March 2025

Redbridge Sustainable Transport Strategy: Equality Impact Assessment (EqIA)

London Borough of Redbridge
24331401

steer

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1 Introduction

Background

1.1 This Equality Impact Assessment (EqIA) relates to the London Borough of Redbridge's (LB Redbridge) Sustainable Transport Strategy (STS). An EqIA is a process designed to ensure that a policy, project, or scheme does not unlawfully discriminate against any protected characteristic as defined by the Equality Act 2010.

1.2 The STS sets the future vision for safer, more accessible, and affordable, and greener travel. LB Redbridge is committed to working in partnership to deliver this strategy for all residents, workers, and visitors. In addition to meeting our needs for local journeys, we will enhance Redbridge's connectivity between central London, other parts of outer London, neighbouring areas, and international gateways, boosting economic growth sustainably and generating new opportunities for our communities to thrive across the Borough.

1.3 The Borough aims to support a 'green' shift in how people are moving around by facilitating the uptake of sustainable alternatives to using cars and vans, predominantly walking, wheeling cycling and the use of public transport.

Approach to Stakeholder Engagement

1.4 The STS was developed following extensive stakeholder engagement with the groups outlined below. Engagement was targeted so that people who are typically lesser heard through consultation were given the opportunity to provide their opinions and feedback. It is noted that a comprehensive representation from all protected characteristic groups was not achieved as part of stakeholder engagement, with some groups, such as LGBT+ groups and ethnic minority groups not represented in stakeholder engagement. However, the public consultation did provide valuable feedback from a wide range of groups on the proposals within the strategy.

1.5 The feedback gathered through this stakeholder engagement was used to directly influence the vision, key priorities, and objectives of the STS.

Travel and transport groups

Transport for London - representatives from public transport departments
London Cycling Campaign – charity designed to make cycling safer and more enjoyable for everyone
Redbridge Cycling Campaign – charity that campaigns for better and safer cycling in Redbridge
Cycling Sisters – registered charity that aims to inspire and enable Muslim women to cycle
Mums for Lungs – grassroots organisation aimed at raising awareness about the risks of toxic air and the harm it causes to health of families (group founded by a local mum)
20's Plenty for Us – group dedicated to supporting 20mph speed limits
Licensed Taxi Drivers Association – representative group for licensed taxi drivers (suburban branch)

Representatives of older age groups

Age UK – charity working in Redbridge and neighbouring boroughs to offer support and services to older people

Representatives of disabled groups

Shop Mobility Ilford – provider of powered wheelchairs and scooters (office in Ilford town centre). This service is part of Disability Redbridge.
One Place East – community charity designed to enable disabled people and those with health conditions in Redbridge and across East London to have choices
Disability Redbridge – charity that encourages and supports disabled people of all ages and backgrounds to fully participate in society

Youth groups

Redbridge Youth Council – group of young people aged 11 – 19 years old who live and/or study in Redbridge
Child Friendly Redbridge Ambassadors – group of young ambassadors to lead the way in delivering a child friendly Redbridge

Redbridge Citizens' Panel

Redbridge Community Voice – platform for residents (over 18) to have their say (diverse in terms of representation)

Approach to the Equality Impact Assessment

1.6 This EqIA has been assessed based on the assumption that the STS delivers on its vision and the 9 key priority areas presented below:

Vision

"By 2041, travel in Redbridge will be safer, healthier, greener, and more inclusive. There will be more affordable choices for all journeys that help us to live healthier and more independent lives. At least two thirds of all journeys will be by public transport, walking, wheeling (i.e. using of wheelchairs and mobility scooters), cycling, or scooting.

Our ambition is to create seamless and safe connections between the bus, Underground and rail networks; and an extensive network of zero emission vehicle charging points that support the Borough's carbon neutral ambitions with the aim to keep Redbridge moving."

1.7 There are nine key priority areas underpinning the Vision for sustainable transport in Redbridge, listed below:

Priority 1 – Improving road safety & air quality: We will address key safety and security issues to reduce serious and fatal injuries to those travelling within the Borough and that also currently prevent people from making active and sustainable travel choices, to create a safer environment for all.
Priority 2 – Enabling healthy lifestyles: The transport network will enable people to access key destinations, community services and green spaces by sustainable travel options, helping to improve residents' physical and mental health.
Priority 3 – Enabling active travel: The transport network will offer attractive and low carbon alternatives to the private car through better integrated infrastructure, services and information provision, to encourage sustainable travel behaviour.

Priority 4 – Education, promotion, and engagement: Educational initiatives will ensure that communities are informed of the benefits of safe and sustainable travel, and people are aware of the choices available. Schools and workplaces across the Borough will commit to promoting greener and safer forms of travel.
Priority 5 – Increasing accessibility and creating high quality public realm: The transport network will make life easier for people of all ages, abilities and backgrounds who are living, working and visiting Redbridge and allow for independent travel. Public spaces will be high-quality, welcoming and inclusive, allowing for both safe, pleasant dwelling and seamless travel for people from all groups and backgrounds.
Priority 6 – Enhancing the environment and biodiversity: Changes to the transport network will aim to reduce congestion and minimise the negative environmental impacts of transport, improving the quality of green spaces, while protecting and enhancing biodiversity across the Borough.
Priority 7 – Responding to the climate emergency: Encouraging the movement of both people and goods by cleaner and greener options wherever possible to help the Borough to reduce congestion, keep Redbridge moving and achieve our goals of Carbon neutrality by 2030 as well as Carbon net zero by 2050.
Priority 8 – Supporting housing, jobs, and economic growth: The transport network will connect people with places of employment, education and opportunity, allowing businesses to access supply chains within and beyond Redbridge, to help meet the needs of a growing Borough and stimulate future prosperity.
Priority 9 – Rethinking freight and servicing: The transport network will reduce the impact of delivery and servicing vehicles through better co-ordination and encouraging greener choices of transport for first and last mile of journeys.

Expected outcomes

1.8 An initial assessment was undertaken of each of the nine priorities to establish the most likely outcomes. A total of seven key outcomes were identified, and this EqIA assesses the impact of these outcomes. These outcomes are presented below:

Outcome 1 – A more accessible public transport network: Making the public transport network more accessible will remove barriers to sustainable travel choices, making it easier for people to use the public transport network to move around Redbridge and Greater London.
Outcome 2 – Improved walking and cycling network: Improvements to the walking and cycling network will make it easier for people who live, work, study or are visitors in Redbridge to move around without relying on a private motor vehicle. Improvements to these networks will also help with integrating public transport, enabling more people to make multi-modal journeys.
Outcome 3 – Improvements to air quality: Accelerating the shift from private petrol/diesel vehicles to public transport, active travel and electric vehicles will help to mitigate impacts on the environment and improve health.
Outcome 4 – Improved road safety for all users: Improving road safety will make people feel safer on the roads and therefore make walking and cycling more attractive and viable to people who live, work or study in Redbridge.
Outcome 5 – Improved accessibility of parking: Improved Blue Badge parking across Redbridge will improve accessibility and mobility for people who rely on their car as an essential mobility aid. Insufficient parking can act as a barrier to accessing key destinations, services, and limits opportunities for onward travel by sustainable and active modes.
Outcome 6 – Community-led engagement on transport proposals: Improved community engagement and co-design with residents, businesses and local community groups on new

transport plans and proposals is likely to lead to more inclusive, accessible designs which meet the needs and desires of residents.

Outcome 7 – Improvements to public realm and the condition and accessibility of the walking environment: New and improved public realm will make it easier for people to walk around Redbridge.

2 Scoping

2.1 A scoping exercise has been undertaken to identify whether the LB Redbridge Sustainable Transport Strategy could have a disproportionate impact on groups of people who share one or more protected characteristic. This assessment considers both potential positive and negative impacts, and, where possible, provides evidence to explain why this group might be particularly affected.

2.2 'Disproportionate impact' means that groups of people who share a protected characteristic (e.g., people of a particular age, people of a particular gender, or people from a particular race and religion) will be significantly more affected by the change than other groups.

2.3 Protected characteristics are specific aspects of a person's identity defined by the Equality Act 2010. The 'protection' relates to protection from discrimination. The law defines nine protected characteristics:

Age
Disability
Gender reassignment
Marriage and civil partnership
Pregnancy and maternity
Race
Religion or belief
Sex
Sexual orientation

2.4 The LB Redbridge STS outlines a range of transport-related policies that are aimed at improving safety, air pollution, health, and economic outcomes in Redbridge. These will predominantly impact people's movement and experience of streets and spaces.

2.5 It is not considered that the 'marriage and civil partnership' protected characteristic has a significant intersection with movement and space. As such, they have not been included in the baseline data, or the detailed analysis of equality impacts that follows.

2.6 A summary of scoping exercise is presented within Table 2.1.

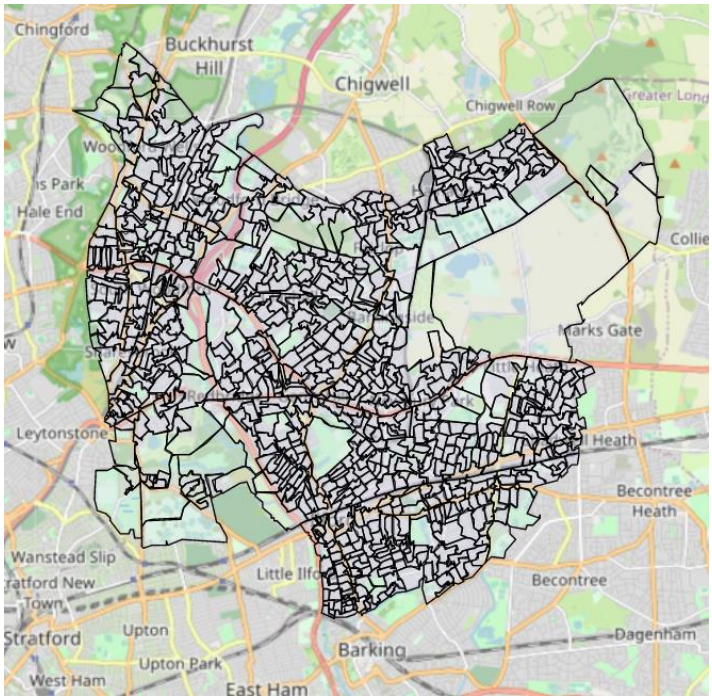
Table 2.1: Protected characteristics scoping

Protected Characteristic	Disproportionate impact unlikely	Disproportionate impact likely	Commentary
Age - people in particular age groups (particularly over 65s and under 16s)		✓	There is likely to be a disproportionate impact which this EqIA will investigate. A person's ability to use the transport network can be shaped by age and age-related health conditions.
Disability - people who have physical, sensory, intellectual, or mental health impairment(s)		✓	There is likely to be a disproportionate impact which this EqIA will investigate. A person's use of the transport network can be shaped by certain impairments.
Pregnancy and maternity – those who are pregnant or caring for new-borns		✓	There is likely to be a disproportionate impact which this EqIA will investigate. A person's use of the transport network can be shaped by pregnancy and parental care.
Gender reassignment - people who are intending to undergo, are undergoing, or have undergone a process or part of a process of gender reassignment		✓	There is likely to be a disproportionate impact which this EqIA will investigate.
Marriage or civil partnership – people who are married or within civil partnerships	✓		People who are married or within civil partnerships are unlikely to be disproportionately impacted by the scheme.
Race - people of a particular race or ethnicity (including refugees, asylum seekers, migrants, gypsies and travellers)		✓	There is likely to be a disproportionate impact which this EqIA will investigate. Use of the transport network and/or occupation may differ depending on ethnicity.
Religion or belief - people of particular faiths and beliefs		✓	There is likely to be a disproportionate impact which this EqIA will investigate. Experience of using the transport network may differ depending on religion or belief.
Sex – whether people are male or female		✓	There is likely to be a disproportionate impact which this EqIA will investigate. Use of the transport network and/or occupation may differ depending on sex.
Sexual orientation – whether a person's sexual orientation is towards the same sex, a different sex, or both.		✓	There is likely to be a disproportionate effect which this EqIA will investigate.

3 Data Sources

3.1 For the purpose of this assessment, information has been gathered about protected characteristics for all Redbridge Census Output Areas as well as London as a whole. The Census Output Areas that are included in Redbridge are shown below in Figure 3.1. London has been included in the assessment to provide greater context to the data for residents living in Redbridge.

Figure 3.1: Surveyed Census Output Areas within Redbridge



Source: Census 2021

3.2 London Travel Demand Survey (LTDS) and Census data are the two primary data sources used throughout this assessment. Supplementary data sources have been used and are referenced throughout. For each protected characteristic, data has been collated and analysed, with comparisons made at borough, regional and national levels, where relevant.

3.3 While Census data is a useful tool to understand and compare travel characteristics of an area with another, it does have limitations as following:

The 2011 dataset is dated and does not reflect development & societal changes occurred over the 2010s.
The 2021 dataset provides up-to-date demographic context but lacks accurate insight on travel patterns due to its undertaking on 21st March 2021, where a larger proportion of workers will have recorded working mostly or at home, compared to the date of which this EqIA was prepared.

Under-representation of houseless people and people with no fixed address.
Some level of inaccuracy in data on sexual orientation and gender identity due to people not wanting to disclose this information.
For some, language may pose a barrier to fully comprehending and completing the census questionnaire.
Question phrasing and options regarding disability and ethnicity are likely to lead to some inaccuracies in the dataset.

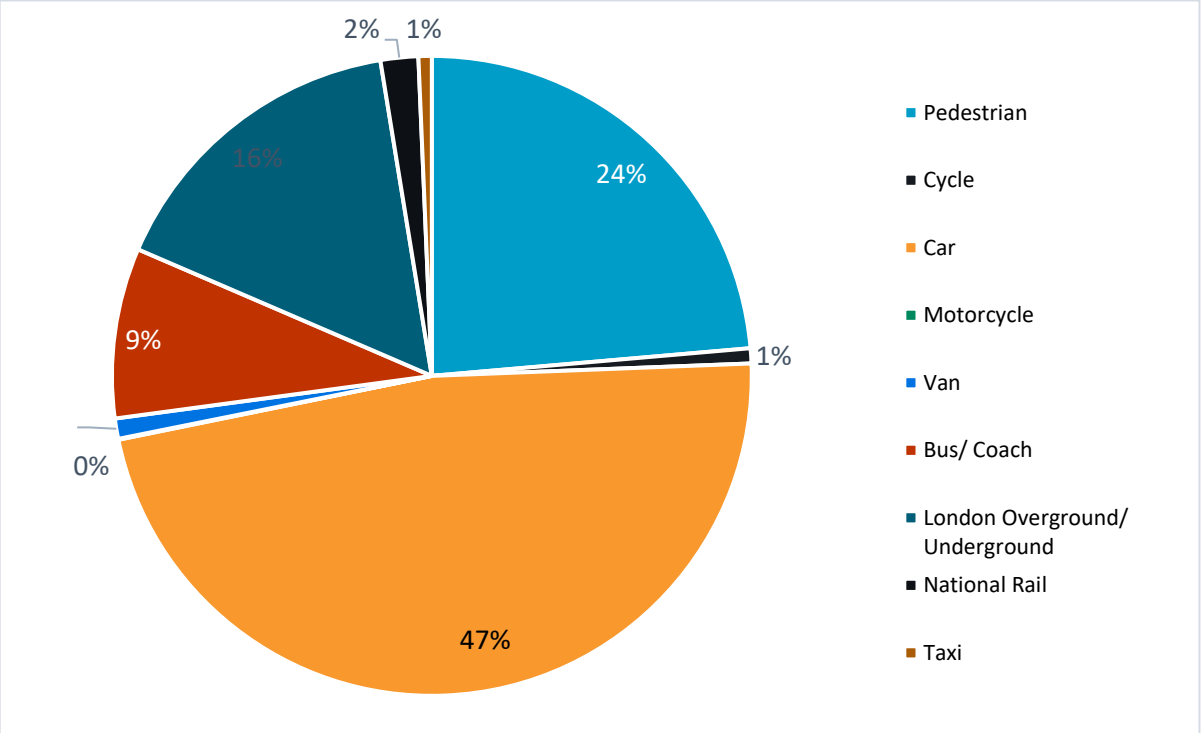
4 Baseline Evidence

Demographics

4.1 The population of Redbridge was recorded at 310,000 residents 2021, which is forecast to increase to 365,000 by 2041, representing an 18 per cent increase. The highest areas of population density are focussed in the south and centre of the borough, around Ilford. Supporting this forecast increase is the proposed delivery of 17,200 new homes.

