Appendix C – Brick Lane Equalities Impact Assessment

Section 1: Introduction

Name of proposal For the purpose of this document, 'proposal' refers to a policy, function, strategy or project
Liveable Streets Brick Lane Changes
Service area and Directorate responsible
Highways and Transportation Service, Public Realm Division, Place Directorate
Name of completing officer
Approved by (Corporate Director / Divisional Director/ Head of Service)
Simon Baxter
Date of approval
Click or tap to enter a date.

Conclusion	**Current decision rating** (see Appendix A)
As a result of performing the EIA, it is evident that for each option there is a risk that disproportionately negatively impacts (as described below) exist to one or more of the nine groups of people who share a protected characteristic under the Equality Act 2010. However, this risk may be removed or reduced by implementing the actions detailed within the *Impact analysis and action plan* section of this document.	Amber

The Equality Act 2010 places a 'General Duty' on all public bodies to have 'due regard' to the need to:

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited under the Act
- Advance equality of opportunity between those with 'protected characteristics' and those without them
- Foster good relations between those with 'protected characteristics' and those without them

This Equality Impact Analysis provides evidence for meeting the Council's commitment to equality and the responsibilities outlined above. For more information about the Council's commitment to equality, please visit the Council's website.

Section 2: General information about the proposal

Describe the proposal including the relevance of proposal to the general equality duties and protected characteristics under the Equality Act 2010

Motor vehicle access restrictions and placemaking measures were implemented in the Brick Lane area as part of the Liveable Streets programme (itself part of the Tower Hamlet's Love Your Neighbourhood portfolio) This programme had the key objectives of improving the look and feel of public spaces; improving the environment to encourage more walking and cycling; and attempting to reduce through traffic on residential streets.

Proposed changes to Brick Lane

The Liveable Streets measures on Brick Lane consist of camera modal filters preventing motor vehicle access to several sections of Brick Lane. Throughout the period of implementation some elements have changed, with the standing arrangement consisting of:

1. Modal filter preventing motor vehicle access on Brick Lane between Hanbury Street and Woodseer Street from 12pm-11pm Saturdays and Sundays
2. Modal filter preventing motor vehicle access on Brick Lane between Buxton Street and the entrance to Taylor's Yard from 11am-11pm Saturdays and 8am-11pm on Sundays

The proposed is for these measures to be removed to allow motor vehicle access at all times except during Sunday market hours, these changes can be seen in **Figure 1.**

Figure 1: Proposed reversal of Liveable Streets measures on Brick Lane

Assumed traffic impact of removing the Liveable Streets measures

This EqIA is based on the following assumptions about the traffic impact of removing the road closures:

- The level of through-traffic on the parts of Brick Lane that currently have closures on them will increase once the restrictions are removed.
- There may a reduction in traffic on local roads on the periphery of the scheme area because through-traffic reverts to Brick Lane. These include Woodseer Street which is the only access road to the public car park which is in the Truman Brewery site.
- The duration of the current restrictions is likely to have a limited impact on air pollution in the area.

Conclusion - To be completed at the end of the Equality Analysis process

Name: X
(signed off by)

Date signed off:
(approved)

Service area:
Public Realm

Team name:
Highways

Service manager: X

Name and role of the officer completing the EA: X

Section 3: Evidence (consideration of data and information)

What evidence do we have which may help us think about the impacts or likely impacts on residents, service users and wider community?

Data was obtained from the following sources:

- 2021 census
- Transport for London's London Travel Data Survey (LTDS)
- Department for Transport's STATS19
- Tower Hamlets Nitrogen Dioxide Diffusion Tube Results.
- Air Quality Action Plan 2022-27
- London Borough of Tower Hamlets LIP3 2018
- 2019.2021 and 2022 traffic counts undertaken by the council
- DfT travel time delay data
- https://www.london.gov.uk/sites/default/files/who_cares_-_helping_londons_unpaid_carers_by_dr_onkar_sahota_am.pdf
- https://content.tfl.gov.uk/travel-in-london-understanding-our-diverse-communities-2019.pdf
- Travel in London: Understanding our diverse communities 2019 (tfl.gov.uk)
- https://democracy.islington.gov.uk/documents/s26001/Appendix%202%20-%20Steer%20Journey%20time%20analysis%20for%20PFS.pdf
- https://roadtraffic.dft.gov.uk/local-authorities/93

General Evidence

2021 Census data was obtained by using the area codes in the scheme area. For the majority, data has been extracted at Output Area level. For some datasets, data is only available at Super Output Area level. For data on gender identity this is only available at Local Authority level. Data has been extracted to the lowest level to achieve greater granularity.

Figure 2 points of interest within the area. There is a cluster of places of worship on Brick Lane, as well as a school and two medical facilities. Section 4 identifies potential positive and negative impacts on protected characteristics of the proposal relating to these facilities.

Figure 2: Liveable Streets Brick Lane Key Destinations

Air Quality Data (NO2)

NO2 data from within the scheme and boundary roads was collected and compared with similar roads and streets in other parts of the borough. The data showed significant reductions between 2019 and 2022 across the borough.

Road Name(s)	2019 (NO2)	2022 (NO2)	Change	2019- 2022 percentage change
Whitechapel High St (KFC)	47.8	39.6	-8.2	-17%
Whitechapel Rd/Adler St	40.3	30.9	-9.4	-23%
Brick Lane/Princelet St	32.2	24.9	-7.3	-23%

Toynbee St/Commercial St	45.1	35.7	-9.4	-21%

Car Ownership data

Car ownership data from the 2021 census for the scheme area shows almost three quarters of households have no access to a car. There is a higher proportion of vehicle ownership across the whole borough. Households in Tower Hamlets have the third lowest proportion of car ownership in London behind the boroughs of Camden and Islington.

