

Equality Impact Assessment Form

Part 1 – Initial Screening

1. Person(s) & project team/directorate /Unit responsible for completing the assessment:

Belinda Davis, Senior Specialist - Health & Recreation Policy Team

2. Name of the policy, strategy or project:

Health & Wellbeing Policy

3. What is the main purpose or aims of the policy, strategy or project?

This policy addresses some of the fundamental needs of society by advocating the use of the natural environment to benefit peoples' health and wellbeing.

4. Who will be the beneficiaries of the policy/strategy/project?

Children, Adults, Older People and wider Communities. Those not accessing the natural environment currently and those at risk of, or suffering from poor health, and social and economic exclusion. Health Sector and Natural England.

5. Has the policy/strategy/project been explained to those it might affect directly or indirectly?

No, the policy has only just been formally signed off by Natural England (October 08) and this question forms part of the advocacy of the Health Policy. An advocacy development plan is being drawn together at the moment

6. Have you consulted on this policy/strategy/project?

Yes, consultation forms part of the Policy making process. A formal consultation event was held in London on 16 July 2008. A variety of equality groups and representatives were invited to participate and included a wide range of environmental organisations/trusts some of which specialise in working with under represented groups such as Groundwork, BTCV, Forest Schools, Forestry Commission, Sure Start. Health professionals from the Department of Health, Primary Care Trusts, National Institute of Clinical Excellence, Obesity Forum etc. A selection of health charities were invited to attend to include MIND, Age Concern, National Childs Homes, Help the Aged, Mencap etc. Not all invitees chose to attend the event and it is recognised that the views provided within this consultation was a representation of those present. Most particularly there was no ethnic minority group representative who attended the formal consultation. It is therefore important that individual work strands undertake further consultation and targeted engagement techniques are used to ensure equality of opportunity for all.

7. Please complete the following table and give reasons/comments for where: (a)

The policy/strategy/project could have a positive impact on any of the equality target groups or contributes to promoting equality, equal opportunities and improving relations within equality target groups.

(b) The policy/strategy/project could have a negative impact on any of the equality target groups, i.e. disadvantage them in any way. **If the impact is high, or the policy will impact significant amounts of people, a full EqIA should be completed.**

Equality Target Group	(a) Positive Impact		(b) Negative Impact		Reason/Comment
	High	Low	High	Low	
Men	H		L		The policy recognises the positive health impact for adults who engage with the natural environment. Evidence reflecting relevant differing gender health patterns should be used when delivery mechanisms are defined. This should include projects, practices, promotion and communications. Statistics show that there is lower representation by men on the WHI programme – Each strand of delivery should consider (and consult if necessary) to ascertain if there are ways that they can accommodate more male participants. (eg could altering the timings and days make a difference or is this more related to the types of opportunities or engagement processes.)
Women	H		L		As per the comments made in ‘men’ above. Ensure that delivery includes equal opportunities for women, particularly when considering cultural aspects such as clothing, chaperoning etc and engagement strategies where aspects such as personal security, or strength and fitness levels should be considered
Asian or Asian British people	H		L		The policy describes the focus on communities, adults and children, all of which will encompass these groups and equate to similar health benefits. However, evidence exists that BME groups are less likely to engage with the natural environment – this could therefore negatively impact on the intended health benefits if BME groups are proportionately less likely to use open space. This lower
Black or Black British people	H		L		
White people (including Irish)	H		L		
Chinese people	H		L		

Mixed Race people	H	L	<p>level of engagement is linked to many cultural aspects all of which should be considered in the delivery of the policy. (See Countryside Agency research 'Capturing Richness' and the 'Diversity review')</p> <p>There is no overt indication that evidence in relation to any differing health patterns of BME groups has been included when devising the policy.</p> <p>These factors should be rectified within subsequent revisions of the policy and should be factored into the delivery mechanisms for this policy.</p>
Other racial/ethnic group (please specify)	H	L	
Disabled and Deaf people	H	L	<p>The policy recognises the positive impact to wellbeing, encompassing both physical and mental benefits. We must ensure that delivery enables opportunities for all people to access and experience the health benefits of the natural environment, and focuses on the removal of barriers to access – both physical (transport/stiles/paths etc) and attitudinal (via training of site staff etc). NE research ('By all reasonable means') shows that people with disabilities are less likely to engage with open space – therefore the policy may inadvertently create negative impact if this group do not take up the benefits of the natural environment due to barriers – perceived or real – being encountered. Engagement with external partner organisations and social care groups will be important here as will involvement and consultation.</p>
Gay, Lesbian and Bisexual people	H	L	<p>The focus on adults within the policy will encompass this group although care will be needed in the delivery of the policy to create a welcoming environment for this group through the attitude of staff</p>
Transgender people	H	L	<p>The focus on adults within the policy will encompass this group with perhaps particular relevance to mental well being through positive impacts on stress levels. Care will be needed in the delivery of the policy to create a welcoming environment for this group through the attitude of staff</p>

