Equality Impact Assessment (EqIA) of the Wirral Local Plan

Scoping Report

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Quality information

Prepared by	Checked by	Approved by
Mary Zsamboky Associate Director	Chris McNulty Senior Consultant	Frank Hayes Associate Director
Tamsin Stevens Graduate Environmental Consultant	Ian McCluskey, Principle Consultant	

Revision History

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Prepared for:

Wirral Metropolitan Borough Council

Prepared by:

AECOM Infrastructure & Environment UK Limited
Aldgate Tower
2 Leman Street
London E1 8FA
United Kingdom
aecom.com

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1. Introduction

Background

1.1 AECOM has been commissioned by Wirral Metropolitan Borough Council ('the Council') to undertake an Equality Impact Assessment (EqIA) of the emerging Local Plan from Regulation 18 to adoption. The Local Plan timetable is currently under review but public consultation under Regulation 18 is anticipated by early 2020. Once adopted, the Plan will establish a spatial strategy in relation to housing and employment growth up to 2035, replacing the saved policies of the Unitary Development Plan (2000).

1.2 As a public sector organisation, the Council has a duty under the Equality Act 2010 and the associated Public Sector Equality Duty (PSED) to ensure that the objectives and options considered through the emerging Local Plan do not lead to unlawful discrimination (direct and indirect), advance equality of opportunity and foster good relations between those with a protected characteristics and all others. An EqIA is often used by public sector organisations to demonstrate how this duty has been discharged.

1.3 AECOM has already been instructed by Wirral Council to undertake the Sustainability Appraisal/Strategic Environmental Assessment (SA/SEA) and Health Impact Assessment (HIA) of the emerging Local Plan. However, the Council have requested an integrated process of SA which will incorporate the requirements of Strategic Environmental Assessment, Health Impact Assessment and Equality Impact Assessment.

1.4 This report relates to the first stage in the EqIA process, namely the 'scoping' stage. This report is published for consultation in order to gather views on the scope of equalities issues and evidence that should be a focus of the assessment stages of the EqIA.

EqIA explained

1.5 EqIA is intended to help make decisions by predicting the equality consequences of the implementation of a proposed plan. In addition to assessing the equality consequences, it also produces recommendations as to how favourable consequences for equality could be enhanced and how any harmful consequences could be avoided or minimised. It addresses equality in relation to protected characteristics, as defined in the Equality Act 2010. These are race, age, sex, disability, sexual orientation, gender reassignment, religion or belief and pregnancy or maternity.

1.6 EqIA considers whether the implementation of proposed policies could:

- Help to address existing discrimination or disadvantage experienced by particular groups in the population;

- Increase equal opportunities for protected characteristic groups, so that they are able to access opportunities on an equivalent basis to others, particularly for people from backgrounds who have experienced historic disadvantage or inequality;

- Improve relations between groups who have different protected characteristic identities (e.g. between people from different racial backgrounds); and

- Identify if there is any risk that the policies could give rise to any intended or unintended illegal discrimination.

1.7 In summary, EqIA is a mechanism for considering and communicating the likely effects of a draft plan, and alternatives, in terms of equalities issues, with a view to avoiding and mitigating adverse effects and maximising the positives. The aim is to ensure that the plan contributes to the achievement of equality of opportunity for all of Wirral residents.

This scoping report

1.8 This 'Scoping Report' presents a suggested scope for the EqIA so that the designated authorities can provide timely comment.

1.9   This scoping report should be read in conjunction with the **Sustainability Appraisal (SA)** of the Wirral Local Plan, particularly in relation to the cross cutting themes of Economy and Employment, Health, Housing, Population and Communities and Transport. The EqIA informs the SA and vice versa. The role of the SA is to identify high level potential issues, but the EqIA explores these issues in greater detail. This reduces duplication. The EqIA has some subtle differences in how it should be applied effectively and how it is best presented. This is why the EqIA is a separate report which has been issued to the statutory consultees for completeness and transparency, despite this not being a requirement.

Approach to scoping

1.10   Scoping essentially involves identifying a 'framework' of equalities issues and objectives that should be a focus of, and provide a methodological framework for, the appraisal of the emerging plan (and reasonable alternatives).

1.11   In order to facilitate the identification of equalities issues/objectives, scoping firstly involves review of the 'context' and 'baseline'. Scoping therefore involves the following steps -

   1. **Context review** - sets the context for the assessment, identifying the key national and regional policy and legislation relevant to equality.

   2. **Baseline review** - a review of current and future equalities situation locally using key datasets and a consideration of how this might evolve in the absence of the plan.

   3. **Key issues summary** - an initial analysis of key issues identified from the review is presented, including a summary of key / most relevant problems and opportunities, identified through steps (1) and (2).

   4. **EqIA Framework development** - a refinement of the key equalities issues.

