

# EQUALITY COMMISSION FOR NORTHERN IRELAND

## Annex: Comments on the Draft Building Forward: Consolidated NI COVID-19 Recovery Plan

2 July 2021

### 1 Overview

- 1.1 The Commission welcomes the opportunity to respond to the Executive Office's final draft of *Building Forward – Consolidated NI COVID Recovery Plan*. The Commission has urged action by Government, throughout the pandemic, to better promote equality of opportunity and avoid the emergence or widening of inequalities in response to COVID-19. This action should be build on the analysis of equality disaggregated data and engagement with key stakeholders
- 1.2 Equality matters, particularly in a context where evidence regarding COVID-19 indicates that the disease appears to have impacts which vary with individual circumstances and equality characteristics.
- 1.3 We have noted the potential for persistent long-term impacts on equality groups, particularly on those in equality groups who more likely to experience poverty. We have made clear that no-one should be unfairly disadvantaged because of who they are and that equality grounds / characteristics should not be a predictor of outcomes.
- 1.4 Mindful of the time available, we provide below some initial comments on the draft Plan's Strategic Framework, Accelerators, Strategic Intent, Priority Actions and Action Plan.
- 1.5 We trust that this feedback is of assistance. Where the same action appears under more than one heading, it is addressed only once and we would ask that officials read across comments from the relevant section.

## 2 Recovery Plan Strategic Framework

- 2.1 We welcome that the Summary Dashboard (p6) specifically identifies, under the Context heading, the disproportionate impact of COVID-19 on some equality groups- older people, women and young people.
- 2.2 Statistics and research from Great Britain have identified an increased rate of COVID-19 related mortality for ethnic minority groups<sup>1</sup> and persons with learning disabilities<sup>2</sup> in England. However, the Department of Health in Northern Ireland has confirmed that it does not collect relevant data in relation to these equality groups that would allow similar analysis to be undertaken in Northern Ireland.
- 2.3 We welcome that the plan will be regularly reviewed and adjusted as external factors change. As indicated in the cover letter and below, it will be important that the Plan is equality assessed (screened/EQIA) as it is reviewed and developed.
- 2.4 We have previously and consistently recommended that comprehensive equality data should be collected to identify equality impacts and shape targeted actions to advance equality. To inform effective responses, tailored to the specific circumstances and needs in Northern Ireland, we recommend that all relevant measures are tracked in aggregate but also tracked for the impact on individuals from across each of the Section 75 equality grounds.
- 2.5 Departments and public authorities, including statistical agencies, should in general ensure that where they are

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1 ONS (Office for National Statistics) (2020): Coronavirus (COVID-19) related deaths by Ethnic Group, England and Wales: 2 March 2020 TO 10 April 2020; Platt, L. and Warwick, R. (2020): Are Some Ethnic Groups more vulnerable to COVID-19 Than Others? (London: Institute of Fiscal Studies) cited in Nazroo, J. and Bécars, L. (2021): Ethnic inequalities in COVID-19 mortality: A consequence of persistent racism, page 1 (Runnymede).

2 The difference in mortality rates between those “limited a lot” by a health problem or a disability and those not disabled were 2.4 times higher for females and 1.9 times higher for males. See Office for National Statistics (19 June 2020): *Coronavirus (COVID-19) related deaths by disability status, England and Wales: 2 March –15 May 2020*, at page 2. People with learning disabilities in England had a death rate of up to 3.6 times higher from coronavirus during the first wave of the pandemic than the general population. Source: Public Health England (November 2020): COVID-19 deaths of people identified as having learning disabilities: summary.

The Department of Health in Northern Ireland, however, has confirmed in correspondence to the Equality Commission that it is not currently in a position to collect relevant data for the disability category and that ‘as the registration system does not collect such information and analysis will be a longer-term project which will require linkage to other data sources’. Correspondence from Department of Health to ECNI dated 15 May 2020.

collecting data they should do so across the range of equality grounds so that the design, delivery and review of any changes to law, policy or service provision is improved by access to comprehensive analysis.

