

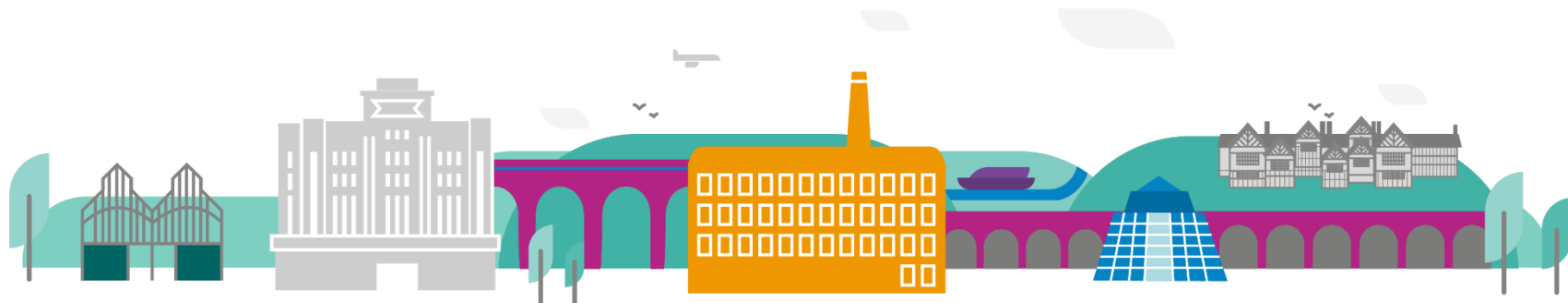
**Safer Stockport Partnership Plan 2022-2025  
Equality Impact Assessment  
February 2022**

# Equality Impact Assessment – Template

This document contains a template for an Equality Impact Assessment (EqIA). An EqIA is a working document that will inform decision-makers and those who come up with solutions about the impacts of your proposal on equality groups. They provide evidence of how we as a council have reached a decision and how we have factored in equalities the decision about a proposal.

**An EqIA should be done when:**

- **introducing a new service, policy or scheme (whether or not the service is statutory);**
- **proposing to remove all or part of a service, policy or scheme;**
- **making a change to the way a service is provided;**
- **making any decision that will affect people's life or the quality of it.**



# Equality Impact Assessment

<b>Title of report or proposal</b>	<b>Safer Stockport Partnership Plan 2022-2025</b>		
<b>Lead officer(s)</b>	Lead Officer: Michael Cullen – Deputy Chief Executive Kathryn Rees – Strategic Director	<b>Date</b>	18.02.22
<b>Aims and desired outcomes of the proposal</b>			
Are you trying to solve an existing problem?			
<ul style="list-style-type: none"> <li>• The Safer Stockport Partnership's Plan 2022 to 2025 (the previous plan covered 2018-2021).</li> <li>• The main sections of the plan are as follows: <ul style="list-style-type: none"> <li>○ Introduction</li> <li>○ One Stockport</li> <li>○ Our shared values</li> <li>○ Opportunities and challenges that shape our Plan</li> <li>○ Insight</li> <li>○ Our Safer Stockport Partnership (SSP) Priorities <ul style="list-style-type: none"> <li>▪ Priority Theme.1: Protecting Vulnerable People</li> <li>▪ Priority Theme.2: Public Safety and Protection</li> <li>▪ Priority Theme 3: Reducing Offending and Reoffending</li> </ul> </li> <li>○ How will we know we have been successful?</li> <li>○ Governance and Accountability</li> <li>○ Performance Monitoring</li> </ul> </li> <li>• The priority themes set out the board issues that make up the plan, as well as proposed actions for the 2022/23 delivery plan (delivery plans will be refreshed annually).</li> <li>• The plan will be a public document and will be professionally designed to a style consistent with "One Stockport" when the content has been finalised.</li> </ul>			

**Scope of the proposal**

Include the teams or service areas from the Council and outward-facing services or initiatives

This is a wide-ranging plan covering a range of disciplines across all SSP partners. Across the council, it has particular relevance to the services below (though it will also have relevance to others):

- Public Health.
- Public Protection.
- Safeguarding and Learning.
- Youth Justice, Serious Violence Reduction & Targeted Youth Support.

**What are the possible solutions you have been / will be exploring?**

You should refer to any business cases, issues papers or options appraisals

We know that there are significant inequalities in the opportunities and outcomes for our residents relating to community safety (such as those highlighted by the results of the GM Community Safety Survey).