Structure of this report

1.12   This EqIA Scoping report is structured according to the step-wise process described above. It is produced with the intention of informing consultation on the latest version of the Wirral Metropolitan Borough Council emerging Local Plan.

1.13   The structure of the report is as follows:

   − Chapter 1, Introduction

   − Chapter 2, Policy context

   − Chapter 3, Baseline situation and key issues

   − Chapter 4, Next steps

   − Appendices: EqIA Framework development

2. Policy context

Equality Act 2010 and Public Sector Equality Duty

2.1   The Equality Act 2010 legally protects people from discrimination both in the workplace and in wider society. It replaces previous anti-discrimination laws which include the Sex Discrimination Act 1975, Race Relations Act 1976 and the Disability Discrimination Act 1995. The Act ensures that individuals with certain 'protected characteristics' are not indirectly or directly discriminated against. The protected characteristics include:

- **Age**: this refers to persons defined by either a particular age or a range of ages;

- **Disability**: a disabled person is defined as someone who has a physical or mental impairment that has a substantial and long-term adverse effect on his or her ability to carry out normal day-to-day activities;

- **Gender reassignment**: this refers to people who are proposing to undergo, are undergoing, or have undergone a process for the purpose of reassigning their gender identity;

- **Marriage and civil partnership**: marriage can be between a man and a woman or between two people of the same sex. Same-sex couples can also have a civil partnership. Civil partners must not be treated less favourably than married couples;

- **Pregnancy and maternity**: pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth. In the non-work context, protection against maternity discrimination is for 26 weeks after giving birth;

- **Race**: the Equality Act 2010 defines race as encompassing colour, nationality (including citizenship) and ethnic or national origins;

- **Religion or belief**: religion means any religion a person follows. Belief means any religious or philosophical belief, and includes those people who have no formal religion or belief;

- **Sex**: this refers to a man or to a woman, or to a group of people of the same sex; and

- **Sexual orientation**: a person's sexual orientation relates to their emotional, physical and/or sexual attraction and the expression of that attraction.

2.2   Under section 149 of the Act, a public authority in the exercise of its functions is subject to the Public Sector Equality Duty (PSED). The PSED requires public bodies to have due regard to three aims. Specifically, a public authority must, in the exercise of its functions, have due regard to the need to:

- eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;

- advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it; and

- foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

2.3   The Equality Act 2010 explains that the second aim (advancing equality of opportunity) involves, in particular, having due regard to the need to: remove or minimise disadvantages affecting people due to their protected characteristics; take steps to meet the needs of people with certain protected characteristics where these are different from the needs of other people; and encourage people with certain protected characteristics to participate in public life or in other activities where their participation is disproportionately low.

2.4   Relevant guidance on fulfilling the PSED includes:

- Equality and Human Rights Commission (EHRC) The Essential Guide to the Public Sector Equality Duty;

- EHRC, Engagement and the Equality Duty and guide for public authorities;

- EHRC, Equality Act 2010: Technical Guidance on the Public Sector Equality Duty England;

- EHRC, Meeting the Equality Duty in Policy and Decision-Making England (and non-devolved public authorities in Scotland and Wales); and

- Government Equalities Office, Equality Act 2010: Public Sector Equality Duty What Do I Need To Know? A Quick Start Guide for Public Sector Organisations.

Equality Act 2017

2.5   The Equality Act 2017 seeks to provide a unified legal framework to protect individuals from discrimination, harassment and victimisation in both the workplace and the provision of goods and services. Compliance with the Equality Act 2017 is a legal obligation and requires Local Planning Authorities to pay due regard to a number of equality considerations when preparing (and before adopting) planning policies, including the need to carry out assessments to ascertain the potential impact of policies on equality and to demonstrate compliance with the Public Sector Equality Duty.

NPPF (2019)

2.6   This assessment also seeks to comply with the National Planning Policy Framework (NPPF). Specifically the paragraphs detailed below:

- **Paragraph 16**. Early and meaningful engagement and collaboration with neighbourhood, local organisations and businesses is essential. A wide section of the community should be proactively engaged, so that Local Plans, as far as possible, reflect a collective vision.

- **Paragraph 60**. To deliver a wide choice of high quality homes, widen opportunities for home ownership and create sustainable, inclusive and mixed communities, local planning authorities should plan for a mix of housing based on current and future demographic trends, market trends and the needs of different groups in the community (such as, but not limited to, families with children, older people, people with disabilities, service families and people wishing to build their own homes).

- **Paragraph 91**. The planning system can play an important role in facilitating social interaction and creating healthy, inclusive communities. Local planning authorities should create a shared vision with communities of the residential environment and facilities they wish to see. To support this, local planning authorities should aim to involve all sections of the community in the development of Local Plans.

