

# Equality analysis of social distancing measures, including restrictions on movement and restrictions on gatherings, in response to severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) in England

Completed by: Cabinet Office

Date: 15 April 2020

## Summary

1. This document records the analysis undertaken by the Department to enable Ministers to fulfil the requirements placed on them by the Public Sector Equality Duty (PSED) as set out in section 149 of the Equality Act 2010. This section provides a summary of the analysis as to the impacts of social distancing measures on groups with protected characteristics. Ministers should consider the equality impact outlined in this PSED when making future decisions concerning social distancing.
2. Government will continue to keep these policies and their impact under review to ensure that disadvantages are minimised wherever possible. Measures will only continue for as long as the level of risk is assessed to be sufficient to justify these negative impacts and will be prepared to edit the guidance or policy to address any undue discrimination that arises.

## Social Distancing measures

3. The measures considered include the government's instructions to the public to:
  - self-isolate for 7 days if experiencing symptoms;
  - self-isolate for 14 days if a household member is experiencing symptoms;
  - shield the vulnerable (self-isolation for the 1.5m most vulnerable);
  - no gatherings of more than two people;
  - closure of schools (except for key workers);
  - closing all retail and indoor public spaces;
  - closing outdoor public spaces;
  - ending mass gatherings; and
  - stay at home guidance.

A detailed annex accompanies this summary which covers the impacts of these measures, as grouped by the effects of the regulation. This summary presents the impacts on the specific groups for the policy as a whole.

## Age

4. **Older groups:** There are particular impacts on age, including both older and younger people. Older people are more likely to be part of the extremely vulnerable group who are being shielded and asked to live in more restricted conditions of isolation. Given the disproportionate risk to this group, these specific measures are appropriate and the

government has taken further steps to mitigate the impacts, for example, by encouraging them to register for support packages and specific care needs and through the setting up of a volunteer network. Older groups are also disadvantaged by their more limited access to and knowledge of IT, which would prevent them from taking up compensatory services such as online shopping and increase isolation.

5. **Young people:** Younger people are indirectly impacted by the closure of businesses – including retail and bars/restaurants where they are disproportionately represented. Furthermore children at school and university students will be adversely affected by the closure of these institutions and for some, the cancellation of exams. Recent polling suggests that young people (16-24) are most likely to self-report as finding it “extremely difficult” to cope with lockdown. We are considering further the effects on younger people and how to mitigate these.

### **Disability**

6. **Shielding policy:** Similar to older age groups, the shielding policy may impact some people with disabilities more than the general public due to its restrictive nature, but the policy is justified due to the increased health risks for this group.
7. **Societal and health impacts:** There is a particular negative impact on disability groups from the closure of indoor public services such as sports centres and swimming pools as well as community centres and libraries. These services can be important for disability groups for mental and physical well-being. The provisions in associated guidance concerning taking exercise (and making clear that disability groups may need to exercise more than once a day) go some way to mitigating these impacts.
8. **Mental health:** Given disabled individuals rely on a range of services and often specialist support, with a unique set of challenges, we would expect social distancing to exacerbate mental health issues for people with learning disabilities and autism conditions as they do not have access to the same community services or continuity of care.
9. **Economic impacts:** Some people with a disability will be less able to work from home and may be more economically vulnerable, for example, more likely to live in food poverty. The government has sought to address this with the Access to Work scheme, which offers advice and discretionary grants to people with a disability. During the pandemic, Access to Work has taken steps to put in place easements to enable disabled people to work more flexibly, for example, by working with disabled people and their employers to enable the transfer of specialist equipment to the disabled persons home.
10. **Engagement:** DHSC are closely engaging with charities that are representing disabled people to discuss the impact of social distancing guidance.

### **Gender reassignment**

11. Trans people may be unable to get hormones from the GP, have gender affirming surgery cancelled or increased waiting times to see trained counsellors and professionals, with resulting severe negative impacts on mental health. DHSC is aware of this risk and has approached NHS England on this matter, as commissioners of these services. They may also be confined with members of their family or others who do not accept their gender which may exacerbate mental health issues and feelings of isolation.

### **Pregnancy and maternity**

12. **Societal/health impacts:** Isolation requirements and reduced availability and accessibility of health and other specific services, for example, antenatal groups, will have a disproportionate impact on pregnant women. As with aged and disability groups, this is judged to be proportionate given the heightened risks to this group. Mitigations are in place including encouraging these centres to offer support without social contact, for example, online.
13. **Economic impacts:** Pregnant women may also have particular concerns that maternity leave or returning from maternity leave could lead to higher risk of employment disruption associated with business closures. Pregnant women may also be impacted by reduced income, relative to the rest of the population, due to maternity pay and allowances, being exacerbated by potentially being furloughed as a result of business closures. Mitigations include clear guidance on expectations of employers

### **Race**

14. **Health risks:** ethnic minorities may have a heightened risk of exposure to Covid 19 as they are thought to be over-represented in roles that continue to require face to face working. Guidance for workplaces has been put in place by the government to mitigate this health risk. There has also been a significantly higher rate of infection in urban areas. Ethnic minority groups are significantly more likely to live in these areas and those that do are more likely to be poor, have poorer health and live in more densely packed households. All of which put these groups at a higher risk of infection and hospitalisation. Therefore measures to control contagion should benefit this group.
15. **Economic impacts:** ethnic minorities are disproportionately represented among those with lower incomes or working in lower paid jobs. Business closures therefore present a number of risks that may be felt more by people in this group. Lower income groups are also more likely to work in sectors where there is less ability to continue operation from home, and if they have the possibility to work from home, this may be impacted by caring responsibilities or lack of IT equipment. This increases the likelihood of income being reduced due to furloughing, and potential job loss. Business support has been introduced during this time to mitigate these risks.
16. **Access to guidance:** Due to the speed with which Regulations and associated guidance were brought in, some official sources of information remain in English only which may

affect groups who do not have English as a first language. Where these are reported, we are seeking to provide information in other languages.

17. **Enforcement:** In the 2011 census Black people constituted 3.5% of the population, but account for 6% of the Fixed Penalty Notices (FPNs) issued. There are other possible explanations for this data, but it might suggest higher rates of enforcement towards ethnic minorities, which could be replicated now. Police guidance is clear that enforcement should be the last resort. Home Office is working closely with the police to track community impacts and associated risks.
18. **Online abuse:** Right wing extremists (RWEs) appear to be exploiting Covid-19 to target minority groups, including Muslims, Chinese people, Jewish people and people of non-white origin. Anti-hate crime services are developing guidance on how minorities can protect themselves from some forms of abuse.

### **Religion or belief**

19. **Access to places of worship:** there is an adverse impact on many people of faith if their place of worship is closed, particularly those with religious festivals at this time.
20. **Diet:** there may be increased difficulty obtaining food that adheres to religious dietary restrictions, due to business closures.
21. **Funerals:** some funeral restrictions will have a specific impact on those of faith in a way that is indirectly discriminating. However, we have sought to mitigate this by consulting with faith leaders on rules for funerals at this time.

### **Sex**

22. **Health impacts:** women may have a heightened risk of exposure to Covid 19 as they are over-represented in many of the roles that continue to require face to face working, such as caring. Guidance for workplaces has been put in place by the government to mitigate health risk and efforts are being made to source PPE materials for health sector roles.
23. **Economic impacts:** women are more likely to be in lower income groups and are therefore at higher financial risk at this time. They are more likely to be impacted by businesses closures, working in sectors where there is less ability to continue operation from home; and if they have the possibility to work from home, this may be impacted by caring responsibilities or lack of IT equipment. This increases the likelihood of income being reduced due to furloughing, and potential job loss. Business support has been introduced during this time to mitigate these risks.
24. **Domestic abuse:** restrictions on movement and business closures present significant physical and mental risks to victims of domestic abuse, who are more likely to be women. A package of mitigations has been put in place, including government funding to domestic abuse charities.