TS045 - Car or van availability	Scheme Area		Tower Hamlets	London
No cars or vans in household	2610	73.8%	66.4%	42.1%
1 car or van in household	769	21.7%	28.7%	40.3%
2 cars or vans in household	135	3.8%	4.2%	13.6%
3 or more cars or vans in household	22	0.6%	0.7%	4.0%

1Source: 2021 Census

Age (all age groups)

Census 2021 data indicates that 9.3% of residents in the scheme area are aged 60 and over; this is a higher proportion than the borough average of 8.4%. The proportion of younger people living in the scheme area is lower than in the borough as a whole. 14.9% of people in the scheme area are aged 0-14 compared to 17.5% across the borough.

In 2021, the numbers of children, working age adults and older people in Tower Hamlets have all increased since 2011. The largest proportionate rise is in the working age population (25% increase).

TS007A - Age by five-year age bands	Scheme Area		Tower Hamlets	London
Aged 4 years and under	478	5.2%	6.2%	6.0%
Aged 5 to 9 years	460	5.0%	5.7%	6.0%
Aged 10 to 14 years	443	4.8%	5.6%	6.1%
Aged 15 to 19 years	490	5.3%	5.9%	5.6%
Aged 20 to 24 years	1157	12.5%	10.3%	6.7%
Aged 25 to 29 years	1575	17.0%	14.3%	8.9%
Aged 30 to 34 years	1189	12.9%	13.1%	9.2%
Aged 35 to 39 years	838	9.1%	9.6%	8.4%
Aged 40 to 44 years	624	6.8%	7.3%	7.6%
Aged 45 to 49 years	495	5.4%	5.6%	6.7%
Aged 50 to 54 years	362	3.9%	4.5%	6.5%
Aged 55 to 59 years	271	2.9%	3.5%	5.8%
Aged 60 to 64 years	297	3.2%	2.7%	4.6%
Aged 65 to 69 years	207	2.2%	2.0%	3.5%
Aged 70 to 74 years	97	1.0%	1.4%	3.1%

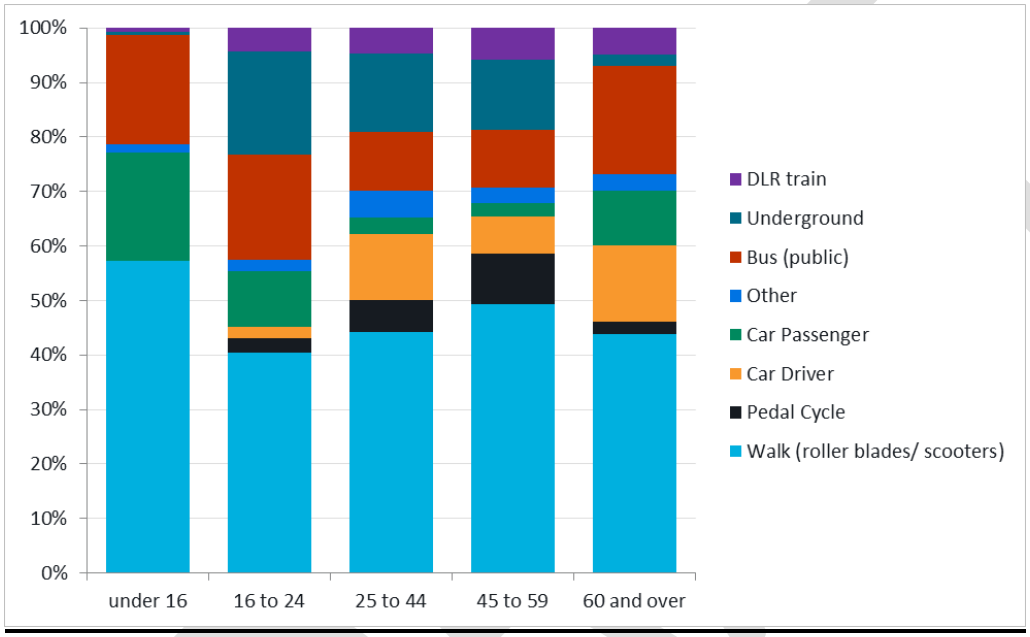
Aged 75 to 79 years	100	1.1%	0.9%	2.2%
Aged 80 to 84 years	86	0.9%	0.7%	1.6%
Aged 85 years and over	75	0.8%	0.7%	1.6%

2Source: 2021 Census

Travel Mode Share

Figure 5 shows the mode share of trips made for all purposes by residents in Tower Hamlets by age group, drawn from the LTDS dataset. Those aged 60+ have higher car use than younger age groups with those aged 16 to 24 having the highest rates of Underground use. Mode share for walking is high across all age groups (over 40%) but is particularly high for those aged under 16 (57%). Cycling is most prevalent among those aged 25-44 (6%) and 45-59 (9%).

Figure 5: borough-wide mode share by age (all trips)