4.2 Figure 4.1 illustrates the method of travel to work of those living in Redbridge as sourced from the LTDS (2021).

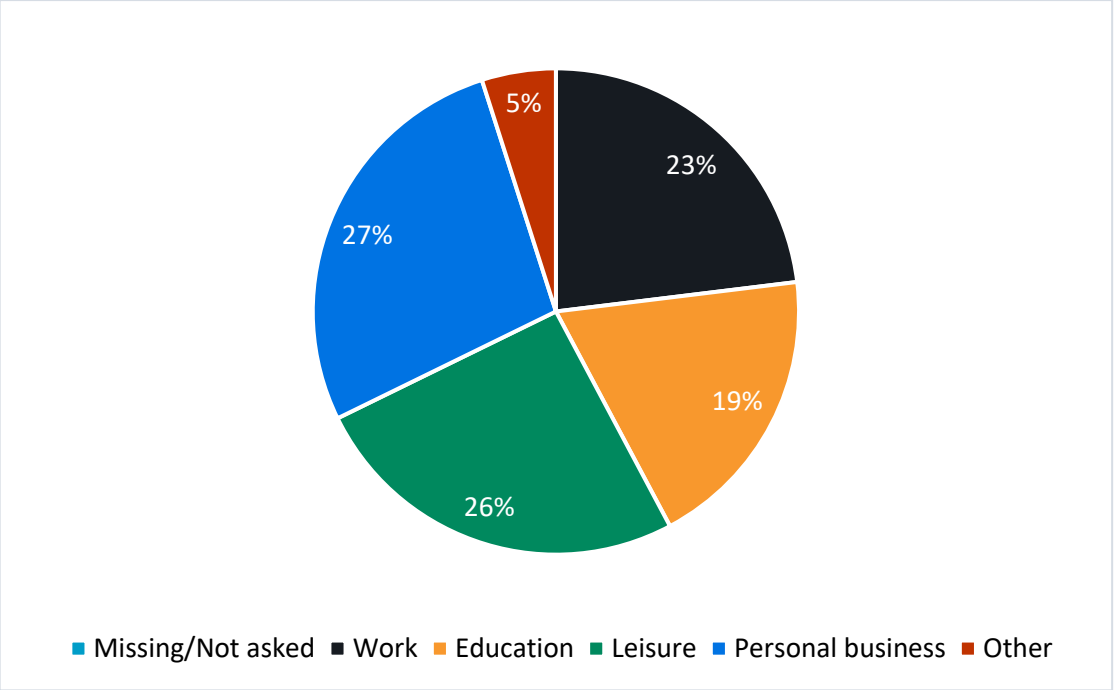
Figure 4.1: Method of travel to work for those living in Redbridge



Source: Census 2021. NB – 'Motorcycle' is at 0 per cent and therefore not represented in the figure above.

4.3 Data from the LTDS has been analysed to understand differences in travel patterns for various trip purposes, including travel to work. Figure 4.2 shows the most common trip purposes for trips ending in Redbridge. Over a quarter (27 per cent) of trips were done for personal business, a further quarter (26 per cent) for leisure, and just under a quarter for work (23 per cent). Nearly a fifth (19 per cent) of trips were taken for education purposes.

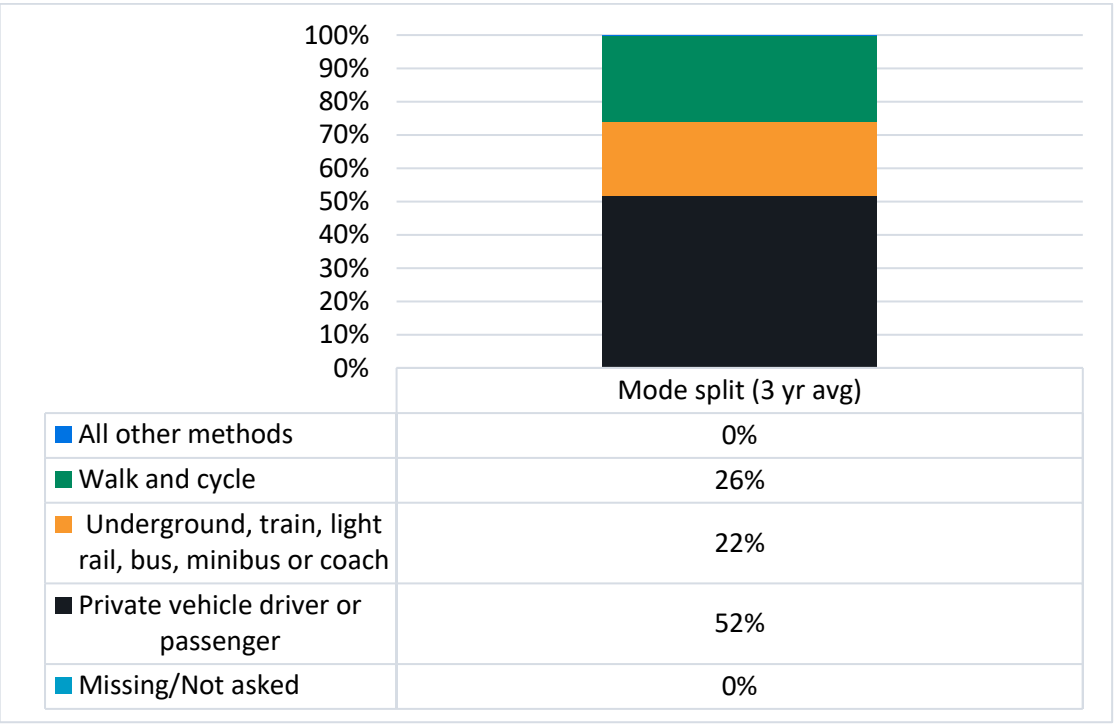
Figure 4.2: Trip purposes in Redbridge



Source: LTDS average (2017/18, 2018/19, 2019/20)

4.4 LTDS data demonstrates the modal split of these trips. Figure 4.3 shows over half (52 per cent) of trips ending in Redbridge were done using a private vehicle. Just over a quarter (25 per cent) were made using active travel modes. Over a fifth (22 per cent) were done by public transport modes.

Figure 4.3: Mode split of all trips ending in Redbridge



	Mode split (3 yr avg)
All other methods	0%
Walk and cycle	26%
Underground, train, light rail, bus, minibus or coach	22%
Private vehicle driver or passenger	52%
Missing/Not asked	0%

Source: LTDS average (2017/18, 2018/19, 2019/20)

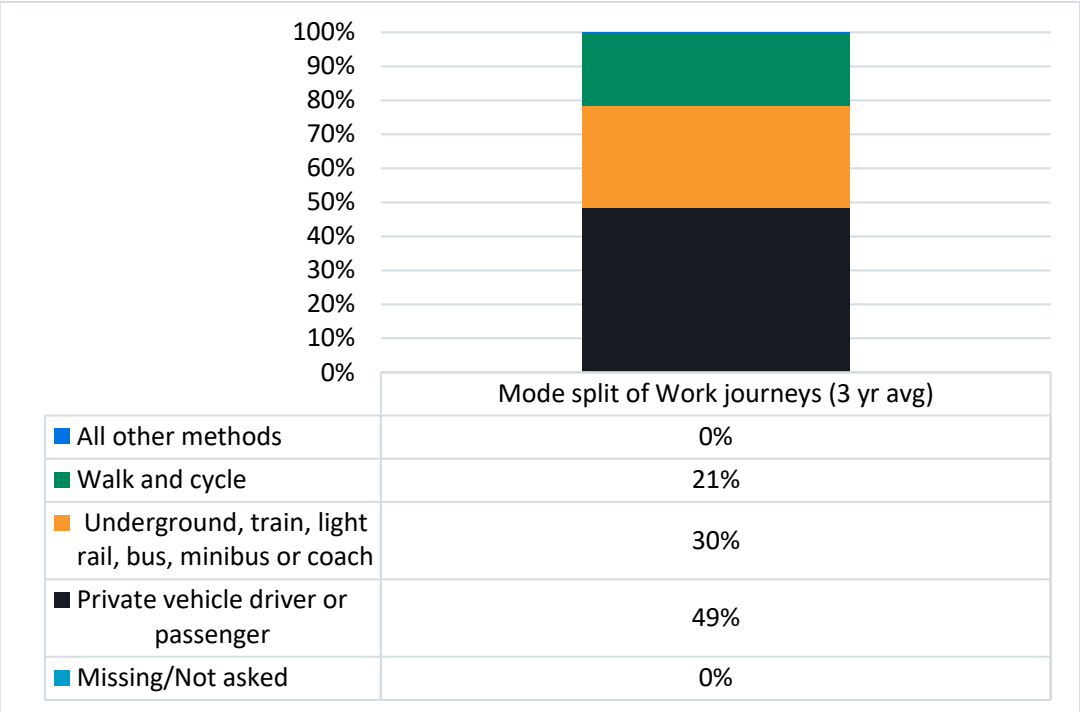
Workforce

4.5 As of 2020, Redbridge's resident workforce was 77,000. Between 2015 and 2030 a growth of 5,000 new jobs continues to be forecast.

4.6 The modal split for work-related trips ending in Redbridge is presented in Figure 4.4. Work-related trips are more likely to be done by public transport (30 per cent) compared to all trip types, and slightly less likely to be done via active travel modes (21 per cent).

4.7 It is worth noting that unlike Census 2021 data, LTDS data largely reflects the pre-pandemic period and does not account for changes to working and travelling that have occurred as a result.

Figure 4.4: Mode split of work trips ending in Redbridge



	Mode split of Work journeys (3 yr avg)
All other methods	0%
Walk and cycle	21%
Underground, train, light rail, bus, minibus or coach	30%
Private vehicle driver or passenger	49%
Missing/Not asked	0%

Source: LTDS average (2017/18, 2018/19, 2019/20)

Age

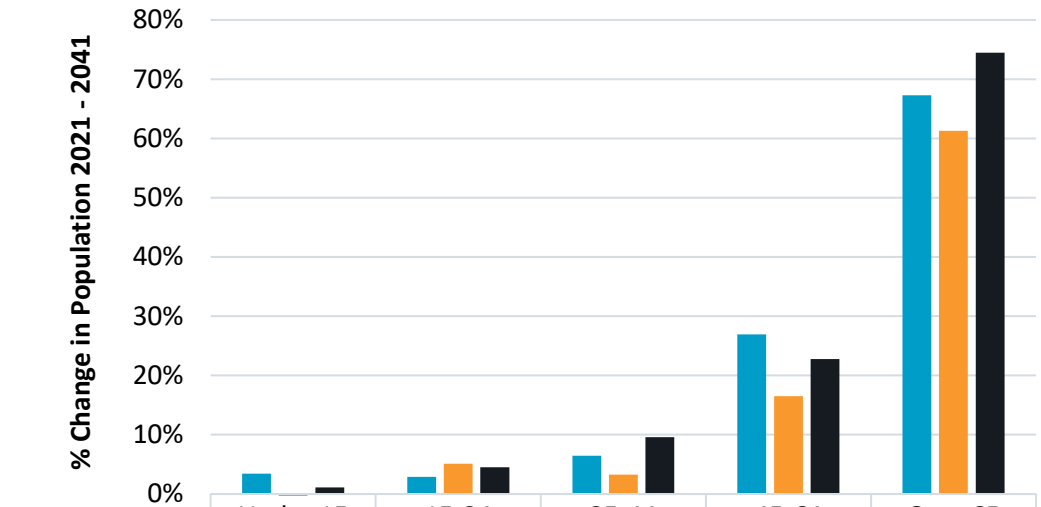
Definition according to the Equality Act 2010

1. In relation to the protected characteristic of age -
    a. A reference to a person of a particular age group
    b. A reference to persons who share a protected characteristic is a reference to persons of the same age group.
2. A reference to an age group is a reference to a group of persons defined by reference to age, whether by reference to a particular age or to a range of ages.

Baseline equalities data

4.8 As shown in Figure 4.5, Redbridge is forecast to see greater population growth for those aged 45 – 64 than for outer London and London between 2021 and 2041, and greater population growth than outer London for those aged 65. In contrast, Redbridge is expected to see lower population growth among the 15-25 age group compared to both outer London and London as a whole.

Figure 4.5: Age distribution change (2021-2041) across Redbridge, Outer London, and London

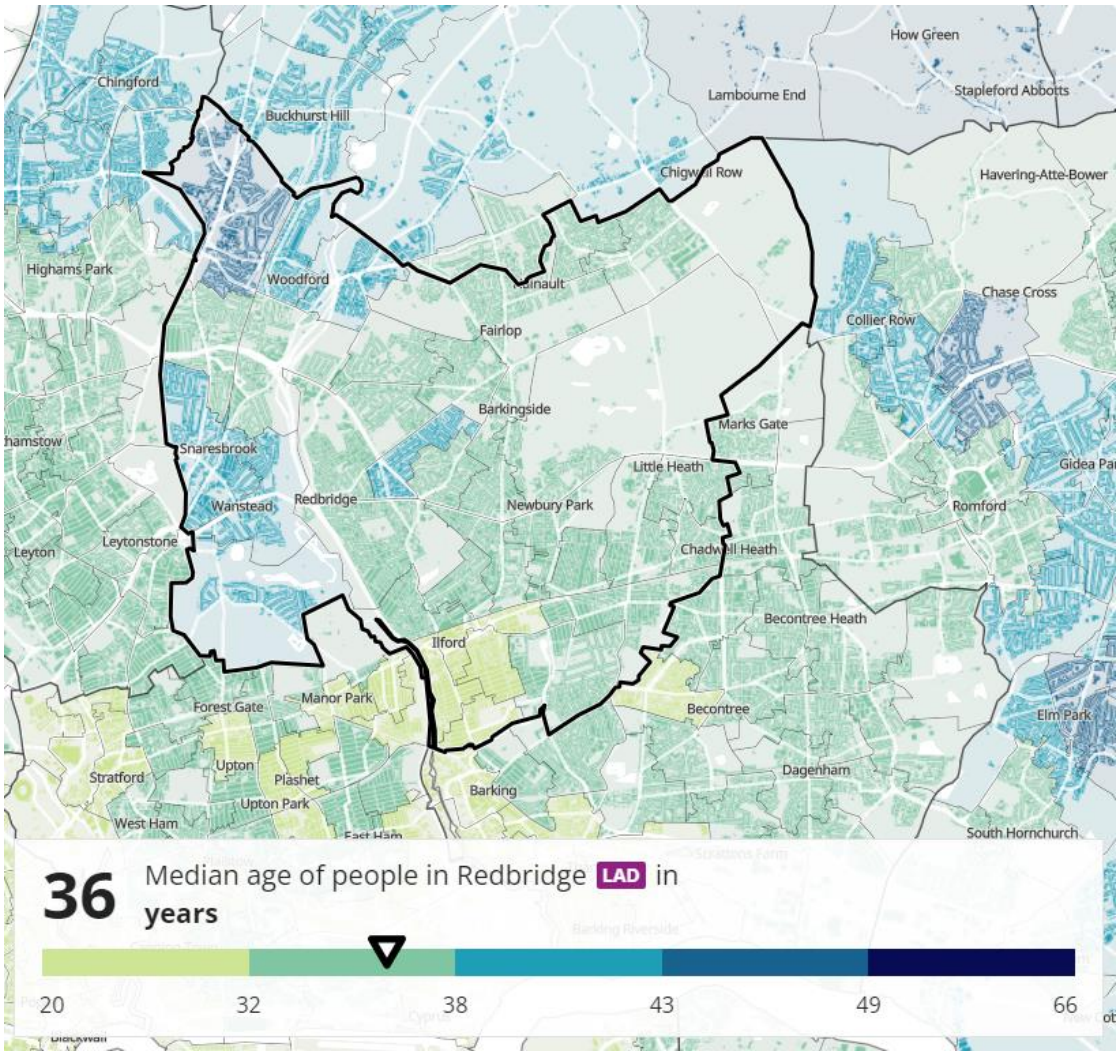


	Under 15	15-24	25-44	45-64	Over 65
Redbridge	3%	3%	6%	27%	67%
Outer London	-1%	5%	3%	17%	61%
London	1%	5%	10%	23%	74%

Source: Census 2021

4.9 Figure 4.6 illustrates the spatial distribution of the mean age across Redbridge's wards. It can be observed that the western and north-western wards exhibit an older average population compared to the southern and eastern wards with lower mean ages.