- 2.6 We recognise that there are some limitations to meaningful data disaggregation. However, where robust to do so, disaggregation would provide greater information to inform the better targeting of policy interventions.
- 2.7 We welcome recognition (at page 20) of the need for *‘innovative ways of cross-departmental collaboration, multi-year funding and resourcing, and a laser-focus on progress measurement over the period’* to move from recovery planning to implementation.
- 2.8 Progress measurement has the potential to be transformative and to deliver tangible outcomes, including for Section 75 groups. It is essential that measures that relate to people are developed in such a way as to enable Departments and other public bodies to gather data across Section 75 grounds. This will not only enable the Executive to measure progress as regards specific Section 75 grounds, but also to enable public bodies to better monitor their policies for impact and potential impact on equality.

### **3 Recovery accelerator – Economic Growth**

#### Strategic intent

- 3.1 *Our economy is revived, resilient and dynamic.* We note the three key areas of strategic intent – accelerating job creation and growth; enhancing skills; and stimulating the economy through green growth.
- 3.2 In the data dashboard (p8) we note, with the exception of mention of 16-24 year olds in the context of employment losses, an absence of highlighting any key impacts by equality ground.
- 3.3 During the pandemic we highlighted the exacerbation of employment inequalities on the basis of gender<sup>3</sup>, race<sup>4</sup>,

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<sup>3</sup> ECNI (2020) [Childcare Strategy – Equality Commission response to Dept of Education update on progress \(equalityni.org\)](#)

<sup>4</sup> ECNI (2021) [ECNI - Racial equality - a need for ongoing action \(equalityni.org\)](#)

disability<sup>5</sup> and pregnancy / maternity<sup>6</sup> and called for the development of a Childcare Strategy<sup>7</sup> and we consider these also need to be addressed.

#### Priority activities

- 3.4 We note and welcome the intention (p9) to accelerate the implementation of targeted employment interventions. If targeted appropriately, these have the potential to address both emergent and persistent inequalities. Such interventions should be targeted at reducing any disparities between equality groups across all key metrics – with a particular focus on areas which have emerged, or been exacerbated by, COVID-19 and/or the public policy response to it.

#### Action plan

- 3.5 We welcome the intention in action 16 (p. 23), to use co-design to develop a new framework to deliver employability services. We have recommended that stakeholders from across the range of equality categories are fully involved in developing and delivering solutions in response to the impacts of COVID-19 generally, and for specific equality groups. Harnessing relevant expertise and experience will better enable the identification of key issues and the delivery of more effective outcomes.
- 3.6 We welcome the potential for the Transition of Young People into Careers (14-19) at action 10 (p. 25) to address gender-based stereotyping and subject choice<sup>8</sup> as a 'transforming' intervention.
- 3.7 While the Summary Dashboard (p6) notes groups that were the hardest hit by the pandemic, and confirmed in our commentary as set out in the previous section, the action plan notes specific interventions only for people with disabilities - and not young people (beyond the point in the paragraph just above), women, black and minority ethnic people or any other equality group. Consideration needs to be given to measures to address the impact of COVID-19 on the employment of these groups too.

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<sup>5</sup> ECNI (2020) [ECNI - Blog - People with disabilities must not be left behind by response to COVID-19 \(equalityni.org\)](#); [ECNI - News, Press Releases, Equality Commission, Northern Ireland \(equalityni.org\)](#)

<sup>6</sup> ECNI (2021) [ECNI - 'View from the Chair' - Pregnancy and Maternity in the Workplace \(equalityni.org\)](#)

<sup>7</sup> ECNI (2020) [Childcare Strategy – Equality Commission response to Dept of Education update on progress \(equalityni.org\)](#)

<sup>8</sup> ECNI (2018) [Equality in Education Policy Recommendations](#), paragraph 8.3, p.56



