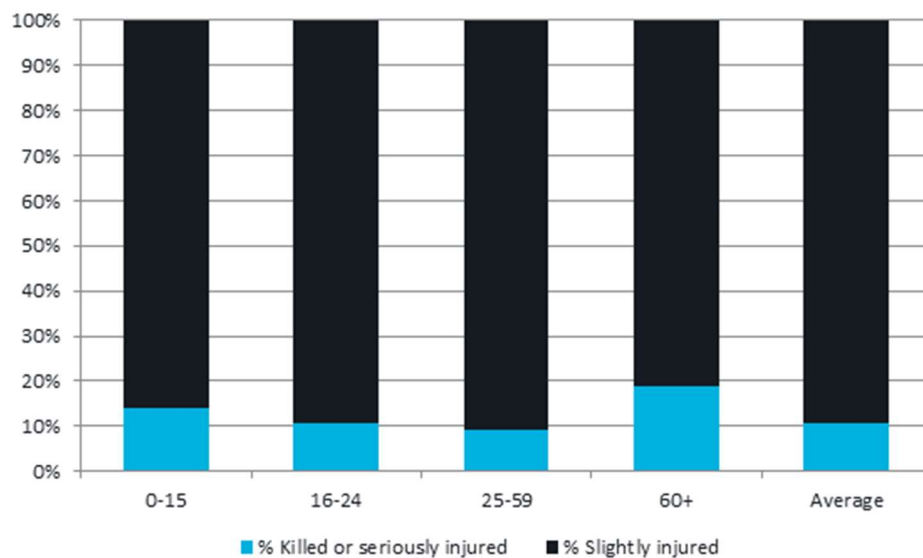


Figure 3: Percentage killed or seriously injured by Age in Enfield

Source: DfT Road traffic statistics (2019)

Table 2 shows the 3-year (2017/18 to 2019/20) average percentage of Reception and Year 6 children in the ward who are overweight or obese, compared with the borough and national averages. This shows a significantly higher level of childhood obesity in the Upper Edmonton ward both in comparison with the Borough average and the national average.

Table 2: Childhood obesity

Children age group	Area	Obese (%)	With excess weight (%)
Reception year	Upper Edmonton	14.4	27.1
	Enfield	11.8	24.3
	England	9.7	22.6
Year 6	Upper Edmonton	28.8	45.5
	Enfield	26.4	42.0
	England	20.4	34.6

Source: Ward Profile: Upper Edmonton 2021

Differential Impact Assessment

People of young and old age are more vulnerable to poor air quality³, and the Upper Edmonton ward has younger mean ages when compared to other wards within the borough. The Clean Air Route aims to discourage use of motor vehicles and enable mode shift, ultimately reducing emissions from private vehicle use. This will disproportionately benefit these age groups through improved air quality, particularly as the project is centred around St John and St James' Church of England Primary School.

The proposed closure of a section of Grove Street to motor vehicles will reduce traffic within the immediate surrounding area of the project, especially as currently Grove Street is reportedly used as a cut-through route from motor traffic. This will result in safer streets with an improved experience for pedestrians – such as reduced noise and air pollution and reduced fear of being involved in a collision. These improvements to the walking environment are likely to disproportionately benefit those who are aged 16 and under who currently make 37 per cent of journeys by walking (or to a lesser degree, cycling). Furthermore, those aged 16-19 who make 37 per cent of trips by public transport are also likely to disproportionately benefit, as many public transport journeys start or end on foot or cycle.

A hands-up survey was carried out at St John and St James' Church of England Primary School in May 2021. This examined the actual and the preferred method of travel by staff (9 participants) and pupils (292 participants) for active travel, public transport and car. The findings revealed that 63% of all respondents currently use active travel modes and 12% use public transport to get to the school. Thus, the above mentioned benefit to those under the age of 16 is likely to be even higher for children under the age of 11 attending the school.

Younger people in Enfield are less likely to drive than older people in the borough and are more likely to travel via active modes or multi modal travel where for example part of a journey is by train and another part is cycled. Active travel improvements and a decrease in volumes of traffic will benefit those who already use active travel modes, and therefore may disproportionately benefit younger people.

However, the improvements are also likely to benefit those who do not currently use active travel modes by providing safer and more attractive conditions to do so. This may allow for a selection of residents which is more evenly dispersed across the age groups to partake in active travel modes – and reaping the health benefits associated with a more active lifestyle. Therefore, while the changes may initially disproportionately benefit younger people and children who exhibit a high level of obesity, over time there may be longer term benefits across the age groups that rectify this initial imbalance.

Older people are more likely to suffer from slight mobility or sight impairments due to aging, which do not fall under the disability protected characteristic group. This can include slower movement and reaction time, and some may use mobility aids for walking. A reduction in motor vehicle traffic is likely to be particularly beneficial for those who require extra time to cross the street due to physical or visual impairments. The proposed closure of a section of Grove Street and the consequent removal of motor traffic will also be beneficial for those with mobility issues, as it will provide a safe crossing point and allow them to cross at their own speeds.

³ https://www.london.gov.uk/sites/default/files/air_quality_for_public_health_professionals_-_city_of_london.pdf

The measures will restrict motor traffic at a section of Grove Street and decrease the volume of motor vehicles in the immediate surrounding area, therefore reducing the threat caused by motor traffic to pedestrians and cyclists. While these improvements are likely to benefit all ages groups, as those aged under 16 and over 60 are disproportionally killed or seriously injured by motor traffic, they are likely to benefit the most from the changes. As the closure is directly outside St John and St James' Church of England Primary School, children under the age of 11 will also disproportionately benefit.

One of the project objectives is to contribute towards a long-term increase in the levels of active travel. This will in turn reduce the volumes of traffic over time, therefore reducing the threat caused by motor traffic. While these improvements are likely to benefit all ages groups, as those aged under 16 and over 60 are disproportionally killed or seriously injured by motor traffic, they are likely to benefit the most from the changes.

Increases in cycling trips between Grove Street and Joyce Avenue may cause elderly pedestrians to feel confused or worried about collisions on shared use paths.

While these measures are likely to create safer, healthier streets for residents of Enfield and visitors to the area, they may lead to slightly longer journey times for people who rely on private cars, taxis or Dial a Ride. Private cars, taxis or Dial a Ride are particularly popular for people aged 65 and over. Travelling can also be uncomfortable for some people, particularly for the elderly, therefore extended journey times could exacerbate this issue. However, any potential increase in journey times will be minimal as Lanhedge Lane provides an immediately adjacent alternative to Grove Street for access to the area and the current traffic volume on Grove Street is low, especially in comparison with that of Fore Street.

Mitigating actions to be taken

Consider improvements to the section of the route between Grove Street and Joyce Avenue to mitigate any potential conflicts or pinch points.

Monitor traffic volumes and bus journey times and consider mitigation measures if there is an impact that is caused directly by the scheme.

Disability

A person has a disability if they have a physical or mental impairment which has a substantial and long-term adverse effect on the person's ability to carry out normal day-day activities.

This could include:

Physical impairment, hearing impairment, visual impairment, learning difficulties, long-standing illness or health condition, mental illness, substance abuse or other impairments.

Will the proposed change to service/policy/budget have a **differential impact [positive or negative]** on people with disabilities?

Please provide evidence to explain why this group may be particularly affected.

Evidence base

Census 2011 data shows that Enfield has a slightly higher per cent of residents with a long-term health problem/ disability compared to that across London. The Upper Edmonton ward percentages largely reflect those in Enfield, with fewer persons having a long-term health problem/disability 'limiting a little' than the Enfield average. This data is presented in Table 3.