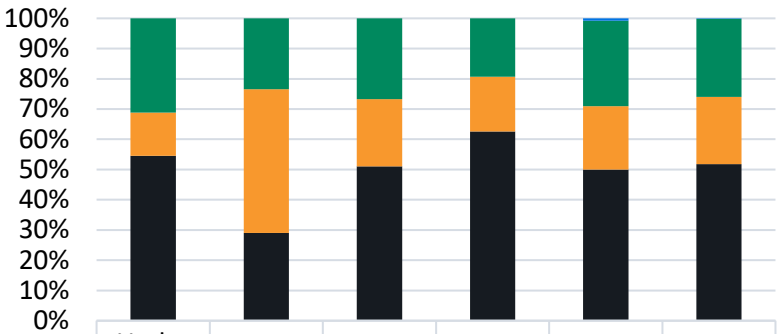
Figure 4.6: Mean age by ward in Redbridge



Source: Census 2011

4.10 Figure 4.7 presents LTDS data on how people travel around Redbridge within each age group. The highest percentage of use of active travel modes is among the under 16 age group, with 31 per cent of journeys made by bike or foot. Those aged 45-59 have comparably lower levels of active travel, making up 19 per cent of trips.

Figure 4.7: Mode share by age in Redbridge



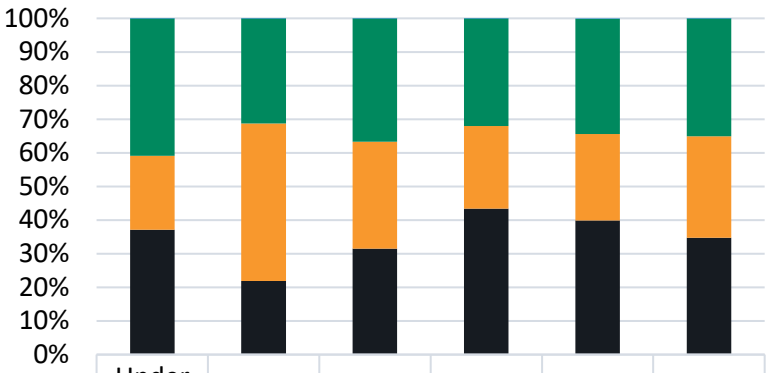
	Under 16	16-24	25-44	45-59	Over 60	Overall
All other methods	0%	0%	0%	0%	1%	0%
Walk and cycle	31%	23%	27%	19%	28%	26%
Underground, train, light rail, bus, minibus or coach	14%	48%	22%	18%	21%	22%
Private vehicle driver or passenger	55%	29%	51%	63%	50%	52%
Missing/Not asked	0%	0%	0%	0%	0%	0%

Source: LTDS average (2017/18, 2018/19, 2019/20)

4.11 Car usage is highest amongst the 45-59 age category, with almost two thirds (63 per cent) using a private vehicle for trips. Nearly half (48 per cent) of 16–24-year-olds use public transport.

4.12 Figure 4.8 presents this same information for London as a whole. Across all age groups there is higher car usage and lower active travel usage in Redbridge, compared to London. The 16-24 age category use public transport for a similar proportion of trips in both Redbridge and London (48 per cent and 47 per cent respectively).

Figure 4.8: Mode share by age in London



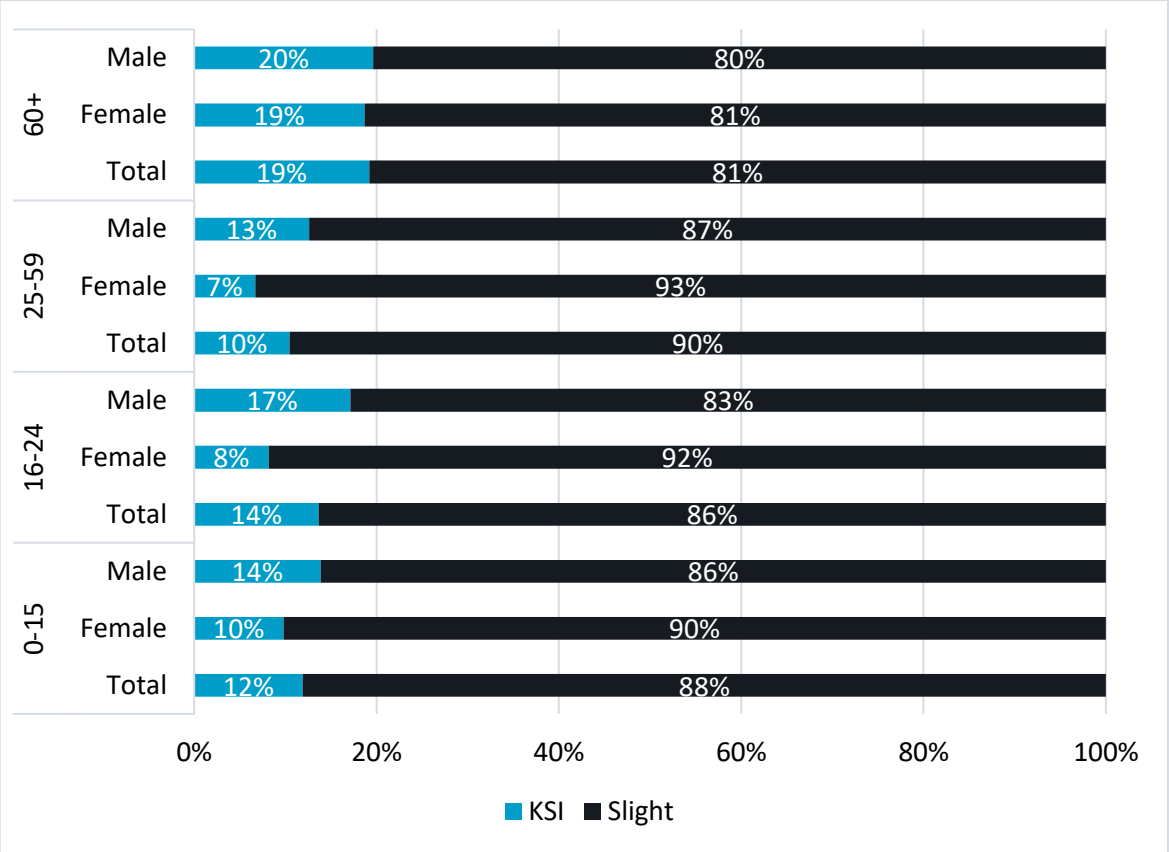
	Under 16	16-24	25-44	45-59	Over 60	Overall
All other methods	0%	0%	0%	0%	0%	0%
Walk and cycle	41%	31%	37%	32%	34%	35%
Underground, train, light rail, bus, minibus or coach	22%	47%	32%	25%	26%	30%
Private vehicle driver or passenger	37%	22%	32%	43%	40%	35%
Missing/Not asked	0%	0%	0%	0%	0%	0%

Source: LTDS average (2017/18, 2018/19, 2019/20)

4.13 Presented in Figure 4.9, the 10-14 age group, people killed in motor traffic collisions make up over 50 per cent of all external causes of death. 15-19-year-olds experience almost double the risk of death from motor traffic collisions (82.5 deaths per million population) in comparison to the general population (42.2 deaths per million population). For males in this age group the risk is higher still at 127.3 deaths per million population[1].

[1] https://www.racfoundation.org/assets/rac_foundation/content/downloadables/road per cent20accident per cent20casualty per cent20comparisons per cent20- per cent20box per cent20- per cent20110511.pdf

Figure 4.9: Percentage killed or seriously injured by age in Redbridge

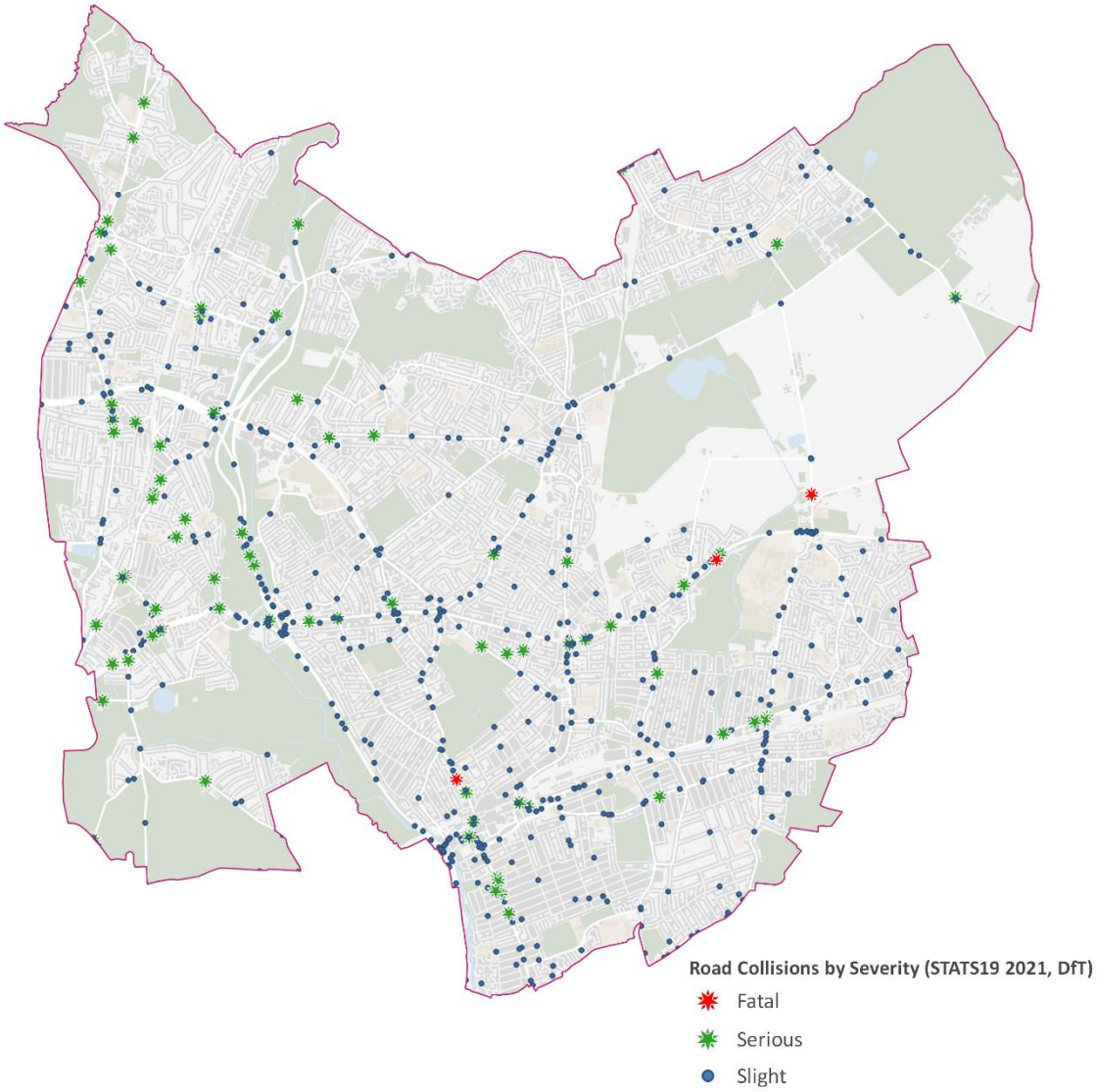


Source: DfT road casualty statistics

4.14 The proportion of Killed or Seriously Injured (KSIs) and Slightly Injured casualties in Redbridge per age category is shown in Figure 4.9. KSIs are higher than average for those aged 60 and over (19 per cent). Those aged between 25 and 59 are the most likely to be slightly injured (90 per cent) and the least likely to be killed or seriously injured (10 per cent).

4.15 Figure 4.10 illustrates instances of road collisions in Redbridge by severity. There is a much greater spread of collisions in the southern part of the borough, with there being more 'Slight' collisions on residential streets. There are higher concentrations of 'serious' collisions in the western part of the borough. There are three 'Fatal' collisions along main roads in Redbridge.

Figure 4.10: Road Collisions by Severity in Redbridge



Source: DfT Stats19

4.16 Data demonstrates that Redbridge has a 'retired' (those who qualify for the state pension, aged-65 or over) population of 34,000, which is 10.9 per cent of Redbridge's total population. This is slightly higher than London's average at 10.6 per cent. Those of retirement age are more likely to hold a Blue Badge compared to those younger. In Redbridge the ratio of the retired population to those with a valid Blue Badge is 2.9 to 1, which is higher than London's average at 3.6 to 1[2].