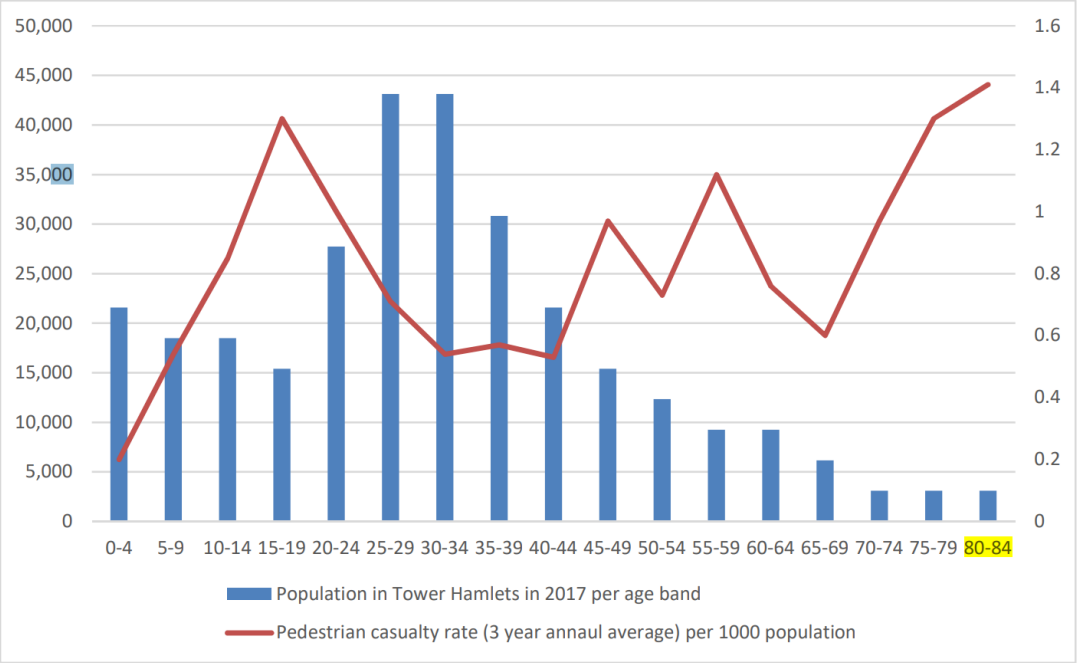


Source: LTDS, 2018/19 and 2019/20

Road Safety Data

The age at which residents are most likely to be injured as pedestrians in Tower Hamlets is 10-15 years and 80-84 years as measured in five-year age bands based on 2017 population against the number of average annual casualties per 1000 population (London Borough of Tower Hamlets LIP3).

Figure 11: Pedestrian casualty rate (3-year average for 2015, 2016 and 2017) per 1000 population against the number of Tower Hamlets population in five-year age bands (as of 2017).



Childhood Obesity

Childhood obesity levels for 4-5-year-olds and 10-11 year olds have increased and are notably higher in Tower Hamlets than national levels:

- Rates of **obesity** in Reception-aged children in Tower Hamlets have increased from 12.2% in 2019/20 to **15.6%** in 2020/21, higher than the London average (15.3%).
- Rates of Reception-aged children with **excess weight** have increased from 22.4% to **26.5%**.
- Rates of **obesity** in Year 6 children in Tower Hamlets have increased significantly from 25.9% in 2019/20 to **33.7%** in 2020/21, higher than the London average (30.0%).
- Rates of Year 6 children with **excess weight** in Tower Hamlets have increased from 41.8% to **50.4%**.

(NCMP data 2020/21 academic year)

It is important to encourage physical activity and exercise from a young age because inactive children are likely to become inactive adults, with evidence to show regular physical activity is linked to positive health outcomes[1]. Walking or cycling to school can be a way of incorporating physical activity into daily routines.

Disability (Physical, learning difficulties, mental health and medical conditions)

There are over 7,000 blue badge holders within the borough. The ratio of retired blue badge holders to all blue badge holders in Tower Hamlets is 2.7:1, and 4.7% of the retired population holds a blue badge. There are 1,634 taxicard members within the borough.

TS037 - General health	Very good health	Good health	Fair health	Bad health	Very bad health
Scheme Area	4529	2745	929	339	123

[1] https://www.gosh.nhs.uk/conditions-and-treatments/general-health-advice/leading-active-lifestyle/exercise-children-and-young-people/ accessed August 2022

	52.3%	31.7%	10.7%	3.9%	1.4%
London	53.6%	31.8%	10.3%	3.2%	1.0%
Tower Hamlets	53.0%	32.1%	10.0%	3.6%	1.3%

3Source: 2021 Census

The proportion of residents living in the scheme area with bad/very bad health is slightly higher than the borough and London average.

Limitation of day-to-day activities

TS038 - Disability	Disabled under the Equality Act: Day-to-day activities limited a lot	Disabled under the Equality Act: Day-to-day activities limited a little	Not disabled under the Equality Act: Has long term physical or mental health condition but day-to-day activities are not limited	Not disabled under the Equality Act: No long term physical or mental health conditions
Scheme Area	561	690	368	7604
	6.1%	7.5%	4.0%	82.4%
Tower Hamlets	5.7%	7.3%	4.5%	82.5%
London	5.7%	7.5%	5.2%	81.5%

4Source: 2021 Census

There is a slightly higher proportion of people in the scheme area whose day-to-day activities are limited (a little and a lot) than in the wider borough.

Sex

TS008 - Sex	Female	Male
Scheme Area	4269	4438
	49.0%	51.0%
Tower Hamlets	49.8%	50.2%
London	51.5%	48.5%

5Source: 2021 Census

There is a slightly higher proportion of males in the scheme area than there are females.

In London, data published by TfL shows women are less likely to drive (35% compared to 45% of men drive once a week) and are less likely to cycle or travel by train, Tube or motorbike. They are also more likely to travel with buggies, which can impact their travel choices. TfL data also shows cyclists are more likely to be male. The study also found that 87% of women never use cycling as a mode of transport around London ('*Understanding the travel needs of London's diverse communities: Women, April 2012*)'. According to the Tower Hamlets Annual Residents Survey (2019), women are less likely to cycle in London due to road safety concerns. Research carried out by TfL in 2014 identified that women make a greater number of journeys per weekday than men. Trips made by women tend to be shorter and completed using different types of transport than journeys made by men.

On average across England in 2018, women made more journeys via taxi or PHVs compared to men (11 trips per person per year to 10 trips per person per year respectively). However, men travel further distances than women. The majority of taxi and PHV drivers are male (98%)[2].

Gender reassignment

Census 2021 included a question about gender identity. Data for this question is provided at local authority. 0.6% of residents in Tower Hamlets said their gender identity was different from their sex registered at birth. This is broadly comparable to the London average of 0.5%.

Marriage and civil partnerships

TS002 - Legal partnership status	Scheme Area		Tower Hamlets	London
Married or in a registered civil partnership: Married	2208	28.4%	31.6%	39.7%
Married or in a registered civil partnership: In a registered civil partnership	29	0.4%	0.4%	0.3%
Separated, but still legally married or still legally in a civil partnership: Separated, but still married	124	1.6%	1.9%	2.3%
Separated, but still legally married or still legally in a civil partnership: Separated, but still in a registered civil partnership	1	0.0%	0.0%	0.0%
Divorced or civil partnership dissolved: Divorced	343	4.4%	5.0%	7.2%
Divorced or civil partnership dissolved: Formerly in a civil partnership now legally dissolved	3	0.0%	0.1%	0.0%
Widowed or surviving civil partnership partner: Widowed	318	4.1%	2.7%	4.2%
Widowed or surviving civil partnership partner: Surviving partner from civil partnership	1	0.0%	0.0%	0.0%
Never married and never registered a civil partnership	4754	61.1%	58.3%	46.2%

6Source: 2021 Census

Research from 2019, demonstrates that poverty is twice as high for lone parents and children in lone-parent families, compared to couple families, although lone parents and families with children are both more at risk of transport poverty compared to average[3].