Older people (50+)	H	L	The policy recognises the linkage between ageing and the health benefits available from the natural environment and is a primary focus of the policy
Younger people (17-25) and children	H	L	<p>The policy recognises the importance of engaging children with the natural environment and is a primary focus of the policy.</p> <p>Policy specifically caters for the 3 ages of man and that different approaches may be necessary to provide an appropriate range of opportunities. However, there is evidence to support that younger people are under-represented as visitors to the natural environment, therefore, individual delivery work strands should consider (and consult with people in this age range) to ascertain how and if they can provide opportunities that attract more active participation. Ecoteering on selected NNRs provide family enjoyment aimed at engaging children, Natural Connections is running five pilot projects trialling different ways of engaging children (using schools as the central hub). WHI walks will be expanding pushchair and family walks.</p>
Working Patterns (P/T or part year)	H	L	In relation to employment and the health and well being of our staff we should continue to ensure opportunities are available to suit a variety of working patterns. In relation to service delivery, creating opportunities to access the natural environment at flexible times of the day and for flexible lengths of time will benefit all working patterns
Faith groups (please specify)	L	L	<p>Policy does not really affect positively or negatively on different faith groups. More can be done to promote the links between spirituality and the natural environment and this should form part of policy delivery.</p> <p>There will be some natural linkages between the considerations described above for race groups and faith groups which should be taken into account. Individual strands of health work should assess if their project/work areas could impact on different faith groups, especially in relation to timings that may potentially</p>

			clash with religious festivals, prayer commitments etc.
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8. Please give a brief description of how this policy/strategy/project benefits the equality target groups identified in the above table, i.e. promotes equality?

There are four specific areas of focus contained within the Health and Wellbeing Policy – children, adults, older people and communities.

There is no differentiation between genders, faith, sexual orientation or working patterns. However, the policy specifically denotes that people of all ages and cultures create communities and that connections with the natural environment will go beyond the life of individuals and help to create a lasting legacy of strong and healthy communities.

Specific mention is made regarding the benefits that contact with the natural environment can have on peoples' mental and physical health and wellbeing although does not explicitly promote equality for disabled and Deaf people.

Nevertheless, it is recognised that disabled and Deaf people will be included in 'children', 'adults', 'older people' and 'communities' and the advocacy and delivery of the Policy must promote equality of opportunity and benefit all sectors of society. This may mean adapting the way the policy is delivered for under represented groups and using involvement and consultation to ensure that assumptions are not made about the policy outcomes being fit for purpose'

9. If there is a negative impact on any equality target group, is the impact intended or legal?

There is no substantial negative impact on any of the equality target groups as the Policy has been developed to benefit the health of all people. Care will need to be taken in the delivery of the policy so that equality is promoted through advocacy and implementation.

impact, and/or will impact a significant number of people complete part 1 and move on to the full assessment. If the impact is low, continue with Q.10

10. What actions could be taken to amend the policy/strategy/project to minimise the low negative impact?

All Natural England teams are expected to complete an Equality and Diversity Action Plan by December 08 which should outline, assess and address any existing inequalities within the work of each team. Delivery of this Policy relies on different strands of work spread across outcomes and regions – horizontal working - and could present disparity of representation due to the nature of its aims. If necessary, appropriate action should be taken and included in team D&E action plans. It also re-enforces the benefits of completing retrospective and or predictive EqlAs on each strand of existing and future delivery work to highlight areas of necessary action.

11. If there is no evidence that the policy/strategy/project promotes equality, equal opportunities or improves relations within equality target groups, what amendments could be made to achieve this?

In any future revisions of this Health and Wellbeing Policy a more specific reference should be made to disabled and Deaf people and to BME groups
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12. How will the policy/strategy/project be implemented including any necessary training?

Full Assessment necessary: Yes (not due to the identification of any substantial areas of negative impact but due to the high 'people' context of the policy)

Is this Policy / Strategy / Project:

A new policy/strategy/project

A change to an existing policy/strategy/project

An existing policy /strategy/project **Existing Policy**

Is this EqIA:

Predictive

Retrospective **Retrospective**

Date completed: 9/12/08

Signed by Line/Project Manager: Belinda Davis

Approved by Senior Management /Project Management Team:

(It is recommended that you seek input from a representative panel of people to complete this EqIA. A list of colleagues who have been trained in EqIA's is available from the Diversity page of the Natural England intranet.)