[2] DfT: Blue Badge scheme statistics

Disability

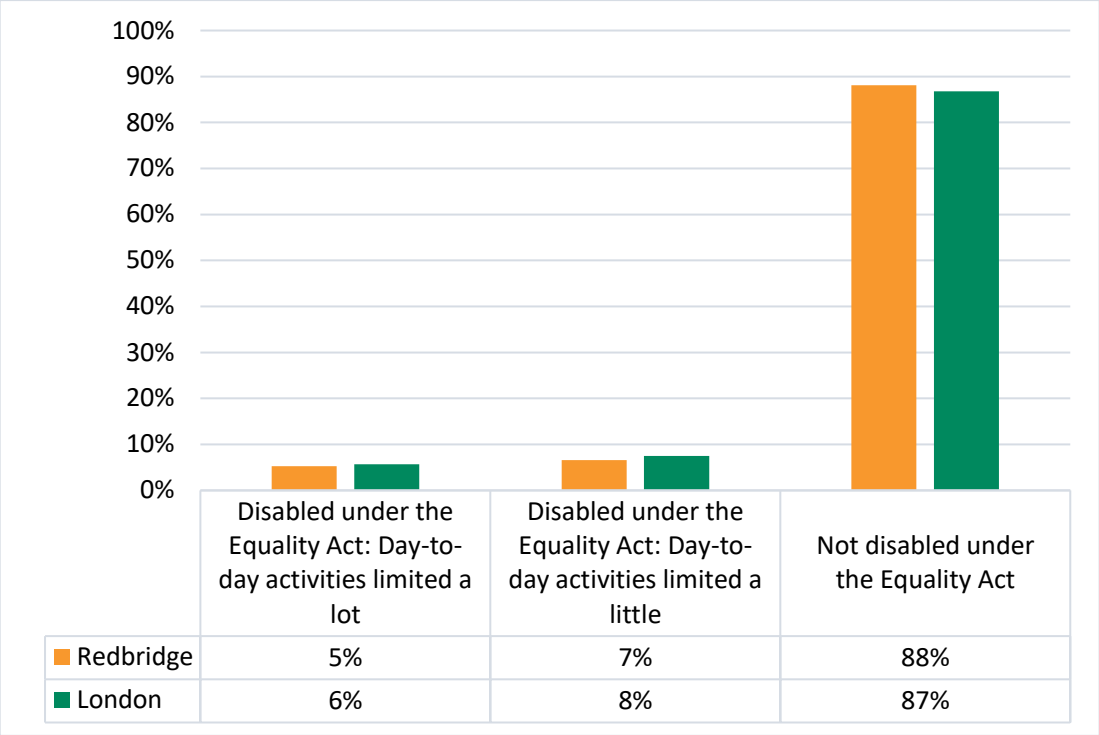
Definition according to the Equality Act 2010

1. A person (P) has a disability if—
    a. P has a physical or mental impairment, and
    b. the impairment has a substantial and long-term adverse effect on P's ability to carry out normal day-to-day activities.
2. A reference to a disabled person is a reference to a person who has a disability.
3. In relation to the protected characteristic of disability—
    a. a reference to a person who has a particular protected characteristic is a reference to a person who has a particular disability;
    b. a reference to persons who share a protected characteristic is a reference to persons who have the same disability.
4. Additionally, the Act states that a person who has cancer, HIV infection or multiple sclerosis (MS) is a disabled person. This means that the person is protected by the Act effectively from the point of diagnosis. Regulations provide for a person who is certified as blind, severely sight impaired, sight impaired or partially sighted by a consultant ophthalmologist to be deemed to have a disability. The Act provides that where an impairment consists of a severe disfigurement, it is to be treated as having a substantial adverse effect on the person's ability to carry out normal day-to-day activities. There is no need to demonstrate such an effect.

Baseline equalities data

4.17 In Redbridge, Census 2021 data in shows that 88 per cent of residents said that their day-to-day activities were not limited by a long-term health condition or impairment (Figure 4.11). This is slightly higher than in London as a whole (87 per cent). 12 per cent in Redbridge said that their day-to-day activities were limited to some extent by a long-term health problem or impairment, compared to 14 per cent in London.

Figure 4.11: Population limited by long-term health problem or impairment in Redbridge and London

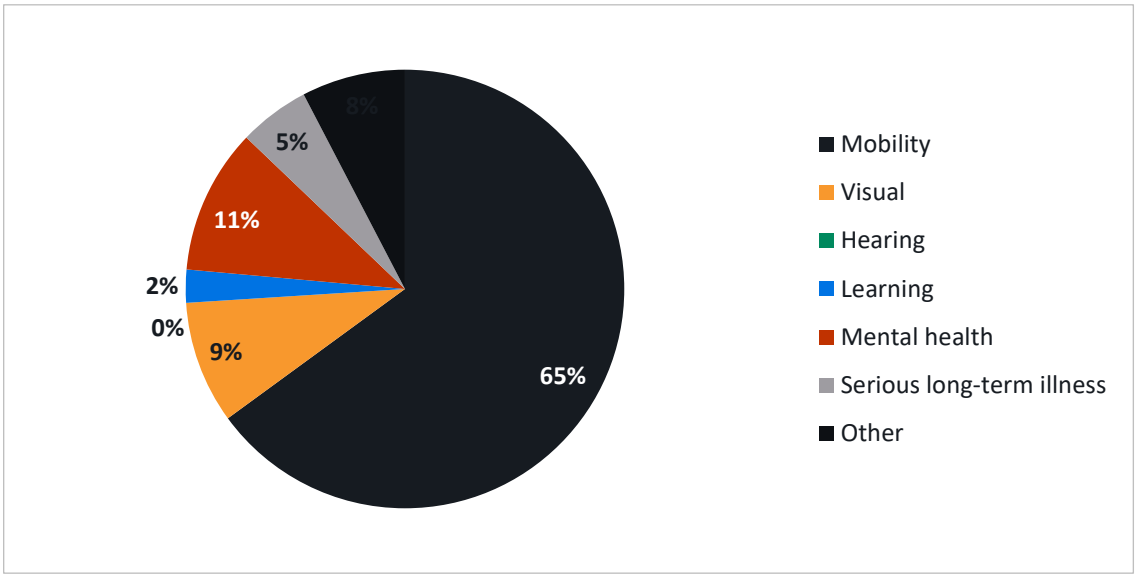


	Disabled under the Equality Act: Day-to-day activities limited a lot	Disabled under the Equality Act: Day-to-day activities limited a little	Not disabled under the Equality Act
Redbridge	5%	7%	88%
London	6%	8%	87%

Source: Census 2021

4.18 Impairment types stated by those with an impairment affecting travel in Redbridge is presented in Figure 4.12. Mobility impairments represent the highest proportion (65 per cent), followed by mental health conditions (11 per cent).

Figure 4.12: Impairment types stated by those with an impairment affecting travel in Redbridge

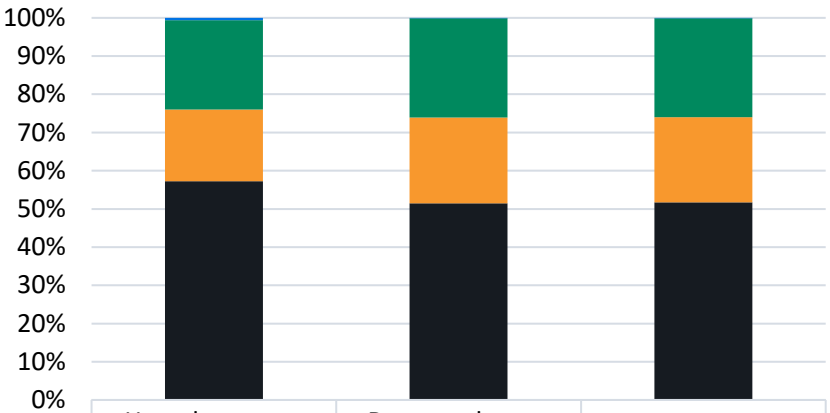


Source: LTDS average (2017/18, 2018/19, 2019/20). NB – 'Hearing' is at 0 per cent and therefore not represented in the figure above.

4.19 The mode split for people with physical impairments or mental health conditions in Redbridge is shown in Figure 4.13, with the London-wide mode split presented in Figure 4.14. In Redbridge, a higher proportion of those who have an impairment/long-term health condition use a private car for trips compared to the London average (57 per cent vs 38 per cent respectively). In London, a higher proportion of those who have a long-term health problem / disability use active modes of travel, compared to in Redbridge (34 per cent vs 23 per cent respectively).

4.20 In both Redbridge and London as a whole, those with a physical impairment or mental health condition are more likely to use a private vehicle. This is likely due to access barriers within the public transport system and public realm impacting on ability to travel by public transport, walk or cycle.

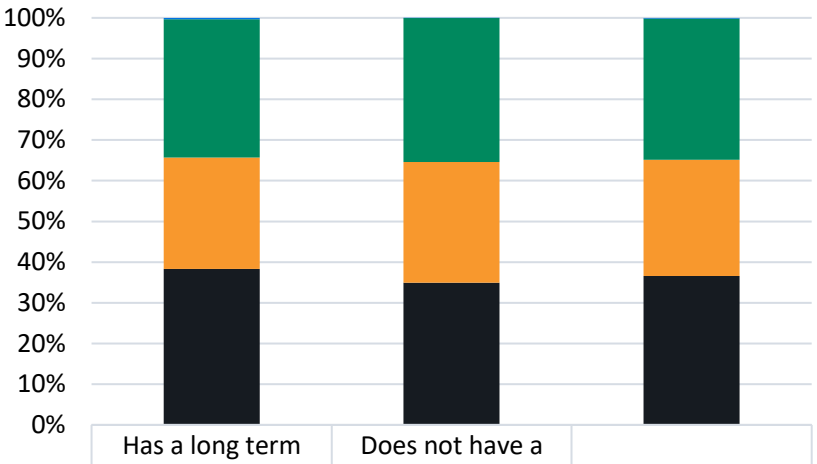
Figure 4.13: Mode split by those with a physical impairment or mental health condition affecting daily travel in Redbridge



	Has a long term health problem/disability	Does not have a long term health problem/disability	Overall
All other methods	1%	0%	0%
Walk and cycle	23%	26%	26%
Underground, train, light rail, bus, minibus or coach	19%	22%	22%
Private vehicle driver or passenger	57%	51%	52%
Missing/Not asked	0%	0%	0%

Source: LTDS average (2017/18, 2018/19, 2019/20)

Figure 4.14: Mode split by those with a physical impairment or mental health condition affecting daily travel in London

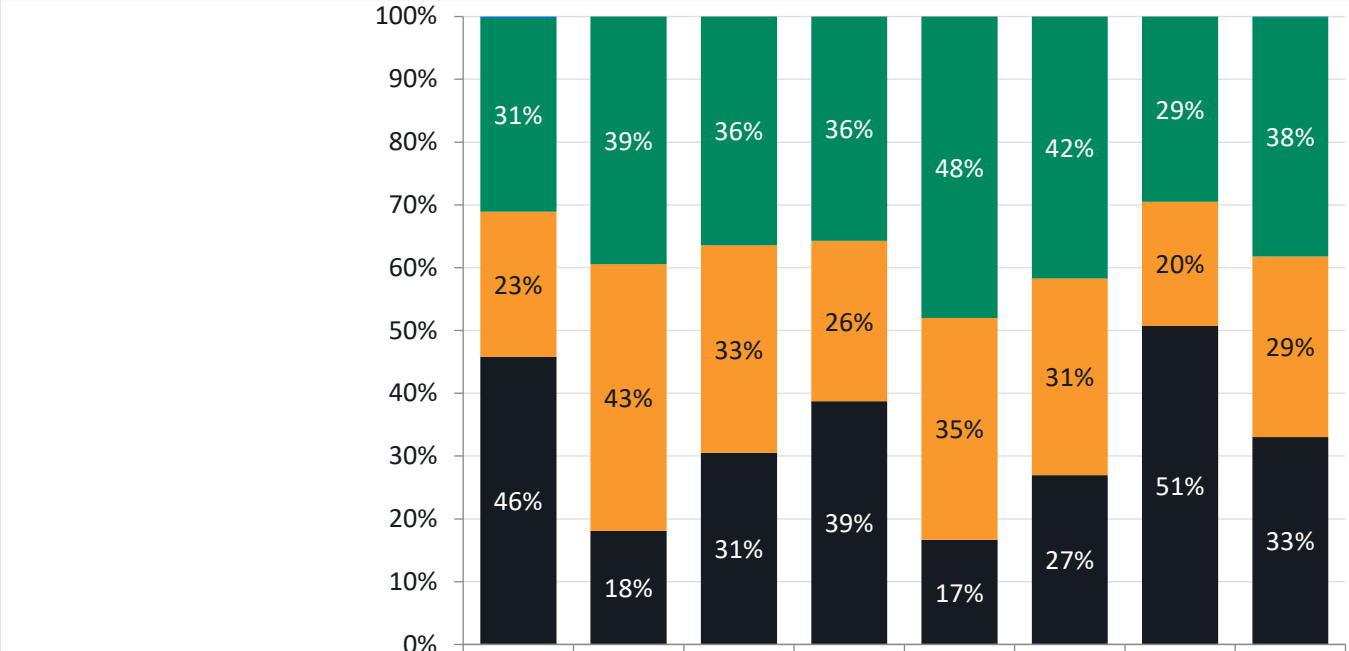


	Has a long term health problem/disability	Does not have a long term health problem/disability	Overall
All other methods	0%	0%	0%
Walk and cycle	34%	35%	35%
Underground, train, light rail, bus, minibus or coach	27%	30%	29%
Private vehicle driver or passenger	38%	35%	37%
Missing/Not asked	0%	0%	0%

Source: LTDS average (2017/18, 2018/19, 2019/20)

4.21 Figure 4.15 illustrates how mode shares across types of impairment vary.

Figure 4.15: Mode shares by impairment type – across London



	Mobility	Visual	Hearing	Learning	Mental health	Serious long-term illness	Other	Overall
All other methods	0%	0%	0%	0%	0%	0%	0%	0%
Walk and cycle	31%	39%	36%	36%	48%	42%	29%	38%
Underground, train, light rail, bus, minibus or coach	23%	43%	33%	26%	35%	31%	20%	29%
Private vehicle driver or passenger	46%	18%	31%	39%	17%	27%	51%	33%

4.22 Focusing on disabled cyclists, the Wheels for Wellbeing annual survey (2019/20)[3] showed that 65 per cent of disabled cyclists use their bike as a mobility aid, and 64 per cent found cycling easier than walking. Survey results also show that 31 per cent of disabled cyclists' use a bike for work or to commute to work and many found that cycling improves their mental and physical health.

4.23 Inaccessible cycle infrastructure was found to be the biggest barrier to cycling, followed by the prohibitive cost of adaptive cycles and the absence of legal recognition of the fact that cycles are mobility aids on par with wheelchairs and mobility scooters. These results are presented on a national level, yet it should be noted that the data is based on a small samples and results should be taken as an indication only.

4.24 Data demonstrates that as of March 2024 a total of 14,000 valid Blue Badges were held by residents in Redbridge, out of a total of 297,000 across London as a whole. As a percentage of

[3] https://wheelsforwellbeing.org.uk/wp-content/uploads/2020/07/WFWB-Annual-Survey-Report-2019-FINAL.pdf

the total population, 4.5 per cent of Redbridge residents hold a valid Blue Badge, in comparison to 3.3 per cent of London as a whole[4].

Pregnancy and maternity

Definition according to the Equality Act 2010

4.25 Pregnancy and maternity discrimination apply to people who are pregnant or expecting a baby and during the period after the birth.