25. **Enforcement:** men are more likely to be issued with Fixed Penalty Notices (FPNs) under these Regulations. Although this broadly reflects wider patterns of offending, the government has been clear that police enforcement of these Regulations must be proportionate and fair.

### **Sexual orientation**

26. **Isolation in a hostile environment:** There are concerns around young people who are isolated in homes with families who are not supportive of their sexual orientation or gender identity, with implications for physical and mental health. Government is in close contact with the LGBT third sector and key frontline organisations which have been adapting their services during the lockdown.
27. **Mental health:** studies have found that adults who identified as LGBT were twice as likely as heterosexual adults to experience symptoms of common mental disorder, for example, symptoms of anxiety or depression. Social distancing may exacerbate these problems.
28. **Access to healthcare:** LGBT people may not be accessing support when they need to due to fears of discrimination or poor treatment, thus being more likely to reach an acute problem with their health. We continue to fund the LGBT National Health Adviser to ensure that LGBT people's needs are considered across the NHS.
29. **Access to employment:** business closures could exacerbate existing problems faced by LGBT people, who have been found to experience more difficulty in finding employment compared to other groups.

### **Decision making**

30. At this time it is assessed that the need to protect lives by continuing this set of policies justifies the negative impacts identified. However, as evidence relating to the impacts of these policies develops, the government continues to roll out mitigating steps to minimise the disadvantage experienced by specific groups, for example, providing £750m funding for charities providing key support to disadvantaged groups, such as victims of domestic abuse; agreeing guidance on funerals with faith leaders to minimise impacts on religious groups; and providing food parcels to vulnerable people who are shielding, to minimise the practical difficulties created by these measures.
31. The government will continue to keep these policies and their impact under review to ensure that disadvantages are minimised wherever possible, and that measures only continue for as long as the level of risk is assessed to be sufficient to justify negative impacts.

### **Monitoring and evaluation**

32. The Government is obliged to review the necessity of the measures underpinned in law every 21 days, taking into account their effectiveness and impacts of these policies on people with protected characteristics and will continue to review measures on a rolling basis and not maintain measures where they are no longer justified.



## Annex: Full Equality analysis

### Equality analysis of social distancing measures, including restrictions on movement and restrictions on gatherings, in response to severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) in England

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## Full assessment

### Introduction

1. This document records the analysis undertaken by the Department to enable Ministers to fulfil the requirements placed on them by the Public Sector Equality Duty (PSED) as set out in section 149 of the Equality Act 2010. The PSED requires the Minister to pay due regard to the need to:
  - eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act;
  - advance equality of opportunity between people who share a protected characteristic and those who do not; and
  - foster good relations between people who share a protected characteristic and those who do not.
2. Ministers should therefore consider the equality impact outlined in this PSED when making future decisions concerning social distancing.

### Brief outline of policy or service

3. The government introduced emergency legislation and accompanying guidance in response to the serious and imminent threat to public health posed by the incidence and spread of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) in England. Central to the response is a set of social distancing measures designed to protect public health. The government's social distancing measures have been set out in 10 broad measures:

<b>1. Self-isolation 12/03</b>	<b>6. Bars and restaurants 20/03</b>
Individuals stay at home (a.k.a "self isolation") for 7 days from point of experiencing symptoms, or until better if still unwell after 7 days.	Closure of entertainment, hospitality (e.g. pubs, restaurants) and indoor leisure premises

<p><b>2. Household isolation 16/03</b> Household stay at home for 14 days if someone else in the house is symptomatic. Individuals continue to stay at home for 7 days from when symptomatic, or until better if still unwell after 7 days</p>	<p><b>7. All retail and indoor public spaces, notable exceptions 23/03</b> Closure of all retail with some exceptions, with closures including clothing and electronic stores, and closure of other venues such as libraries and places of worship.</p>
<p><b>3. Shielding the vulnerable 22/03</b> Shielding (effectively stay at home/ “self isolation”) of the 1.5m most clinically vulnerable for 12 weeks - each individual contacted by the NHS.</p>	<p><b>8. Outdoor Public spaces: playgrounds 23/03</b> Closure of playgrounds and outdoor gyms.</p>
<p><b>4. No gatherings of more than two people 23/03</b> No gatherings of more than two people in public, excluding from the same household. No social events, including weddings, baptisms and other ceremonies, but excluding funerals.</p>	<p><b>9. Mass gatherings 16/03</b> Ending all mass gatherings.</p>
<p><b>5. Schools 18/03</b> Closure of schools from Monday 23 March, apart from children of critical workers and vulnerable children. Guidance in Scotland is higher level with more discretion for local authorities about how they implement this, compared to the rest of the UK.</p>	<p><b>10. Stay at home guidance 23/03</b> All individuals to stay at home (initially for 3 weeks, and subject to review) apart from: shopping for basic necessities, as infrequently as possible; one form of exercise a day - alone or with members of household; any medical need, to provide care or to help a vulnerable person; and travelling to and from work, but only where this is absolutely necessary and cannot be done from home.</p>

6. Measures 4, 6, 7, 8, 9 and 10 in the table above are provided for in the Health Protection (Coronavirus, Restrictions) (England) Regulations 2020 (“The Regulations”), which came into force on 26 March 2020. The Regulations require the closure of businesses selling food or drink for consumption on the premises, and other businesses, to protect against the risks to public health arising from Covid-19, except for limited permitted uses. They impose restrictions on businesses which are permitted to remain open. The Regulations prohibit anyone leaving the place where they live without reasonable excuse, and ban public gatherings of more than two people. The Regulations also set out how these restrictions will be enforced, and identify the relevant persons capable of enforcing these restrictions. The Regulations are supplemented by guidance.
7. This assessment considers the package of social distancing measures in two parts. First, measures in the Regulations which are due for review (impact of closure on business, restrictions on movement and restrictions on gathering), and second, those measures not covered in the Regulations.

8. Regulations 4 and 5 provide that businesses and other venues across the UK must close at the end of trading on Monday 23 March 2020, and must not open for trade from Tuesday 24 March with exceptions set out in guidance. They require the closure of retail and public premises selling non-essential goods and items for hire although they may continue to operate in order to respond to online and telephone orders etc. Similarly, hotels and similar accommodation must close except for where people are living in them as interim abodes whilst their primary residence is unavailable to them, including key workers, permanent residents and non-UK residents, those unable to move into a new home, for homeless and vulnerable people, and to host blood donations. The regulations also provide for places of worship to close except for funerals (provided social distancing is observed) and for support of the vulnerable. There are also restrictions on crematoriums. The closures last until a direction is given by the Secretary of State.
9. Regulations 6 and 7 set out restrictions on movement and restrictions on gatherings. Specifically, they give effect to the following:
  - i) that no person should leave their home without a reasonable excuse. A non-exhaustive list of specified examples of “reasonable excuse” are given, such as to obtain essential goods e.g. food and medical supplies; to take exercise; to seek medical assistance; to provide care to a vulnerable person or emergency assistance; to donate blood; to travel for work or to volunteer; to attend funerals of household or close family members, or if no-one else is attending, friends; to meet legal obligations e.g. attending court; to access critical public services e.g. social services; to continue existing arrangements for contact between parents and children; for religious leaders to go to their place of worship; to move house; avoid harm e.g. injury or illness. These amount to restrictions on movement.
  - ii) They impose a prohibition on public gatherings of two or more persons, other than those who live in a household or in specified instances such as to assist a house move, provide emergency assistance or for essential work purposes.
10. The regulations require that the Secretary of State must review these restrictions every 21 days, with the first review taking place on 15 April 2020.
11. School closures were not included in the Regulations, but the limitations on schools (measure 5) were set out in guidance. This is similarly the case for self isolation measures (measures 1 and 2 from the table) and shielding the vulnerable (measure 3). The impact of these measures on people of protected characteristics are assessed in the final section of this document.
12. An equality impact assessment was undertaken during the development of the regulations and social distancing measures to determine what impacts they would have on people with different protected characteristics. This original