Signed by Diversity lead within OD: Jo Collinge

Equality Impact Assessment Form Stage 2 and Stage 3 – Partial/Full Assessment

1. Person(s) & project team/directorate /Unit responsible for completing the assessment:

Belinda Davis, Senior Specialist, Health and Recreation Policy team

2. Name of the policy, strategy or project:

3. In part 1 (initial screening), which equality target groups were identified as being disadvantaged by the policy, strategy or project:

Age

Disability X
Faith or Religion
Gender / Transgender X
Race X
Sexual Orientation X
Working Patterns

4. Summarise the negative impacts for each group: (check questions at checklist for stage 2 – assessing likely impact)

Date completed:

Partial assessment completed. Move on to stage 3 – full assessment

See Part 1 for descriptions of possible impact – these can be mitigated via delivery if equality and diversity considerations are fully embedded

5. What previous consultation has taken place or will take place with each equality target group either externally or internally? Give details:

Question 6 must only be completed once consultation and research has been carried

out. A formal consultation is part of the policy making process, although to date this has focused more on the technical nature of the Policy rather than following through to advocacy and delivery. It is therefore recognised that each individual work strand should carry out further and more specific equality consultation and that this should form one of the key recommendations in the policy guidance notes. It is also important to capture all further consultation, recommendations and actions taken and an overarching recording/progress document is being drafted to follow the work strands through delivery and will help to inform future policy reviews. A copy of this EqIA will also be assessed by internal Natural England D&E groups/representatives.

6. Who was consulted and/or what research material was obtained? Please list:

Previous research gathered via 'Capturing Richness' 'By all reasonable means' and the 'Diversity review' are all relevant and have helped to indicate areas for consideration. This research included consultation with under-represented groups at various stages and therefore key learning has been brought forward from those.

7. What does the consultation indicate about the negative impact of the policy, strategy or project?

Research indicates that under represented groups are less likely to use / engage with the natural environment. Therefore whilst the policy in itself aims to be inclusive, we must recognise that the benefits may be reduced if there is disparity in take up or application. That is why it is vital that delivery mechanisms take account of the differing levels of engagement and take appropriate action to promote equality of outcome.

8. What changes / action do you propose to make to the policy, strategy or project as a result of research and/or consultation?

Guidance to delivery and advocacy teams will ensure priority areas for consideration are highlighted, with recommendations for key delivery aspects that need to be adapted to ensure equality is promoted

9. Will the planned changes / action to the policy/strategy/project:

Lower the negative impact? Yes

Ensure that the negative impact is legal under anti-discriminatory law?

Provide an opportunity to promote equality, equal opportunity and improve relations within equality target groups? i.e. a positive impact Yes

10. What equality monitoring/evaluation/review systems have been set up to carry out regular checks on the effects of the policy/strategy/project? Give details:

Introduction of an overarching review and progress record that starts with Policy and records/demonstrates any consultation and action taken through advocacy, delivery, evidence. This record will be used to inform any future policy review or new policy decisions. Reference to more specific actions identified in this EqIA will also be incorporate into Policy guidance notes. It is recognised that this EqIA only covers the Policy and that each individual work/delivery strand should undertake its own EqIA.

11. When will the policy be reviewed?

Unknown at present but processes being put in place (see 10 above) to ensure that when any review is undertaken that there is a record of progress, action taken and lessons learnt that will inform any proposed review. In any future review it is recommended that BME groups are involved more fully in any consultation.

Please tick which assessment has been completed.

Partial Assessment Full Assessment

Date completed:

Signed by Line/Project Manager: Belinda Davis

Approved by Senior/Project Management Team:

(It is recommended that you seek input from a representative panel of people to complete this EqIA. A list of colleagues who have been trained in EqIA's is available from the Diversity page of the Natural England intranet.)

Signed by Diversity lead within OD: Jo Collinge

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Equality Impact Assessment Improvement Plan

Area of negative impact	Changes proposed	Lead responsibility	Deadline	Resource implication	Comments
BME, Disabled and Deaf people	In any revision careful wording or statement to promote inclusion for these equality groups	NE staff responsible for Health and Wellbeing Policy Review	Unknown at present time		
Potentially all equality groups in advocacy and delivery	Ensure that reference to this EqIA is made in Policy guidance notes which reinforces the importance of individual work strands carrying out their own EqIAs and being made aware of their D & E responsibilities - if necessary further consultation. Positive promotion wherever possible	NE Project managers (and potentially external partners and Contractors) be made aware of their Diversity and Equality responsibilities	Ongoing	NE staff time and possible funding for further and specific delivery strand consultation	
Potentially all equality groups	Ensure a record of progress and action recorded throughout advocacy and delivery to inform future Policy reviews	Belinda Davis to start record of progress and pass on through advocacy and delivery strands	Ongoing	NE staff time	