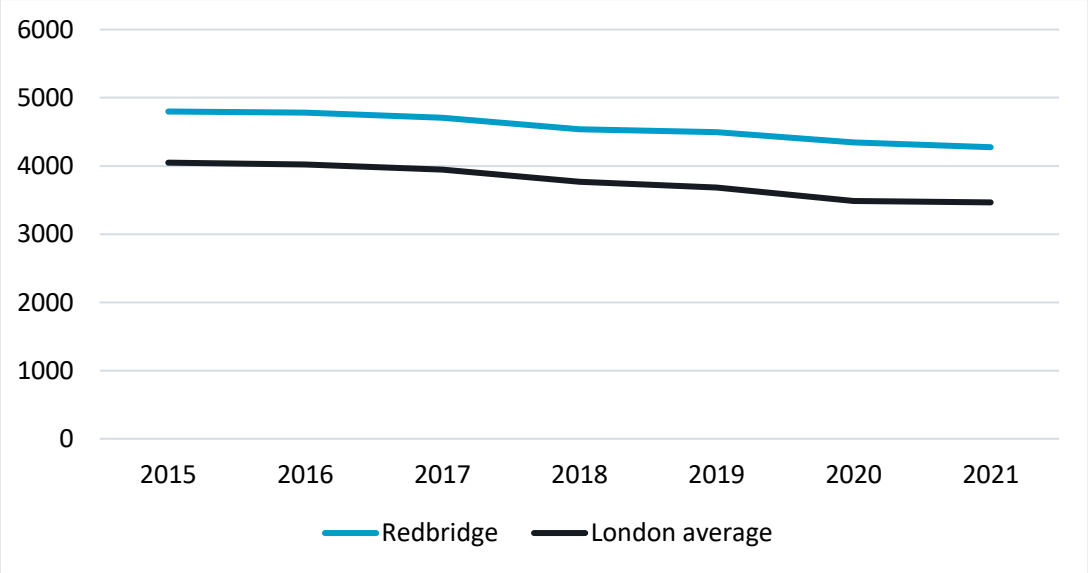
4.26 As per the Equality Act 2010, pregnancy is the condition of being pregnant or expecting a baby, and maternity refers to the period after the birth, and is linked to maternity leave in the employment context. In the non-work context, protection against maternity discrimination is for 26 weeks after giving birth.

Baseline equalities data

4.27 In 2021, there were 4,275 live births in the borough, higher than the London borough average of 3,466. The General Fertility Rate (GFR) in Redbridge was 69 births per 1,000 women aged 15-44, while in London the GFR was 56. This suggests that more women of that age group were likely to be pregnant or have given birth in 2021 in Redbridge, compared to the London average. [5]

4.28 Data since 2015 shows that the number of live births has been slowly declining in Redbridge, and in London as a whole. During this time, the number of live births in Redbridge has consistently remained above the London average, as presented in Figure 4.16.

Figure 4.16: Number of live births per year in Redbridge compared to the London average



Source: ONS Births and Fertility Rates, Borough

[4] Blue Badge scheme statistics: data tables (DIS) - GOV.UK

[5] Births and Fertility Rates, Borough - London Datastore

Gender reassignment

Definition according to the Equality Act 2010

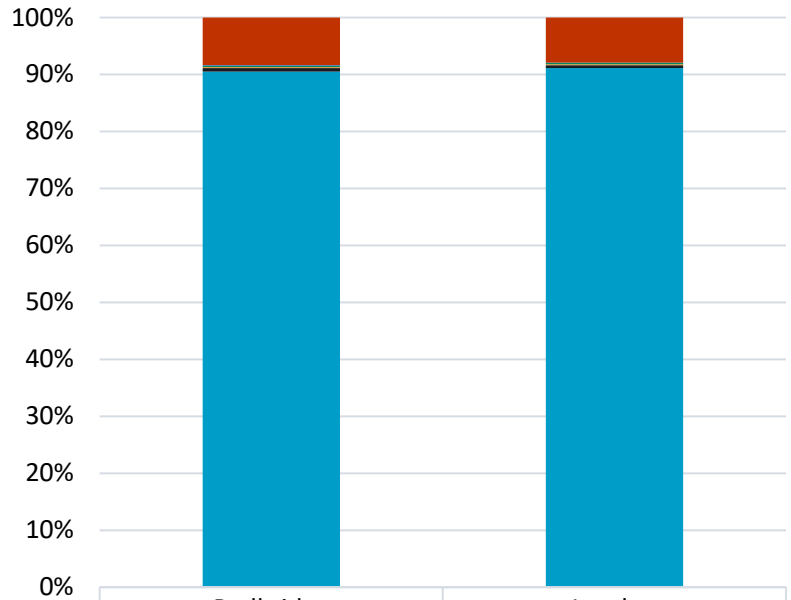
1. A person has the protected characteristics of gender reassignment if the person is proposing to undergo, is undergoing, or has undergone a process (or part of a process) for the purpose of reassigning the person's sex by changing physiological or other attributes of sex.
2. A reference to a transsexual person is a reference to a person who has the protected characteristics of gender reassignment.
3. In relation to the protected characteristics of gender reassignment –
    a. A reference to a person who has a particular characteristic is a reference to a transsexual person.
    b. A reference to persons who share a protected characteristic is a reference to transsexual persons.

Baseline equalities data

4.29 Figure 4.17 presents Census 2021 data on population by gender identity. The percentage split in both Redbridge and London are very similar. 1.1 per cent[6] of respondents from Redbridge have a gender identity that is different from their sex registered at birth. This is slightly higher than London, which has a 1 per cent share. 0.1 per cent identify as 'Trans man' and 0.2 per cent identify as 'Trans woman' in each of Redbridge and London's population.

[6] Percentage out of those who provided an answer to this question. This question was only shown to those aged 16 and over.

Figure 4.17: Population by gender identity in Redbridge and London



	Redbridge	London
Not answered	8.4%	7.9%
All other gender identities	0.1%	0.1%
Trans man	0.2%	0.2%
Trans woman	0.2%	0.2%
Gender identity different from sex registered at birth but no specific identity given	0.6%	0.5%
Gender identity the same as sex registered at birth	90.6%	91.2%

Source: Census 2021

4.30 UK crime data for 2019/20 shows 'Transgender identity' accounts for 1 per cent of hate crimes recorded by the British Transport Police and 1.25 per cent of hate crimes recorded by the Metropolitan Police.

4.31 The 2021 Walking and Cycling Index[7] (formerly known as Bike Life) found that only 51 per cent of people who identified their gender 'in another way' (including transgender and non-binary) feel welcome and comfortable walking or spending time on the streets of their neighbourhood, compared to 65 per cent of cisgender women and 67 per cent of cisgender men.[7].

Race

Definition according to the Equality Act 2010

1. Race includes—

[7] Sustrans Walking and Cycling Index (2021) **https://www.sustrans.org.uk/the-walking-and-cycling-index/**

a. colour;
b. nationality;
c. ethnic or national origins.

2. In relation to the protected characteristic of race—

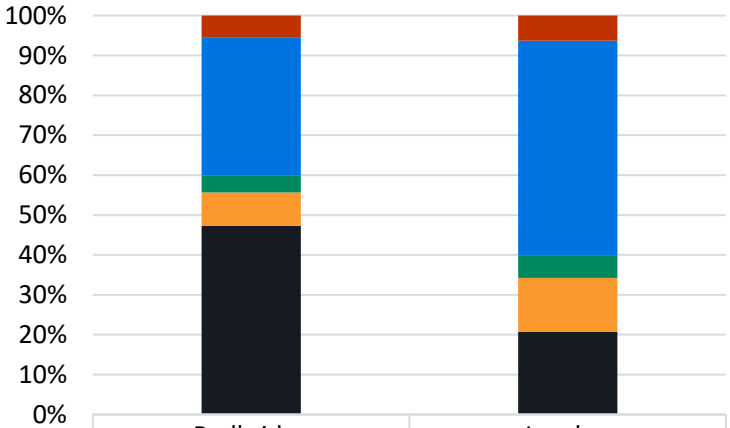
a. a reference to a person who has a particular protected characteristic is a reference to a person of a particular racial group;
b. a reference to persons who share a protected characteristic is a reference to persons of the same racial group.

3. A racial group is a group of persons defined by reference to race; and a reference to a person's racial group is a reference to a racial group into which the person falls.
4. The fact that a racial group comprises two or more distinct racial groups does not prevent it from constituting a particular racial group.

Baseline equalities data

4.32 Figure 4.18 presents the population of Redbridge, and London as a whole, by ethnicity. Based on Census 2021 data, nearly half (47 per cent) of the borough's population is 'Asian, Asian British, or Asian Welsh', making it the most common ethnicity. This is much higher than the London share of 21 per cent. 35 per cent of the population in Redbridge is 'White', which is lower than the London share of 54 per cent. Only 8 per cent of Redbridge's population is 'Black, Black British, Black Welsh, Caribbean or African', compared to London which has a 14 per cent share.

Figure 4.18: Redbridge ethnicity compared to London

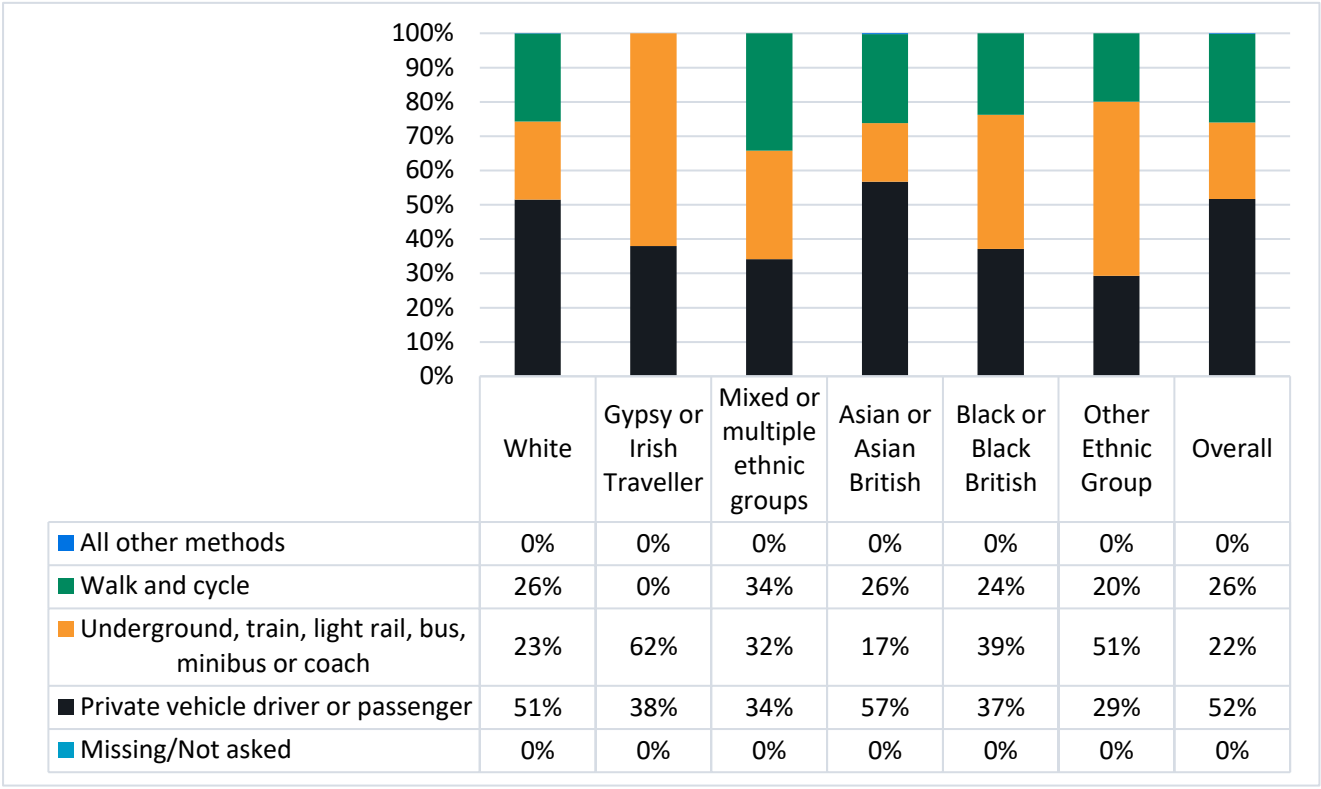


	Redbridge	London
Other ethnic group	5%	6%
White	35%	54%
Mixed or Multiple ethnic groups	4%	6%
Black, Black British, Black Welsh, Caribbean or African	8%	14%
Asian, Asian British or Asian Welsh	47%	21%

Source: Census 2021

4.33 Based on usual travel modes from the LTDS data presented in Figure 4.19, in Redbridge, 'White' and 'Asian or Asian British' residents are more likely to use a private motor vehicle to make trips than any other mode. 'Mixed or multiple ethnic groups' are most likely to use active travel modes, with 34 per cent walking or cycling in Redbridge. Compared to the London average (Figure 4.20), 'Other Ethnic Groups' are much more likely to use public transport in Redbridge (33 per cent and 51 per cent respectively).

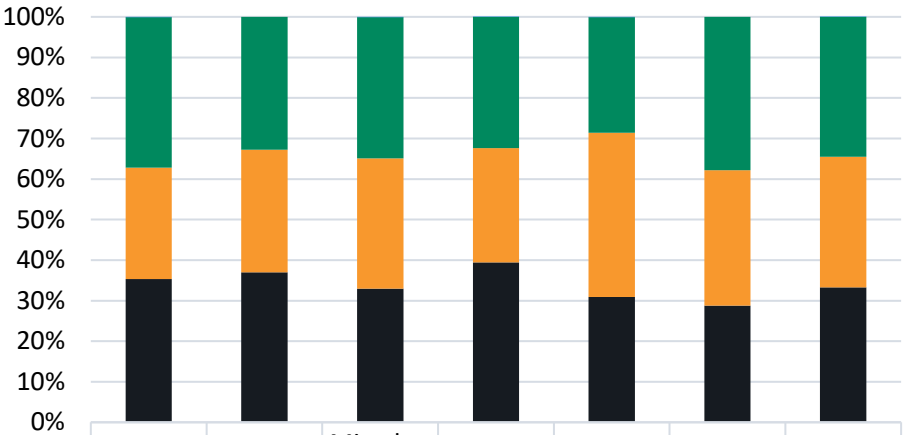
Figure 4.19: Mode share by ethnicity in Redbridge



	White	Gypsy or Irish Traveller	Mixed or multiple ethnic groups	Asian or Asian British	Black or Black British	Other Ethnic Group	Overall
All other methods	0%	0%	0%	0%	0%	0%	0%
Walk and cycle	26%	0%	34%	26%	24%	20%	26%
Underground, train, light rail, bus, minibus or coach	23%	62%	32%	17%	39%	51%	22%
Private vehicle driver or passenger	51%	38%	34%	57%	37%	29%	52%
Missing/Not asked	0%	0%	0%	0%	0%	0%	0%

Source: LTDS average (2017/18, 2018/19, 2019/20)

Figure 4.20: Mode share by ethnicity in London



	White	Gypsy or Irish Traveller	Mixed or multiple ethnic groups	Asian or Asian British	Black or Black British	Other Ethnic Group	Overall
All other methods	0%	0%	0%	0%	0%	0%	0%
Walk and cycle	37%	33%	35%	32%	29%	38%	34%
Underground, train, light rail, bus, minibus or coach	28%	30%	32%	28%	41%	33%	32%
Private vehicle driver or passenger	35%	37%	33%	39%	31%	29%	33%
Missing/Not asked	0%	0%	0%	0%	0%	0%	0%

Source: LTDS average (2017/18, 2018/19, 2019/20)

Religion or belief

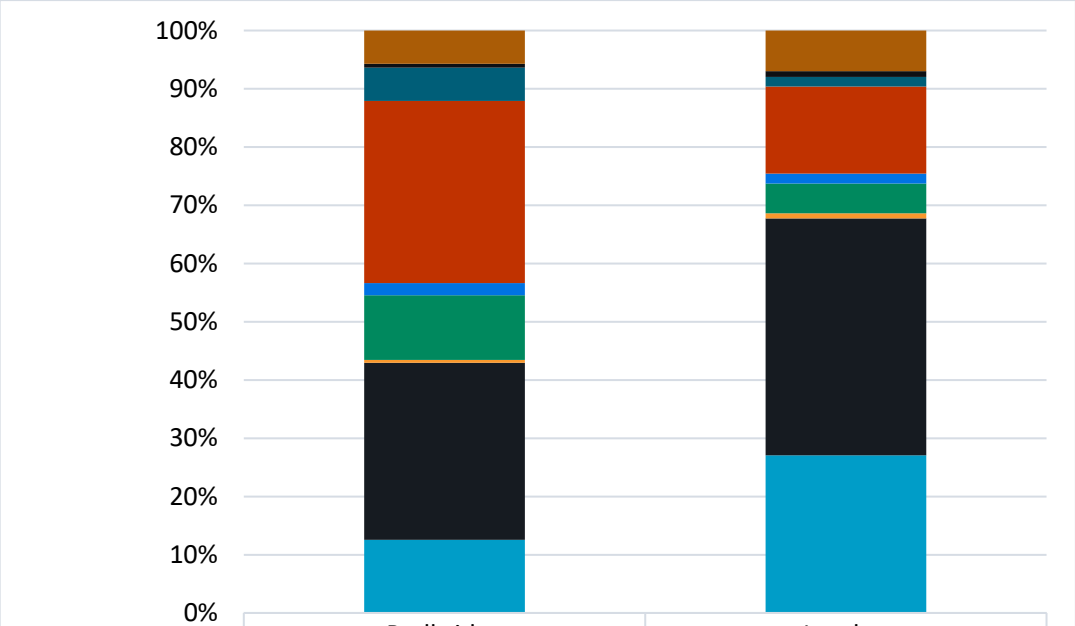
Definition according to the Equality Act 2010

1. Religion means any religion and a reference to religion includes a reference to a lack of religion.
2. Belief means any religious or philosophical belief and a reference to belief includes a reference to a lack of belief.
3. In relation to the protected characteristic of religion or belief—
    a. a reference to a person who has a particular protected characteristic is a reference to a person of a particular religion or belief;
    b. a reference to persons who share a protected characteristic is a reference to persons who are of the same religion or belief.