Religion or philosophical belief

TS030 - Religion	Scheme Area		Tower Hamlets	London
No religion	2389	25.9%	26.6%	27.1%
Christian	1501	16.3%	22.3%	40.7%
Buddhist	87	0.9%	1.0%	0.9%
Hindu	159	1.7%	2.0%	5.1%

[2] Taxi and Private Hire Vehicles Statistics: England 2019 https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/833569/taxi-and-phv-england-2019.pdf

[3] https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/953951/Transport_and_inequality_report_document.pdf

Jewish	41	0.4%	0.4%	1.7%
Muslim	4377	47.5%	39.9%	15.0%
Sikh	8	0.1%	0.3%	1.6%
Other religion	43	0.5%	0.5%	1.0%
Not answered	613	6.7%	6.9%	7.0%

7Source: 2021 Census

The proportion of people indicating they have no religion, and those declining to state their religion, is lower in the scheme area than the Tower Hamlets and London averages. The proportion of residents who are Muslim in the scheme area is 47.5% which is significantly higher than the borough average, and the proportion of residents in the scheme area who are Christian is 16.3%, lower than the borough average.

Race

There is a higher proportion of Asian, Asian British or Asian Welsh: Bangladeshi in the scheme area than the borough average (47.1% compared to 34.6%). There is a lower proportion of White: British in the scheme area than in the borough as a whole (19.5% compared to 22.9%).

TS021 - Ethnic group	London	Tower Hamlets	Scheme Area	
Asian, Asian British or Asian Welsh: Bangladeshi	3.7%	34.6%	4683	47.1%
Asian, Asian British or Asian Welsh: Chinese	1.7%	3.3%	153	1.5%
Asian, Asian British or Asian Welsh: Indian	7.5%	3.3%	33	0.3%
Asian, Asian British or Asian Welsh: Pakistani	3.3%	1.1%	24	0.2%
Asian, Asian British or Asian Welsh: Other Asian	4.6%	2.2%	66	0.7%
Black, Black British, Black Welsh, Caribbean or African: African	7.9%	5.0%	717	7.2%
Black, Black British, Black Welsh, Caribbean or African: Caribbean	3.9%	1.6%	276	2.8%
Black, Black British, Black Welsh, Caribbean or African: Other Black	1.7%	0.8%	75	0.8%
Mixed or Multiple ethnic groups: White and Asian	1.4%	1.4%	87	0.9%
Mixed or Multiple ethnic groups: White and Black African	0.9%	0.7%	36	0.4%
Mixed or Multiple ethnic groups: White and Black Caribbean	1.5%	1.2%	54	0.5%
Mixed or Multiple ethnic groups: Other Mixed or Multiple ethnic groups	1.9%	1.7%	150	1.5%
White: English, Welsh, Scottish, Northern Irish or British	36.8%	22.9%	1941	19.5%
White: Irish	1.8%	1.1%	165	1.7%
White: Gypsy or Irish Traveller	0.1%	0.0%	0	0.0%
White: Roma	0.4%	0.7%	9	0.1%
White: Other White	14.7%	14.6%	1116	11.2%

Other ethnic group: Arab	1.6%	1.2%	105	1.1%
Other ethnic group: Any other ethnic group	4.7%	2.7%	243	2.4%

*8*Source: 2021 Census

TS021 - Ethnic group	**London**	**Tower Hamlets**	**Scheme Area**	
All other	23.3%	13.8%	624	6.3%
Black	13.5%	7.4%	1068	10.8%
Bangladeshi	3.7%	34.6%	4683	47.1%
Mixed	5.7%	5.0%	327	3.3%
White Other	17.0%	16.4%	1290	13.0%
White English, Welsh, Scottish, NI or British	36.8%	22.9%	1941	19.5%

*9*Source: 2021 Census

Ethnic minority residents are more likely to undertake journeys by walking or by public transport than white Londoners, however, they are more likely to be concerned about their personal security and safety than white Londoners, especially at night.

- Ethnic minority Londoners, both adults and children are almost twice as likely as white Londoners to be injured on the roads as a car occupant and reducing this statistic is a priority. Ethnic minority road users also have the highest risk of being a pedestrian casualty. White Londoners are at higher risk with being involved in a cycle collision than other groups of cyclists.
- Ethnic minority Londoners are also less likely than white Londoners to say that they feel safe from road accidents when walking around London, either during the day or at night.

Walking is the most commonly used type of transport by ethnic minority Londoners[4]. Use of cars among ethnic minority Londoners is lower than for white Londoners, with 32% and 43% respectively driving a car at least once a week. Car use is higher among Asian Londoners compared to other minority ethnic groups (38% of Asian Londoners drive a car at least once a week, compared to 25% of black Londoners). In contrast, higher proportions of white Londoners travel by bike, car, black cab, National Rail and motorbike than ethnic minority Londoners.

In England, there are significantly higher rates of incidence of asthma within ethnic minority groups. When subdivided, there are even higher rates of asthma incidence in people in ethnic minority groups born inside the UK than those born outside the UK; second and third generation descendants of South Asian and Afro-Caribbean migrants suffer disproportionately from asthma. Inequalities exist between ethnic groups and asthma registrations in the older age groups. 12.9% of Tower Hamlets' South Asian population over 70 years old have been diagnosed with asthma compared with 8.3% of the white and 5.2% of the black population over 70[5].