The Plan sets out a number of issues under each of the three main priority themes (Protecting Vulnerable People, Public Safety & Protection and Reducing Offending and Reoffending). Under each of these issues, a range of actions have been set out that will form the basis of an SSP Delivery Plan for 2022-23 (which will be reviewed and refreshed each year). A number of these have been included with equalities, or inequalities issues in mind.

**Who has been involved in the solution exploration?**

Please list any internal and external stakeholders

- All partners comprising the Safer Stockport Partnership.
- Representatives from across all sectors contributed to a “One Stockport Bitesize” session on the SSP Plan.
- Stockport Equity Network’s Working Group.
- The 2,700 Stockport responses to quarterly GM Community Safety Surveys undertaken from July 2019 to June 2021 were used to develop the plan.
- Elected Members have overseen the plan’s development through an All-Party Working Group and all members have had the opportunity to comment via feedback sought by members of the Working Group through their political groups.

**What evidence have you gathered as a part of this EqlA? Which groups have you consulted or engaged with as part of this EqlA?**

Sources can include but are not limited to: Statistics, JSNAs, stakeholder feedback, equality monitoring data, existing briefings, comparative data from local, regional or national sources. Groups could include but are not limited to: equality / disadvantaged groups, VCSFE organisations, user groups, GM Equality panels, employee networks, focus groups, consultations.

A range of data, intelligence and insights have been used to inform the development of the draft SSP Plan to ensure that it is focused on the needs and aspirations of our population. This data was pulled together and presented in Strategic Intelligence Assessment, findings from which underpinned the development of the plan. Intelligence included in the assessment included:

- This included findings from the GM Community Safety Survey (with 2,700 responses from across the borough of Stockport) as well as a number of direct engagement exercises undertaken between July 2021 and January 2022.
- Data on crimes and other incidents recorded by a range of partners.
- Regional and national plans and priorities.
- Local engagement events with SSP partner agencies, wider engagement with all sectors and a session with the Stockport Equity Working Group

**Are there any evidence gaps that make it difficult or impossible to form an opinion on how the proposed activity might affect different groups of people?**

The GM Survey was a rich source of data which enabled analysis to be undertaken to compare responses on a range of different protected characteristics. Even with 2,700 responses however, to enable meaningful analysis (i.e. with sufficient numbers in each category) it was often necessary to combine categories. For example, the categories that were used in the analysis for the following characteristics were:

- **Ethnicity:** white ethnic groups; non-white ethnic groups.
- **Religion:** no religion; Christians; adherents to all non-Christian religions.
- **Disability:** No disability; physical, learning, sensory and other disability; mental ill-health.
- **Gender:** male; female (there were no respondent who identified as trans).
- **Age:** 16-29; 30-44; 45-60; 61+.

One other significant gap in the data related to online crime and other harm. This is perceived to be a significant and growing issue but data (local and otherwise) on the extent of the issue is lacking.

## Step 1: Establishing and developing the baseline

To assess the impacts of your proposal, you first need to understand how things are now. This will vary depending on your proposal, but consider who will be affected by the proposed changes: for example, who currently accesses a service or lives in an area? What works well for them? Are you aware of any issues? Are there any groups that are underrepresented?

Characteristic	Demographic of residents / service users	What works well How does the current provision or service meet the needs of people in different protected characteristics?	Current problems / issues This could include low levels of access or participation from certain demographic groups in current service or scheme; or disadvantages or barriers for particular groups
Age	<p>Stockport is ageing, with an increasing population aged over 65. The percentage of residents aged 65+ is higher than regional and national averages and this will continue to be the case- it is projected that 2 in 9 residents will be aged 65 or above in 2030</p> <p>Children and young people will represent a smaller proportion of the population in future, but the reduction is smaller compared to regional and national averages</p> <p>Stockport has a much smaller proportion of younger adults (aged 20-34) compared to Greater Manchester Since October 2019, Universal Credit claimants have doubled from 4,725 to 10,685.- Under 25's now make-up a third of all new claimants</p>	The GM Survey suggests that those in the older age groups tend to feel more positively about community safety issues and their local area than the younger age groups	The GM Community Safety Survey respondents were all aged 16+. Younger age groups however tended to have more negative perceptions of their local area and of community safety issues than those in the older age groups (note however that the oldest age group in the survey was "61+").