assessment was completed urgently and at pace in order to proceed with emergency legislation to protect public health. The 21-day review period for the Regulations has provided further opportunity to gather and assess relevant data and information on potential impacts of the policy. This updated equality impact assessment draws on new evidence of the impact of the social distancing policies on people with protected characteristics, to coincide with the review of the Regulations. The duty under s.149 Equality Act is an ongoing duty and as such this assessment will continue to be developed as evidence of the impact of these measures emerges.

13. This document also acknowledges some of the impacts of the listed measures that do not form part of the regulations under review. It is of particular relevance to note the positive benefits of shielding the vulnerable, set out below, which help to protect the most vulnerable in our society. To an extent the purpose of these measures frames the context for considering this package as a whole, as the ultimate goal of all of these interventions is the protection of life, in particular for people who are vulnerable because of their age, health, pregnancy, or other factors. As set out in the 'Decision Making' section, at this time it is judged that the need to protect lives by continuing this set of policies justifies the negative impacts identified. However, the Government will continue to keep these policies and their impact under review to ensure that disadvantages are minimised wherever possible, and that measures only continue for as long as the level of risk is assessed to be sufficient to justify these negative impacts.

## Analysis

14. As the social distancing measures apply equally to everyone, including the "reasonable excuses", we consider that there is no direct discrimination as the result of these policies. We assess below where policies may result in indirect discrimination on the basis of particular protected characteristics. Further consideration of shielding measures, which are specific to individual groups, is considered in the following section.
15. Overall it is clear that the measures will have adverse effects on groups with protected characteristics as a result of indirect discrimination. However, these impacts are, at the time of this review, justified by the aim pursued.
16. The PSED only requires that due regard be given to the impact of policies on people with the protected characteristic of marriage or civil partnership in limited circumstances. These are the need to eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act in the context of employment. We have not identified any impact on people with this protected characteristic, so it has not been addressed in detail in the below analysis.



## Closure of businesses

### Age

#### ***eliminate unlawful discrimination, harassment and victimisation because of age***

17. There may be differential impacts on different age groups from the closure of businesses. We recognise the particular benefit visiting business premises and other public places offers the over 70s. These include reducing social isolation, and could also include offering care and support services e.g. from community centre, sports and leisure facilities. Reducing access to these premises by enforced closures could have a negative impact. We recognise there may be increased risk to physical and mental health to these groups as a result. The Regulations do provide some in-built mitigation to this such as setting out in Regulation 6(2) that a “reasonable excuse” to leave home would include accessing the support services listed there. Further mitigations have been put in place to address these including a nationwide and localised efforts to mobilise volunteers to support these groups.
18. Limited access to IT resources, or lack of confidence in using them, may limit the ability of older groups to offset the effect of business closures through taking advantage of online business services such as online shopping. Older groups may be less likely to offset the effect of business closures through moving to delivery services of food and goods.
19. Additionally, we recognise that there could be a disproportionate negative impact from business closure provisions on younger people and children, including closing of sports facilities and leisure centres; soft play centres, arcades, bowling alleys; ice rinks; funfairs; youth centres; and libraries. The services these offer are disproportionately used by younger people and their parents. These sites offer mental and physical health benefits that we can reasonably expect to be reduced during the duration of business and premises closures. Mitigations include encouraging online provision of services, although we recognise not all of the benefits of these services can be replicated virtually.

#### ***advance equality of opportunity between people of different ages***

20. At this stage we have not identified any equality of opportunity impacts on people as a result of their age, due to the closure of businesses.

#### ***foster good relations between people of different ages***

21. At this stage we have not identified any impacts on good relations between people as a result of their age, due to the closure of businesses.

### Disability



***eliminate unlawful discrimination, harassment and victimisation for people with disabilities***

22. Based on the data available, we believe the fatality rate of novel Coronavirus is higher in those with pre-existing medical conditions, which could include some forms of disability.
23. Similar to those over 70, we recognise there may be increased risk to physical and mental health to these groups as a result of business closures, from increased social isolation and reduced care and support e.g. from community centre, sports and leisure facilities closures.
24. Since our original analysis, the specific health and well-being impacts of the closure of sports facilities on those with mental health conditions and/or particular disabilities such as autism have been further considered. We recognise that there is a particular negative impact on these groups from the closure of sports facilities including fitness studios, gyms, swimming pools or other indoor leisure centres and other leisure facilities. This negative impact is linked to reduced opportunity to improve physical health, and the mental health benefits that are associated with this. The provisions in Regulations and associated guidance concerning taking exercise and leaving the house for medical assistance and/or to avoid injury and illness go some way to mitigating this impact.
25. Moreover, the closure of community centres and libraries may also particularly impact those with mental health conditions and/or particular disabilities, and particularly disabled children, who use these services for support to improve mental and physical health.

***advance equality of opportunity between people with disabilities and those without, or between people with different disabilities.***

26. At this stage we have not identified any equality of opportunity impacts on people as a result of disability, due to the closure of businesses.

***foster good relations between people with disabilities and those without, or between people with different disabilities***

27. At this stage we have not identified any impacts on good relations between people as a result of disability, due to the closure of businesses.

**Gender reassignment**

***eliminate unlawful discrimination, harassment and victimisation because of gender reassignment***

28. At this stage we have not identified any discrimination, harassment and victimisation impacts on people as a result of gender reassignment, due to the closure of businesses.

***advance equality of opportunity between people who have undergone gender reassignment and those who have not***

29. At this stage we have not identified any equality of opportunity impacts on people as a result of gender reassignment, due to the closure of businesses.

***foster good relations between people who have undergone gender reassignment and those who have not***

30. At this stage we have not identified any impacts on good relations between people as a result of gender reassignment, due to the closure of businesses.

**Pregnancy and maternity**

***eliminate unlawful discrimination, harassment and victimisation for those who are pregnant or on maternity leave***

31. Based on the data available, we believe there could be particular health implications of Covid-19 for those who are pregnant. Similar to the analysis for the over 70s and those with underlying health conditions, we recognise the benefit visiting particular businesses and premises offer increased risk to physical and mental health to these groups as a result of business closures, from increased social isolation and reduced care and support e.g. from any antenatal or other support groups that were previously offered in person at community centre closures. Mitigations are in place including encouraging these centres to offer support without social contact e.g. online.

32. Pregnant women may also be affected by particular negative mental health impacts from business closures. For example, pregnant women may have concern that maternity leave or returning from maternity leave could lead to higher risk of employment disruption associated with business closures. Mitigations include clear guidance on expectations of employers.

33. There could also be negative economic impacts for pregnant women from business closures. This is with regard to their reduced income, relative to the rest of the population, due to maternity pay and allowances, being exacerbated by potentially being furloughed as a result of business closures.

***advance equality of opportunity between people who are pregnant or on maternity leave and those who are not***

34. At this stage we have not identified any equality of opportunity impacts on people as a result of pregnancy and maternity, due to the closure of businesses.