Sexual orientation

According to TfL's '*Travel in London: Understanding our diverse communities*' 2019 study, lesbian, gay and bisexual (LGB) people have a similar profile to the general population in terms

[4] Understanding the travel needs of London's diverse communities BAME April 2012 http://content.tfl.gov.uk/BAME.pdf

[5] Travel in Tower Hamlets Transport Strategy Evidence Base & Bibliography Annex A, 2019 https://democracy.towerhamlets.gov.uk/mgConvert2PDF.aspx?ID=160546

of barriers to using public transport more frequently. For example, 48% of Londoners identify overcrowding as a barrier compared to 52% of LGB Londoners, and 41% identify cost of travel as a barrier in both groups.

Census 2021 data indicates that the proportion of residents in the scheme area that are straight or heterosexual is 81.2%, lower than the borough and London average of 83.1% and 86.2% respectively.

TS077 - Sexual orientation	Scheme Area		Tower Hamlets	London
Straight or Heterosexual	39922	81.7%	83.1%	86.2%
Gay or Lesbian	1879	3.8%	4.0%	2.2%
Bisexual	1323	2.7%	2.5%	2.0%
All other sexual orientations	346	0.7%	0.7%	0.4%
Not answered	5367	11.0%	9.8%	9.5%

*10*Source: 2021 Census

Pregnancy and Maternity

There is no Census 2021 data relating to this protected characteristic. Data from the Office for National Statistics[6] shows that the conception rate across the borough as a whole was 62.8 per 1,000 women, which is below the London rate of 76.2 per 1,000 women. Data are not available at the ward level.

There is little evidence to draw upon about pregnancy and maternity in terms of transport and public realm. Looking beyond the UK, research published by the US Federal Transit Administration considered the challenges experienced by pregnant women using public transport[7]. Although this study is focused on public transport, its wider findings help to illustrate how streets and public realm pose challenges to pregnant women or people on maternity leave. Included in the findings are that unsafe footways and crossings pose a particular challenge to, that safety and security are critical concerns and that pregnant women may incur higher transport costs than other people because they make more trips due their role as a carer or make more expensive trips to address concerns about safety and security.

Parents/ Carers

The data below shows the proportion of unpaid carers in the scheme area, in Tower Hamlets and in London. The proportion of carers in the scheme area is equivalent to the borough average, and slightly lower than the London average.

TS039 - Provision of unpaid care	Scheme Area		Tower Hamlets	London
Provides no unpaid care	8153	93.1%	93.6%	92.8%
Provides 19 hours or less unpaid care a week	258	2.9%	2.8%	3.6%
Provides 20 to 49 hours unpaid care a week	160	1.8%	1.8%	1.7%
Provides 50 or more hours unpaid care a week	183	2.1%	1.8%	2.0%

6 https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/conceptionandfertilityrates/datasets/conceptionstatisticsenglandandwalesreferencetables

7 https://www.transit.dot.gov/sites/fta.dot.gov/files/2022-02/FTA-Report-No-0211.pdf

11Source: 2021 Census

The National Travel Survey (2019) suggests that one barrier preventing children walking to school is their parents not allowing them. A further study suggests parents might be less likely to cycle with their children due to perceived road safety risks, and as a result may opt to drive short journeys that could otherwise be walked or cycled[8].

Gender Identity

In 2021 the Census included a question on gender identity. Lowest level data for this gender identity is at local authority level. There is a slightly lower proportion of Tower Hamlets residents whose gender is the same as registered at birth than the London average – 90.7% compared to 91.2%.

TS078 - Gender identity	Tower Hamlets	London
Gender identity the same as sex registered at birth	90.7%	91.2%
Gender identity different from sex registered at birth but no specific identity given	0.6%	0.5%
Trans woman	0.1%	0.2%
Trans man	0.1%	0.2%
All other gender identities	0.2%	0.1%
Not answered	8.3%	7.9%

12Source: 2021 Census

Data is not available about mode choice preferences or other travel behaviours disaggregated by gender identity.

Socio-economic

The table below shows a comparison of levels of household deprivation in the scheme area to deprivation in Tower Hamlets and more widely across London. The four dimensions of deprivation measured are **Employment, Education, Health & disability,** and **Housing**. The data shows that deprivation, specifically severe deprivation (i.e. in more than one dimension) is on par with the borough average.

TS011 - Households by deprivation dimensions	Household is not deprived in any dimension	Household is deprived in one dimension	Household is deprived in two dimensions	Household is deprived in three dimensions	Household is deprived in four dimensions
Scheme Area	46.3%	31.1%	16.1%	6.0%	0.4%
Tower Hamlets	46.4%	31.8%	15.5%	5.9%	0.4%
London	48.1%	32.9%	14.4%	4.3%	0.4%

*13*Source: 2021 Census

At the time of the 2021 Census, 55.7% of working age residents in the scheme area were employed. This is lower than the borough overall (58.7%), and less than London (59.4%). There is a higher percentage of residents who are economically inactive due to long term sickness or disability in the scheme area compared to Tower Hamlets and London averages.

[8] BMC Public Health 2018 Understanding child and parent perceptions of barriers influencing children's active school travel
https://bmcpublichealth.biomedcentral.com/track/pdf/10.1186/s12889-018-5874-y.pdf

TS066 - Economic activity status	Scheme Area		Tower Hamlets	London
Economically active (excluding full-time students):In employment	4348	55.9%	58.7%	59.4%
Economically active (excluding full-time students): Unemployed	410	5.3%	4.7%	4.1%
Economically active and a full-time student:In employment	269	3.5%	2.7%	2.0%
Economically active and a full-time student: Unemployed	101	1.3%	1.3%	0.7%
Economically inactive: Retired	455	5.9%	5.8%	12.9%
Economically inactive: Student	758	9.8%	9.6%	7.2%
Economically inactive: Looking after home or family	687	8.8%	8.4%	6.0%
Economically inactive: Long-term sick or disabled	335	4.3%	4.0%	3.6%
Economically inactive: Other	411	5.3%	4.7%	4.1%