Baseline equalities data

4.34 Figure 4.21 presents Census 2021 data on religion and belief in Redbridge and London. Nearly a third (31 per cent) of the population of Redbridge identify as Muslim, higher than the London-wide composition of 15 per cent. A further 30 per cent of the population in Redbridge identify as Christian, lower than the London-wide composition of 41 per cent. 11 per cent of the population of Redbridge are Hindu.

Figure 4.21: Religion/belief composition in Redbridge compared to London



	Redbridge	London
Not answered	6%	7%
Other religion	1%	1%
Sikh	6%	2%
Muslim	31%	15%
Jewish	2%	2%
Hindu	11%	5%
Buddhist	1%	1%
Christian	30%	41%
No religion	13%	27%

Source: Census 2021

4.35 On certain dates and at certain times of the day, religious services and observances can have an impact on travel patterns. Places of worship and faith-based schools are major destinations for large populations from different groups.

Sex

Definition according to the Equality Act 2010

4. In relation to the protected characteristic of sex—

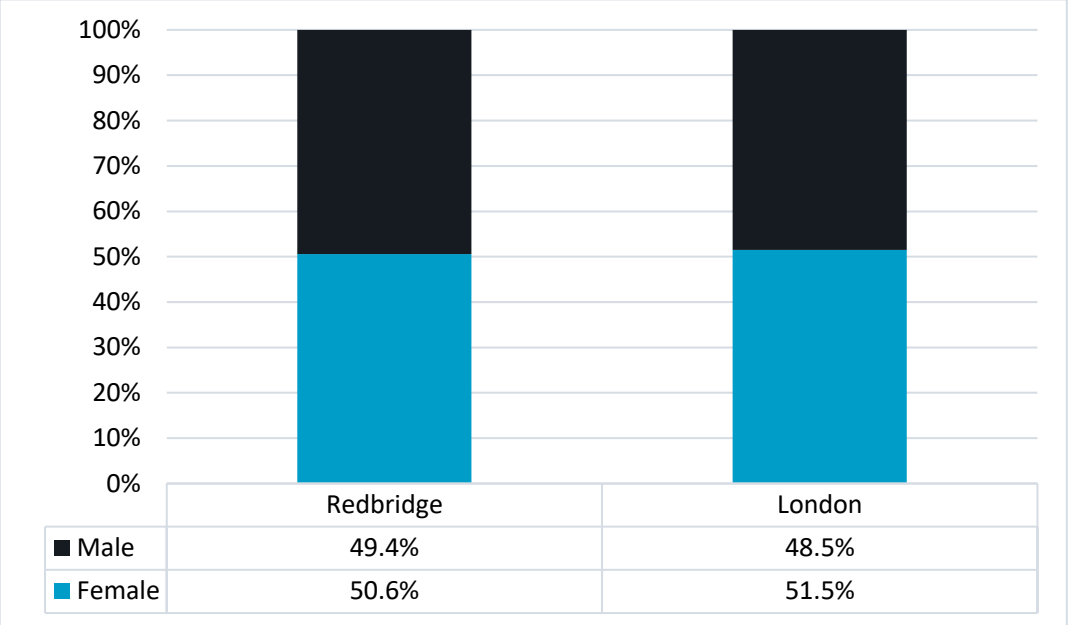
   a. a reference to a person who has a particular protected characteristic is a reference to a man or to a woman;
   b. a reference to persons who share a protected characteristic is a reference to persons of the same sex.

Baseline equalities data

4.36 Figure 4.22 presents Census 2021 data on workday population by sex. The percentage split in Redbridge is very similar to that of London as a whole, with slightly more residents identifying

as female. Redbridge has a slightly higher percentage identifying as male and a slightly lower percentage identifying as female, compared to London.

Figure 4.22: Population breakdown by sex in Redbridge and London



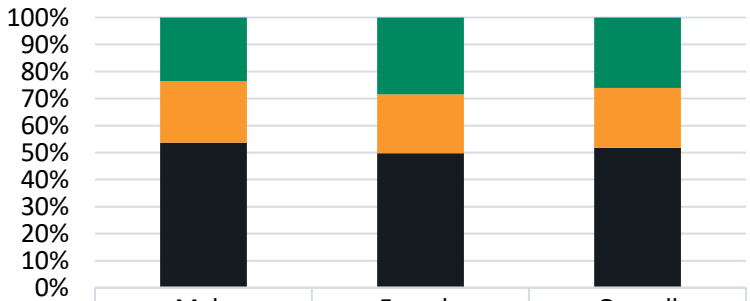
	Redbridge	London
Male	49.4%	48.5%
Female	50.6%	51.5%

Source: Census 2021

4.37 Figure 4.23 presents the mode share by sex in Redbridge. Private vehicle is the most used transport mode by both male and female residents, representing 54 per cent of all trips for males and 50 per cent of all trips for females. Females are more likely to use active travel modes than males, with 28 percent and 23 per cent respectively opting for walking and cycling. This is much lower than the London average of 35 per cent male and 36 per cent female.

4.38 Compared to the London average, presented in Figure 4.24, people in Redbridge are also less likely to use public transport compared to the London average (23 per cent male and 22 per cent female in Redbridge vs. 29 per cent male and 30 per cent female in London).

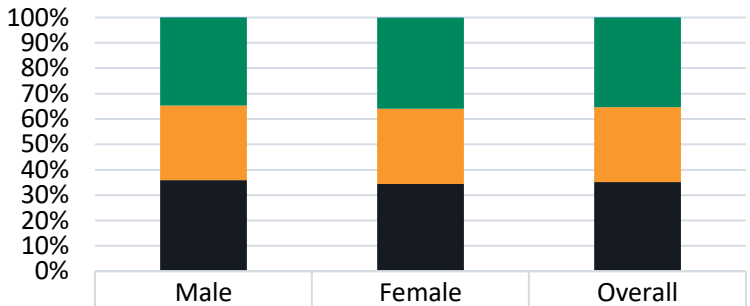
Figure 4.23: Mode share by sex in Redbridge



	Male	Female	Overall
All other methods	0%	0%	0%
Walk and cycle	23%	28%	26%
Underground, train, light rail, bus, minibus or coach	23%	22%	22%
Private vehicle driver or passenger	54%	50%	52%
Missing/Not asked	0%	0%	0%

Source: LTDS average (2017/18, 2018/19, 2019/20)

Figure 4.24: Mode share by sex in London



	Male	Female	Overall
All other methods	0%	0%	0%
Walk and cycle	35%	36%	35%
Underground, train, light rail, bus, minibus or coach	29%	30%	30%
Private vehicle driver or passenger	36%	34%	35%
Missing/Not asked	0%	0%	0%

Source: LTDS average (2017/18, 2018/19, 2019/20)

4.39 Across Greater London, research undertaken by TfL[8] suggests that females are more likely to use buses than males (62 per cent compared to 56 per cent) but are less likely to use other types of transport including the Tube (38 per cent of females compared to 43 per cent of males).

[8] https://content.tfl.gov.uk/travel-in-london-understanding-our-diverse-communities-2019.pdf

4.40 Female travel needs can be more complex than males. The increased likelihood of travelling with a buggy and/or shopping affects the travel choices females make. Females are also more likely to be carers of children[9], further affecting the choices they make.

4.41 Female Londoners make more trips per weekday than male Londoners (2.5 trips compared to 2.3 trips)[8]. This pattern, however, is reversed amongst older adults, with older female Londoners making fewer weekday trips than older male Londoners (2.0 compared to 2.2).

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

Sexual orientation

Definition according to the Equality Act 2010

1. Sexual orientation means a person's sexual orientation towards
    a. Persons of the same sex
    b. Persons of the opposite sex, or
    c. Persons of either sex
2. In relation to the protected characteristics of sexual orientation
    a. A reference to a person who has particular protected characteristic is a reference to a person who is of a particular sexual orientation
    b. A reference to persons who share a protected characteristic is a reference to persons who are of the same sexual orientation.

Baseline equalities data

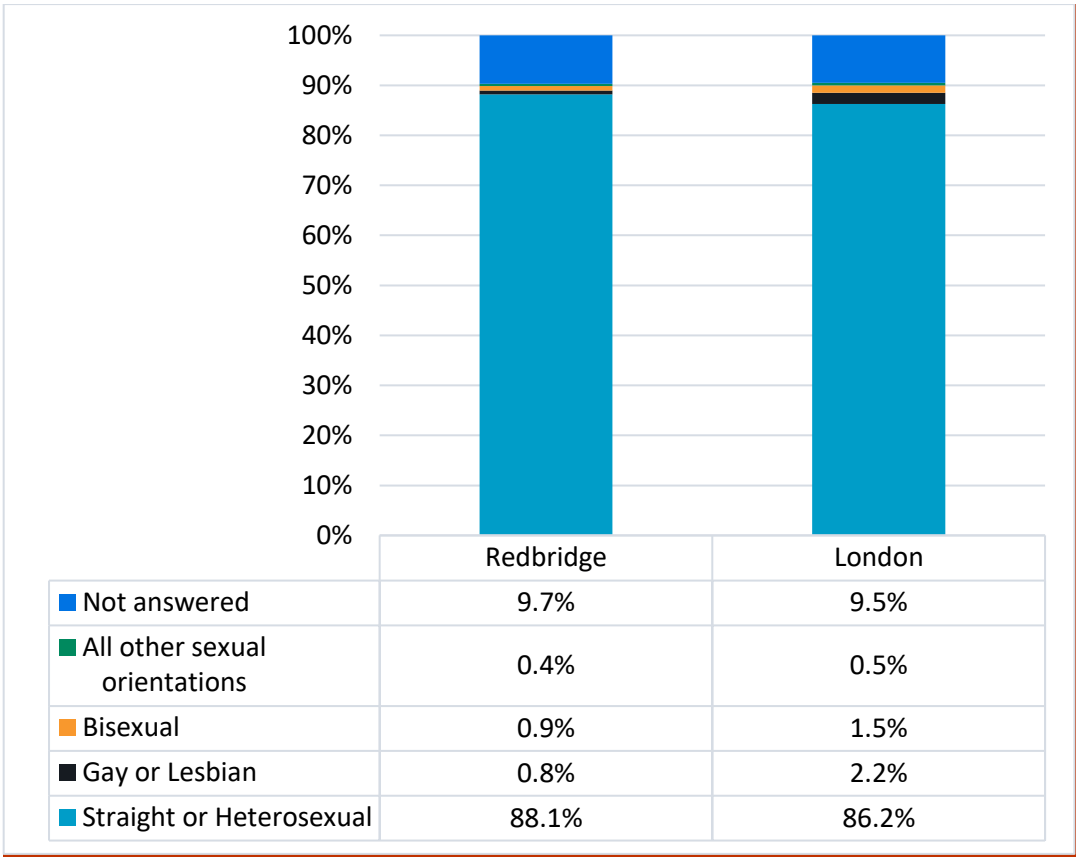
4.43 Figure 4.25 presents Census 2021 data on population by sexual orientation. Majority of people in both Redbridge and London are 'Straight or Heterosexual' (88.1 per cent and 86.2 per cent respectively). Nearly 1 per cent of people in Redbridge identify as 'Bisexual' and a further 0.8 per cent identify as 'Gay or Lesbian'. This is lower than the London region, where 2.2 per cent identify as 'Bisexual' and 1.5 per cent identify as 'Gay or Lesbian'.

4.44 While Census data can provide an indicative figure for the LGBT+ population in Redbridge and across London, these figures may not be fully representative due to limitations of reporting gender identity and sexuality acknowledged by the ONS, as well as the impact of the Covid pandemic on population distribution at the time that the Census was taken[10].

9 **https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/476635/travel-to-school.pdf**

10 **2021 census: What do we know about the LGBT+ population?**

Figure 4.25: Population breakdown by sexual orientation in Redbridge and London



	Redbridge	London
Not answered	9.7%	9.5%
All other sexual orientations	0.4%	0.5%
Bisexual	0.9%	1.5%
Gay or Lesbian	0.8%	2.2%
Straight or Heterosexual	88.1%	86.2%

Source: Census 2021

4.45 According to TfL's 'Travel in London: Understanding our diverse communities' study (2019)[11], Londoners who identify themselves as being LG (lesbian, gay and bisexual) account for 2.6 per cent of the city's population. It found that LGB people have a similar profile to the general population when asked about barriers to using public transport.

4.46 Over half (52 per cent) of LGB respondents cited overcrowding as an issue, compared to 48 per cent of the general population. 41 per cent of both LGB respondents and the general population identified the cost of travel as an issue. 30 per cent of LGB respondents saw passengers pushing and shoving each other on public transport as a key issue, while 26 per cent of the general population raised this as a concern. Overall, it was found that fears about abuse and/or intimidation can have a greater effect on the travel behaviours of LGB Londoners.

4.47 According to the 2021 Walking and Cycling Index report[7], only 59 per cent of LGBT+ people feel welcome and comfortable walking or spending time on the streets in their neighbourhood, compared to 67 per cent of heterosexual people.

[11] https://content.tfl.gov.uk/travel-in-london-understanding-our-diverse-communities-2019.pdf

5 Impact Assessment

5.1 Table 5.1 summarises the potential positive and negative impacts of the seven key outcomes the strategy is expected to deliver, and the protected characteristics that are disproportionately impacted.

5.2 For some outcomes, only potential positive impacts were identified, while for others, both positive and negative impacts were identified. These are assessed in further detail in this chapter.

5.3 It is noted that protected characteristics are not mutually exclusive, and intersectionality between two or more protected characteristics can be common among individuals. This means that individuals are likely to be impacted in multiple ways that reflect the combination of their protected characteristics. For example, a disabled female could be impacted in regard to both disability and sex. Intersectionality can further compound the severity and/or disproportionate nature of certain impacts.