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Disability	<p>Stockport residents on average have good health outcomes and life expectancy that have been improving year on year</p> <p>44% of the Stockport population have a long-term health condition, rates increase with age to 92% of those aged 85 and over. In recent years the prevalence of diabetes and dementia diagnoses have increased in particular.</p> <p>The proportion of children and young people with SEND is twice as high in the more deprived areas of Stockport. In 2018/19, 16% of children with special educational needs or disabilities in Stockport achieved a good level of development, compared to 29% nationally.</p> <p>An estimated 6,430 children and young people aged 5-19 years have a mental health disorder and an estimated 6,100 children and young people aged 5-19 have low mental wellbeing. Rates of poor wellbeing have almost doubled from pre-pandemic levels.</p>		<p>The GM Community Safety Survey showed that who self-reported that they had disabilities were less likely to feel safe in their local area, less likely to have positive perceptions of their local area, were more likely to have experienced and/or reported a community safety issue (but less likely to be satisfied with the response if they did report it) and were less confident agencies would respond to community safety issues if they reported them</p> <p>The survey also found similar (but even more pronounced) patterns for those respondents who self-reported mental health issues.</p>

<b>Characteristic</b>	<b>Demographic of residents / service users</b>	<b>What works well</b> How does the current provision or service meet the needs of people in different protected characteristics?	<b>Current problems / issues</b> This could include low levels of access or participation from certain demographic groups in current service or scheme; or disadvantages or barriers for particular groups
<b>Gender reassignment</b>			Of the 2700 Stockport-based responses to the GM Community Safety Survey, there were no respondents self-reported as trans or gender reassignment, so the survey gives us no indication of the community safety related perceptions of this community.
<b>Race</b>	<p>The population continues to become more ethnically diverse, especially in younger populations to the west of the borough including the areas of Heald Green, Cheadle &amp; Gatley and Heatons South. In each of these areas there are particularly high rates of the population who identify themselves as from an Asian, Pakistani or Indian background</p> <p>People from some Black and Asian ethnic backgrounds are more likely to experience inequalities in access to health, education and employment.</p> <p>Educational attainment is lowest among children from Black Caribbean, Gypsy/Roma and Irish traveller backgrounds.</p> <p>Children from Indian backgrounds are least likely to live in low-income households and they have one of the highest levels of educational attainment of any ethnic group</p> <p>People from Black, and Bangladeshi and Pakistani backgrounds are more likely to be</p>	Though the GM Community Safety Survey did highlight some differences between white and non-white ethnic groups (see column to the right), these were not as stark as those observed on some of the other protected characteristics. Indeed, on three survey questions, the non-white group gave more positive responses (how confident they were that GMP would respond in a non-emergency; whether SSP was dealing with community safety issues; the extent to which they felt they could influence decisions about their local area).	Specifically relating to community safety, GM Community Safety Survey respondents from non-white ethnic groups were less likely to feel safe in parts of the borough away from their local area, more likely to have experienced a community safety issue and less likely to be satisfied with the response from any agency they contacted regarding such issues. They were less likely to say people from different backgrounds get on well in their local area and to say they have a sense of belonging to their local area



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	<p>unemployed than those from other ethnic groups</p> <p>The health outcomes of people from different ethnic groups vary according to different health indicators, however, people from almost all ethnic groups are more likely to experience worse health-related quality of life than white British people.</p>		
<b>Religion or Belief</b>	<p>Census data from 2011 shows that the religious make up of Stockport is 63% Christian, 25% no religion, 3.3% Muslim, 0.6% Hindu, 0.5% Jewish, 0.3% Buddhist, and 0.1% Sikh.</p>		<p>Analysis of the GM Community Safety Survey compared Christians, those adhered to other religions and people with no religion. Generally speaking, Christians gave the most positive responses and those from other religions the most negative (and those with no religion in the middle). This pattern was observed on the questions about how safe people felt (in their local area an elsewhere in the borough), if they had experienced a community safety issue, how confident they were the GMP would respond in an emergency and on the question about whether they felt a sense of belonging to their local area.</p>
<b>Sex</b>	<p>51% of Stockport residents are female and 49% are male, in line with the national average</p>	<p>The GM Community Safety Survey showed that women responded more positively than men on several questions: they were more confident GMP would respond in an emergency; were less likely to have reported a community safety issue; but were more satisfied with the response they received from agencies when they did report one; they were more likely to say people looked out for each other in their local area.</p>	<p>In recent years, domestic abuse has been of SSP's key priorities, and this continues to be the case. Indeed, reports of domestic abuse increased during the pandemic. Though anyone can be a victim of domestic abuse, the majority of victims are women and the majority of incidents are perpetrated by men against women.</p>