- 3.8 We also note that there is no reference in the draft Recovery Plan to the potential impact of Brexit on achieving this strategic intent. We recommend that the Plan explicitly recognises the potential impact of any loss of EU funding, including the NI European Social Fund (ESF), on Section 75 equality groups. For example, the ESF has assisted with the creation of job opportunities, including for unemployed young people and disabled people, and supported an upgrade of skills levels.
- 3.9 We are aware the UK Government has indicated that EU structural funds will be replaced by the UK Shared Prosperity Fund (UKSPF), due to launched across the UK in 2022. We draw to your attention that a number of civil society groups have expressed concern about the lack of detail of the UKSPF's design, the implementation process, the level of funding that will be made available in Northern Ireland and how the fund will operate in practice<sup>9</sup>.
- 3.10 We also recommend that the Plan includes steps to mitigate against any loss of such EU funding on Section 75 equality groups, as well as on those working in the voluntary /community sector involved in the delivery of services to Section 75 equality groups, who were in receipt of such EU structural funds.

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<sup>9</sup> See for example, NIUSE (2019), NIUSE Policy Group Briefing Paper, and NICVA (2020) ESF Users Briefing Paper Future Replacement of ESF Funding Post Brexit

## 4 Recovery accelerator – Tackling Inequalities

### Strategic intent

- 4.1 We welcome that the plan includes ‘tackling inequalities’ as one of its four ‘recovery’ accelerators. Equality matters in such difficult times - both in the initial response to the pandemic and also in the longer term recovery from it.
- 4.2 We are however concerned that neither this accelerator, nor the wider document, makes explicit reference to tackling inequalities across the statutory equality grounds covered by Section 75.
- 4.3 We note the strategic intent of this accelerator – *We have an inclusive society where people have equitable access to opportunities*. It is not clear what this means, nor why the phrase equality of opportunity is not used, the language of the equality law frameworks. We recommend that this is reviewed.
- 4.4 More broadly, the wider plan does not convey that it is built on any analysis of COVID-19 impacts across the range of equality grounds. While there is some mention of issues (for example age, gender or disability), the Plan generally does not convey a consideration of the impacts of COVID-19 on the protected statutory equality grounds or that it directly addresses specific inequalities across the protected statutory equality grounds which have emerged, or been exacerbated by, COVID-19. Indeed, data presented often spans a time period well before the onset of the COVID-19 in March 2020.
- 4.5 We also note that, where there are references to issues impacting on some equality groups in the Plan, it is often not clear if or how actions are explicitly targeted to addressing the issue(s) identified. We recommend that this is reviewed.
- 4.6 We note references throughout this section to ‘vulnerability’. Where this is considered to include equality groups already subject to disadvantage, which places them at greater risk of inequalities which might emerge, or be exacerbated by, COVID-19 or the policy responses to it, this should be made clearer. The definition of the word in the context used is unclear and should be provided. It seems likely that protected equality characteristics are part of the vulnerability referenced, and this should be explicitly stated where it applies. This will ensure that the interventions being developed to combat that ‘vulnerability’ are targeted and appropriate.

- 4.7 Officials should also ensure that any usage of the term takes account of the views of disability stakeholders who have voiced concern to the Commission that the classification of disabled people under the term ‘vulnerable’ reflects a medical model approach rather than a social or human rights model. This latter model identifies disabled people as rights holders in line with the approach of the UN Convention on the Rights of Persons with Disabilities and is the model also adopted by the Commission in its work.
- 4.8 As regards enabling learning recovery, we have identified a range of concerns around the exacerbation of existing and emergence of new educational inequalities. These concerns included the impact of a lack of access to specialist support and equipment, in particular for children with disabilities and special educational needs, and those in need to language and wider support<sup>10</sup>; the risk that children and young people with traditionally low attendance and transitioning rates such as Traveller and Roma children would not return to school or have lower attendance rates than previously; and the potential for disengagement from education<sup>11</sup>.