Local

2.7   The Wirral Plan (2015)[1] is a non-statutory document which presents 20 'pledges' to achieve over a five year period, with a key theme of protecting the most vulnerable. The plan describes Wirral as 'a place where the vulnerable are safe and protected, every child gets a good start in life and older residents are respected and valued.' Specifically the plan's pledges regarding 'people' are to ensure:

- Zero tolerance to domestic violence;
- Older people live well;
- Children are ready for school;
- Young people are ready for work and adulthood;
- Vulnerable children reach their full potential;
- Reduce child and family poverty; and
- People with disabilities live independently.

2.8   The Wirral Growth Plan (2016)[2] sets out a five year strategy for delivering economic growth in Wirral. The purpose of the Growth Plan 'is to attract and guide investment into Wirral, to overcome barriers and maximise sustainable growth from local opportunities, benefiting Wirral's communities, businesses and residents'. The plan highlights that driving economic growth will lead to:

- Improved quality of life;
- Higher life expectancy;

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[1] Wirral Council (2015) Wirral Council Plan: A 2020 Vision [online] available from: < https://www.wirral.gov.uk/sites/default/files/all/About%20the%20council/Wirral%20Council%20Plan%20- %20a%202020%20Vision.pdf> [last accessed 28/02/19]
[2] Wirral Partnership (2016) Wirral Growth Plan [online] available from: https://www.wirral.gov.uk/sites/default/files/all/About%20the%20council/Wirral%20Plan/Wirral%20Growth%20Plan.pdf [accessed 28/02/19]

- Employment growth;

- Higher income;

- Less Deprivation; and

- Raised aspirations of young people.

2.9   Wirral Council's Equality and Diversity policy[3] sets out the Council's commitment to observing and implementing the requirements of the Equality Act 2010. Specific commitments include: a) ensuring that all service and employment practices are lawful within the equalities legislation framework, and will promote equality of opportunity; recognising the variety of cultures, lifestyles, experiences, beliefs and perspectives across Wirral; and c) delivering an inclusive recruitment and selection process aimed at creating a strong and diverse workforce.

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[3] https://www.wirral.gov.uk/jobs-and-training/job-vacancies/working-council/equality-and-diversity

3. Baseline

3.1   The EqIA includes relevant baseline evidence at the local, regional and national levels, to allow the assessment to consider the potential effects of the emerging Local Plan for protected characteristic groups at varying geographical scales. At the local level, data has been collected and analysed to identify where there is disproportionate representation of protected characteristic groups, in comparison to regional and national averages.

3.2   The EqIA also uses existing research to understand the needs of protected characteristic groups so that the assessment of potential equality effects can be made more robust. The baseline includes, where relevant, published evidence regarding how protected characteristic groups experience particular social or economic issues, which may shape their sensitivity or resilience to potential effects.

3.3   Baseline data is presented for the protected characteristic groups listed above and is structured under the following series of thematic headings:

- Population (covering PCGs) and communities
- Housing
- Transport
- Economy and employment
- Health

Current baseline

3.4   A baseline profile of the population living and working within the study area is necessary for the scoping of potential equality impacts in order that an assessment can be made as to the potential level of impact the Local Plan may have on groups with protected characteristics. The main source of data used in the baseline profiling at this stage is Census 2011 data from the Office for National Statistics (ONS).

Population and communities

Population change

3.5   According to the most recent census data available, Wirral is home to 312,293 people.

3.6   As shown in Table 3.1, the population of Wirral increased at a lower rate between 2001 and 2011 in comparison to the North West of England and England averages.

Table 3.1: Population growth 2001 - 2011[4]

Date	Wirral	North West	England
2001	312,293	6,729,764	49,138,831
2011	319,783	7,052,177	53,012,456
Population Change 2001-2011	+2.4%	+4.8%	+7.9%

Age structure of the population

3.7   The age profile of the population living within Wirral is broadly similar to that in the North West and England. 29.2% of residents within Wirral are within the younger age categories (0-15 and 16-24), broadly similar to the totals for the North West of England (31.6%) and England (30.8%). In contrast, a slightly

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[4] ONS (no date): Census 2011: Population Density 2011 (Table QS102EW); Population Density 2001 (Table UV02)

low er proportion of residents are w ithin the w orking age categories (25-44 and 45-59) in Wirral (45.1%) in comparison to the percentages for the North West of England (46.2%) and England (46.9%).

3.8   There is also a larger proportion of elderly residents aged 60+ w ithin Wirral (25.7%) than in the North West (22.8%) and England (22.3%), as show n in Table 3.2.