***foster good relations between people who are pregnant or on maternity leave and those who are not***

35. At this stage we have not identified any impacts on good relations between people as a result of pregnancy and maternity, due to the closure of businesses.

**Race**

***eliminate unlawful discrimination, harassment and victimisation because of race***

36. There could be particular impacts from some business closures disproportionately affecting certain races or nationalities. We do not yet have reliable evidence on the representation of certain races and nationalities by business in terms of ownership but are considering appropriate steps to take on this ahead of the next review.
37. Some groups with non-protected characteristics are expected to be disproportionately impacted by the Regulations. These groups are or could be correlated with those from black and minority ethnic groups. In particular, BAME people are disproportionately represented among those with lower incomes or working in lower paid jobs.
38. Lower income groups may be disproportionately impacted by forming a higher proportion of employees of those businesses that remain open. These include markets such as supermarkets, corners shops, convenience stores and newsagents, petrol stations, pet supply shops, agricultural supply shops, laundrettes and dry cleaners. For this subset of lower income groups, adverse health impacts can be expected from increased risk of exposure to novel Coronavirus. Guidance has been put in place by the government for employees which covers premises which remain open to mitigate this health risk. The converse is expected from lower income groups that work in those businesses that have been closed i.e. a positive health impact.
39. Lower income groups may be less likely to have access to good quality living space and/or outdoor space and/or may live in more deprived or urban areas with fewer open spaces which will mean a higher proportionate impact of the closure of sports and other leisure facilities on the mental and physical health of these groups. The government is publicising free ways to improve mental and physical health through using online resources. Lower income groups are also likely to be less able to replicate the services from closed businesses compared to higher income groups, for example, purchasing home gym equipment to offset sports and leisure facilities closures.
40. Lower income groups may be more likely to be represented in the workforce of businesses closed by these Regulations, where there is less ability to continue operation off-site, for example, through working from home and as above. This may mean that this group may be more likely to be furloughed and see a reduction

in their income, or in the worst cases, lose their jobs. They might also suffer more from any measures with an adverse economic impact, like business closures, as they are least able to financially sustain interruptions to income and livelihoods. As above, it is thought that there is likely to be a disproportionate representation of BAME individuals and women working in those jobs. These impacts could also link to reduced equality of opportunity, for example, less opportunity to develop new skills. Small business grants and business loans, support for the self-employed and business interruption loans have been introduced by the government to support businesses during this time to mitigate the impact of these closures. Conversely a positive economic impact is expected for lower income groups that work in those businesses that remain open such as supermarkets.

41. Lower income groups may also have a lower ability to effectively work from home, from potentially more limited access to IT resources, less space in the home and more caring responsibilities for children or the vulnerable within the home and this could lead to reduced income or loss of work.
42. Limited access to IT resources may also limit the ability of lower income groups to offset the effect of business closures through taking advantage of online business services such as online shopping.
43. Lower income groups may be less likely to offset the effect of business closures through moving to delivery services of food and goods in cases where cost of delivery is higher compared to purchase on site. This may also have read across to health impacts such as less access to more nutritional food.
44. While we recognise that HM Treasury has introduced a number of mitigating measures to offset economic impacts, we have included these impacts for completeness and are recognising that they may not be fully offset.
45. Other factors associated with race include immigration status for those with no recourse to public funds who are likely to be worse affected by income reduction and disruption
46. Due to the speed with which Regulations and associated guidance were brought in, some official sources of information remain in English only which may affect groups who do not have English as a first language, which is likely to be associated with race. Where these are reported, we are seeking to provide alternative information in other languages.

***advance equality of opportunity between people of different race***

47. At this stage we have not identified any equality of opportunity impacts on people as a result of their race, due to the closure of businesses.

***foster good relations between people of different race***

48. At this stage we have not identified any impacts on good relations between people as a result of race, due to the closure of businesses.

### **Religion or belief**

#### ***eliminate unlawful discrimination, harassment and victimisation because of religion or belief***

49. The closure of places of worship is a highly sensitive issue. It is clear that there is an adverse impact on people of faith if their place of worship is closed (an impact on all those who follow a faith that practices communal prayer). There is a particular concern of the impact on communal prayer over upcoming religious festivals across different faith groups. There are further concerns regarding those with dietary restrictions as a result of their faith, who cannot access shops that provide for them due to business closures. Similarly, some funeral restrictions will have a specific impact on those of faith in a way that is indirectly discriminating. However, this continues to be outweighed by the public health benefits that the measures provide.

#### ***advance equality of opportunity between people of different religion or belief***

50. At this stage we have not identified any equality of opportunity impacts on people as a result of religion or belief, due to the closure of businesses.

#### ***foster good relations between people of different religion or belief***

51. At this stage we have not identified any impacts on good relations between people as a result of religion or belief, due to the closure of businesses.

### **Sex**

#### ***eliminate unlawful discrimination, harassment and victimisation because of sex***

52. There could be particular impacts from some business closures disproportionately affecting people based on their sex, for example, women tend to dominate employment within caring and leisure industries occupations, so may be disproportionately affected by, for example, hair salon closures. Small business grants and business loans, support for the self-employed and business interruption loans have been introduced by the government to support businesses during this time to mitigate the impact of these closures.

53. Business closures may disproportionately impact victims of domestic abuse, who are predominantly women, through having less recourse to go out to visit businesses or leisure premises and therefore having to remain at home with their abuser. A concern has been raised via MPs that the exemption for off-licences to remain open is exacerbating the impact on this group. Mitigations have been in

place including government funding to domestic abuse charities (see the subheading on Sex under 'Restrictions on movement').

54. Further impacts relating to children and to those from lower income groups may also impact women who can form a higher proportion of single-parent families, take on more child-caring responsibilities or form a higher proportion of lower income groups relative to men.

55. Some groups with non-protected characteristics are expected to be disproportionately impacted by the Regulations. These groups are or could be correlated with sex. In particular, women are disproportionately represented among those with lower incomes or working in lower paid jobs.

56. Women are disproportionately represented in lower income groups, and are therefore more likely to see the same negative impacts as low earners described in paragraphs 36-42, and in particular financial instability coupled with higher likelihood of taking on child and elderly caring responsibilities, leaving their employment situation vulnerable to personal circumstances. As stated previously, HM Treasury has introduced a number of mitigating measures to offset economic impacts.

***advance equality of opportunity between people of different sex***

57. At this stage we have not identified any equality of opportunity impacts on people as a result of sex, due to the closure of businesses.

***foster good relations between people of different sex***

58. At this stage we have not identified any impacts on good relations between people as a result of sex, due to the closure of businesses.

**Sexual orientation**

***eliminate unlawful discrimination, harassment and victimisation because of sexual orientation***

59. Business closures could exacerbate existing problems faced by those groups who find it harder to seek new forms of employment, should businesses be forced to close permanently in worst cases. For example, LGBT people can experience more difficulty in finding employment compared to other groups, so could therefore be disproportionately impacted.

60. Further, LGBT people may be particularly reliant on access to safe spaces, and therefore disproportionately negatively impacted as a result of some types of business closures, for example, community centre closures.

***advance equality of opportunity between people of different sexual orientation***

61. At this stage we have not identified any equality of opportunity impacts on people as a result of sexual orientation, due to the closure of businesses.