Table 3: Persons with a long-term health problem/ disability in Enfield and Upper Edmonton ward

Persons with long-term health problem/ disability (2011)	Upper Edmonton ward (%)	Borough of Enfield (%)	London (%)
Limiting a lot	7.4	7.3	6.7
Limiting a little	7.7	8.1	7.4

Source: Ward Profile: Upper Edmonton 2021 and Census 2011

Disability types stated by those who live in Enfield and have a disability affecting daily travel (including old age) is shown in Figure 4 below. Mobility impairment represents the highest proportion (77 per cent) followed by impairment due to mental health (12 per cent). It should be noted that this data is based on a small sample, therefore results should be taken as a general indication only. It is important to note that various physical and mental disabilities can lead to travel limitations.

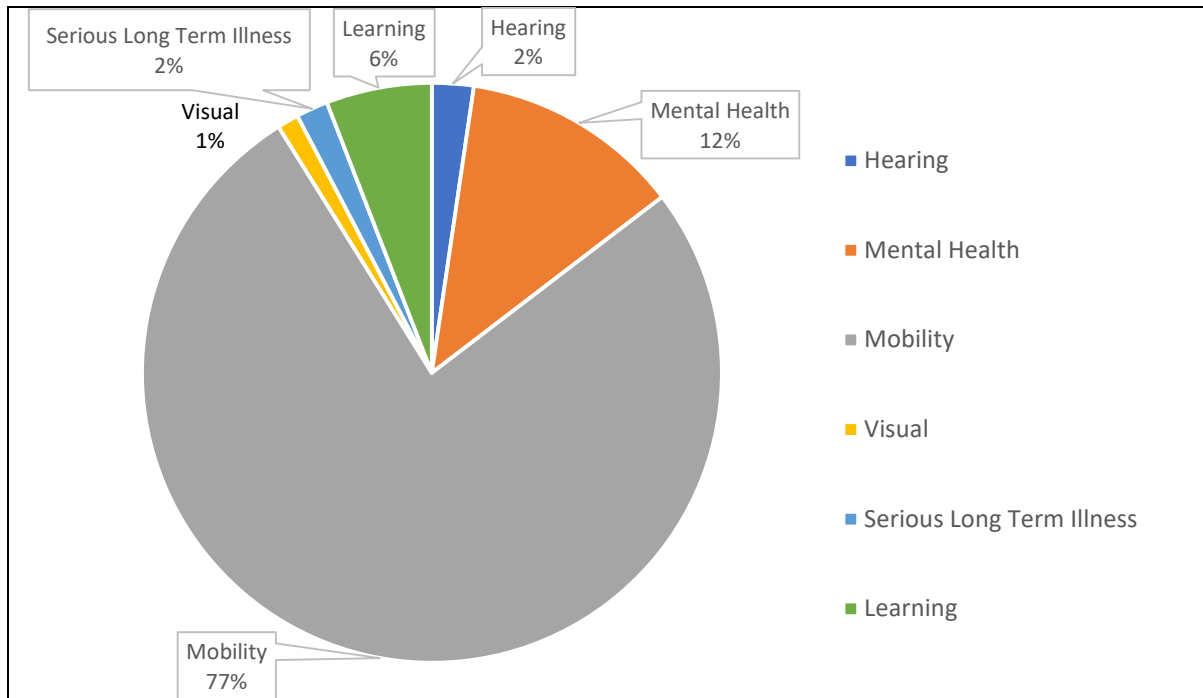


Figure 4: Disability types stated by those with a disability affecting travel

Source: LTDS (2016/17, 2017/18 and 2018/19)

Focusing solely on cyclists who have a disability, the Wheels for Wellbeing annual survey⁴ shows that approximately 59 per cent of disabled cyclists use their bike as a mobility aid, and approximately 64 per cent found cycling easier than walking. Survey results also show that 24 per cent of disabled cyclists use their bike for work or to commute to work and many found that cycling improves their mental and physical health. Inaccessible cycle infrastructure was found to be the biggest barrier to cycling.

Mode split for people with a physical or mental disability is shown in Figure 5. When compared to the LTDS mode split of trips made by all people, car use for those with disabilities is lower (42.7 per cent compared to 45 per cent), bus use is greater (17.5 per cent compared to 13.7 per cent) and walking is marginally higher (31.1 per cent compared to 30.8 per cent).

⁴ [Wheels for Wellbeing Annual Survey 2021](#)

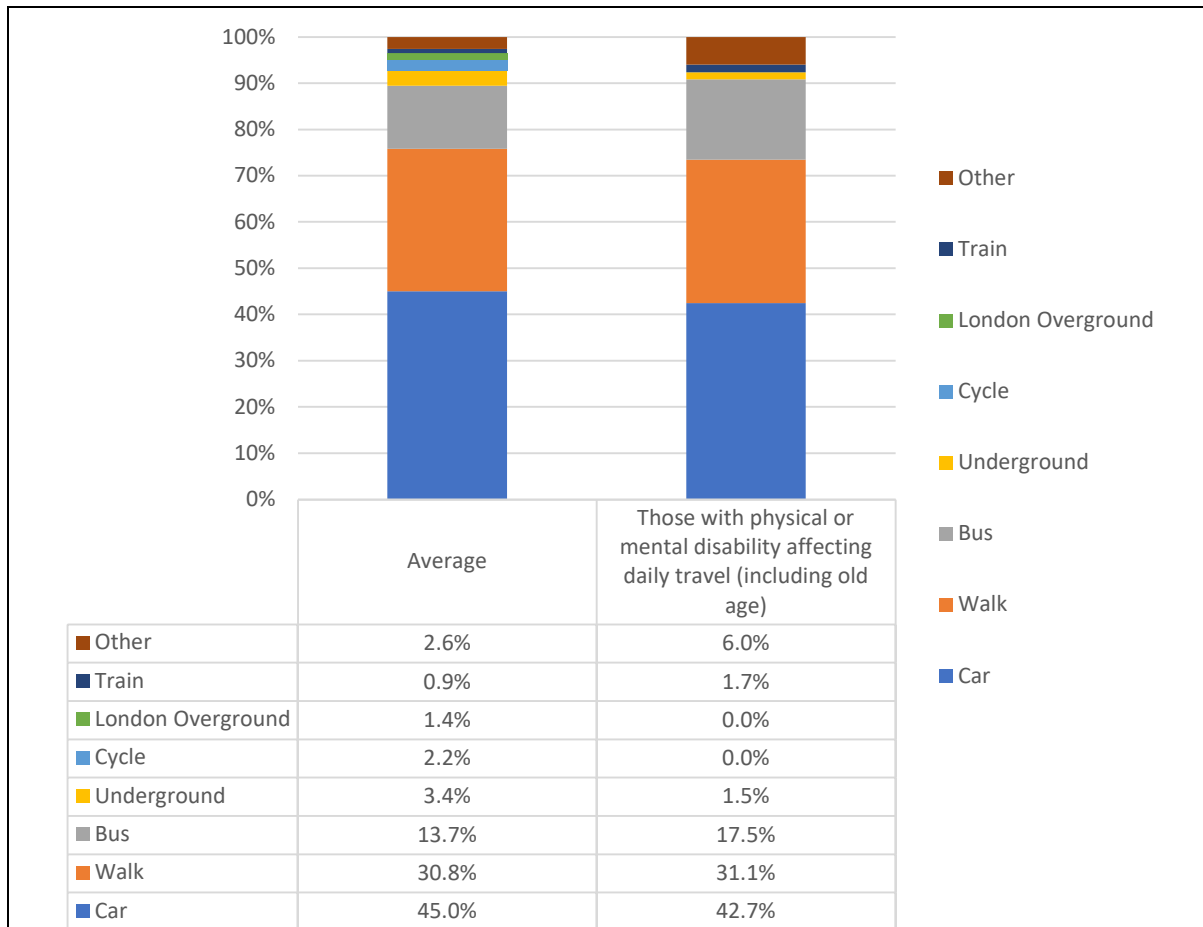


Figure 5: Mode split by those with a physical or mental disability affecting daily travel

Source: LTDS (2016/17, 2017/18 and 2018/19)

Differential impact assessment

Improved cycling conditions will benefit disabled cyclists and could potentially encourage people with disabilities to try cycling if their disability allows. Some disabled people rely upon cycling as their primary means of mobility.