*14*Source: 2021 Census

Section 4: Assessing the impacts on different groups and service delivery

Groups	Positive	Negative	Neutral	Considering the above information and evidence, describe the impact this proposal will have on the following groups?
Protected				
Age *(All age groups)*	☒	☒	☐	Census 2021 data indicates that 9.3% of residents in the scheme area are aged 60 and over; this is a higher proportion than the borough average of 8.4%. The traffic data indicated a combination of increases and decreases in total traffic volumes and in the scheme areas. The impact of the proposed changes may also be mixed depending on a street. **Older people** **Potential positive impacts for older people** • Older people may be more likely to use private cars and taxi services. A larger percentage of over 60s drive than any other age group in Tower Hamlets. Older people are more likely to use private cars, taxi, have a Blue Badge for age-related disabilities or Dial-a-Ride services for door-to-door journeys. They are also more likely to rely on family members or friends for travel support e.g. to access daily care or ferrying to medical appointments. • Reinstating through-traffic during the restriction periods could benefit older people through better travel opportunities by car across the local area. • Longer routes and time taken to navigate areas may have a negative impact on the willingness of private hire vehicles from picking up residents in those areas. Removal of closures may result older residents whose day-to-day activities were limited due to a health problem or disability being more independent and mobile. **Potential negative impacts for older people** • The age at which residents are most likely to be injured as pedestrians in Tower Hamlets is 10-15 years and 80-84 years as measured in five-year age bands based on 2017 population

Groups	Positive	Negative	Neutral	Considering the above information and evidence, describe the impact this proposal will have on the following groups?
Protected				
				against the number of average annual casualties per 1000 population. (Source Transport Strategy evidence base LBTH LIP3). The existing scheme has created locations free from traffic on Brick Lane, reducing the threat caused by motor traffic during the control times, particularly from larger vehicles such as vans or HGVs. Reintroducing through traffic is likely to impact younger people who, along with older people, are disproportionately negatively impacted by road danger, particularly as the current restrictions cover times over the weekend when pedestrians are more likely to be out for leisure activities, making use of the shops, restaurants and bars in the area. **<u>Young people & children</u>** The proportion of younger people living in the scheme area is lower than in the borough as a whole. 14.9% of people in the scheme area are aged 0-14 compared to 17.5% across the borough. **Potential positive impacts** • A proportion of young people are driven as passengers, and as such the proposals could reduce their journey times as a result of the removal of the restrictions. • Those relying on bus services to access education and employment opportunities may also see improved journey times and reliability of their journeys on roads on the periphery of the scheme area where congestion may be reduced by allowing through-traffic to return to Brick Lane. However, the duration of the current restrictions is likely to have a limited impact on congestion in the area. **Potential negative impacts** • The age at which residents are most likely to be injured as pedestrians in Tower Hamlets is 10-15 years and 80-84 years as measured in five-year age bands based on 2017 population against the number of average annual casualties per 1000 population. (Source Transport

Groups	Positive	Negative	Neutral	Considering the above information and evidence, describe the impact this proposal will have on the following groups?
Protected				
				Strategy evidence base LBTH LIP3). The existing scheme has significantly reduced the volumes of traffic through Brick Lane, reducing the threat caused by motor traffic, particularly from larger vehicles such as vans or HGVs who could no longer cut through the area. Reintroducing of through traffic is likely to impact younger people who, along with older people, are disproportionately negatively impacted by road danger, particularly as the current restrictions cover times over the weekend when pedestrians are more likely to be out for leisure activities, making use of the shops, restaurants and bars in the area. ***Actions to mitigate against any disproportionate impacts on this cohort is detailed in Section 5 'Impact analysis and action plan'***
Disability *(Physical, learning difficulties, mental health and medical conditions)*	☒	☒	☐	In 2021 the census asked about residents general health and limitation of day-to-day activities. Census 2021 data indicates that the proportion of residents living in the scheme area with bad/very bad health is slightly higher than the borough and London average. With regard to the Census question about limitation of day-to-day activities, 13.6% of residents in the scheme area said their day-to-day activities were limited to some extent. This is slightly higher than the borough and London average. **Potential positive impacts** Disabled people are more likely than non-disabled people to rely upon family members or friends for daily care. The 2021 Census indicates that 31,800 (6.4%) Tower Hamlets residents spend at least an hour a week caring for someone – equivalent to 8.5% of the population9. The removal of the restrictions may reduce journey times and/or distance for carers who visit the area in a private car. This may allow carers to attend more regularly or reduce delays. It should be noted however, that exemptions are available to the Brick Lane filters for Blue Badge holders and locally impacted residents (those requiring direct access within the scheme area). They are also more likely to rely on family members or friends for travel support e.g. to access daily care or ferrying to medical appointments.

[9] https://www.london.gov.uk/sites/default/files/who_cares_-_helping_londons_unpaid_carers_by_dr_onkar_sahota_am.pdf

Groups	Positive	Negative	Neutral	Considering the above information and evidence, describe the impact this proposal will have on the following groups?
Protected				
				• The existing restrictions may have negatively impacted on journey times for those with mobility impairments who may find it more difficult to walk or cycle, and therefore need to make use of door-to-door transport services such as private cars (and do not have a Blue Badge). Increased journey times may have led to further discomfort and anxiety for some disabled people, and ultimately may have had a detrimental impact on their mental or physical health. The reintroduction of through-traffic is likely to benefit these people, with shortened journey times/distances during the operating hours of the scheme. **Potential negative impacts** • It is recognised that certain impairments may mean disabled people are more at risk of road danger, noise and pollution. Mobility impairment or mental health issues increase the challenge of day-to-day activities such as travelling. For people who are blind or partially sighted, and for people with mobility impairments, the reintroduction of vehicle traffic may reduce their confidence in walking, cycling, using a mobility scooter or accessing public transport. Brick Lane has narrow footways in places, and is frequently busy with pedestrians, while through-traffic is limited disabled people are able to use the carriageway to navigate obstacles (e.g. street clutter or crowds). The ability to use the carriageway safely while walking or wheeling would be limited by the reintroduction of through-traffic during the period when the current restrictions are in place. **Actions to mitigate against any disproportionate impacts on this cohort is detailed in Section 5 'Impact analysis and action plan'**
Sex	☒	☒	☐	Census 2021 data indicates that there is a slightly higher proportion of males in the scheme area than there are females. ***Potential positive impacts*** • A potential reduction in fear of crime as a result of more traffic on streets in the scheme area, although the evidence for this is mixed. ONS data shows that a greater