***foster good relations between people of different sexual orientation***

62. At this stage we have not identified any impacts on good relations between people as a result of sexual orientation, due to the closure of businesses

## **Restrictions on movement and restrictions on gatherings**

### **Age**

***eliminate unlawful discrimination, harassment and victimisation because of age***

63. We do not at this stage believe data on the issuing of fixed-penalty notices (FPN) showing a skew towards younger groups is necessarily due to discriminatory practices. Initial polling work suggests, for instance, likely higher levels of non-compliance among younger people. As such, we have reason to believe disparities are likely to reflect broader behaviours among younger people.

64. Disparities in age are also broadly in line with offending patterns more generally. The data states that around two-thirds of those issued with notices were under 35 (3% were 18 to 24, 16% were aged 25-29 and 15% 30-34).

***advance equality of opportunity between people of different ages***

65. It is possible that restrictions on movement and gatherings could have differential implications based on age. Older people are more likely to be isolated, or less able to mitigate the social isolation arising from lockdown with technological solutions. Older people or those with dementia might see significant negative impacts on their wellbeing by changes to their routine or contacts. However, the health impact on people over 70, compared with not making the Regulations, is said to be positive because of the higher fatality rate among older people.

66. We know that 850,000 in the UK have dementia and 675,000 in England. DHSC is bringing forward research to support the response to COVID-19, including a project on the best ways to mitigate the psychological and social impact of COVID-19 on people with dementia living in the community and their family carers. This research builds on the IDEAL research funded by Alzheimer's Society (and previously by the joint NIHR/ESRC initiative on dementia care), and is funded via the NIHR Older People and Frailty PRU. Work has already started with phased outputs to August 2020. The research and outputs will focus on how people with dementia and their carers should stay safe through the crisis, and



public health risk reduction messages which should continue to apply as people isolate.

67. We have also gathered some anecdotal evidence about how people with dementia are being impacted. For example, they are more likely to face further isolation and confusion, as well as practical problems such as shopping.
68. Recent polling suggests that young people (16-24) are most likely to self-report as finding it “extremely difficult” to cope with lockdown.<sup>1</sup> We will consider further any effects on younger people.

***foster good relations between people of different ages***

69. As we see in the data, young people are more likely to be issued with Fixed Penalty Notices (FPNs) under these Regulations. Although this broadly reflects wider patterns of offending, the government has been clear that police enforcement of these Regulations must be proportionate and fair. Enforcement that is perceived to be unfair or heavy handed could damage relationships with people with those protected characteristics. This has the potential to undermine the social distancing measures more broadly.
70. Therefore police guidance has been clear that enforcement should be the last resort. The police are expected to follow the principles under policing by consent, to work to engage, explain, encourage and then enforce. We will continue to work closely with the police to track community impacts and associated risks.

**Disability**

***eliminate unlawful discrimination, harassment and victimisation for people with disabilities***

71. We recognise that some people who have a disability or health condition could be at a disadvantage compared to those who do not have a disability and are required to work from home as part of the government response to Covid-19.
72. The Access to Work scheme offers advice and a discretionary grant of up to £60,700 per year to people with a disability or health condition, for support above the level that an employer would be required to provide as a reasonable adjustment under the Equality Act 2010. The Scheme can be applied to online, by phone, by NGT text relay, British Sign Language video relay service, and through a range of other alternative formats.
73. During the pandemic, Access to Work has taken steps to put in place easements to enable disabled people to work more flexibly including:

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<sup>1</sup> <https://www.bbc.co.uk/news/uk-52228169>

- a. prioritising applications from disabled people who are key workers or have a job to start within 4 weeks ensuring that grant funding is available for the support from day one of their job;
- b. working with disabled people and their employers to enable the transfer of specialist equipment from the workplace to the disabled persons home where there are difficulties with the employer doing this;
- c. enabling disabled people to adapt their support to meet their requirements in the new environments and barriers they face, for example: changing from British Sign Language face-to-face support to Video Remote Interpreting in order to follow government advice;
- d. enabling flexibility to the upper limit of Access to Work support during the pandemic by averaging the total package of support over the 3 year award;
- e. where an employer provides standard equipment, but additional specialist software is required, Access to Work will look to provide funding as appropriate; and
- f. where support worker support is coming to an end, we are extending customers' awards by 6 months to ensure the disabled person can continue to receive the in work support they need during the pandemic.

74. Access to Work service delivery are recording those applications where Covid-19 easements have been applied and we will review these in line with the Cabinet Office guidance as part of the government's response to Covid-19.

***advance equality of opportunity between people between people with disabilities and those without, or between people with different disabilities***

75. The health impact for people with some forms of disability, compared with not making the Regulations, is said to be positive because of the higher fatality rate.

76. Nonetheless, Covid 19 is presenting this vulnerable group of individuals, who rely on a range of services and often specialist support in the community, with a unique set of challenges as staffing and services are impacted by Covid 19 and are insufficient. We would expect social distancing to exacerbate mental health issues for people with learning disabilities and autism (LD&A) conditions as they do not have access to the same community services. Managing challenging behaviours at home is important to prevent escalation and possible admission to hospital. There is also a risk of existing health inequalities being compounded as a result of Covid 19, which may have longer term implications including costs for health and care services.

77. For example, we know that 70-80% of autistic people will have a mental health problem at some point in their lives. We have emerging evidence that social distancing is exacerbating this as people who relied on community services no longer have access to these to support their mental health and wellbeing. We are hearing from stakeholders that autistic people and those with learning disabilities

are becoming distressed as a result of changes to routine, loss of care team through illness / self-isolation or just not being able to do usual activities. Managing behaviours that are seen to challenge at home to prevent escalation of need, breakdown of community placements and admission to mental health hospital is a very real issue. Such breakdowns of community placements would place greater stress of NHS services and Local Authority commissioners at a time when we are trying to alleviate pressure on these services.

78. DHSC are closely engaging with charities that are representing disabled people to discuss the impact of social distancing guidance. We know anecdotally that the guidance is impacting on people's routines which are essential to keeping people with autism and learning disabilities well. There are also issues about autistic people and those with learning disabilities not always understanding the social distancing rules necessitating police involvement, which could be avoided with the right preventative support in place. We know that it is crucial for individuals to go outside and exercise in order to manage their behaviour and keep well.
79. The disturbance of people's routine can lead to an increase in challenging behaviour that puts people at risk of being admitted into hospital for care and treatment. We also know that people with learning disabilities and autism who are admitted into hospital under the Mental Health Act are in places far away from their homes and experience significant delays in discharge which is distressing for the individuals and their families. For individuals who are already in placements, an increase in the presentation of challenging behaviour could result in a placement breakdown and needing to be cared for in a different location.
80. We are also hearing anecdotally that an increasing number of special and residential schools are closing due to staffing issues, meaning that the needs of children with Special Educational Needs and Disabilities (SEND) can't be met within the school setting resulting in more children with complex needs being looked after at home. This is without any additional practical support being provided.
81. People with addictions amounting to a disability may struggle to access their usual support networks during lockdown (e.g. AA meetings, methadone prescriptions from busier-than-usual pharmacies).<sup>2</sup>
82. People with disabilities in live-in institutions will be particularly affected by the inability to receive visits from immediate family (particularly as they may have

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<sup>2</sup> <https://www.bbc.co.uk/news/uk-52139895> and <https://www.kentonline.co.uk/maidstone/news/life-as-an-addict-during-lockdown-224857/>

additional difficulties using technology to communicate).<sup>3</sup> As a result of this NHS England has recently changed their clinical guidance to ensure that individuals, such as those with autism and learning disability, are able to still have visits with their relatives, either in person or through digital technology where appropriate.

83. We also understand, anecdotally, that people with physical and learning disabilities are struggling to access food delivery slots or visit the supermarkets and this is impacting on their physical and mental health.