Table 3.2: Age structure[5]

	Wirral	North West	England
0-15	18.6%	18.8%	18.9%
16-24	10.6%	12.8%	11.9%
25-44	24.1%	26.4%	27.5%
45-59	21%	19.8%	19.4%
60+	25.7%	22.8%	22.3%
Total Population	319,783	7,052,177	53,012,456

Disability

3.9   The total proportion of residents w ithin Wirral w ho report that their activities are limited 'a little' is slightly greater than the regional and national totals, as show n in Table 3.3. There are also slightly more residents w ithin Wirral w ho report that their activities are limited 'a lot' (11.9%) in comparison to the North West of England (10.3%) and England (8.3%).

3.10   Overall, 22.6% of residents state that they experience a long-term health problem or disability in Wirral according to the 2011 Census.

Table 3.3: Long-term health problem or disability[6]

	Wirral	North West	England
Day-to-day activities limited a lot	11.9%	10.3%	8.3%
Day-to-day activities limited a little	10.7%	10%	9.3%
Day-to-day activities not limited	77.4%	79.8%	82.4%

Gender reassignment

3.11   There are no official statistics relating to gender reassignment and the UK Census currently only collects data relating to sex (gender assigned at birth). The Office for National Statistics (ONS) has identified a need for information about gender identity for policy development and service planning w ith these requirements strengthened by the need for information on those w ith the protected characteristic of gender reassignment as set out in the Equality Act 2010. Work is currently being undertaken to identify the w ays of capturing this information w ithin the 2021 Census.

3.12   Transgender people may have concerns about safety and security w hen using public transport and reports from British Transport Police highlight a rise in hate crimes against this group in 2017. Transgender people may also avoid associated public transport facilities such as toilets for fear of being harassed or identified[7].

[5] ONS (no date): Census 2011: Age Structure 2011 (Table KS102EW)
[6] ONS (no date): Census 2011: 'Long-term Health Problem or Disability 2011' (Table QS303EW)
[7] EHRC (2015) Is Britain Fairer?: Key Facts and Findings on Transgender People [online] available at:
<https://www.equalityhumanrights.com/sites/default/files/key_facts_and_findings-_transgender_0.pdf> [accessed 22/02/19]

Marriage and civil partnership

3.13   44.8% of the population in Wirral who are over the age of 16 are married or in a registered same-sex civil partnership comparable to 46.8% nationally. Singles account for 33.4% of the population, 10.3% of the population are divorced, 3.0% are separated and 8.5% widowed (Census, 2011).
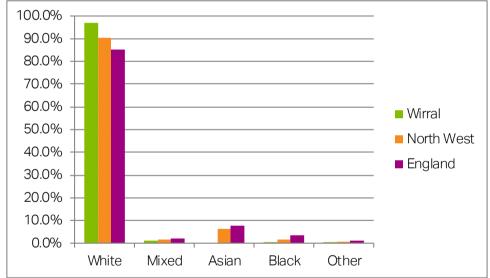
Pregnancy and maternity

3.14   Pregnant women can be more susceptible to experience negative effects associated with development and the built environment. For example, pregnant women can be more susceptible to poor air quality[8], which can have a negative impact on birth weight.

3.15   Pregnant women will also need good access to health care facilities, particularly towards the latter stages of pregnancy. Accessibility is therefore an important issue for this group.

3.16   With regards to income, housing and wellbeing, young mothers (and fathers) may be more likely to suffer from deprivation and struggle to find affordable housing.

Race

3.17   2011 Census presented in Figure 3.1 revealed that the majority of the population of Wirral are classed as White British (97%). This is a greater proportion in comparison to the North West (90.2%) and England (85.4%). Wirral has one of the lowest proportions of Black, Asian and Minority Ethnic (BAME) groups in the country. The largest non-white ethnic groups within Wirral are Chinese (0.5% of the population), Indian (0.4%), Bangladeshi (0.3%), Other Asian (0.3%), Pakistani (0.1%), African (0.1%), Black Caribbean (0.1%), Table 3.4 shows the breakdown of ethnic groups in Wirral.

Figure 3.1: Ethnicity by Geography[9]

3.18   When compared with 2001 Census data, it can be seen that certain areas within Wirral are becoming slightly more ethnically diverse over time. For example, 3.01% of the Wirral population are now from a BAME group. This compares to 1.69% in 2001 and 20.2% for England as a whole. Within the BAME population the groups that have grown the most between 2001 and 2011 are Asian British (0.4% of the population in 2001 to 1.2% in 2011) and Indian (0.2% of the population in 2001 to 0.4% in 2011).