5.4 Given the large number of possible combinations of any and all protected characteristics, this EqIA does not individually set out impacts for a full list of combinations. However, where it is deemed relevant and of particular significance, intersectionality with particular characteristics is considered within the impact assessment below.

Table 5.1: Protected characteristics impacted

Outcome	Protected characteristics impacted
1. A more accessible public transport network	Age Disability Pregnancy and maternity Sex
2. Improved walking and cycling network	Age Disability Religion or belief Sex
3. Improvements to air quality	Age Disability Pregnancy and maternity Race
4. Improved road safety for all users	Age Disability Pregnancy and maternity Race Sex
5. Improved accessibility of parking	Age Disability

6. Community-led engagement on transport proposals	Age Disability Race Religion or belief Gender reassignment Sexual orientation
7. Improvements to public realm and the condition and accessibility of the walking environment	Age Disability Gender reassignment Sexual orientation

1. A more accessible public transport network

5.5 Making the public transport network more accessible will remove barriers to sustainable travel choices, making it easier for people to use the public transport network to move around Redbridge and Greater London.

Protected characteristics impacted

Age
Disability
Pregnancy and maternity
Sex

Summary of potential impacts

Age

5.6 Those aged 16-24 use public transport more than any other age group, with a public transport mode share of 48 per cent. As such, they are most likely to benefit from improvements to the public transport network. Those aged under 16 and those over 60 in Redbridge are likely to benefit from improvements to public transport and active travel networks the most, through using these modes to a greater extent than other age groups.

5.7 Older people are more likely to be disabled, and more likely to live with mobility impairments due to ageing. This can include slower movement and reaction time, and some may use mobility aids for walking. Improvements to the accessibility of the public transport network are likely to disproportionately benefit older people by providing them with increased independence and mobility, ultimately improving their quality of life.

Disability

5.8 In Redbridge, data shows us that disabled people do not use public transport as often as people who identify as non-disabled. This could be for a range of reasons, including barriers to accessibility.

5.9 Inability to fully access the public transport network can reduce participation in society, increase social isolation, reduce employment prospects, and make travel more expensive (for example, taking a taxi instead of a London Underground trip). As such, improving the accessibility of the public transport network in Redbridge is likely to disproportionately benefit disabled people.

Pregnancy and maternity

5.10 Pregnant people and those travelling with newborns, including with prams, are likely to experience reduced mobility and are therefore likely to disproportionately benefit from a more accessible and integrated public transport network, particularly in relation to step-free access provision and easier, faster interchanges between public transport services.

Sex

5.11 In Redbridge, those who identify as female are more likely to walk and cycle (28 per cent mode share) and are less likely to use public transport (22 per cent mode share) or drive (50 per cent mode share) than those who identify as male.

5.12 A more accessible public transport network would make it easier for females to use public transport. Females are more likely to travel with a pram or shopping trolley[12] than males and are therefore likely to disproportionately benefit from provision of step-free access and improvement interchanges across the public transport network.

Suggested action(s) to be taken

Monitoring and evaluation: In partnership with TfL, it is recommended that Redbridge surveys passengers on public transport to understand their experiences and analyse data on the use of public transport by different types of users (e.g. disabled people, older people). Survey methods used should be as accessible as possible. This can help to identify any existing barriers to accessibility that could be addressed, and track the progress made through the interventions delivered as part of the STS.

2. Improved walking and cycling networks

5.13 Improvements to walking and cycling network will make it easier for people who live, work, study or visit Redbridge to move around without relying on a private motor vehicle. Improvements to these networks will also help with integrating public transport, enabling people to make multi-modal journeys.

Protected characteristics likely to be disproportionally impacted

Age
Disability
Pregnancy and maternity
Sex

Summary of potential impacts

Age

5.14 People aged under 16 and over 60 have higher levels walking and cycling in Redbridge than other age groups. Particularly for younger people, cycling may be the most affordable form of transport, providing them some freedoms from relying on being driven around or being dependent on public transport. Improvements to the active travel network are likely to benefit them the most and could encourage further levels of walking and cycling.

[12] **https://content.tfl.gov.uk/travel-in-london-understanding-our-diverse-communities-2019.pdf**

5.15 Those aged 16-24 are more likely to use public transport in Redbridge than other age groups. As there is likely a need to walk or cycle as part of a public transport journey, they will also benefit through active travel infrastructure improvements.

Disability

5.16 Some disabled people, such as those with mobility impairments, find cycling easier than walking due to the reduced strain it can have on joints, whilst also aiding balance and alleviating breathing difficulties[13]. Additionally, those using other forms of mobility aids, such as manual and powered wheelchairs and mobility scooters, will have the ability to use active travel infrastructure. As a result, those using cycles or other mobility aids could benefit disproportionately from improvements to walking and/or cycling infrastructure (depending on type of aid used).

5.17 Engaging in active travel is a common way to get exercise, and exercise is important for health. Exercise can help to improve strength, balance, and coordination, and it can also help to reduce the risk of chronic diseases such as heart disease, stroke, and type 2 diabetes – diseases which some disabled people are at risk of. Enabling more disabled people to embed daily, passive exercise into their lives, and being able to do this safely and conveniently, is likely to disproportionately benefit them. Notably, the full benefits will only be realised if new active travel schemes improve both the convenience and safety of journeys.

Pregnancy and maternity

5.18 Pregnant people and those travelling with newborns or prams are likely to experience reduced mobility and are therefore likely to disproportionately benefit from a more accessible and joined up walking network. Accessibility could be improved by removing street clutter, increasing pavement widths and pedestrian priority schemes.

Religion or belief

5.19 Depending on the specific geographies of walking and cycling infrastructure improvements, some religious groups may disproportionately benefit if access is provided or improved to or via particular places of worship. Detailed impacts would need to be considered on the level of individual schemes, considering the communities and places of worship served along their length.

5.20 Some religious groups are likely to face disproportionate barriers to engaging in active travel and may benefit less or not at all from improvements to walking and cycling infrastructure compared to other groups. For example, research shows that Muslim women face significant social barriers and stigma against taking up cycling[14]. Tailored and on-going engagement is likely required by both the Council and community groups, such as Cycle Sisters, to encourage Muslim women to take up cycling. Similar arrangements need to be investigated for other religious groups, as well for intersections between religious groups, gender and disability.

[13] **Wheels for Wellbeing**

[14] **https://blog.westminster.ac.uk/ata/wp-content/uploads/sites/60/2021/09/SChaudhry_Cycling-Amongst-Muslim-Women-in-London-1.pdf**

Sex

5.21 Improvements to active travel can give females more freedom and independence by making it easier for them to get around without relying on others. As of December 2022, only 35 per cent of private vehicles were registered by females[15], suggesting that they often rely on another person's vehicle to travel, even if they are the driver. Moreover, Census 2021 data shows that females are marginally less likely to drive in London (34 per cent) than males (36 per cent). Increased freedom and independence can be particularly beneficial for females who live in areas with poor public transportation or who cannot afford to drive.

5.22 Increasing access to favourable cycling conditions could potentially have greater benefits to females, particularly due to higher number of trips they make on a daily basis compared to males, as well as being more likely to take children to and from educational and recreational facilities.

Suggested action(s) to be taken

Accessibility: Ensure that any additional space created for pedestrians is accessible to all users, for example by ensuring that new space is level with existing footways. Alternatively, ramps or an alternative step-free access should be provided. Likewise, the Council should work towards ensuring that existing footways and cycle routes are accessible where possible.
Supporting access to adapted cycles: Adapted cycles for disabled people can be costly to purchase and maintain. As poverty rates are higher among disabled people, they may not have access to an adapted cycle, which can act as a barrier to their mobility.
Monitoring and evaluation: Ensure that robust monitoring and evaluation plans are developed for each scheme intending to improve the numbers of people walking and cycling. This information will provide the Council with a better understanding of how existing schemes are used and could inform the design of future schemes.
Targeted engagement: Ensure that older people, disabled people, younger people and people across religious groups are engaged with prior to and during the design phase of schemes, in ways that are as accessible and inclusive as possible.

3. Improvements to air quality

5.23 Accelerating the shift from private petrol and diesel vehicles to public transport, active travel and electric vehicles will help to mitigate the impacts of transportation on the environment and public health. There are also specific protected characteristics which can be at higher risk from poor air quality due to an increased likelihood of underlying health conditions worsened by high concentrations of air pollutants.

Protected characteristics likely to be disproportionally impacted

Age
Disability
Pregnancy & maternity
Race
Sex
Sexual orientation

[15] **https://www.gov.uk/government/statistics/vehicle-licensing-statistics-2022/vehicle-licensing-statistics-2022#licensed-vehicles-overview**

Summary of potential impacts

Age

5.24 Those aged under 16, and those over 60 are more likely to walk and cycle in Redbridge than other age groups, therefore having greater exposure to the risks of poor air quality. The objectives within the STS to prioritise improvements air quality are likely to benefit these groups. It is also recognised that this will also increase opportunities for those in other age groups to walk and cycle.

5.25 Children can be exposed to poor air quality through walking, wheeling, or cycling around their local area, or on school playgrounds. Furthermore, children are more vulnerable to air pollution compared to adults because their organs are still developing, they breathe more rapidly and are closer to the ground, where pollutants are more highly concentrated. Children are shown to be especially affected by nitrous oxides and particulate matter, with evidence suggesting that elevated levels of those pollutants increase the chance of asthma and allergy levels and can negatively impact lung development, neurodevelopment, and brain growth[16].

5.26 Older people are shown to be particularly vulnerable to air pollution in general due to higher prevalence of long-term conditions occurring at the same time, with increased stroke incidences and cognitive decline.[17] Therefore improvements to air quality are likely to disproportionately benefit them.

Disability

5.27 Evidence suggests that disabled people are more vulnerable to poor air quality, particularly those with long-term illnesses such as lung diseases (asthma, chronic bronchitis, emphysema, and chronic obstructive pulmonary disease) and those with cardiovascular diseases[18]. Therefore, improvements to air quality are likely to disproportionately benefit them, reducing the likelihood of air pollution worsening existing conditions, or contributing to new detrimental health conditions.

5.28 In addition to health benefits, improving air quality can also help to improve the quality of life for disabled people in other ways. For example, making it easier for people with respiratory conditions to breathe, which can make it easier for them to participate in activities that they enjoy. Improved air quality can also make it more pleasant to be outdoors, which can help to reduce social isolation and improve mental health.

Pregnancy and maternity

5.29 Redbridge has a higher-than-average birth rate in comparison to the London-wide average at 69 births per 1,000 women aged 15-44. However, the birth rate is shown to be decreasing in Redbridge, which is similar to that of London as a whole.

5.30 Studies strongly indicate the risks of poor air quality to pregnant people, including risks relating to specific serious conditions. Exposure during foetal development can have long-term

[16] **Air pollution and children**

[17] **Air pollution and older people**

[18] **Air quality and health**

impacts on childhood and beyond.[19] As a result, pregnant people are likely benefit through air quality improvements prioritised in the STS.

Race

5.31 There is a strong link between the likelihood of ethnic minorities residing in areas with poor air quality. Data suggests that concentrations of nitrogen dioxide were on average, 16-27 per cent higher in areas where BAME Londoners were more likely to live, in comparison to white Londoners[20].

5.32 It's recognised that various initiatives such as the Low and Ultra Low Emission Zones have reduced both overall levels, and the gap between ethnic groups, by between 15-37 per cent[21]. As a result, this means ethnic minority communities will be likely to benefit through STS objectives to prioritise air quality improvements.

Sex and Sexual orientation

5.33 A significantly quieter environment which may result from the reduction in the number of cars on certain streets may heighten personal safety concerns for people within the LGBT+ community, where hate crime is a particular concern[22]. The perception may also be felt particularly by certain females making trips on foot or bicycle, as part of a public transport journey or a trip on its own. This, however, can be balanced by an increased number of people walking and cycling which in turn can improve the overall sense of safety.

Suggested action(s) to be taken

Monitoring and evaluation: Ensure that LB Redbridge is monitoring and evaluating the impact of its schemes on air quality. This can be achieved by installing air quality monitors at key locations. This will allow Redbridge to measure the levels of pollutants in the air before, during, and after the implementation of its schemes.
Redbridge could also review health records across the borough to identify any changes in the incidence of respiratory and cardiovascular diseases. This could help to establish the impact of the STS on public health.

4. Improved road safety for all users

5.34 Improving road safety will make people feel safer on the roads and therefore make walking and cycling more attractive and viable to people who live, work or study in Redbridge.

5.35 There are also specific protected characteristics which are at a higher risk from the impact of road collisions. This is due to a combination of their increased likelihood of developmental, physical, and mental health conditions, which can reduce their ability to avoid a collision and their ability to recover from sustained injuries.

Protected characteristics likely to be disproportionally impacted

Age
Disability

[19] **Impact of air pollution in pregnancy**

[20] **Ethnic minority and poorer Londoners and poor air quality**

[21] **Ethnic minority and poorer Londoners and poor air quality**

[22] **Travel in London: Understanding our diverse communities 2019 (tfl.gov.uk)**

Pregnancy and maternity
Race
Sex

Summary of potential impacts

Age

5.36 Those aged under 10 have highest percentage of pedestrian casualties across all age groups, constituting 30 to 40 per cent of total casualties[23]. Young people are most likely to be involved in collisions with cars than any other vehicle type. Additionally, cyclist casualties for those aged six to 14 constitute around 14 per cent of all fatalities, which is double the rate for the average percentage across all age groups. Improvements to road safety, particularly through improvements to cycle infrastructure, are likely to disproportionately benefit these people.

5.37 Older people are more at risk of injury from motor traffic collisions. This is both due to the impact of the collision on the body, but it can also relate to the general deterioration of cognitive function and the ability to avoid a collision in the first place. As such, improvements to road safety would disproportionately benefit them.

Disability

5.38 Evidence suggests that disabled people are at significantly greater risk of collisions, injuries, and fatalities due to several factors. These include challenges avoiding road danger due to slower walking speeds and crossing decisions, which increases the chances of collision, alongside a higher risk of sustaining more severe injury outcomes[24]. Inaccessible street spaces, such as uneven pavements and lack of dropped kerbs also act as barriers that disproportionately impact disabled people.

5.39 Improvements to road safety would not only reduce the likelihood of disabled people being involved in collisions but may also increase the number of people who feel safer when walking and cycling, which could improve their quality of life and improve their transport options.

5.40 Encouraging uptake of bicycles and scooters is likely to disproportionately negatively impact disabled people from the perspective of safety, especially where these are silent electric bikes and electric scooters. There are similar safety concerns regarding the proliferation of low-noise electric vehicles, with particular disproportionate impacts on those with visual and hearing impairments. It will be important to find methods that mitigate these impacts and encourage safer scooting, cycling and driving behaviours.

Pregnancy and maternity

5.41 Redbridge has a higher-than-average birth rate in comparison to the London-wide average at 69 births per 1,000 women aged 15-44. Pregnant people are at heightened risk of birth complications when involved in traffic collisions[25], therefore improvements to road safety would disproportionately benefit pregnant people.

[23] **European Commission: Age groups most involved in fatal crashes**

[24] **Disability and pedestrian road traffic injury**

[25] **British Medical Journal**

Race

5.42 The most common ethnicity in Redbridge is 'Asian, Asian British, or Asian Welsh' at 47 per cent. This ethnic group is also more likely to use private vehicles as driver or passenger than other ethnic groups, both in Redbridge and London as a whole. Other ethnicities such as 'Mixed or multiple ethnic groups' and 'Other ethnic group' have higher levels of walking and cycling, and public transport usage.