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Sexual orientation	There are 17,000 people in Stockport who identify as LGBTQI .		<p><u>LGBTQ+ (sexual orientation and gender reassignment/ confirmation)</u></p> <p>There is limited data on LGBTQ+ communities in Stockport, in part, due to the limited monitoring of gender identity, trans status and sexual orientation within public services and limited numbers of people disclosing sexual orientation or trans status<sup>1</sup></p> <p>Some analysis on LGBTQ+ residents was possible however from responses to the GM Community Safety Survey. In order for analysis to be meaningful, those identifying as gay, lesbian or bisexual were included in one category – those respondents who identified as heterosexual were therefore compared to those who identified as either gay, lesbian or bisexual. (Also, none of the 2,700 respondents identified as trans). Bearing these limitations in mind however, non-heterosexual respondents were less likely to feel safe in their local area and elsewhere in the borough, were less confident agencies would respond in a community safety situation (and were less satisfied with their response when they did) and felt less positive about their local area. They were however more likely to have experienced or reported a community safety related issue.</p>

<sup>1</sup> Stockport NHS Foundation Trust & LGBT Foundation (2017) 'Lesbian, Gay, Bisexual and Trans People in Stockport Needs Assessment'  
<http://www.stockportjsna.org.uk/wp-content/uploads/2017/06/Stockport-LGBT-Needs-Assessment.pdf>

<b>Characteristic</b>	<b>Demographic of residents / service users</b>	<b>What works well</b> How does the current provision or service meet the needs of people in different protected characteristics?	<b>Current problems / issues</b> This could include low levels of access or participation from certain demographic groups in current service or scheme; or disadvantages or barriers for particular groups
<b>Socioeconomic status</b>	<p>Stockport is a polarised borough (8<sup>th</sup> in England), with a number of residents living in some of the most affluent and least affluent areas in England</p> <p>In 2019, 0.56% of households in Stockport were noted to have experienced destitution. It is likely that the pandemic will increase this number further. Since October 2019, Universal Credit claimants have doubled from 4,725 to 10,685.</p> <p>Most children and young people in Stockport live in settled families, are healthy and do well at nursery, school and college – however inequalities significantly affect how children start life and grow-up;</p> <p>Children living in poverty in Stockport do less well in education and have poorer health and life chances than children living in poverty nationally and in similar boroughs.</p>	<p>On average, Stockport respondents to the GM Community Safety Survey gave more positive responses than the GM average. Indeed, Stockport was one of the best-performing of the GM districts on most of the survey questions.</p>	<p>This polarization within the borough however became evident when different levels of affluence/deprivation and different areas of the borough were compared.</p> <p>The GM Community Safety Survey showed that people who were worse off financially were less likely to feel safe in their local area, less likely to have positive perceptions of their local area, were more likely to have experienced and/or reported a community safety issue (but less likely to be satisfied with the response if they did report it) and were less confident agencies would respond to community safety issues if they reported them</p> <p>Less affluent parts of the borough tend to experience higher incidence of crime and antisocial behaviour (and to report less “positive” responses to GM Community Safety Survey questions).</p>

<b>Characteristic</b>	<b>Demographic of residents / service users</b>	<b>What works well</b> How does the current provision or service meet the needs of people in different protected characteristics?	<b>Current problems / issues</b> This could include low levels of access or participation from certain demographic groups in current service or scheme; or disadvantages or barriers for particular groups
<b>Asylum seekers and refugees</b>	There is a significant number of recent evacuees from Afghanistan currently living in the borough.		There has been previous incidents of far-right activity targeted at the evacuees and SSP and its constituent partners need to remain vigilant that potential threat and ready to respond if materialises.

## Step 2: Identifying impacts the proposal will have compared with the baseline

To explore the impacts of your proposal, you should use your baseline as a comparison with how things would be after your proposal. Think about how this would differ from the baseline for people with each protected characteristic. Include any sources of data you have used (including desktop research and engagement activity).

Impact no.	Characteristic	Positive or negative impact	Impact source	Impact details and rationale	Additional information
1	All residents	Positive	GM Community Safety Survey	<p>The SSP Plan 2022-2025 aims to address a broad range of community safety issues that impact on an equally broad range of local people. For example, reducing incidence of crime and ASB, improving our response to incidents reported to partners and work in our local neighbourhoods should all contribute to how our communities perceive community safety issues locally, which will, in turn, be reflected in responses to the quarterly GM Community Safety Surveys.</p> <p>Whilst the intention is that the plan would contribute to improved perceptions across the board, the survey highlighted particular groups within the borough whose perceptions we would particularly want to improve, and these are summarised below.</p>	
2	Disability and mental health	Positive	GM Community Safety Survey	<ul style="list-style-type: none"> <li>• Feelings of safety.</li> <li>• Satisfaction with services.</li> <li>• Confidence in services.</li> <li>• Experience of community safety issues.</li> <li>• Perceptions of their local area.</li> </ul>	
3	Race	Positive	GM Community Safety Survey	<ul style="list-style-type: none"> <li>• Feelings of safety.</li> <li>• Satisfaction with services.</li> <li>• Experience of community safety issues.</li> <li>• Perceptions of their local area.</li> </ul>	Particularly non-white ethnic groups.
4	Religion or Belief	Positive	GM Community Safety Survey	<ul style="list-style-type: none"> <li>• Feelings of safety.</li> <li>• Confidence in services.</li> <li>• Experience of community safety issues.</li> <li>• Perceptions of their local area.</li> </ul>	Particularly those adhering to non-Christian religions.