The project aims to decrease motor vehicle traffic, therefore creating a safer environment, particularly for disabled people who are more likely to be pedestrians. Quieter roads will also benefit those whose physical impairments necessitate more time to cross the road, or whose mobility aids may require use of the road, such as mobility scooters.

Reduction to through-traffic is likely to reduce conflict between different road users on the whole. This will create a safer environment, particularly those with physical disabilities. Quieter streets also mean that those traveling with wheelchairs or mobility scooters are able to use the roadway if they choose to circumvent blockages across the pavement (e.g., if the pavement is too narrow to navigate due to bins).

The proposed three new crossings with dropped kerbs will also be beneficial for those with mobility issues, as they will provide increased accessibility to the footpaths. The proposed bollards are spaced at least 1.0m apart to ensure accessibility for adapted cycles, cargo bikes and trailers. The restriction to motor traffic at a section of Grove Street will increase the space available for walking, which was previously narrow. These will benefit disabled people, who are more likely to be pedestrians, and particularly wheelchair and mobility scooter users who require additional space.

Visually impaired people will be pedestrians in the affected area, users of public transport or passengers in other vehicles. Visually impaired people will have varying degrees of ability to see the changes in the environment around them. This will include changes to traffic flows. Although likely to benefit from decreased traffic flows, the project will include an active travel route that will be shared between cyclists, pedestrians, and users of other active travel modes, therefore initially the change could be confusing. However, the shared use paths are being proposed to have a minimum width of 4.0m (above the recommended minimum width of 3.0m) in order to limit any conflicts between pedestrians and people who cycle, and aid the movement of pedestrians with visual impairments. Moreover, textured ground surface indicators, in the form of tactile paving, are proposed at crossing points and at points where shared spaces begin and end to assist pedestrians who are visually impaired by alerting them of the changes in the surrounding environment.

The Clean Air Route may negatively impact on journey times for those with mobility impairments who may find it more difficult to walk or cycle, and therefore prefer the use of door-to-door transport services such as private cars, taxis or Dial a Ride. However, the likely traffic reassignment volume is anticipated to be low.

Children and young people with Special Educational Needs and Disabilities (SEND) that receive travel assistance to get to their school or setting by specialist transport/ public transport could experience increased travel times when travelling through or around the scheme area. The Council's Travel Assistance Policy⁵ aims to encourage "*sustainable modes of transport for all children and young people, whether travel assistance is provided or not*", including "*encouraging walking, cycling [...]*" and "*providing an environment which is as safe as possible for all children and young people on their journey to and from school*". The objectives of this project are to improve air quality and road safety outside the school gates and to contribute towards a long-term increase in the levels of active travel, both along the route and as part of a wider borough network. Therefore, the project supports the aims of the Travel Assistance Policy.

Let's Talk is the software platform engagement in Enfield is conducted on. It meets and exceeds WCAG 2.1, the current global web accessibility standard⁶. Text, graphics and figures should be able to be read by screen readers, and all content

⁵ https://www.enfield.gov.uk/data/assets/pdf_file/0014/5612/getting-to-school-policy-local-offer.pdf

⁶ <https://www.w3.org/TR/WCAG/>

should be made available in alternative formats for those with visual impairments. Braille can be made available on request (though it is acknowledged that only a small proportion of visually impaired people use braille) or the opportunity offered to speak to someone over the phone or in person about the scheme.

Mitigating actions to be taken

Ensure that the design of the cycle facilities is suitable for use by those on adapted or non-standard cycles which are often used as mobility aids for disabled people. Both LTN 1/20 and the London Cycle Design Standards (LCDS) contain guidance on accessible designs.

Consider improvements to the section of the route between Grove Street and Joyce Avenue to mitigate any potential conflicts or pinch points.

Monitor traffic volumes and bus journey times and consider mitigation measures if there is an impact that is caused directly by the scheme.

Gender Reassignment

This refers to people who are proposing to undergo, are undergoing, or have undergone a process (or part of a process) to reassign their sex by changing physiological or other attributes of sex.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on transgender people?

Please provide evidence to explain why this group may be particularly affected.

It is considered that this scheme is unlikely to have a disproportionate impact on grounds of Gender Reassignment.

Mitigating actions to be taken

N/A

Marriage and Civil Partnership

Marriage and civil partnerships are different ways of legally recognising relationships. The formation of a civil partnership must remain secular, where-as a marriage can be conducted through either religious or civil ceremonies. In the U.K both marriages and civil partnerships can be same sex or mixed sex. Civil partners must be treated the same as married couples on a wide range of legal matters.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on people in a marriage or civil partnership?

Please provide evidence to explain why this group may be particularly affected

It is considered that this scheme is unlikely to have a disproportionate impact on grounds of Marriage and Civil partnership.

Mitigating actions to be taken

N/A

Pregnancy and maternity

Pregnancy refers to the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth and is linked to maternity leave in the employment context. In the non-work context, protection against maternity discrimination is for 26 weeks after giving birth, and this includes treating a woman unfavourably because she is breastfeeding.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on pregnancy and maternity?

Please provide evidence to explain why this group may be particularly affected

Evidence base

The birth rate in Enfield was 15.1 births per 1000 people in 2016, approximately 28 per cent above the national average that year of 11.8, though on par with the Outer London average of 15.0 per 1000 people. Therefore, it is statistically more likely for pregnant and maternal people to reside in Enfield than the national average, however this is near equal to Outer London.

Differential impact assessment

The traffic restriction on Grove Street and the improvements to active travel infrastructure are likely to reduce conflict between different road users on the whole. In addition to the better walking provisions as a result of the new/improved crossings, this traffic reduction will create a safer environment, particularly for pregnant and parents with infants and/or young children. This will also provide benefits to pedestrians travelling with prams who require additional time to navigate kerbs when crossing the street. Quieter streets also mean that those traveling with prams are able to use the carriageway to circumvent blockages across the pavement (e.g., if the pavement is too narrow to navigate due to bins). It is also noted that advice from the Royal College of Midwives highlights the importance of physical activity during pregnancy, such as brisk walking.⁷

⁷ <https://www.rcm.org.uk/media-releases/2019/september/rcm-comments-on-new-cmo-s-guideline-for-physical-activity-during-pregnancy/>

The implementation of the proposed closure of a section of Grove Street may negatively impact on journey times by motor vehicle for a portion of those who are pregnant and parents with infants and/or young children who may find it more difficult to walk or cycle, and prefer the use of door-to-door transport services such as private cars, taxis, or Dial a Ride.

Improvements in air quality are likely to disproportionately benefit infants and children who are more vulnerable to breathing in polluted air than adults due to their airways being in development, and their breathing being more rapid than adults.