Table 3.4: Ethnicity[10]

	Wirral	North West	England
White	96.99%	90.21%	85.42%
English / Welsh / Scottish / Norther Irish / British	94.97%	87.08%	79.75%
Irish	0.83%	0.92%	0.98%

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[8] https://www.nhs.uk/news/pregnancy-and-child/air-pollution-associated-with-low-birthweight/

[9] ONS (no date): Census 2011: Ethnic Group 2011 (Table KS201EW)
[10] ONS (no date): Census 2011: Ethnic Group 2001 (Table KS006)

Gypsy or Irish Traveller	0.02%	0.06%	0.10%
Any other White background	1.17%	2.15%	4.58%
Mixed / Multiple Ethnic Groups	1.03%	1.57%	2.25%
White and Black Caribbean	0.30%	0.56%	0.78%
White and Black African	0.17%	0.26%	0.30%
White and Asian	0.30%	0.43%	0.63%
Any other Mixed / Multiple ethnic background	0.25%	0.32%	0.53%
Asian / Asian British	1.60%	6.20%	7.82%
Indian	0.42%	1.52%	2.63%
Pakistani	0.07%	2.69%	2.10%
Bangladeshi	0.27%	0.65%	0.82%
Chinese	0.52%	0.68%	0.72%
Any other Asian background, please describe	0.33%	0.66%	1.55%
Black / African / Caribbean / Black British	0.22%	1.39%	3.48%
African	0.12%	0.84%	1.84%
Caribbean	0.06%	0.33%	1.11%
Any other Black / African / Caribbean background	0.04%	0.22%	0.52%
Other	0.17%	0.63%	1.03%
Other Ethnic Group: Arab	0.07%	0.35%	0.42%
Any other ethnic group	0.10%	0.28%	0.62%

Religion or belief

3.19   The proportion of the population within Wirral that identify as Christian (70.4%) is greater than the North West (67.3%) and England (59.4%). Other than the proportion of people who identify themselves as being Muslim in Wirral, the proportion of all other religions are broadly similar across the North West and England, as outlined in Table 3.5 below.

Table 3.5: Religion/belief by Geography[11]

Religion	Wirral	North West	England
Christian	70.4%	67.3%	59.4%
Buddhist	0.3%	0.3%	0.5%
Hindu	0.2%	0.5%	1.5%
Jewish	0.1%	0.4%	0.5%
Muslim	0.6%	5.1%	5.0%
Sikh	0.1%	0.1%	0.8%
Other religion	0.3%	0.3%	0.4%
No religion	21.3%	19.8%	24.7%
Religion not stated	6.8%	6.2%	7.2%

Sex

3.20   Wirral has a slightly higher proportion of female residents (51.9%) compared to males (48.1%). A similar trend is observed nationally (Census 2011).

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[11] ONS (no date): Census 2011: Religion 2011 (Table KS209EW)

Sexual orientation

3.21   In 2017, there were an estimated 1.1 million people aged 16 years and over identifying as lesbian, gay or bisexual (LGB) out of a UK population aged 16 years and over of 52.8 million. This reflects approximately 2.0% of the UK population identifying as (LGB) in 2017, a 0.5% increase from 2012 figures [12].

Nationality and migration

3.22   96% of residents in Wirral were born in the UK (see Table 3.6). Outside of the UK, the most common countries of birth were Poland (56,864 or 1.6%), India (37,218 or 1.1%), Pakistan (35,629 or 1.0%), Ireland (29,770 or 0.8%) and South Africa (16,596 or 0.5%).

3.23   EU nationals have arrived mainly from 2001 member countries (1.2%) and from accession countries (0.7%).

Table 3.6: Place of birth[13]

	Wirral	**South East**	**England**
United Kingdom	**96.0%**	**91.8%**	**86.2%**
England	92.9%	89.0%	83.5%
Northern Ireland	0.5%	0.5%	0.4%
Scotland	1.1%	1.4%	1.3%
Wales	1.5%	0.9%	1.0%
Ireland	**0.0%**	**0.0%**	**0.7%**
Other EU	**0.6%**	**0.7%**	**3.7%**
Member Countries in March 2001	1.2%	2.0%	1.7%
Accession countries April 2001 to March 2011	0.7%	0.8%	2.0%
All Other Countries	**0.5%**	**1.2%**	**9.4%**

Public realm and safety

3.24   The ability to access and use the public realm is important to ensuring that all members of society are able to participate in their community. However, certain PCGs such as people with a disability and BAME groups are less likely to take part in public life than other sections of the population. For disabled people, public spaces can often be inaccessible due to mobility limitations. Access to the public realm is also important to the provision (and management) of play space for children.

3.25   The number of recorded crime events varied each month in Wirral in 2018. The lowest number of crime events was in February with a total number of 2299 events recorded. The highest number was recorded in May with a total number of 2921 events recorded.[14] Recorded rime events in the Wirral predominantly consist of violence and sexual offences, anti-social behaviour, criminal damage and arson and vehicle crime.[15]

3.26   The majority of crime events occur around Birkenhead in the north east which as discussed below is a highly deprived area. Violence and sexual offences are the greatest recorded crime events occurring in Birkenhead.[16]

Housing

3.27   According to the Wirral Housing Strategy (2016) there is an on-going need to continue to improve the quality of housing available to residents. 1 in 3 homes fail to meet decent homes standard and 16% of households in Wirral experience difficulty in heating their homes.