84. To address the above needs arising directly from Covid 19 and to mitigate against the negative impacts of Covid 19, DCMS is exploring options to:

- a. improve the provision and dissemination of Covid 19 information tailored to the specific needs of this vulnerable cohort of people, including accessible information for different audiences in different formats;
- b. improve the provision of Covid 19 advice specific to people with learning disabilities, those with complex needs and who are autistic, including maintaining and increasing helpline and casework capacity;
- c. create an infrastructure needed to deliver key Covid 19 support programmes remotely; and
- d. share Covid 19 insight and resources between organisations to reduce duplication, improve coordination and ensure people are signposted to the right support.

***foster good relations between people with disabilities and those without, or between people with different disabilities***

85. At this stage we have not identified any impacts on good relations between people as a result of disability, due to restrictions on movement and restrictions on gathering.

**Gender reassignment**

***eliminate unlawful discrimination, harassment and victimisation because of gender reassignment***

86. Trans people may be unable to get hormones from the GP, have gender affirming surgery cancelled or increased waiting times to see trained counsellors and professionals, with resulting severe negative impacts on mental health. DHSC is aware of this risk and has approached NHS England on this matter, as commissioners of these services.

***advance equality of opportunity between people who have undergone gender reassignment and those who have not***

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<sup>3</sup> <https://www.theguardian.com/society/2020/mar/24/my-sister-learning-disability-cant-visit-coronavirus>



87. At this stage we have not identified any equality of opportunity impacts on people as a result of gender reassignment, due to restrictions on movement and restrictions on gathering.

***foster good relations between people who have undergone gender reassignment and those who have not***

88. At this stage we have not identified any impacts on good relations between people as a result of gender reassignment, due to restrictions on movement and restrictions on gathering.

**Pregnancy and maternity**

***eliminate unlawful discrimination, harassment and victimisation for those who are pregnant or on maternity leave***

89. There may be differential impacts of this policy on expectant or new mothers, in particular inability to attend the usual classes and support groups. Many resources are now moving online to maintain access. However, lack of face-to-face access might be challenging for those without digital resources or limited ability to access online support though this challenge is not limited to pregnant women.<sup>4</sup>

***advance equality of opportunity between people who are pregnant or on maternity leave and those who are not***

90. At this stage we have not identified any equality of opportunity impacts on people as a result of pregnancy and maternity, due to restrictions on movement and restrictions on gathering.

***foster good relations between people who are pregnant or on maternity leave and those who are not***

91. At this stage we have not identified any impacts on good relations between people as a result of pregnancy and maternity, due to restrictions on movement and restrictions on gathering.

**Race**

***eliminate unlawful discrimination, harassment and victimisation because of race***

92. Due to the significant force to force variation in enforcement it is difficult to say whether the national racial disparities in the data are accurate however it is likely that some racial disparities do exist. For example, in the 2011 census Black people constituted 3.5% of the population, but account for 6% of the Fixed Penalty Notices

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<sup>4</sup> <https://www.itv.com/news/anglia/2020-04-02/pregnancy-in-lockdown-the-support-for-mums-during-the-coronavirus-crisis/>

(FPNs) issued. The age of the 2011 census data makes it difficult to assess how accurate these disparity figures may be as since 2011 there have been changes to the number and proportion of BAME people in the UK.

93. We cannot conclude based on these disparities alone that they are due to unlawful discrimination. This may, for instance, reflect the overrepresentation of BAME groups among younger demographics.
94. We have also noted that there has been a significantly higher rate of infection, and a higher number of overall cases in urban areas and cities, specifically London and the West Midlands. BAME groups are significantly more likely to live in these areas. BAME groups living in these urban areas are more likely to be poor, have poorer health and live in more densely packed households. All of which put these groups at a higher risk of infection and hospitalisation.
95. This would suggest that as BAME populations are more at risk, the effective enforcement of these measures in the country as a whole may be to the benefit of this group.
96. We are working with the police to understand whether restrictions on movement has increased the risk or incidence of online abuse for minority groups. We do not hold data on whether the overall scale of such abuse has increased.
97. Right wing extremists (RWEs) are almost certainly exploiting Covid-19 to target minority groups:
- a. high profile extremists have accused Muslims and other minorities of breaching lockdown measures, for example, by attending mosques, and criticised authorities for allowing them to do so; and
  - b. extremists taking advantage of anonymity on message-boards are using racist language, conspiracy theories and incitement to target Chinese people, Jews and people of non-white origin
98. Anti-hate crime services such as CST and Tell Mama has reported hate groups disrupting online community events through 'Zoombombing'. These groups are developing guidance on how minorities can protect themselves from such incidents.

***advance equality of opportunity between people of different race***

99. There may be differential impacts of the restriction on movement depending on race resulting from overcrowding or housing quality. Poor housing conditions and overcrowded households could lead to a quicker transmission of COVID-19 should a member of their household be infected. In 2014 to 2017, around 679,000 (3%) of the estimated 23 million households in England were overcrowded (that is, they had fewer bedrooms than they needed to avoid undesirable sharing); around 2% of White British households experienced overcrowding, compared with 30% of Bangladeshi households (the highest

percentage). In the 2 years to March 2018, an average of 4% of households in England had damp in at least one room of their home (871,000 homes). Bangladeshi and Black African households were more likely to have damp problems than White British households

100. The new COVID-19 legislation may result in a higher proportion of individuals from Ethnic Minority communities having restricted access to mental health, learning disability, and autism services. In 2018/19, people in the Black Caribbean specific ethnic group were the most likely to use mental health, learning disabilities and autism services, out of all ethnic groups for which ethnicity was reliably recorded. Under the new COVID-19 legislation there is a question as to whether this variance will increase or decrease during this period. Less accountability by reducing the number of doctors required to 'section' an individual from 2 to 1 may increase racial bias Black people are 4 times more likely than white people to be detained under the Mental Health Act (England, 2017/18).

***foster good relations between people of different race***

101. As we see in the data BAME people are more likely to be issued with Fixed Penalty Notices (FPNs) under these Regulations. The government has been clear that police enforcement of these Regulations must be proportionate and fair. Enforcement that is perceived to be unfair or heavy handed could damage relationships with people with those protected characteristics. This has the potential to undermine the social distancing measures more broadly. This is why police guidance has been clear that enforcement should be the last resort. The police are expected to follow the principles under policing by consent to work, engage, explain, encourage and then enforce. We will continue to work closely with the police to track community impacts and associated risks.
102. The Home Office will continue to regularly liaise with police forces, who will report back on community reactions.

**Religion or belief**

***eliminate unlawful discrimination, harassment and victimisation because of religion or belief***

103. Restrictions relating to funeral rites may have a particular impact on different faith communities, although efforts have been made to mitigate these impacts by consulting with faith leaders on guidance for funerals during this crisis.

***advance equality of opportunity between people of different religion or belief***

104. Restrictions on gatherings will prevent believers participating in communal prayer/worship which may be central to their faith (everything from Jumuah



(Muslim Friday prayers) to Easter Sunday services to Passover to iftar and Eid).<sup>5</sup> These restrictions apply across all faiths, but their impact will depend on the time and duration of particular celebrations specific to a religion or belief.

***foster good relations between people of different religion or belief***

105. At this stage we have not identified any impacts on good relations between people as a result of their religion or belief, due to restrictions on movement and restrictions on gathering.