Expectant mothers and mothers who have recently given birth may have increased numbers of medical appointments. Where this journey, which is approximately 0.7 miles to the nearest maternity unit, is made by car it may take slightly longer than prior to the project, but where the journey is walked or cycled through the area, it is likely to be less polluted and have reduced volumes of traffic.

The analysis from consultation on other Healthy Streets projects, showed that across all genders, the proportions of responses from people pregnant or with young children stating they had experienced a 'somewhat negative' or 'very negative' impact were very similar to those who were not pregnant or with young children.

Mitigating actions to be taken

Monitor traffic volumes and bus journey times and consider mitigation measures if there is an impact that is caused directly by the scheme.

Race

This refers to a group of people defined by their race, colour, and nationality (including citizenship), ethnic or national origins.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on people of a certain race?

Please provide evidence to explain why this group may be particularly affected

Evidence base

Table 4 presents the population of the study area by ethnicity. The most common ethnicity in the area is 'White British', albeit at a significantly lower percentage compared to the Enfield percentage. This is followed by 'Turkish' and 'Other Black African' ethnicities which appear at a higher percentage than the Enfield percentage.

Table 4: Population of Study area by ethnicity versus Borough

<i>Ethnicity (2019)</i>	<i>Upper Edmonton (%)</i>	<i>Borough of Enfield (%)</i>
White British	15.1	38.3
White Irish	1.0	1.9
Greek	0.8	1.2
Greek Cypriot	2.8	4.7
Turkish	12.7	7.6
Turkish Cypriot	2.1	1.8
Kurdish	2.2	1.2
White Other	7.3	6.7
White& Black Caribbean	1.5	1.3
White and Asian	0.9	1.1
White and Black African	0.8	0.7
Other mixed	2.3	2.0
Indian	3.3	3.3
Pakistani	0.7	0.7
Bangladeshi	1.9	1.8
Chinese	0.6	0.7
Other Asian	5.6	3.6
Somali	5.3	2.7
Other Black African	12.2	7.5
Black Caribbean	9.5	5.2
Other Black	4.4	2.5
Other Ethnic Group	6.8	4.2

Source: Ward Profile: Upper Edmonton 2021

The 2011 Census indicates that Enfield has the largest proportion of Greek and Turkish speaking people in the country⁸. The top five non-English languages within

⁸ https://www.enfield.gov.uk/data/assets/pdf_file/0016/13525/Borough-profile-2021-Your-council.pdf

Enfield are shown in Table 5 and the main language within study area are shown in Table 6.

Table 5: Top five non-English languages within Enfield

Top 5 non-English languages	Enfield (%)
Turkish	6.2
Polish	2.0
Greek	1.6
Somali	1.1
Bengali (with Sylheti and Chatgaya)	0.9

Source: Enfield Borough Profile 2021 and Census 2011

Table 6: Main languages of residents within the ward

Main languages of residents	Upper Edmonton (%)
English	65.0
Turkish	10.9
Polish	2.5
Somali	2.0
Kurdish	1.4

Source: Ward Profile: Upper Edmonton 2022 and Census 2011

The most popular languages for which Enfield Council receives translation and interpreting requests are Turkish, Polish, Albanian, Somali, Bulgarian, British Sign Language and Romanian.

The Spring 2020 School Census records 195 languages or dialects being spoken by pupils who live in Enfield. As of Spring 2020, the top five non-English languages spoken by Enfield school pupils are shown in Figure 6.

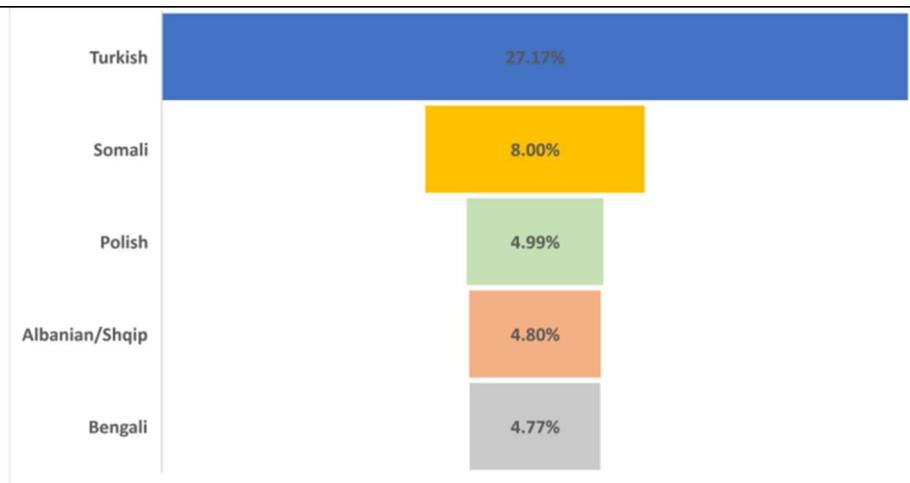


Figure 6: Top five non-English languages spoken by Enfield school pupils

Source: Spring 2020 Enfield School Census

Based on average travel modes from the LTDS data presented in Figure 7 in Enfield all ethnic groups except for 'Other Ethnic Group' are more than likely to drive or be driven in a car or van than use any other mode. 'Other Ethnic Group', 'Asian or Asian British' and 'Mixed or multiple ethnic groups' are most likely to walk and cycle, with a mode share of between 35 and 43 per cent. It is important to note that the sample size of LTDS data is small, therefore these percentages may not accurately reflect the travel behaviours of each ethnic group.

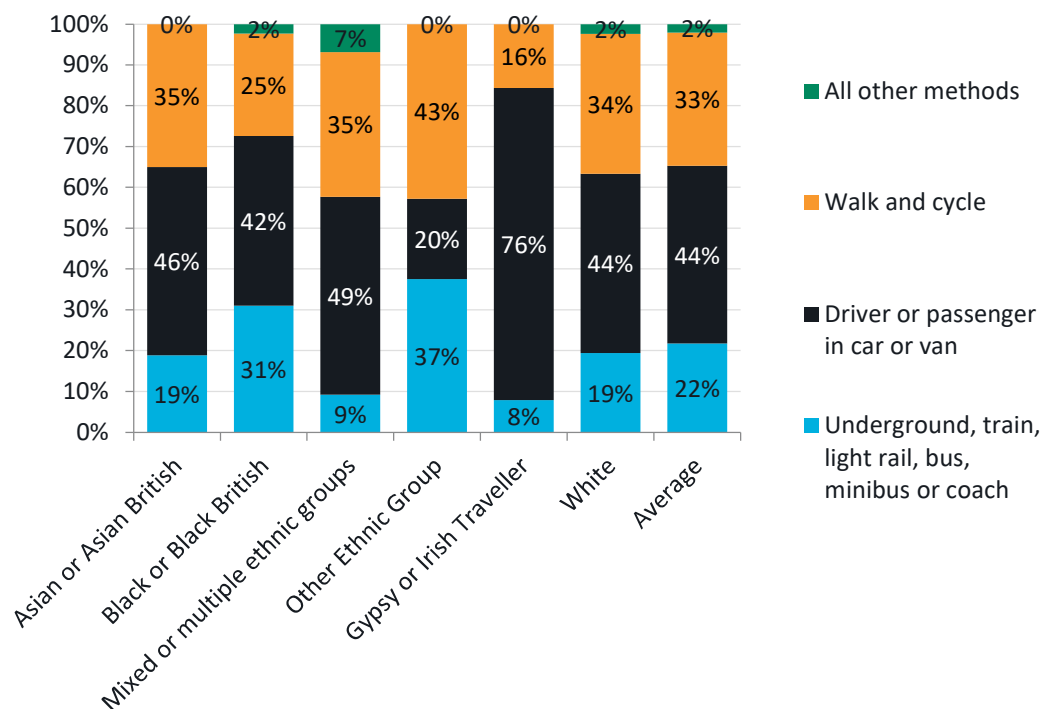


Figure 7: Mode share by ethnicity in Enfield

Source: LTDS (2018/19)

Differential impact assessment

The proposed measures will improve conditions for pedestrians and cyclists, by reducing conflicts with motorised vehicles. This will disproportionately benefit ethnic groups who are disproportionately likely to walk ('Asian or Asian British', 'Mixed or multiple ethnic groups' and 'Other Ethnic Groups'), as well as 'Black and Black British' and 'Other Ethnic Groups' who are disproportionately likely to use public transport (as every public transport journey starts or ends on foot or cycle).