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[12] ONS: Sexual orientation, UK: 2017 Available at:
https://www.ons.gov.uk/peoplepopulationandcommunity/culturalidentity/sexuality/bulletins/sexualidentityuk/2017?utm_source=govdelivery&utm_medium=email#main-points
[13] ONS (no date): Census 2011: Country of birth 2011 (Table KS204EW)
[14] Home Office (2019) Crime map [online] available at: https://www.police.uk/merseyside/A1A2/crime/+gG7YTJ/ [accessed 22/02/19]
[15] ONS (2018), Recorded Crime Data at Local Authority Level Year to June 2018
[16] Ibid.

3.28   Over 6000 households sought housing advice and assistance between 2013 and 2015. In 30% of these cases, the potential loss of accommodation was a result of affordability issues linked to welfare reforms. In 2015/16, approximately 335 households were prevented from becoming homeless every three months, through either assisting residents to remain in their own homes or assisting them to access alternative accommodation.[17]

3.29   Over the same period, the Wirral adaptations service received an increase of 56.1% in the number of applications for people requiring minor works to enable them to leave hospital and other social care settings and to also avoid admission to hospital. The strategy states that over 2,000 home adaptations are completed each year to enable disabled people to remain in their own homes.[18]

3.30   The Wirral SHMA and Housing Needs Study (2016) identifies the housing need for Wirral, including affordable housing and other specialist housing types.[19] It highlights that there is a high level of affordable housing need in Wirral.

3.31   The proportion of households requiring 3 or more bedrooms is significantly lower than the proportion of properties let with 3 or more bedrooms. This would suggest that more 'smaller' properties are needed, particularly 1-bed properties, within the affordable housing stock. The demand for 3-bed properties in Wirral has declined substantially as a result of the potential financial penalties involved with under-occupation of social rented properties.

Transport

3.32   People with disabilities have specific access needs and are more likely to rely on public transport to access services and facilities[20]. The Ipsos expressways customer insight survey[21] illustrated that 30% of survey respondents with a long term limiting illness or disability had not used the strategic road network during the past 12 months compared with 14% of the population overall. This suggests that those with disabilities that limit mobility may be disproportionately affected by impacts on public transport services.

3.33   Women generally tend to have a lower access to private vehicles when compared to men. Therefore, women are more likely to use and depend on public transport especially buses to access local services and goods.

3.34   The Pregnancy Mobility Index (2006) provides evidence that mobility restrictions suffered by pregnant women (particularly in the later stages of pregnancy) such as chronic back/pelvic/joint pain, pelvic instability, breathlessness and rib pain, differentiate them from the general population. These restrictions can affect mobility in accessing/leaving a vehicle and may also influence their capability and willingness to drive.

Economy and employment

3.35   According to 2011 census data, 66.4% of people in Wirral are economically active, 5.6% are unemployed and 30.6% are economically inactive. Levels of unemployment in Wirral are slightly greater than the North West (4.8%) and England (4.5%).

3.36   Table 3.7 outlines economic activity by ethnic group in Wirral. It is evident that a higher proportion of BAME groups are economically active and unemployed and a lower proportion are economically inactive in comparison to white residents.

Table 3.7: Economic activity by ethnic group in Wirral[22]

Ethnic Group	Economically active	Unemployed	Economically inactive
White	58.8%	5.1%	41.2%
Mixed/ multiple ethnic group	69.3%	8.7%	30.7%
Asian/ Asian British	69.8%	5.0%	30.2%

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[17] https://democracy.wirral.gov.uk/documents/s50035479/WBC%20Housing%20Strategy%20v1.pdf
[18] Ibid.
[19] Wirral Council (2016) Wirral SHMA and Housing Needs Study [online] available at:
https://www.wirralintelligenceservice.org/media/2096/wirral-shma-final-report-may-2016.pdf [accessed 25/02/19]
[20] https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/245715/bus9902.xls
[21] Ipsos Mori (2017) Highways England and Expressways.
[22] ONS (no date): Census 2011: Economic activity by ethnic group by sex by age 2011 (Table DC6201EW)

Black/ African/ Caribbean	73.4%	8.8%	26.6%
Other ethnic group	75.1%	9.0%	24.9%

3.37   Table 3.8 outlines economic activity by age group in Wirral.

Table 3.8: Economic activity by age in Wirral[23]