Groups	Positive	Negative	Neutral	Considering the above information and evidence, describe the impact this proposal will have on the following groups?
Protected				
				proportion of women than men feel unsafe in quiet streets particularly after dark[10] and the media has reported on women feeling unsafe on streets with fewer motor vehicles due to traffic restrictions. In terms of actual numbers in the scheme area, the evidence base showed a negligible change in the number of recorded instances of violence and sexual offences in the periods prior-to and post-implementation within the study area. In addition, it should be noted however that the current restrictions have been timed to coincide with periods when pedestrian footfall is at its highest (weekends where residents and visitors take advantage of the markets, restaurants, shops and pubs) and therefore it is likely that fear of feeling unsafe in quiet streets is less likely to be a potential impact. • Men are more likely to drive than women, and as a result the proposals which will facilitate motor vehicle journeys are more likely to positively impact men than women. The proposal to open streets may make it quicker and easier to get around by car or taxi. **Potential negative impacts** • The Tower Hamlets Annual Residents Survey (2019) found that women are more conscious than men of road danger when choosing how to travel. The presence of motor traffic may discourage women than men from cycling, therefore with higher traffic levels on streets in the scheme area may be less able to experience the benefits afforded by cycling (evidence). Women are more likely than men to walk for local journeys and therefore more likely to be exposed to the negative consequences of more traffic on the streets such as increased road danger and air pollution. However, the duration of the current restrictions is likely to have a limited impact on traffic safety in the area. **Actions to mitigate against any disproportionate impacts on this cohort is detailed in Section 5 'Impact analysis and action plan'**

10 https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/bulletins/perceptionsofpersonalsafetyandexperiencesofharassmentgreatbritain/16februaryto13march2022 - national dataset, not specific to the scheme area or Tower Hamlets (accessed August 2022).

Groups	Positive	Negative	Neutral	Considering the above information and evidence, describe the impact this proposal will have on the following groups?
Protected				
Gender reassignment	☐	☐	☒	Census 2021 included a question about gender identity. Data for this question is provided at local authority. 0.6% of residents in Tower Hamlets said their gender identity was different from their sex registered at birth. This is broadly comparable to the London average of 0.5%. There is no estimated direct or indirect disproportionate impact of these proposals to residents on the grounds of different gender identities.
Marriage and civil partnership	☐	☐	☒	Census 2021 data indicates that the proportion of residents in the scheme area that are married is 28.5% and is lower than the borough (32.6%) and London average (39.7%). There is no estimated direct or indirect disproportionate impact of these proposals to residents on the grounds of marriage and civil partnership status.
Religion or **philosophical belief**	☐	☐	☒	The proportion of people indicating they have no religion, and those declining to state their religion, is lower in the scheme area than the Tower Hamlets and London averages. The proportion of residents who are Muslim in the scheme area is 47.5% which is significantly higher than the borough average, and the proportion of residents in the scheme area who are Christian is 16.3%, lower than the borough average. **Potential positive impacts** The are a number of places of worship in the area of which Brick Lane Mosque is the largest. Vehicle access will be improved to places of worship as a result of the removal of the closures during the scheme operational hours.
Race	☒	☒	☐	Census 2021 data indicates that there is a higher proportion of Asian, Asian British or Asian Welsh: Bangladeshi in the scheme area than the borough average (47.1% compared to 34.6%). There is a lower proportion of White: British in the scheme area than in the borough as a whole (19.5% compared to 22.9%).

Groups	Positive	Negative	Neutral	Considering the above information and evidence, describe the impact this proposal will have on the following groups?
Protected				
				Potential positive impacts • In terms of transport mode used, across all Londoners, there is little difference in the frequency of walking and cycling between white Londoners and black, Asian and minority ethnic Londoners[16] while car use is slightly higher among white Londoners. Although ethnic minority Londoners on average have lower car usage than white Londoners, Asian Londoners exhibit higher car usage than other minority ethnic groups. In the first stage consultation on the proposal to remove closures, Bangladeshis were much more likely to support than oppose the removal. • The removel of closures would result in less traffic diverted during the closure times to the dense residential areas east of Brick Lane. The key areas that may benefit are concentrated around Hanbury Street and Spital Street. • The removal of the closures may result in shorter journeys through Brick Lane and improve bus journey times and bus journey time reliability on the periphery of the scheme area by reducing traffic congestion on these roads, which could benefit black, Asian and minority ethnic people who are more likely to travel by bus than white Londoners. **Potential negative impacts** JSNA data from 2015 shows that the prevalence of asthma is greatest among some ethnic minority groups, with 12.9% of the borough's South Asian population aged 70+ diagnosed with asthma compared to 8.3% of the white and 5.2% of the black population respectively. However, the duration of the current restrictions is likely to have a limited impact on air pollution in the area ***Actions to mitigate against any disproportionate impacts on this cohort is detailed in Section 5 'Impact analysis and action plan'***
Sexual orientation	☐	☐	☒	

Groups	Positive	Negative	Neutral	Considering the above information and evidence, describe the impact this proposal will have on the following groups?
Protected				
				Census 2021 data indicates that the proportion of residents in the scheme area that are straight or heterosexual is 81.2%, lower than the borough and London average of 83.1% and 86.2% respectively. There is no estimated direct or indirect disproportionate impact of these proposals to residents on the grounds of sexual orientation.
Pregnancy and maternity	☒	☒	☐	There is no Census 2021 data relating to this protected characteristic. We will investigate other data relating to this cohort. Data from the Office for National Statistics[11] shows that the conception rate across the borough as a whole was 62.8 per 1,000 women, which is below the London rate of 76.2 per 1,000 women. Data are not available at the ward level. **Potential positive impacts** • There may be some benefit for pregnancy and maternity from the removal of the traffic restrictions for people using or more reliant upon motor vehicles for local journeys. Pregnant women and people on maternity leave may be more likely to use a private motor vehicle or a taxi/private hire vehicle because their mobility may be impaired, they may feel less confident walking or, and may have lots of things to carry having had a new baby. Facilitating through traffic on Brick Lane may improve journey times and accessibility for drivers making local journeys. • Pregnant women or people on maternity leave may benefit from easier and quicker journey times to medical appointments as a result of removing traffic restrictions. **Potential negative impacts** • Pregnant women or people on maternity leave may be deterred from walking or cycling in Brick Lane due to concerns road safety or increased exposure of themselves or their baby to noise and air pollution. This may result in a reduction in levels of physical exercise in this