#### Priority activities and Action Plan

- 4.9 We note the intention to prioritise activity to “implement targeted interventions for the most vulnerable in our society and which have the greatest impact on reducing poverty”. It should also be made explicit that this includes actions to advance equality of opportunity across the equality grounds and to address inequalities / reduce disparities that have emerged due to, or been exacerbated by, the COVID-19 pandemic and the policy response to it.
- 4.10 We welcome the intention to increase digital inclusion and recommend that such actions take account of our related recommendations<sup>12</sup>.
- 4.11 Our Statement on Key Inequalities in Housing and Communities identified inequalities in social housing waiting lists, and we have recommended steps to increase supply and demand. We therefore welcome the proposed increase in social housing supply for those most in need.

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<sup>10</sup> ECNI (2020) [COVID-19 and Education: Equality Considerations, at paragraph 3.42, p12](#)

<sup>11</sup> ECNI (2020) [COVID-19 and Education: Equality Considerations, at paragraph 3.54, p 15](#)

<sup>12</sup> ECNI (2019) Equality in Housing and Communities, Policy Recommendations, paragraph 7.14, p46

- 4.12 With regards to generating jobs for people most impacted, again this should be targeted to include those equality groups most impacted. The Commission's [Statement of Key Inequalities in Employment](#) (2018) identified inequalities experienced by a range of equality groups including disabled people, carers, lone parents with dependants, Irish Travellers, migrant workers, refugees and people from a black ethnic group. Departments should consider if inequalities have emerged or been exacerbated by the COVID-19 pandemic for these or other equality groups.
- 4.13 Evidence from the Runnymede Trust<sup>13</sup> and the Institute of Fiscal Studies<sup>14</sup> has highlighted a range of labour market-related inequalities experienced by BAME groups. This concluded that they are more likely to be disproportionately and adversely economically impacted upon as result of the COVID-19 pandemic crisis. The Commission recommends that the NI Executive take steps to identify and mitigate any disproportionate economic impact of COVID-19 on black and minority ethnic groups in Northern Ireland.
- 4.14 Many disabled workers have been impacted by the coronavirus emergency, particularly if their impairment or condition has meant that they have to 'shield'. However, new ways of working have emerged during lockdown offering a level of flexibility that can benefit some disabled employees and this could form part of the Recovery Plan.
- 4.15 The Commission notes that disability rights campaigners have urged Government to use the experience of work during lockdown to create a strategy for more flexible workplaces which will help disabled people find, stay in, and progress at work<sup>15</sup>.
- 4.16 We welcome the prioritisation activity to support learning recovery for children and young people. We have set out a range of recommendations on the equality impacts of the pandemic<sup>16</sup>, which include not only learning recovery but around the broader elements of education, including sharing and tackling prejudice-based bullying. Departments should

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<sup>13</sup> Runnymede Trust (26 March 2020): [Coronavirus will increase race inequalities](#)

<sup>14</sup> Institute for Fiscal Studies (1 May 2020): [Are some ethnic groups more vulnerable to COVID-19 than others?](#)

<sup>15</sup> Scope (May 2020): [The Disability Report](#)

<sup>16</sup> ECNI (2020) [COVID-19 and Education: Equality Considerations](#)

seek to give effect to these recommendations in their recovery planning.

- 4.17 With regards to providing equitable access to our health services, it is not clear what this means, nor why the phrase equality of opportunity is not used, the language of the equality law frameworks. We recommend that this is reviewed.
- 4.18 In developing responses, Departments should be mindful of pre-existing inequalities and consider how they may have evolved over the last 18 months. For example, recently in correspondence with the Department of Health regarding the Rebuilding Health and Social Care Services – Strategic Framework<sup>17</sup> the Commission drew attention to our key policy positions in relation to Health and Social Care, recommending that the Department:
- identify and remove barriers to health and social care and wellbeing experienced by particular Section 75 equality groups (including older people; lesbian, gay, bisexual people; trans people; Irish Travellers and other minority ethnic communities; and people with disabilities)
  - ensure investment in health care to address the specific needs of equality groups (including the health care needs of people with disabilities; and young people's mental health needs);
  - ensure the collection, by the Department of Health, of system wide data across the Section 75 categories; and that appropriate account is taken of people's multiple identities.