Age Group	Economically active	Unemployed	Economically inactive
Age 16 to 24	64.8%	14.5%	35.2%
Age 25 to 34	84.7%	7.6%	15.3%
Age 35 to 49	84.2%	5.1%	15.8%
Age 50 to 64	64.9%	3.6%	35.1%
Age 65 and over	7.8%	0.2%	92.2%

3.38   According to Nomis (2017) Labour Market data, Wirral had a slightly higher rate of economic inactivity (23.2%) compared to regional (23.0%) and national (21.5%) averages, although unemployment rates were below average, 3.2% compared to 4.1% in the North West and 4.2% in UK. The proportion of residents who were self-employed (9.0%) or full-time students (22.8%) was below regional and national averages.[24]

3.39   There is a slightly higher than average proportion of residents who are retired, and a considerably higher than average proportion who are long-term sick (27.3%) compared to North West (26.4%) and UK (22.4%). This reflects the data in Table 3.3 above which shows that the district has a higher than average proportion of residents who have a limiting long-term health problem or disability.

3.40   Census statistics measure deprivation across four 'dimensions' of deprivation including:

- Employment: Any person in the household (not a full-time student) that is either unemployed or long-term sick.

- Education: No person in the household has at least a level 2 qualification and no person aged 16-18 is a full-time student.

- Health and Disability: Any person in the household that has generally 'bad' or 'very bad' health, or has a long term health problem.

- Housing: The household accommodation is either overcrowded (with an occupancy rating of -1 or less), in a shared dwelling or has no central heating.

3.41   Based on the most recently available census data, Wirral is slightly more deprived than England as a whole but has broadly similar to the levels of deprivation in the North West. As shown in Table 3.9, 40.2% of households in Wirral are not deprived in any dimension and a slightly higher percentage of households are deprived in 2 dimensions or more in comparison to the North West and England.

Table 3.9: Relative household deprivation[25]

	Wirral	North West	England
Household is not deprived in any dimension	40.2%	40.5%	42.5%
Household is deprived in 1 dimension	31.7%	31.7%	32.7%
Household is deprived in 2 dimensions	21.1%	20.8%	19.1%
Household is deprived in 3 dimensions	6.4%	6.4%	5.1%

[23] ONS (no date): Census 2011: Economic activity by ethnic group by sex by age 2011 (Table DC6201EW)
[24] https://www.nomisweb.co.uk/reports/lmp/la/1946157107/report.aspx
[25] www.nomisweb.co.uk/census/2011/qs119ew

Household is deprived in 4 dimensions	0.5%	0.6%	0.5%

3.42   The English Indices of Deprivation (2015) provide more recent data and measures relative levels of deprivation in small areas of England called Lower Layer Super Output Areas (LSOA). According to this data, Wirral was the 66th most deprived authority (of 326 authorities) in England.[26]

3.43   Although Wirral overall is not in the 20% most deprived areas in England, many of the LSOAs within Wirral are amongst the most deprived in the country. The most significant deprivation is concentrated at Birkenhead in the north east with many of the LSOAs surrounding Birkenhead and Wallasey being classified in the 10% most deprived neighbourhoods in the country, whilst some of the western communities are among the least deprived in the country.

3.44   Wirral performs particularly poorly in the income and employment domains. According to the English Indices of Deprivation (2015), Wirral was ranked 51st nationally for income deprivation and now has the 9th and 10th most income deprived LSOAs in the country and the most employment deprived LSOA in the country, which are all located adjacent to Morpeth Dock and is the Birkenhead Park / East Float area. The data also indicate that between 50% and 70% of older people in wards in east Wirral are income deprived. Even in the west of Wirral, one in three older people (35%) are in receipt of guaranteed Pension Credit.

3.45   Wirral performs better on education and qualifications and residents are better qualified, on average, than across England as a whole (see Table 3.10). 33.1% hold level 4 qualifications and above, compared to 27.4% nationally. 17.9% of the population of Wirral have no qualifications, significantly lower than regional and national levels. Slightly less people in Wirral have undertaken an apprenticeship in comparison to regional and national averages.

Table 3.10: Education and qualifications[27]

	Wirral	North West	England
No qualifications	17.9%	24.8%	20.7%
Level 1 qualifications	13.6%	13.6%	13.6%
Level 2 qualifications	16.1%	15.8%	16.4%
Apprenticeship	2.7%	3.9%	4.3%
Level 3 qualifications	11.5%	12.9%	13.2%
Level 4 qualifications & above	33.1%	24.4%	27.4%
Other qualifications	5.18%	4.5%	5.7%

3.46   However, the proportion of 16-18 year olds not in Education, Employment or Training (NEET) remains higher than regional and national figures at 9.0% with concentrations of NEET in deprived areas reaching up to 16% in some areas of Wirral.[28]

Health

3.47   Overall health outcomes in Wirral are slightly below those at regional and national levels. According to the 2011 Census, there are slightly more people in the Borough in "fair health", lower proportions of the population being in "very good" and "good" health, and higher proportions being in "bad" and "very bad" health when compared with regional and national levels.