On the contrary, this scheme may cause increased congestion in the short to medium term on Fore Street as motor traffic previously cutting through Grove Street will no longer be able to do that. As such, these impacts may disproportionately impact 'Black and Black British' and 'Other Ethnic Groups' who are disproportionately likely to use public transport.

With the exception of 'Other Ethnic Groups', car usage in Enfield is high, particularly for 'Gypsy or Irish Travellers'. For this reason, the scheme may disproportionately affect this ethnic group – such as causing slightly longer journey times for trips made by car. This could have some financial impacts such as increased cost of travel and increased commuting times. However, the delivery of this scheme has the potential to offer genuine alternatives to car journeys and reduce the reliance on cars within these ethnic groups.

It is important to note that reducing car dominance and car usage is a key aspect of Enfield's broader transport strategy, and as such it is acknowledged that this disproportionate impact is necessary to facilitate a shift across Enfield to more sustainable, healthy and equitable modes.

Mitigating actions to be taken

There is often poor awareness of local walking and cycling schemes amongst those who rarely walk, cycle or travel outside their immediate area, particularly in those who do not speak English at all, or it is not their first language. As such, all consultation and engagement communications should aim to ensure that these groups are reached, for example by offering materials in appropriate languages and/or engaging through relevant community organisations.

Monitor traffic volumes and bus journey times and consider mitigation measures if there is an impact that is caused directly by the scheme.

Religion and belief

Religion refers to a person's faith (e.g. Buddhism, Islam, Christianity, Judaism, Sikhism, Hinduism). Belief includes religious and philosophical beliefs including lack of belief (e.g. Atheism). Generally, a belief should affect your life choices or the way you live.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on people who follow a religion or belief, including lack of belief?

Please provide evidence to explain why this group may be particularly affected.

Evidence base

Table 7 presents the population of the Upper Edmonton ward by religion, and Figure 8 presents Census 2011 data on religion and belief in Enfield. The Upper Edmonton ward and Enfield overall is predominantly Christian, with a slightly higher proportion of the population identifying as Christian when compared to the London average. Muslim is the second most common religion or belief identified, with a significantly higher proportion than both the Enfield and London average. The proportion of the population identifying as 'other' or 'none' or did not state their religion in the Upper Edmonton ward is lower than those of Enfield and London. The Upper Edmonton ward and Enfield is also home to smaller proportions of residents compared to the other faiths including Buddhist, Hindu, Jewish and Sikh.

Table 7: Religion composition of the study area compared to London and Borough

Religion	Upper Edmonton (%)	Borough of Enfield (%)	London (%)
Christian	49.6	53.6	48.4
Buddhist	0.6	0.6	1.0
Hindu	4.0	3.5	5.0
Jewish	0.1	1.4	1.8
Muslim	27.0	16.7	12.4
Sikh	0.3	0.3	1.5
Other/ none/ not stated	18.4	23.8	29.8

Source: Ward Profile: Upper Edmonton 2022 and Census 2011

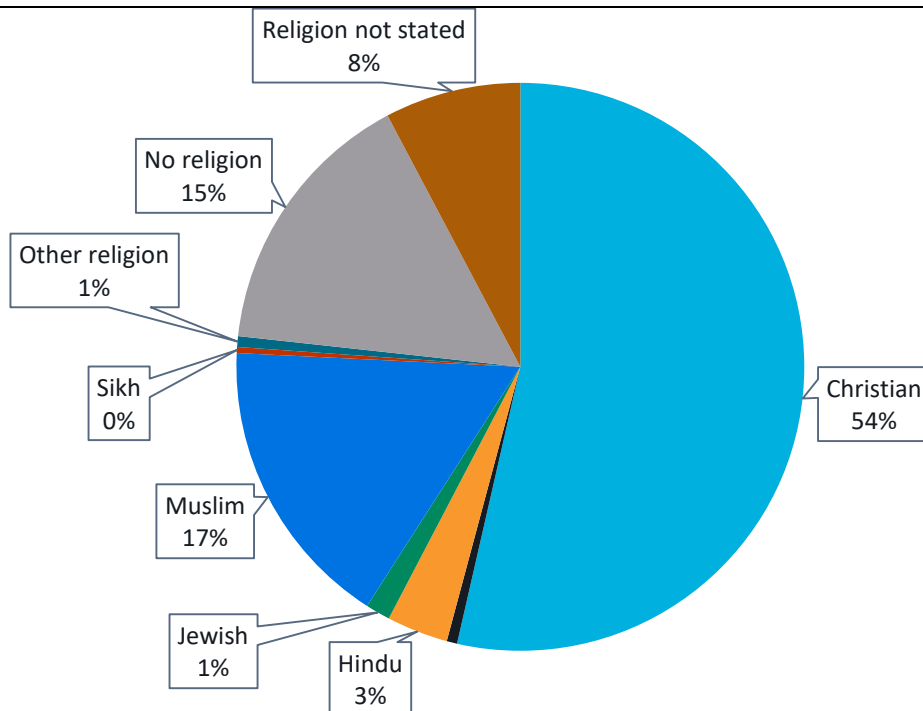


Figure 8: Breakdown of religion/ belief within Enfield

Differential impact assessment

Improving conditions for walking and cycling is likely to positively benefit those who follow a religion and regularly attend places of worship. Destinations such as this are generally local and have large walking and cycling catchments. Although it is acknowledged that this scheme is likely to increase journey times for some worshippers that live within the immediate project area and drive to their place of worship, they can still access their destination as they could before the scheme, sometimes using a slightly different route. It is also acknowledged that some residents attend places of worship outside the immediate project area. Journey times by motor vehicle to these locations may be longer.

On certain dates and at certain times of the day, religious services and observances can have an impact on travel patterns. Places of worship and faith-based schools are major destinations for large populations from different groups. There are two such destinations adjacent to the project, Edmonton Temple and St John and St James Church of England Primary School, which are located on Grove Street.

Attendees accessing these locations by motor vehicle will continue to be able to do that as previously, but the route there by motor vehicle may change due to the proposed traffic restriction. In addition, the active travel route will enable another mode of travel to access them. The scheme is not likely to make the on-street parking situation materially worse for attendees. Approximately 14 on-street

parking spaces are proposed to be removed, 6 of which are pay and display spaces. Removal of parking spaces was kept to a minimum where possible but was necessary at places in order to improve traffic flows. Both Edmonton Temple and St John and St James Church of England Primary School have a car park within their premises. The eastern extent of the proposed motor traffic restriction has been designed in such a way that allows vehicle access to those car parks.

This scheme is likely to benefit people who currently use active travel modes to get to places of worship and faith-based schools, and create a more welcoming environment for those who do not currently travel actively.