#### Action plan

- 4.19 As regards action 14 (p. 31 - Reducing Educational Disadvantage Programme), we recommend that the programme is based upon addressing disadvantage caused not only by socio-economic deprivation, but also experienced across the equality grounds. In our work we have identified and recommended actions to tackle a range of educational inequalities<sup>18</sup>, including as a result of the COVID-19 pandemic<sup>19</sup>. Additional relevant actions include securing

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<sup>17</sup> 30 November 2020

<sup>18</sup> ECNI (2018) [Equality in Education Policy Recommendations](#)

<sup>19</sup> ECNI (2020) [COVID-19 and Education: Equality Considerations](#)



Ministerial approval of the Supporting Newcomer Policy and review of the Traveller Child in Education Policy.

- 4.20 We have noted the impact of fuel poverty on older people<sup>20</sup>, and welcome that a fuel poverty strategy is planned (action 20, p.31).
- 4.21 We are members of the co-design groups for each of the social strategies currently being developed. We note the reference to delivering an anti-poverty strategy at action 18 (p. 31) and reiterate our recommendation that the strategy should have a clear overarching reference to tackling and preventing poverty across the equality grounds. Development and delivery of the wide suite of social inclusion and equality strategies has a clear role to play in identifying key issues and potential solutions.
- 4.22 Action 68 (p. 31) undertakes to respond to the social well-being needs of people most at risk of marginalisation and isolation in the community. We strongly recommend that this identification, and actions leading from it, take account of the lived experience of people from across the protected equality grounds.
- 4.23 In delivering action 78 (p.27) to build safe and resilient communities and tackle paramilitary activity, criminality and coercive control, we recommend the active and meaningful participation of women in peace-building and post conflict reconstruction<sup>21</sup>.
- 4.24 Action 1 (p. 28) is to accelerate digital inclusion. We have called for safeguards to be put in place to ensure that barriers to 'digital by default' are tackled. We have noted particular issues that arise in the digital and telephone advice system for benefits, for people who do not have access to the internet or who may require assistance to provide the range of information required. These barriers must be overcome in the process of accelerating digital inclusion.
- 4.25 As regards the Housing Supply Strategy, the Commission is in the process of responding to the Department for Communities' call for evidence and welcome its adoption of the key inequalities in housing and communities we identified. The Commission's views on priority issues for attention with regards to housing supply, homelessness and the Supporting People

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<sup>20</sup> ECNI (2017) [Age Equality, Policy Priorities and Recommendations, para 7.29, p.41](#)

<sup>21</sup> ECNI (2019) [Equality in Participation in Public Life Policy Recommendations](#), para 6.19, p 23

Programme (actions 23, 27 and 30) can be found in our policy positions<sup>22</sup>.

- 4.26 Action 53 (p.28) refers to flexible employment programmes targeted at those most impacted. Without further information on the proposed content of these programmes, the Commission is unable to provide a view on them. The focus should include actions to address inequalities, across the equality grounds, which have emerged or been exacerbated by the COVID-19 pandemic.
- 4.27 We note there are a number of actions to support learning recovery for children and young people (actions 7, 8, 9, 11, 12 and 15). We reiterate our assessment that COVID-19 appears to have impacts which vary with individual circumstances and equality characteristics.
- 4.28 We have published recommendations which are highly relevant to the education-related actions<sup>23</sup>, including the need to: maximise collaborative approaches; mitigate the negative impacts of pre-school closures including for children with disabilities, from minority ethnic communities and new residents; identify and mitigate the potential negative equality impacts arising from reduced access to formally taught education, including those requiring specialist and language support; and address the risk of disengagement and that children and young people with traditionally lower attendance and transitioning rates such as Traveller and Roma children will not return to school or have lower attendance rates than previously.
- 4.29 The Commission notes and welcomes that action 79 (p. 27) addresses domestic violence, with a specific focus on women and girls. The statistics noting an increase in domestic abuse are however any presented (p. 11) without reference to equality groups. In general, services should be targeted to objective need drawn from an analysis of data, disaggregated by equality group. It has been highlighted that domestic violence has increased during the COVID-19 pandemic for a range of equality groups. For example, stakeholders have highlighted to the Commission concerns that persons with disabilities may be particularly impacted by domestic violence during the COVID-