**Sex**

***eliminate unlawful discrimination, harassment and victimisation because of sex***

106. As with offending in general, the large majority (around 8 in 10) of Fixed Penalty Notices (FPNs) were issued to men.
107. The health impact on men, compared with not making the Regulations, is positive because of the higher fatality rate among men.
108. There are disproportionate impact on victims of domestic violence, who are predominantly women, of having to remain at home with their domestic abuser. Regulation 6(2) does contain provision that is relevant to this group by specifying that leaving home to prevent illness or injury or to escape a risk of harm constitutes a “reasonable excuse” (regulation 6(2)(m)), as does accessing critical public services (such as social services or services provided to victims of crime: regulation 6(2)(i)(ii) and (iv)). However, there are mitigations which are being considered in relation to the particular circumstances of domestic violence, and the police response.
109. In response to evidence and concerns that domestic abuse may be increasing as a result of the restrictions under the Regulations, the government has taken the following steps to mitigate this impact:
- a. the Home Secretary launched a new public awareness raising campaign highlighting that if anyone is at risk of, or experiencing domestic abuse, help is still available;
  - b. a £750 million of HMT funding for the voluntary sector to support charities including those working on domestic abuse;
  - c. additionally, the Home Secretary announced that the Home Office is working with charities and the Domestic Abuse Commissioner to provide an additional £2 million to immediately bolster domestic abuse helplines and online support;
  - d. putting into the regulation the clear provision individuals can leave home to avoid injury or the risk of harm

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<sup>5</sup> <https://www.bbc.co.uk/news/uk-england-london-52201066>; <https://www.mirror.co.uk/news/uk-news/ramadan-eid-2020-how-coronavirus-21834544>

- e. clarifying legal guidance for police that Domestic Violence Protection Orders that require perpetrators to leave the family home override the law on social distancing; and
- f. working with domestic abuse charities and police to ensure that victims understand they should leave their home if they are under threat and that police and victims services are still there to assist them.

***advance equality of opportunity between people of different sex***

110. At this stage we have not identified any impacts on equality of opportunity impacts on people because of sex, due to restrictions on movement and restrictions on gathering

***foster good relations between people of different sex***

111. As we see in the data, men are more likely to be issued with Fixed Penalty Notices (FPNs) under these Regulations. Although this broadly reflects wider patterns of offending, the government has been clear that police enforcement of these Regulations must be proportionate and fair. Enforcement that is perceived to be unfair or heavy handed could damage relationships with people with those protected characteristics. This has the potential to undermine the social distancing measures more broadly. Therefore, police guidance has been clear that enforcement should be the last resort. The police are expected to follow the principles under policing by consent, to work to engage, explain, encourage and then enforce. We will continue to work closely with the police to track community impacts and associated risks.

**Sexual orientation**

***eliminate unlawful discrimination, harassment and victimisation because of sexual orientation***

112. At this stage we have not identified any discrimination, harassment and victimisation impacts on people as a result of their sexual orientation, due to restrictions on movement and restrictions on gathering.

***advance equality of opportunity between people of different sexual orientation***

113. There are concerns around young people who are isolated in homes with families who are not supportive of their sexual orientation or gender identity, and for older members of the LGBT population who may be particularly isolated. In the National LGBT Survey 2017, 29% of respondents had experienced a negative incident involving someone that they lived with due to being LGBT, or being thought to be LGBT, in the 12 months leading up to the survey. Of these respondents, 38% identified a parent or guardian as a perpetrator of the most serious incident.

114. Around a quarter (24%) of respondents to the National LGBT Survey 2017 reported that they were not open about being LGBT with any family members that they lived with (excluding partners) in the 12 months preceding the survey. A similar proportion (25%) reported that they were not open about being LGBT with any other people, for example, flat mates, that they live with.
115. There is evidence that LGB people's general and mental health is worse than heterosexual people. Individuals from groups who already experience poorer outcomes in healthcare may be disproportionately affected by the wider healthcare implications of the current situation.
116. Analysis of population studies found that adults who identified as LGB were twice as likely as heterosexual adults to experience symptoms of common mental disorder (e.g. symptoms of anxiety or depression). An online survey commissioned Stonewall in 2017 found that 52% of LGBT respondents in Britain reported experiencing depression in the previous year. Social distancing may make it harder to look after your mental health<sup>6</sup>.
117. Sources of advice and support will continue to be available to victims – including for example through the National Domestic Abuse Helpline, which is staffed 24 hours a day, every day of the year, by a dedicated team of experts.
118. LGBT people may not be accessing support when they need to due to fears of discrimination or poor treatment thus being more likely to reach an acute problem with their health:
- a. the National LGBT Survey 2017 found that 16% of respondents who accessed or tried to access health services had a negative experience because of their sexual orientation in the 12 months preceding the survey; and
  - b. research commissioned by GEO found that LGBT people's dissatisfaction with health services are largely driven by experiences of discrimination and a lack of staff knowledge on LGBT people's health needs. This could mean that LGBT people may be less likely to try to access healthcare for COVID-19 than non-LGBT people.
119. We have been working with DHSC and the LGBT National Health Adviser to identify and support the health needs of LGBT people during the COVID-19 outbreak. DHSC are aware of the potential risks of this beyond Covid-19 and it forms part of the ongoing work from the LGBT Action Plan. Communications campaigns are targeting the whole population, including LGBT people.
120. LGBT Charity, Galop has noted anecdotal evidence of an increase in online hate.

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<sup>6</sup> Government Equalities Office. 2018. National LGBT Survey. Available at <https://www.gov.uk/government/publications/national-lgbt-survey-summary-report>

121. We are continuing to fund the LGBT National Health Adviser to ensure that LGBT people's needs are considered across the NHS.

***foster good relations between people of different sexual orientation***

122. In times of self-isolation, some LGBT people are locked in a house or environment with people who are not LGBT, or even not accepting of their sexual orientation. This can have a severe negative impact on good relations on a micro-level, resulting in domestic violence or homelessness. There is no view on whether Covid-19 may foster good relations, either on a micro- or macro-level. Possibly, through current, moderate (social) media attention about the impact of Covid-19 on LGB people, society's understanding of LGBT positions is growing, as well as existing solidarity.
123. Government is in close contact with the LGBT third sector and key frontline organisations which have been adapting their services to support LGB people during the lockdown.
124. We have announced that charities across the UK will receive a £750 million package of support to ensure they can continue their vital work during the Covid-19 outbreak. As part of a UK-wide package of support, £360 million will be directly allocated by government departments to charities providing key services and supporting vulnerable people during the crisis.

## **Other Measures**

### **Closing schools**

For the closure of schools we have made a high level assessment of the characteristics of age, race and disability. Further work will be done to carry out a full equalities assessment.

125. The closure of schools has a direct impact on children of school age and disadvantages them in comparison to their seniors that had continuous access to education. In mitigation, the government is requiring that schools provide resources online and that schools remain open for vulnerable children.
126. The data shows that many parents/guardians have chosen not to send their children to school even though they are eligible, for example, vulnerable children. They may in turn be adversely affected by being isolated at home and have less contact with their social worker and less intensive support.
127. There are all race and gender implications for the policy: the attainment gap (and, in early years, the word gap) is greater for vulnerable children – and especially for white working class and black Caribbean children, especially boys.

This will be exacerbated by school closures given vulnerable children are disproportionately from BAME backgrounds.

128. Some children with underlying health conditions will be shielded, meaning fewer educational opportunities. Disabled children are also expected to be disproportionately affected by the closures due to the specific educational needs they frequently require, which cannot be provided at home and early data showing more SEN school closures due to staff shortages. Although vulnerable children would still be eligible to attend school, the evidence suggests that this is not being taken up.