Religious commitments can sometimes leave little time for sporting activities. For example, a report published in 2011 by TfL mentions that young Muslims that attend mosque after school may not have as much leisure time as those from non-religious backgrounds⁹. Therefore, creating environments that enable and encourage people to cycle more often can lead to exercise being built into their day, rather than having to go out of their way to achieve it.

Mitigating actions to be taken

Engage with Edmonton Temple and St John and St James Church of England Primary School on the proposals.

Sex

Sex refers to whether you are a man or woman.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on men or women?

Please provide evidence to explain why this group may be particularly affected.

Evidence base

Table 8 presents the sex composition of the Upper Edmonton ward.

Table 8: Sex composition of the Upper Edmonton ward

Distribution by sex 2020	Upper Edmonton (%)	Borough of Enfield (%)
Male	48.9	49.1
Female	51.1	50.9

Source: [ONS mid-year estimate 2020](#)

⁹ <http://content.tfl.gov.uk/barriers-to-cycling-for-ethnic-minorities-and-deprived-groups-summary.pdf>

According to the Office for National Statistics (ONS) population estimates, in Enfield 49.1 per cent of residents identify as male and 50.9 per cent as female. This is very similar to the percentage split for London as a whole (49 per cent male, 51 per cent male).

Figure 9 presents the mode share by sex in Enfield. Walking more commonly used as transport by females, making up 33 per cent of all trips. This is 5 per cent higher than males. On average, females drive slightly less than males, making up 44 per cent of trips vs 46 per cent with males. Females are also use the bus more than males (15 per cent vs 13 per cent).

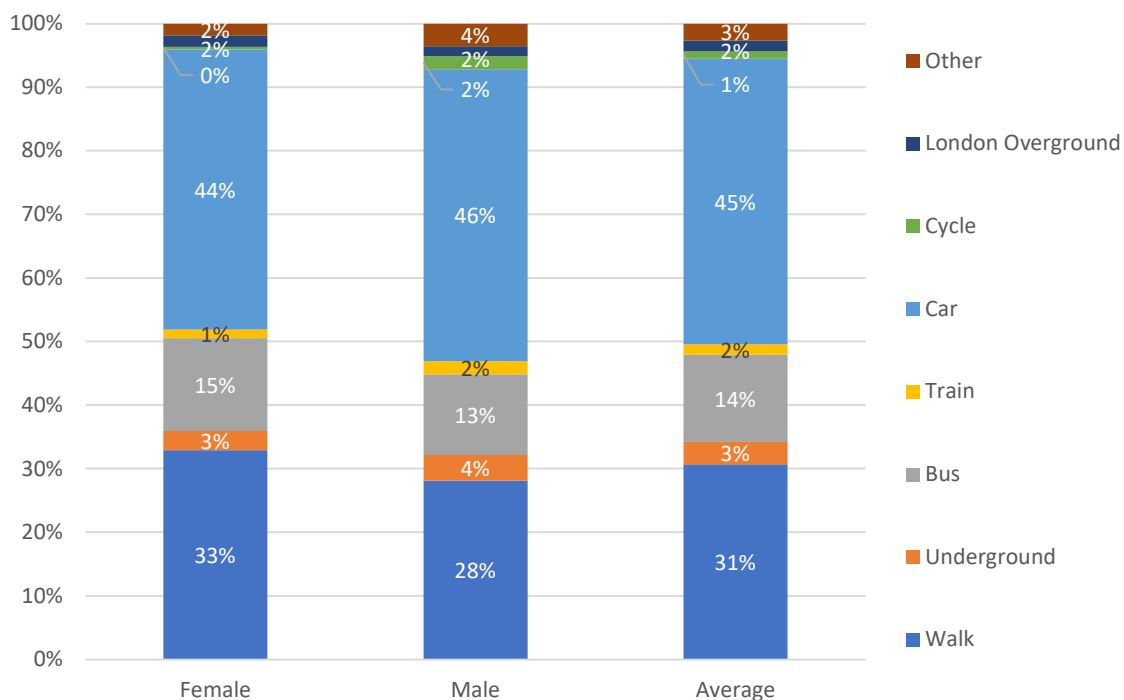


Figure 9: Mode share by sex in Enfield

Source: LTDS (2016/17, 2017/18 and 2018/19)

Across Greater London, research undertaken by TfL shows walking is the most commonly used type of transport by females (95 per cent walk at least once a week). Females are also more likely to use buses than males (62 per cent compared with 56 per cent) but are less likely to use other types of transport including the Tube (38 per cent women compared with 43 per cent males).

Female Londoners take more trips on a weekday than male Londoners, 2.5 compared to 2.3¹⁰. This pattern however is reversed amongst older adults, with older female Londoners taking fewer weekday trips than older male Londoners, 2.0 compared to 2.2. It is important to recognise that females are more likely than

¹⁰ <https://content.tfl.gov.uk/travel-in-london-understanding-our-diverse-communities-2019.pdf>

males to be travelling with buggies and/or shopping, and this can affect transport choices.

Females aged 17 or over who are living in London are less likely than males to have a full driving licence (58 per cent compared with 72 per cent) or have access to a car (63 per cent of all females compared with 66 per cent of all males). These factors are likely to be related to the frequency of car use as a driver.

79 per cent of females in London report being able to ride a bike, compared with 91 per cent of males¹¹.

The number of female cyclists nationally rose by 50% in 2020 according to DfT statistics¹².

Differential impact assessment

Females are less likely to drive in Enfield and are more likely to walk than males. They are also less likely to cycle. Improvements made to the safety and convenience of cycling reduce the barriers to cycling disproportionately faced by females and increase the percentage of females choosing to cycle.

Females are more likely to use the bus than males. As many public transport journeys start or end on foot or cycle, improvements in safety and convenience to these networks will improve their access to public transport services. However, this scheme may cause increased congestion in the short to medium term on Fore Street and other surrounding roads as traffic is unable to cut through Grove Street. As such, these impacts may disproportionately impact females who use buses more often than males.

Increasing residents' access to favourable cycling conditions is likely to disproportionately benefit females, particularly due to higher number of trips they make on a daily basis compared to males, as well as the higher proportion of them taking children to and from educational and recreational facilities. The intervention would reduce a significant barrier to cycling.

Following the recent murder of Sarah Everard, a national movement has highlighted the concerns of women and how safe they feel at particular times, notably at night. Reduced traffic volumes create a quieter environment which can heighten the apprehension of threat. This perception particularly impacts women making trips by foot or bicycle, as part of a public transport journey or a trip on its own. There is some concern that this perceived risk impacts women's willingness to make trips by active travel modes after dark. In contrast, an academic report¹³ suggested a positive improvement in the measured crime rate after introducing

¹¹ <http://content.tfl.gov.uk/attitudes-to-cycling-2014-report.pdf>

¹² <https://www.gov.uk/government/statistics/walking-and-cycling-statistics-england-2020>

¹³ <https://findingspress.org/article/19414-the-impact-of-introducing-a-low-traffic-neighbourhood-on-street-crime-in-waltham-forest-london>

traffic restriction measures, similar to the closure of a section of Grove Street proposed for this scheme, such as those found in low traffic neighbourhoods. The report examined the impact on street crime of introducing low traffic neighbourhoods in Waltham Forest which was associated with a 10% decrease in total street crime and this effect increased with a longer duration since implementation.