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<sup>22</sup> ECNI (2019) Consultation Response: Definition of Affordable Housing; ECNI (2019) Equality in Housing and Communities, para 5.36, 5.22

<sup>23</sup> ECNI (2020) [COVID-19 and Education: Equality Considerations](#)

19 lockdown<sup>24</sup>. According to Public Health England, disabled people generally experience disproportionately higher rates of domestic abuse. Disabled people also experience domestic abuse for longer periods of time, and more severe and frequent abuse than non-disabled people<sup>25</sup>.

- 4.30 However, no disaggregated domestic abuse data is available in Northern Ireland and it is unknown how many persons seeking PSNI assistance during the lockdown were persons with disabilities. The Commission recommends that measures are developed to improve the identification and reporting of abuse and that support services are reviewed for their accessibility. We reiterate again our recommendation regarding the need for data collection analysis and reporting across the range of statutory equality grounds.

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<sup>24</sup> Information provided by a stakeholder attending the Independent Mechanism NI Virtual Roundtable on Disability and COVID-19, 25 June 2020

<sup>25</sup> Public Health England, 'Disability and domestic abuse: risk, impacts and responses', (PHE, 2015), at 4.

## **5 Recovery accelerator – Health of the population**

### Strategic intent

- 5.1 *We have a resilient health sector and our people have access to health and social care in line with targets.*
- 5.2 With regards to access to health services we have highlighted, in the context of the pandemic, the importance of equality characteristics (for example age, disability) not being the sole criteria in decision making in respect of obtaining access to life preserving health care or other provisions. We have also highlighted that due regard needs to be paid to equality of opportunity for equality groups and specific attention to the needs of specific groups.
- 5.3 In the data dashboard (p14) we note, with the exception of mention of children and young people, an absence of highlighting any key impacts by equality ground – including those emerging due to, or exacerbated by, the COVID-19 pandemic or the related public policy response.

### Priority activities

- 5.4 Please see our comments further above with regards to 'targeted interventions for the most vulnerable'
- 5.5 The Commission notes the two priority activities under the strategic intent of protecting and improving the health of the population - maintaining a focus on the ongoing pandemic; and supporting and reforming social care services.
- 5.6 We reiterate that such interventions should be data driven, built on an analysis of key metrics disaggregated by equality ground so that activities can be prioritised and targeted at advancing equality of opportunity for the protected statutory equality groups and at reducing disparities between equality groups across all key metrics – with a particular focus on areas which have emerged, or been exacerbated by COVID-19 and/or the public policy response to it.

### Action plan

- 5.7 We note and welcome the intention both to maintain a focus on the ongoing COVID-19 response as well as restoring and improving core health services – including primary care, mental health services etc.