### **Self isolation**

129. The requirements to self-isolate for 7 days if presenting symptoms of coronavirus, and to self-isolate for 14 days if a member of the household has presented with symptoms (social distancing measures 1 and 2 from the table in the introduction) were set out in government guidance.
130. Broadly, this will have similar impacts as those described under the restrictions on movement section above. However, self-isolation goes further in that it requires people to stop making use of the reasonable exceptions, for example, exercising and visiting the shops for essential items. In addition to the broadly impacts on each of the characteristics outlined above, it is noteworthy that self-isolation will have particular impacts on:
- a. older people, who need access to essential supplies but are more likely to be isolated and unable to call upon others to support them, for example, by delivering essential shopping;
  - b. disabled people who have particular needs such as exercising (as noted above). The clarification that disabled people can exercise more than once a day has not explicitly been extended to cover periods of self-isolation. The requirement to self-isolate for 14 days if a household member has symptoms, even if not displaying symptoms themselves, will be particularly difficult for some disabled individuals; and
  - c. pregnant women may be particularly impacted if they are unable to access maternity services during their isolation.

131. Overall these restrictions are time-limited and the benefits of containing the disease are particularly important in these instances, which relate to people displaying symptoms. Therefore the overall impact on these groups is expected to be positive.

### **Shielding**

132. The government published guidance on the shielding of vulnerable individuals on 21 March 2020. There is no obligation on individuals to follow this guidance, but it is strongly recommended that people categorised as extremely vulnerable stay at home at all times and avoid any face-to-face contact for an



initial period of 12 weeks, with potential for extension. Visits for essential support are allowed.

133. These measures are most likely to impact people with a disability, those over the age of 70, and pregnant women (the impacts are the same as those described above under self-isolation). Overall the health impact on these groups, compared with not issuing this guidance, is positive because of the higher fatality rate.
134. The government has also implemented mitigation measures, including a registration service for the extremely vulnerable. This allows the government to organise support for access to essential supplies and to specific care needs.
135. Nonetheless it is important to recognise that there are likely to be significant negative additional impacts that are likely to result from these measures that are not being mitigated. In particular, there will likely be negative impacts to physical and mental wellbeing as a result of being limited to the home, and losing access to care and support services accessed elsewhere.

## Mitigations

136. Since the start of this crisis the government has made efforts to mitigate the negative impacts of necessary measures, both in the design of regulations and in the subsequent support measures that have been introduced.
137. Regulations have made exceptions wherever possible to minimise negative impacts on individuals and businesses, for example, ensuring that people can still leave their houses for essential activities and exercise, and making provision for businesses to move online wherever possible. Government has likewise encouraged centres and services providing support to vulnerable groups - such as social contact - to move online where possible to minimise the impact on isolated and vulnerable people. The government also introduced a registration service for the extremely vulnerable to ensure they have access to essential supplies and specific care needs, and has provided food parcels to extremely vulnerable people who are shielding, to minimise the practical difficulties they face at this time.
138. The government has issued guidance on a number of topics to improve people's understanding of the measures introduced, and minimise the risk of their misinterpretation which could further exacerbate negative impacts. For example, guidance has been produced for workplaces that remain open to ensure that health risks to workers are minimised.
139. We have also introduced a suite of financial support measures for businesses and individuals impacted by the economic climate and business closures, to minimise the disadvantages suffered as a result of the crisis. These

measures include increasing the Universal Credit standard allowance and Working Tax Credit basic element, and introducing the Coronavirus Job Retention Scheme, small business grants, business loans, support for the self-employed and business interruption loans.

140. Steps have also been taken to address particular disadvantages identified for certain groups; most notably the package of measures announced to support victims of domestic abuse, which includes the public awareness campaign, the £750 million HMT funding, further work with charities etc. as listed above.

141. Efforts have also been made to consult with key impacted groups to ensure their needs are being taken into account, for example collaboration with faith leaders on the development of new guidance for funerals, and DHSC's efforts to mitigate the impact of social distancing measures on disabled people, which include:

- DHSC along with NHS England and NHS Improvement (NHSEI) jointly hosting a weekly webinar with learning disability and autism stakeholders to discuss emerging issues and how these can be resolved;
- DHSC working closely with learning disability and autism charities to develop bids for government funding that will boost their online and telephone service capacity to upscale their support offer and prevent the deterioration of the physical and mental health;
- DHSC engaging with the Disability Unit, Public Health England and NHS England to improve the accessibility of government guidance for disabled people. This includes producing easy read, audio and BSL versions;
- DHSC working with Defra and the Disability Unit to ensure disabled people are considered to be a non-shielding vulnerable group;
- DHSC working to provide clarity to disabled people on their need to take exercise; and
- DHSC publication of a strategy to support the medical and caring workforce and to highlight the needs of people with physical and learning disabilities, complex needs and autism which recognises the concerns of the adult social care sector.

142. To ensure that appropriate care is available for pregnant women, and a proportionate approach is taken to meet their needs and balance risks, a number of steps have been taken:

- the Royal College of Obstetricians and Gynaecologists (RCOG), the Royal College of Midwives (RCM) and the Royal College of Anaesthetists (RCA) are working closely with NHSE, the four UK health departments, system regulators, academics, etc. to produce guidance and information for women which is kept under constant review to ensure the advice to women and clinicians is proportionate and reflective of the various stages of the course of the pandemic and emerging evidence;
- following passage of the Coronavirus Act, the Nursing and Midwifery Council (NMC) set up the Covid-19 emergency temporary register on 27 March and invited nursing and midwifery professionals who left the



register up to three years ago to join. In addition, varied emergency education standards have been introduced to enable the last six months in the final year of undergraduate midwifery degrees to be spent in supervised clinical placements. Students in England who have student loans will be offered a salary at pay band 4 for this period as an incentive.

- As of 14 April, 684 Midwives have joined the NMC Emergency Register. This figure is made up of 581 registered midwives and 103 dual registered Midwives.
- As of 13 April, we have 516 midwife students (Y3, last 6 months) and an additional 109 (Y2 and Y3 first 6 months) opting to be deployed in service;
- maternity services are using remote means to provide additional antenatal and postnatal consultations. Remote consulting enables greater compliance with social distancing measures recommended for pregnant women and maternity staff; and
- other practical support, such as the procurement of 16,000 blood pressure monitors for distribution free of charge to ensure all can offer blood pressure self-monitoring for the 10% of pregnancies with chronic hypertension, gestational hypertension or pre-eclampsia.

## Decision making

143. At this time it is assessed that the need to protect lives by continuing this set of policies justifies the negative impacts identified. However, as evidence relating to the impacts of these policies develops, the government continues to roll out mitigating steps to minimise the disadvantage experienced by specific groups, for example, providing £750m funding for charities providing key support to disadvantaged groups, such as victims of domestic abuse; agreeing guidance on funerals with faith leaders to minimise impacts on religious groups; and providing food parcels to vulnerable people who are shielding, to minimise the practical difficulties created by these measures.

144. The government will continue to keep these policies and their impact under review to ensure that disadvantages are minimised wherever possible, and that measures only continue for as long as the level of risk is assessed to be sufficient to justify negative impacts.

## Monitoring and evaluation

145. The government continues to gather data, including through interactions with stakeholders, to understand the impacts of these measures on all citizens, and in particular groups with protected characteristics. This information is being taken into account as these policies continue to be reviewed. The government's approach is therefore compliant with the public sector equality duty as set out in s.149 Equality Act 2010 as this is an ongoing duty.

146. Ministers are prepared to change the Regulations and accompanying guidance when needed to address unanticipated equalities impacts.
147. The Government is obliged to review the necessity of the measures underpinned in law every 21 days, taking into account their effectiveness and impacts of these policies on people with protected characteristics.