The proposed public realm improvements are likely to increase footfall and dwell time. Indeed, one of the project objectives is to make public space seem more welcoming and provide opportunities for social interaction and children's play. Therefore, the above can contribute to better passive surveillance and increased sense of safety. Enhanced street lighting provisions are also being explored as part of the proposals.

Mitigating actions to be taken

Monitor traffic volumes and bus journey times and consider mitigation measures if there is an impact that is caused directly by the scheme.

Engage with the Metropolitan Police and associated Neighbourhood Community Safety teams to identify whether they have any specific security concerns in that area that may be exacerbated by the measures. Collect any information from the Metropolitan Police on crime levels and antisocial behaviour within the project area before and after implementation to ensure safety of those travelling.

Sexual Orientation

This refers to whether a person is sexually attracted to people of the same sex or a different sex to themselves. Please consider the impact on people who identify as heterosexual, bisexual, gay, lesbian, non-binary or asexual.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on people with a particular sexual orientation?

Please provide evidence to explain why this group may be particularly affected.

It is considered that this scheme is unlikely to have a disproportionate impact on grounds of Sexual Orientation.

Mitigating actions to be taken

N/A

Socio-economic deprivation

This refers to people who are disadvantaged due to socio-economic factors e.g. unemployment, low income, low academic qualifications or living in a deprived area, social housing or unstable housing.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on people who are socio-economically disadvantaged?

Please provide evidence to explain why this group may be particularly affected.

Evidence base

As outlined within the Enfield Borough Profile 2021, Enfield is one of the most deprived Outer London boroughs. Enfield is now the 9th most deprived London borough, whereas it was 12th in 2015. The overall ranking in the 2019 Indices of Multiple Deprivation showed that Enfield is the 74th most deprived out of 316 English local authorities

Figure 10 presents a visual representative of deprivation across Enfield. Upper Edmonton area sits within the southeast of Enfield. In broad terms the eastern areas of Enfield have more levels of deprivation, whereas the west and northwest areas have the least. Figure 10 indicates the Upper Edmonton is among the most deprived wards in England.

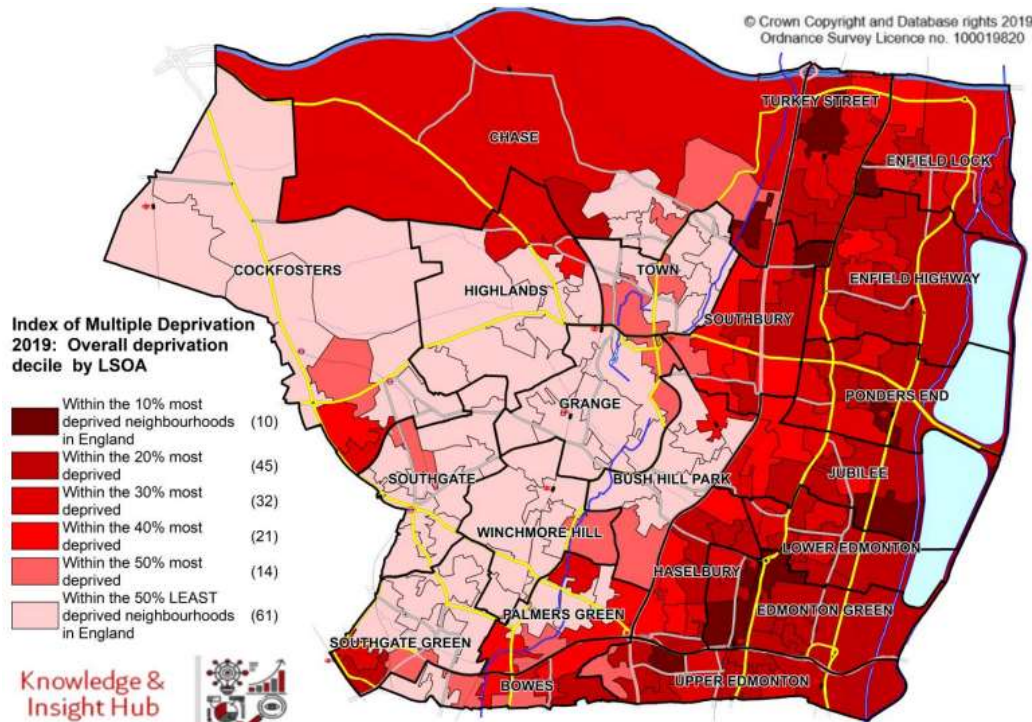


Figure 10: Deprivation in Enfield

Data source: Enfield Borough Profile 2021

Table 9 presents the Upper Edmonton ward to have significantly higher proportions of households with incomes less than £15,000 and claiming Universal Credit than the Borough average.

Table 9: Enfield and Upper Edmonton income

Income (2020)	Upper Edmonton (%)	Borough of Enfield (%)
Proportion of households with an income of less than £15,000	22.7	15.4
Households claiming Universal Credit (May 2020)	40.6	28.6

Data source: Ward Profile: Upper Edmonton 2022

As mentioned in the 2022 ward profile, all of the neighbourhood areas within Upper Edmonton are among the 30% most deprived areas in. Figure 11 shows the proportions of children in poverty in the Upper Edmonton ward, which is significantly higher in comparison with local, regional, and national averages.

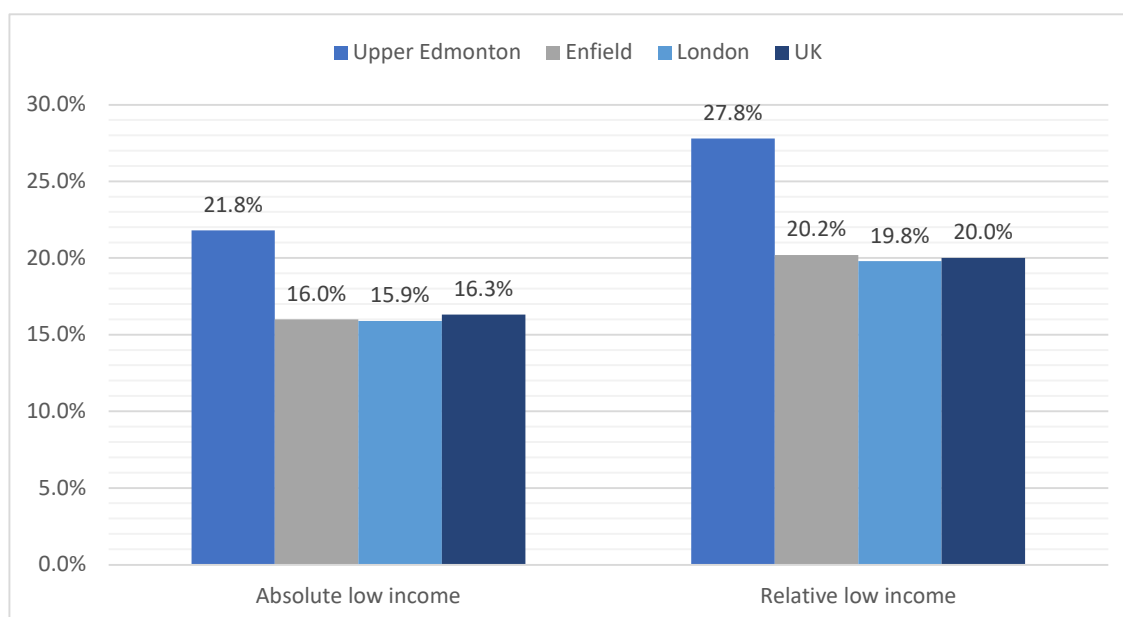


Figure 11: Percentage of children in low-income families

Source: Ward Profile: Upper Edmonton 2022

Table 10 presents the percentage cars in Enfield households. Areas without access to a car broadly mirror the most deprived sections seen in Figure 10, with the east of the borough having some of the highest percentages without access to a car, and the west having the least. Upper Edmonton, located in the east of the borough, have one of the highest percentages without access to a car in Enfield.