- 5.8 Again, we reiterate the importance of such actions also seeking to advance equality of opportunity for the statutory equality groups and at reducing disparities between equality groups across all key metrics.
- 5.9 For example, the Commission's (2017) submission to the UN Committee on the Rights of Persons with Disabilities highlighted the health inequalities experienced by persons with learning disabilities such as lower life expectancy and barriers to accessing services, including evidence-based screening, checks and treatments.
- 5.10 In the context of COVID-19, the Commission hosted two roundtables for key disability stakeholders in 2020 to discuss the impact of the pandemic on persons with disabilities and their carers. Stakeholders placed particular emphasis on the difficulties experienced by carers in looking after children and adults with complex disabilities around the clock during lockdown, without access to respite care, leading to deterioration of mental health and family relationships.
- 5.11 The Commission subsequently expressed concern that the plans set out by the SHSCT, cited in the Department's Rebuilding Health and Social Care Services – Strategic Framework, to restart day care provision for persons with learning disabilities would only be for 10% of this cohort (30% of the physical disability cohort), whilst only two respite care beds would be re-opened.
- 5.12 Fears have also been expressed to the Commission by disabled stakeholders regarding the continuity of access to essential support services and appropriate care in the home (including due to potential shortages of resources or carers because of redeployment, illness, or a lack of personal protective equipment). Family carers have expressed concerns regarding the impacts of isolation on those in supported living or institutional settings, who might become even more isolated or unwell without family visits and without the daily routines on which they depend.
- 5.13 The Commission recommends that, when reconfiguring services and redirecting resources, full account is taken of the impact on disabled patients and groups and that full cognisance is taken of the need to ensure the highest attainable standard of health for all is pursued. This includes ensuring care arrangements are subject to constant review.



- 5.14 It is critically important that the already disadvantaged situation of disabled people, as documented by the UNCRPD Committee in its [concluding observations](#) on the UK (2017), is not further compounded as a result of the current pandemic, by the very real risk of a regression in disabled people's rights.
- 5.15 In other areas, we note for example action 85 (p.32) to launch the *10 year NI Strategy for Physical Activity and Sport*. We have recommended that action is taken to increase women's participation in sport, and its governance; to tackle barriers to the participation of transgender people in sport<sup>26</sup>; and to tackle homophobia in sport<sup>27</sup>.

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<sup>26</sup> ECNI (2016) [Gender Equality Policy Priorities and Recommendations](#), section 12, p.46

<sup>27</sup> ECNI (2013) [Sexual Orientation Equality Priorities and Recommendations](#), para 4.39, p.10

## **6 Recovery accelerator – Green growth and sustainability**

### Strategic intent

- 6.1 *We are prioritising green growth and sustainability to reduce our emissions and protect our environment.*
- 6.2 In the data dashboard (p17), we note an absence of highlighting any key impacts by equality ground – including those emerging due to, or exacerbated by, the COVID-19 pandemic or the related public policy response.

### Priority activities and action plan

- 6.3 We reiterate our cross-cutting recommendation that interventions should be data driven, built on an analysis of key metrics disaggregated by equality ground where appropriate so that activities can be prioritised and targeted at advancing equality of opportunity for the protected statutory equality groups and at reducing disparities between equality groups across all key metrics. This should have a particular focus on areas which have emerged, or been exacerbated by, COVID-19 and/or the public policy response to it.
- 6.4 Where actions are proposed that advance green growth or sustainability, government should ensure they are accessible, and of benefit, to individuals from across the range of equality grounds.
- 6.5 With regards to more specific comments, please see our earlier comments on relevant matters, such as the Housing supply Strategy and Fuel Poverty Strategy etc. The sustainable development of towns and cities should be targeted to ensure and improve the accessibility (including physical accessibility) of services, transport and employment.