Impact no.	Characteristic	Positive or negative impact	Impact source	Impact details and rationale	Additional information
5	<b>Sexual orientation</b>	Positive	GM Community Safety Survey	<ul style="list-style-type: none"> <li>• Feelings of safety.</li> <li>• Satisfaction with services.</li> <li>• Confidence in services.</li> <li>• Experience of community safety issues.</li> <li>• Perceptions of their local area.</li> </ul>	Particularly those who identified as anything other than heterosexual
6	<b>Socio-economic status</b>	Positive	GM Community Safety Survey	<ul style="list-style-type: none"> <li>• Feelings of safety.</li> <li>• Satisfaction with services.</li> <li>• Confidence in services.</li> <li>• Experience of community safety issues.</li> <li>• Perceptions of their local area.</li> </ul>	The less affluent respondents reported being, the less positive responses they gave.

**Step 3: Identifying mitigating factors to minimise negative impacts**

Step 2 identified potential impacts your proposal may have on people with different protected characteristics. If there are negative impacts, then you must consider how you could mitigate against (lessen) these negative impacts.

Impact no.	Impact summary	Suggested mitigation and rationale	Source of suggestion	Evidence for solution	Feasibility
There are no anticipated negative impacts associated with the plan on people within any of the protected characteristics categories.					

<b>Please state if there are any additional comments or suggestions that could promote equalities in the future.</b>

#### Step 4: Conclusions and outcome

It is strongly recommended to engage with people with protected characteristics to sense-check your conclusions before you indicate an outcome in this EqIA. Including feedback from this engagement activity will ensure your baseline assessment and your impacts are accurate, and that your mitigating actions are helpful and the best use of resources. It ensures that the proposal has been designed so that it is fair as possible to everybody.

**If you have not undertaken any community engagement for this EqIA, please indicate this and explain why.**

Community engagement has been undertaken through the quarterly GM Community Safety Surveys.

**If there are impacts identified that cannot be mitigated against, are there any justifications for not taking any action to improve the negative impacts that have been identified?**

No negative impacts are anticipated.

**Are there any adverse impacts that can be justified on the grounds of promoting equality of opportunity for one group, or for any other reason? Please state why.**

No adverse impacts are anticipated.

**Are there any other proposals or policies that you are aware of that could create a cumulative impact?**

This is an impact that appears when you consider services or activities together. A change or activity in one area may create an impact somewhere else.

No. Work is ongoing to ensure that work undertaken by other partnerships and boards (e.g. Safeguarding Boards, Youth Justice Board, Domestic Abuse Partnership etc.) aligns and is consistent with the SSP Plan 2022-2025.



Based on your equality impact analysis, please indicate the outcome of this EqIA.

Please indicate the outcome of the EqIA and provide justification and / or changes planned as required.		
A.	No major barriers identified, and there are no major changes required – proceed.	<input type="checkbox"/>
B.	Adjustments to remove barriers, promote equality and / or mitigate impact have been identified and are required – proceed.	<input type="checkbox"/>
C.	Positive impact for one or more of the groups justified on the grounds of equality – proceed.	<input checked="" type="checkbox"/>
D.	Barriers and impact identified, however having considered available options carefully, there appear to be no other proportionate ways to achieve the aim of the policy or practice – proceed with caution, knowing that this policy or practice may favour some people less than others. Strong justification for this decision is required.	<input type="checkbox"/>
E.	This policy identifies actual or potential unlawful discrimination – stop and rethink.	<input type="checkbox"/>
<b>Please describe briefly how this EqIA will be monitored.</b> When will this be reviewed? What mitigating actions need to be implemented and when?		
Through the quarterly GM Community Safety Survey responses. Local analysis will be undertaken with the Stockport cohort to maintain an overview of trends relating to responses overall and by the protected characteristics described above		