Table 10: Percentage of cars in Enfield households

Cars in households (2011)	Upper Edmonton (%)	Borough of Enfield (%)
---------------------------	--------------------	------------------------

0 cars	43.5	32.5
1 car	40.8	43.3
2+ cars	15.6	24.3

Data source: Ward Profile: Upper Edmonton 2021 and Census 2011

TfL research shows that low income Londoners tend to travel less frequently than Londoners overall – 2.2 trips per weekday on average compared to 2.4 among all Londoners. Among this group, a greater proportion of journeys are completed for the purposes of shopping and personal business: 31 per cent for Londoners with household income of less than £20,000 compared with 22 per cent all Londoners (in line with 31 per cent and 22 per cent observed in 2013/14).¹⁴

Londoners in lower income households are the most likely equality group to use the bus at least weekly; seven in 10 Londoners in households with an annual income of less than £20,000 do so (69 per cent).

Differential impact assessment

Active modes of travel present a low-cost form of transport and can connect people safely and quickly to local centres, as well as to stations as part of multi-modal longer distance journeys (e.g. into inner London). As such, the project will benefit these alternative methods and therefore are likely to disproportionately benefit those without access to cars.

People on lower incomes are less likely to be able to afford to adapt to the measures (e.g. buying a new bike), therefore may not experience the full benefits of the scheme compared to those from higher income backgrounds. This may mean that those on higher incomes disproportionately benefit from the scheme.

The rate of car ownership increases as income increases and so people who are on lower incomes are less likely to be adversely affected by any potential reassigned traffic.

Buses are likely to be used by people on lower incomes and where buses are delayed by any increased traffic this is likely to affect this group.

Mitigating actions to be taken.

Monitor traffic volumes and bus journey times and consider mitigation measures if there is an impact that is caused directly by the scheme.

Encourage lower income households to make use of free bike repair services, such as Dr Bike, and opportunities to access affordable cycles, such as second-hand bike markets.

¹⁴ <https://content.tfl.gov.uk/travel-in-london-understanding-our-diverse-communities-2019.pdf>

SECTION 4 – Monitoring and Review

How do you intend to monitor and review the effects of this proposal?

Who will be responsible for assessing the effects of this proposal?

On balance, this scheme is likely to promote equalities through the improvement of conditions for those walking, cycling, and wheeling. Not only will the scheme improve the experience for those already using these modes, but it will also help to make non-car transport options more attractive by making them safer, more accessible, and more convenient.

It is acknowledged that the improvements may come at an ongoing inconvenience to drivers. The altering of traffic flow may add some level of complication to trips and may slightly increase the length of some car journeys made through the project area. However, access to all properties and locations is maintained. This impact will be felt disproportionately by individuals who rely upon cars as their primary or only mode of transport, which is common for elderly or disabled people and certain ethnic groups. However, this scheme will make walking and cycling a more attractive and accessible option for people, offering genuine alternative to car use which will benefit a wide range of residents and visitors.

The monitoring and evaluation for this project is critical for many of the recommendations set out in this EqlA. Alongside consultation and engagement, these are the primary means of monitoring benefits and disbenefits of the project. Activities include monitoring of traffic volumes including bus journey times and air quality, and engagement with emergency services. Consultation and engagement activities are planned to reflect relevant recommendations in this EqlA. The outcomes of monitoring, consultation and engagement will help to inform whether the project has been successful in achieving its objectives and in identifying, and if possible mitigating, the potential inequalities raised in this EqlA.

SECTION 5 – Action Plan for Mitigating Actions.

Protected Characteristic	Identified Issue	Action Required	Lead officer	Timescale/By When	Costs	Review Date/Comments
Age, Disability	Confusion or worries about collisions on shared use paths.	Consider improvements to the section of the route between Grove Street and Joyce Avenue to mitigate any potential conflicts or pinch points.	Petros Ximerakis	During scheme design stages	Included within scheme budget	16/06/2022 The shared use paths have been proposed to have a minimum width of 4.0m (above the recommended minimum width of 3.0m) in order to limit any conflicts between pedestrians and people who cycle, and aid the movement of pedestrians with mobility or visual impairments.

Age, Disability, Pregnancy and maternity, Race	Longer journey times for people who rely on private cars, taxis, or Dial a Ride.	Monitor traffic volumes and bus journey times and consider mitigation measures if there is an impact that is caused directly by the scheme.	Petros Ximerakis	During post implementation scheme monitoring	Included within scheme budget	Will be reviewed following evaluation of monitoring data collected as part of the project Monitoring Plan.
Age, Disability, Race, Sex, Socio-economic deprivation	Traffic reassignment may delay bus services.	Monitor traffic volumes and bus journey times and consider mitigation measures if there is an impact that is caused directly by the scheme.	Petros Ximerakis	During post implementation scheme monitoring	Included within scheme budget	Will be reviewed following evaluation of monitoring data collected as part of the project Monitoring Plan.
Disability	Confusion or worries about collisions on shared use paths.	Ensure that the design of the cycle facilities is suitable for use by those on adapted or non-standard cycles which are often used as mobility aids for disabled people. Both LTN 1/20 and the London Cycle	Petros Ximerakis	During scheme design stages	Included within scheme budget	16/06/2022 Design of cycle facilities has been developed in line with LTN 1/20 and LCDS guidance.

		Design Standards (LCDS) contain guidance on accessible designs.				
Race	Poor awareness of local walking and cycling schemes amongst those who do not speak English at all, or it is not their first language	Consultation and engagement communications should aim to ensure that these groups are reached, for example by offering materials in appropriate languages and/or engaging through relevant community organisations	Petros Ximerakis	During community engagement & consultation period	Included within scheme budget	16/06/2022 All materials included instructions in a number of different languages for requesting translated copies in alternative languages

Religion and belief	Proposals affecting access to places of worship and faith-based schools.	Engage with Edmonton Temple and St John and St James Church of England Primary School on the proposals.	Petros Ximerakis	During community engagement & consultation period	Included within scheme budget	16/06/2022 Edmonton Temple and St John and St James Church of England Primary School have been engaged and contributed to the development of the proposals.
Sex	Public perception of personal safety due to the reduced 'passive surveillance' of passing motor traffic	Engage with the Metropolitan Police and associated Neighbourhood Community Safety teams to identify whether they have any specific security concerns in that area that may be exacerbated by the measures. Collect any information from the Metropolitan Police on crime levels and antisocial	Petros Ximerakis	During scheme design stages and post implementation scheme monitoring	Included within scheme budget	At regular intervals post implementation of the scheme

		behaviour within the project area before and after implementation to ensure safety of those travelling.				
Socio-economic deprivation	People on lower incomes are less likely to be able to afford to adapt to the measures (e.g. buying a new bike).	Encourage lower income households to make use of free bike repair services, such as Dr Bike, and opportunities to access affordable cycles, such as second-hand bike markets.	Tina Uhrynowycz	Ongoing	Included within Healthy Streets programme budget	16/06/2022 Several Dr Bike sessions took place at North Middlesex University Hospital before and after the consultation period. A number of Second-Hand Bike Markets were held before and after the consultation period. A subsidized Second-Hand Children's Scooter and Bike

						Market took place on 28/05/2022.
--	--	--	--	--	--	----------------------------------