11 https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/conceptionandfertilityrates/datasets/conceptionstatisticsenglandandwalesreferencetables

Groups	Positive	Negative	Neutral	Considering the above information and evidence, describe the impact this proposal will have on the following groups?
Protected				
				cohort. However, the duration of the current restrictions is likely to have a limited impact on air pollution in the area • The duration of the current restrictions is limited to periods over the weekend and removing these restrictions is therefore likely to have a limited impact as residents are likely to apply the same mitigating measures to support their mobility and safety as they would during the periods when the restrictions are not in place. ***Actions to mitigate against any disproportionate impacts on this cohort is detailed in Section 5 'Impact analysis and action plan'***
Other				
Socio-economic	☒	☒	☐	Deprivation data is measured through four dimensions: **Employment, Education, Health & disability,** and **Housing**. Census 2021 data shows that deprivation, specifically severe deprivation (i.e. in more than one dimension). The data shows that 53.6% of households in the scheme area and in the borough overall are deprived in one or more dimension. At the time of the 2021 Census, 55.7% of working age residents in the scheme area were employed. This is lower than the borough overall (58.7%), and less than London (59.4%). There is a higher percentage of residents who are economically inactive due to long term sickness or disability in the scheme area compared to Tower Hamlets and London averages. **Potential positive impacts** • Removing the closures could benefit those on low incomes who rely on cars to get around, including people who use a car for work such as taxi or PHV drivers as they will benefit from the potential reduction in journey times in and around Brick Lane. • The removal of measures could benefit those on low incomes who may be reliant on cars, such as those undertaking work or caring responsibilities and/or travelling at times of the day when public transport accessibility is poor. This is because they may benefit from reduced

Groups	Positive	Negative	Neutral	Considering the above information and evidence, describe the impact this proposal will have on the following groups?
Protected				
				vehicle journey lengths and times although journey time savings are likely to be marginal for anything but short car journeys[12]. • However, the duration of the current restrictions, and the relatively small geography of the scheme area is likely to have a limited impact on journey times and congestion. **Potential negative impacts** • Whilst the number of vehicles registered in the borough has increased slightly in recent years, Tower Hamlets still has one of the lowest levels of car ownership in London. Many households on low incomes are not able to afford a car. It is recognised that those on low incomes in London are less likely to drive, and more likely to walk, cycle or use bus services. Affordability of car ownership may mean that there is no impact in the levels of walking as a result of the removal of the scheme, though safety and cycling prevalence may decline ***Actions to mitigate against any disproportionate impacts on this cohort is detailed in Section 5 'Impact analysis and action plan'***
Parents/Carers	☒	☒	☐	Census 2021 data indicates that the proportion who have some unpaid caring responsibility is 6.8% in the scheme area. This is equivalent to the borough average and slightly lower than the London average. **Potential positive impacts** • The current scheme already implements an exemption for registered and unregistered carers as well as residents. • Parents and carers may benefit from easier and quicker journey times to medical appointments as a result of removing traffic restrictions.

[12] See for example analysis conducted for Islington Council by consultants Steer on the impacts on journey times and lengths of low traffic neighbourhoods in Islington https://democracy.islington.gov.uk/documents/s26001/Appendix%202%20-%20Steer%20Journey%20time%20analysis%20for%20PFS.pdf accessed August 2022.

Groups	Positive	Negative	Neutral	Considering the above information and evidence, describe the impact this proposal will have on the following groups?
Protected				
				Potential negative impacts • The reintroduction of traffic could decrease the ability to use the carriageway to navigate Brick Lane with a pushchair and creates additional hazards to consider while travelling with children on foot. ***Actions to mitigate against any disproportionate impacts on this cohort is detailed in Section 5 'Impact analysis and action plan'***
People with different ***Gender Identities*** *e.g. Gender fluid, Non-Binary etc*	☐	☐	☒	In 2021 the Census included a question on gender identity. Lowest level data for this gender identity is at local authority level. There is a slightly lower proportion of Tower Hamlets residents whose gender is the same as registered at birth than the London average – 90.7% compared to 91.2%. There is no estimated direct or indirect disproportionate impact of these proposals to residents on the grounds of different gender identities
Any other groups	☐	☐	☐	

Section 5: Impact analysis and action plan

Recommendation	Key activity	Progress milestones including target dates for either completion or progress	Officer responsible	Update on progress
Further data collection post implementation to measure the impact of proposals	*Data collection*	*Six month monitoring*	*Simon Baxter*	*TBC*
The council will commission a comprehensive study into improving the public realm for pedestrians in the areas around Brick Lane. It should consider walking routes throughout the area and should also consider parking arrangements on Brick Lane and how they impact on pedestrian use of Brick Lane. Key priorities will be:	*Commission pedestrian study*	*Six month monitoring*	*Simon Baxter*	*TBC*

We have identified steps to mitigate any identified negative impacts and these are listed above. Following this consultation round, we will review the draft EIA, review these mitigating actions and develop alternative and/or additional mitigating actions where a need has been identified.

Section 6: Monitoring

What monitoring processes have been put in place to check the delivery of the above action plan and impact on equality groups?
Monitoring delivery If option 1 is implemented, a project plan will be developed for delivery timescales including the milestones for each of the mitigating measure outlined in section 5.

Monitoring impact

Traffic counts
If option 1 is implemented, traffic counts will be undertaken for boundary roads and internal roads in order to assess the impact on traffic flows from the proposals.

Air quality
If option 1 is implemented, the council will develop a robust monitoring framework to assess the impact on NO2, PM2.5 or PM10 levels from the proposals. This will include new and more accurate monitoring equipment where required.