## 7 Section 75 Advice

- 7.1 The statutory Section 75 duties require designated public authorities to pay the appropriate level of regard to the need to promote equality of opportunity and the desirability of promoting good relations for each of the relevant equality groups when developing and reviewing their policies. This entails public authorities following the arrangements in their equality schemes, including equality assessing their policies (screening/EQIA) at an early stage in the policy development process. These policy development tools ensure that consideration is given to potential equality impacts of policies, mitigation measures, alternative policies and enables the public authority to seek out opportunities to better promote equality of opportunity and good relations. Equality assessments (screening/EQIA) also enable stakeholder awareness of the considerations that a public authority has given to the need to promote equality of opportunity and the desirability of promoting good relations and the outworking of these considerations.
- 7.2 The Commission, cognisant of the difficulties faced by policy makers during the Covid pandemic, produced [an advice note for public authorities](#) (May 2020) which emphasised that Covid related policies may have different impacts on different groups of people and may exacerbate existing inequalities. The advice notes stresses the importance and need for public authorities to effectively monitor any anticipated or actual equality impacts of policies and to give due regard to the need to promote equality of opportunity.
- 7.3 The Commission is concerned that the Draft Recovery Plan does not include any equality assessment (screening/EQIA) and it is not demonstrated how the duties have impacted on the development of this Plan. Evidence of impacts and opportunities to promote equality are not presented across the Section 75 grounds, mitigation measures are not identified or alternate policies considered.
- 7.4 Equality impact assessments should be conducted where the policy is significant in terms of its strategic importance; potential impacts are unknown, because for example there is insufficient data; there are potential equality and/or good relations adverse impacts; further assessment offers a valuable way to examine the evidence and develop recommendations in respect of a policy; or where the policy is significant in terms of expenditure.

Where an equality impact assessment is conducted, TEO's equality scheme includes arrangements that will be followed to ensure effective consultation on draft policies. The provision of one week consultation on this Plan would not be considered to be effective consultation.

- 7.5 The Commission recommends that TEO follows the arrangements in its equality scheme and equality assesses this Plan. This equality assessment should clarify the responsibilities for the application of the statutory duties as policies arising from the Plan are implemented. Where more than one public authority has some responsibility for developing policy, each public authority should satisfy itself that it has paid the appropriate level of regard to the statutory duties and adhered to its equality scheme arrangements. In this context, it is stressed that the Section 75 statutory duties are continuing duties, with considerations of equality and/or good relations as policies arising from the Plan are further reviewed and developed.
- 7.6 In addition, monitoring arrangements should be established, in adherence with equality scheme arrangements, to monitor any adverse impacts of the adopted policies, so that any mitigations may be considered in a timely manner.

## 8 Delivering on our Shared Focus

- 8.1 We welcome the recognition that “a more holistic and collaborative plan will ensure there is transparency across each intervention, alignment between departments, real-time intervention tracking and that efforts are focussed...”
- 8.2 We note the indication (p20) that a “laser-focus on progress measurement over the period will be needed to effectively mobilise and move from Recovery Planning to data-driven implementation.”
- 8.3 To inform effective responses, tailored to the specific circumstances and needs in Northern Ireland, we recommend that TEO and wider Departments ensure that data which spans the range of equality groups is comprehensively collected, analysed and reported for all key outcome and programme metrics.
- 8.4 All relevant measures should not only be tracked in aggregate but also tracked for the impact on individuals from across each of the Section 75 statutory equality grounds.
- 8.5 Adopting this as a key supporting focus of the Recovery Plan will assist Departments to identify and address any disparities by equality groups across key outcome measures. It should also help ensure that ‘recovery’ actions are more tightly targeted to tackle inequalities which have emerged due to, or been exacerbated by, COVID-19. In addition, it can also seed longer term improvements into future Programmes for Government and the ‘renew’ focus. Following our recommendation on this would be consistent with, and contribute to, the ‘strengthening’ aspects of the supporting action plan and, if effectively progressed, to the longer term ‘innovation’ and transformation’ goals.
- 8.6 Given that the Draft plan and actions are intended as a bridge between the ‘respond’ and ‘renew’ phases, the latter of which will be taken forward by future Programmes for Government, it is vital also that the ‘recovery’ action plans set out what will be achieved (outcomes and outputs) by the end of the (proposed 24 month) delivery period. This should include for key equality groups. This will enable officials and wider stakeholders to monitor and ensure appropriate progress across the priority areas.



- 8.7 Finally, prior to, and during the COVID-19 pandemic, we have engaged with key Ministers to reinforce the importance of effective equality legislation (including reform, for example seeing progress on the adoption of Age-GFS legislation) and the need to see fulfilment of the equality duties and obligations.