5.43 Ethnic minority Londoners are less likely than white Londoners to say they feel safe from collisions whilst walking around London, with only 22 per cent saying they consider themselves 'very safe' compared to 30 per cent of white Londoners. Ethnic minority Londoners are more likely to say they feel unsafe from collisions when walking around at night, with 17 per cent saying they do not feel safe at all at night, compared to 8 per cent of white Londoners[26].

5.44 Data suggests that ethnic minority groups living in deprived areas are up to three times more susceptible to pedestrian injuries than white groups living in non-deprived areas. This risk has been attributed to a complexity of factors including those defined above and results in large variations in collision risks between all ethnic minority groups[27]. Therefore, improvements to road safety would disproportionately benefit ethnic minorities.

Sex

5.45 Analysis of road collision data shows that females are more likely than males to be casualties between 10am and4pm at 38 per cent versus 31 per cent, whilst males more likely between 6pm and 6am at 40 per cent versus 31 per cent. Male casualties were higher for those aged 25 to 49 at 39 per cent compared to females at 30 per cent, while 20 per cent of females were over-65 compared to 11 per cent of men[28].

5.46 As presented within the pregnancy and maternity protected characteristic, females have an increased severity risk from road collisions when pregnant due to worsened health outcomes for both them and their child.

Suggested action(s) to be taken

Monitoring and evaluation: Ensure that Redbridge is monitoring and evaluating the impact of its schemes on road safety. This can be achieved by analysing KSI data from the Department for Transport's STATS 19 database. This will allow Redbridge to measure the impact of its schemes in delivering improvements to road safety. Monitoring this data can also provide insights into areas with higher collision rates, which could be prioritised for intervention.

5. Improved accessibility of parking

5.47 Improved Blue Badge parking across Redbridge will improve accessibility and mobility for people who rely on their car as an essential mobility aid. Insufficient parking can act as a barrier to accessing key destination and services and can limit opportunities for onward travel by sustainable and active modes.

[26] **Travel in London: Understanding our diverse communities 2019**

[27] **Road traffic and injury risk in Ethnic minority populations**

[28] **Gender analysis of KSI casualties 2011-2020**

5.48 Blue Badge data indicates that Redbridge has a higher proportion of Blue Badge holders than the London average, demonstrating the need to facilitate and enable equitable access to amenable parking across the borough.

Protected characteristics likely to be disproportionally impacted

Age
Disability

Age and Disability

5.49 Blue Badge data indicates those of retirement age (over-65) to be of higher likelihood of holding a valid Blue Badge, with the ratio of retired people to Blue Badge holders in Redbridge to be 2.9 to 1. As individuals age, they become more likely to develop medical conditions which necessitate the need for parking to access a variety of services. Redbridge also has a higher proportion of Blue Badge holders in comparison to the London average with 3.7 per cent of the resident population holding one.

As a result, older and disabled people are likely to disproportionately benefit through outcomes improving Blue Badge parking provision. Blue Badge parking bays are typically located near shops, GP surgeries and leisure facilities, which can improve the overall accessibility to essential services and amenities for older and disabled people who rely on driving or being driven around. Higher prevalence of Blue Badge parking bays is likely to contribute towards increased independence and reduced social isolation.

Suggested action(s) to be taken

Blue Badge parking bay review: It is recommended that the provision of Blue Badge parking bays is reviewed across the borough to establish where any gaps may be within the network and identify areas which would benefit from an increase in the density of Blue Badge bays. The Council will need to work to ensure that new and existing blue badge parking bays comply with national inclusive design guidance.
Targeted engagement: It is recommended that any changes to Blue Badge parking are made following engagement with disabled people and Blue Badge holders. This will allow LB Redbridge to better understand the needs and desires of existing users and deliver schemes that can make a meaningful difference to accessibility.

6. Community-led engagement on transport proposals

5.50 Improved community engagement and co-design where applicable with residents, businesses and local community groups on new transport plans/proposals is likely to lead to more inclusive, accessible designs which meet the needs and desires of residents.

Protected characteristics likely to be disproportionally impacted

Age
Disability
Race
Gender reassignment
Sexual orientation

Summary of potential impacts

Age

5.51 Individuals of varying age will access and respond to consultation and engagement activities differently. For example, older people are less likely to engage with activities undertaken online in comparison to those who are younger. Older people are more likely to engage with activities delivered in-person, and less likely to use online services and social media platforms.

5.52 As a result, older people and younger people can often feel like their voices are not being heard as part of consultation events. This can lead to people feeling disenchanted with the planning and design process, which ultimately can have an impact on schemes being delivered. Better consultation and engagement, with targeted and tailored events for younger and older people, can help to address this, improving the outcomes for all users. This is likely to disproportionately benefit older and younger people.

Disability

5.53 Disabled people can often face barriers when it comes to being engaged and consulted. This includes access barriers, such as the physical access to buildings, inaccessible online services or poor information provision that do not fully consider accessibility[29], as well as logistical challenges, such as the day of the week or time of the event. Improving the accessibility, quality and variety of consultation and engagement activities and methods will disproportionately benefit disabled people, ensuring that their voices are heard, their feedback is taken into consideration, and better and more accessible schemes are being delivered as a result.

Race

5.54 There is often poor awareness of consultation events amongst those who rarely walk, cycle, or travel outside their immediate area, particularly in those who do not speak English at all, or it is not their first language[30]. As such, improving consultation and engagement communications should help to better reach these groups, improving the feedback received, and ultimately resulting in better schemes. This can be achieved by delivering translated materials and communications and tailoring communications to specific ethnicity minority groups to help ensure residents feel that their feedback is valued.

Religion or belief

5.55 Religious groups, as well as males and females within particular religious groups, are likely to have differing experiences of using and navigating the public realm and the transport network. Religious and faith-based crimes have been on the rise over the last five years[31], with Muslim and Jewish residents more likely to be victims of hate crime. In the year ending March 2022, 42 per cent of religious hate crimes were targeted against Muslims and 23 per cent of hate crimes were targeted against Jewish people across England[32].

[29] **ONS – Disabled people's experiences with activities, goods, and services**

[30] **TfL – Barriers to cycling among ethnic minatory groups and people from deprived backgrounds**

[31] **Religious Discrimination - Stop Hate UK**

[32] **Hate crime, England and Wales, 2021 to 2022 - GOV.UK (www.gov.uk)**

5.56 Understanding the perspectives of religious groups is therefore a crucial part of the consultation process and should be built into the engagement programme for new and forthcoming schemes and policies.

Gender reassignment and sexual orientation

5.57 Better and more targeted engagement can increase the number of Lesbian, Gay, Bisexual, Trans and others (LGBT+) people attending and responding to proposals. LGBT+ people are more likely to be affected by issues such as discrimination and harassment on public transport or feeling excluded from public space. Through hearing the feedback and experiences from LGBT+ individuals and groups, more inclusive schemes can be designed and delivered, ultimately benefiting these groups.

Suggested action(s) to be taken

Accessibility: Ensure that all public consultation and engagement events are hosted online and in-person, using fully accessible venues and websites, so that disabled people are not excluded from having their say. Engagement and consultation material should also be made available in large print, Braille, BSL, audio, easy read, any other accessible formats and in other languages so that disabled people, and people who do not speak English as their first language can also actively participate in engagement activities.
Targeted engagement: Where possible, engagement should be targeted at collecting the views of people who do not typically engage in consultation and engagement events, such as younger and older people and some ethnic minority groups.

7. Improvements to public realm and the condition and accessibility of the walking environment

5.58 New and improved public realm will make it easier for people to walk around Redbridge. Factors currently impacting the accessibility of people walking around Redbridge include the presence of steps, barriers (such as gates and chicanes), the lengths and elevations of slopes, narrow and cluttered footways, poor pedestrian priority at crossings, and anti-social behaviour.

Protected characteristics likely to be disproportionally impacted

Age
Disability
Gender reassignment
Sexual orientation

Age

5.59 Younger people in Redbridge to be more likely to walk and use public transport (where it likely a walk will be required at the start/end of a journey), than other age groups. Children and younger people will benefit from exercise undertaken as part of a walk, where it is vital walking behaviours are ingrained at an early age. Children are also at risk simply due to their size and still being in development physically when involved in a road traffic accident or accident due to the lack of maintenance of a pavement or road surface. This suggests both children and younger people to disproportionately benefit through improvements to the accessibility of the walking network.

5.60 Although older people in Redbridge are more likely to use private vehicles as a driver or passenger compared to walking or using public transport, they are also likely to be at

particular risk from poor quality walking networks due to the health risks resulting from slips, falls or collisions. Furthermore, the evidence suggests that regular, light exercise such as walking, for older people provides physical, mental and wellbeing benefits.

5.61 Older people are more likely to have mobility impairments and may require the use of a mobility aid such as a wheelchair or mobility scooter, of which they may find difficult to navigate around parts of Redbridge due to physical barriers such as gates and chicanes. Therefore, improvements to the walking environment are likely to disproportionately benefit older people.

Disability

5.62 Disabled people in Redbridge are less likely to walk, cycle or use public transport than non-disabled people. This could partially be caused by poor quality public realm and footways, which can present barriers to some disabled people with mobility or sensory impairments. Some disabled people may use a wheelchair or mobility scooter, but if the existing infrastructure does not meet the standards of national inclusive design guidance, this can pose access barriers in navigating kerbsides or crossing the street. Uneven surfacing and narrow footway widths can also be difficult to navigate, especially during peak times when footways can become crowded.

5.63 Improvements to the public realm and accessibility of the walking environment are likely to reduce or eliminate these barriers, making it easier for disabled people to move throughout Redbridge. Evidence indicates that disabled people particularly benefit from the physical, mental and wellbeing benefits resulting from regular, light exercise such as walking[33].Therefore, making it easier to walk around can improve the physical and mental health of disabled people. Improvements to public realm are likely to provide an opportunity for people to rest during their journeys. This is likely to disproportionately benefit people with mobility impairments who may be more likely to need to stop and rest.

Gender reassignment and sexual orientation

5.64 LGBT+ people often face hate crime and/or harassment, and therefore personal safety when out in public is often a key issue. Improvements to the public realm, such as lighting and security, should reduce the likelihood of anti-social behaviour and provide people with greater confidence that they can safely spend time or pass through the area. This would disproportionately benefit LGBT+

Suggested action(s) to be taken

Accessibility: Ensure that any additional space created for pedestrians is accessible to all users. This must be paired with improvements to the accessibility of existing spaces.

Targeted engagement: Where possible, engagement should be targeted at collecting the views of all people through as many forms of communication in consultation and engagement events, social media or letter drops. This will try and encompass all groups that may be under-represented in responses such as younger and older people, LGBT+ people and disabled people.

[33] **DfT – Physical activity benefits**

6 Action Plan

6.1 Table 6.1 overleaf presents an action plan for each of the suggested actions identified within this EqIA.

6.2 For each action, an action owner has been identified who will be responsible for ensuring that the action is progressed. Furthermore, timescales are outlined to assist with monitoring of this document.

6.3 As there are currently no further specific details for actions and how outcomes will be achieved, this EqIA has not covered the impact of every proposed action individually. It is expected that further EqIAs will be commissioned for the specific actions and interventions when they are fully scoped and ready for implementation. These will explore the negative and positive impacts in relation to protected characteristics in more detail.

Table 6.1: Action Plan

Strategy Priority	Protected characteristic impacted	Action required/comments	Action owner	Timescale
1. A more accessible public transport network	• Age • Disability • Pregnancy and maternity • Sex	**Monitoring and evaluation: I**t is recommended that Redbridge works with TfL to surveys passenger that use public transport to understand their experiences and analyse data on the use of public transport by different types of users (e.g., disabled people, older people). Survey methods used should be as accessible as possible. This can help to identify any existing barriers to accessibility that could be addressed, and track the progress made through the interventions delivered as part of the STS.		
2. Improved walking and cycling networks	• Age • Disability • Religion or belief • Sex	**Accessibility**: Ensure that any additional space created for pedestrians is accessible to all users by ensuring that new space is flush with existing footways or ensuring that alternative step free access is provided. Likewise, ensure that existing footways and cycle routes are accessible where possible. **Supporting access to adapted cycles:** Adapted cycles for disabled people can be costly to purchase and maintain. As poverty rates are higher among disabled people, they may be less able to acquire an adapted cycle, and this can act as a barrier to their mobility. **Monitoring and evaluation**: Ensure that robust monitoring and evaluation plans are developed for each scheme aimed at improving the numbers of people walking and cycling. This will enable Redbridge to establish whether schemes are successful and will provide valuable data for learning and evolving Future schemes. **Targeted engagement**: Ensure that older people, disabled people, younger people and people across religious groups, are engaged with		

Strategy Priority	Protected characteristic impacted	Action required/comments	Action owner	Timescale
		prior to and during the design phase of schemes, in ways that are as accessible and inclusive as possible.		
3. Improvements to air quality	• Age • Disability • Pregnancy and maternity • Race • Sex • Sexual Orientation	**Monitoring and evaluation:** Ensure that Redbridge is monitoring and evaluating the impact of its schemes on air quality. This can be achieved by installing air quality monitors at key locations. This will allow Redbridge to measure the levels of pollutants in the air before, during, and after the implementation of its schemes. Redbridge could also review health records across the borough to identify any changes in the incidence of respiratory and cardiovascular diseases. This could help to establish the impact of the STS on public health.		
4. Improved road safety for all users	• Age • Disability • Pregnancy and maternity • Race • Sex	**Monitoring and evaluation:** Ensure that Redbridge is monitoring and evaluating the impact of its schemes on road safety. This can be achieved by analysing KSI data from the Department for Transport's STATS 19 database. This will allow Redbridge to measure the impact of its schemes that deliver improvements to road safety. Monitoring this data can also provide insights into areas with higher collision rates, which could be prioritised for intervention.		
5. Improved accessibility of parking	• Age • Disability	**Blue Badge parking bay review**: It is recommended that the provision of Blue Badge parking bays is reviewed across the borough to establish where any gaps may be within the network and identify areas which would benefit from additional Blue Badge bays. The Council will need to work to ensure that new and existing blue badge parking bays comply with national inclusive design guidance.		

Strategy Priority	Protected characteristic impacted	Action required/comments	Action owner	Timescale
		Targeted engagement: It is recommended that any changes to Blue Badge parking are made following engagement with disabled people and Blue Badge holders. This will allow Redbridge to better understand the needs and desires of existing users and deliver schemes that can make a meaningful difference to accessibility.		
6. Community-led engagement on transport proposals	• Age • Disability • Race • Religion or belief • Gender reassignment • Sexual orientation	**Accessibility:** Ensure that all public consultation and engagement events are hosted online and in-person, using fully accessible venues and websites, so that disabled people are not excluded from having their say. Engagement and consultation material should also be made available in large print, Braille, BSL, audio, easy read, any other accessible formats and in other languages so that disabled people, and people who do not speak English as their first language can also actively participate in engagement activities. **Targeted engagement:** Where possible, engagement should be targeted at collecting the views of people who do not typically engage in consultation and engagement events, such as younger and older people and some ethnic minority groups.		
7. Improvements to public realm and the condition and accessibility of the walking environment	• Age • Disability • Gender reassignment • Sexual orientation	**Accessibility:** Ensure that any additional space created for pedestrians is accessible to all users. This must be paired with improvements to the accessibility of existing spaces. **Targeted engagement:** Where possible, engagement should be targeted at collecting the views of people who are seldom heard from in consultation and engagement events, such as younger and older people, LGBT+ people and disabled people.		

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