3.48   This corresponds to data indicating that approximately one fifth of Wirral residents experience a long-term health problem or disability (as described in Table 3.3 above).

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[26] LSOAs are ranked out of the 32,844 in England and Wales, with 1 being the most deprived. Ranks are normalized into deciles, with a value of 1 reflecting the top 10% most deprived LSOAs in England and Wales.
[27] Annual Population Survey 2017
[28] Wirral Economic Profile June 2011. Available online at:
https://democracy.wirral.gov.uk/documents/s19885/Investment%20Strategy%20Appendix%202.pdf

3.49   The 2017 Wirral Annual Report of the Director of Public Health identifies the inequalities in life expectancy[29]. From this report, it is highlighted that life expectancy for men is 78 and 82 for women. there are also large differences in life expectancy across the borough and people living in deprived areas have shorter life expectancies and tend to spend more years of life in poor health.

3.50   The proportion of deaths which are classified as avoidable deaths seems to be rising in Wirral. Avoidable deaths are around 50% higher in men than in women. Cancers accounted for 1 in 3 avoidable deaths in Wirral and cardiovascular disease accounted for 1 in 4. Coronary heart disease, lung cancer, chronic obstructive pulmonary disease, falls and alcohol related liver disease were the most common specific causes of avoidable death for the period 2014-2016. The rate of avoidable deaths in the most deprived areas in Wirral is 3 times higher than the least deprived areas.[30]

3.51   Areas with the highest rates of avoidable mortality are in the north and east of Wirral particularly surrounding Birkenhead and Wallasey. Areas surrounding Birkenhead and Wallasey are also the most deprived areas in Wirral suggesting there is a direct correlation between levels of poor health and levels of deprivation.

3.52   For the North West of England in 2015, the biggest population-level risk factor for early death was tobacco smoking, followed by dietary risks (e.g. not eating enough fruit and vegetables or eating too much salt), high blood pressure, high cholesterol and being overweight or obese. Cancer and cardiovascular disease are the biggest contributors of death within Wirral.

3.53   Air pollution is associated with a number of adverse health impacts and is a contributing factor in many chronic conditions such as cancer, asthma, heart disease, and neurological changes linked to dementia. It particularly affects the most vulnerable in society including children, older people and those with pre-existing diseases as they are more sensitive to the effects of poor air quality.[31] A report assessing the impact of air pollution on public health in the UK suggests that air pollution is contributing to about 40,000 early deaths a year in the UK[32]. Evidence from the Wirral Joint Strategic Needs Assessment (2017) suggests that in 2015 there were 161 deaths in Wirral (3.5% of the total) directly attributable to poor air quality, although the JSNA does note that this is a lower proportion than the North West region and England as a whole.

3.54   In terms of child health, 20.7% of children were classified as obese in 2017[33].

Future baseline

3.55   Population projections indicate that the older population in Wirral is expected to increase by 30% by 2030. Even larger increases are predicted for the 90+ age group which is predicted to increase by 103% by 2030.

3.56   As the population continues to age, the number of people with many chronic conditions is expected to increase. For example, the number of people with diabetes in England is expected to increase in the next two decades from 3.9 million people in 2017 to 4.9 million in 2035. Obesity is a major risk factor for diabetes and a range of other diseases, including heart disease and some forms of cancer, and this number will increase further if the prevalence of obesity also increases.

3.57   Estimates suggest that the number of people in Wirral surviving a stroke and heart attack who are left with a longstanding health condition as a result will rise by a third by 2030, with significant implications for health and social care services.

3.58   By 2032, the vast majority of households in Wirral with children in 2032 are expected to have 1 or 2 children. The proportion of households comprising larger families (with 3 or more children) is projected to equate to less than 13% of the total of households with children.

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[29] Wirral Council (2017) Expect Better Annual Report of the Director of Public Health 2017 [online] available at: https://www.wirral.gov.uk/sites/default/files/all/Health%20and%20social%20care/Health%20in%20Wirral/Public%20Health%20Annual%20Report%20Wirral%202017.pdf [accessed 25/02/19]
[30] www.gov.uk/government/publications/health-profile-for-england-2018
[31] DEFRA (2006) Air Quality and Social Deprivation in the UK: an environmental inequalities analysis. Available at: https://uk-air.defra.gov.uk/assets/documents/reports/cat09/0701110944_AQinequalitiesFNL_AEAT_0506.pdf
[32] Royal College of Physicians (2016) Every breath we take: The lifelong impact of air pollution. Available at: https://www.rcplondon.ac.uk/projects/outputs/every-breath-we-take-lifelong-impact-air-pollution
[33] Public Health England: Wirral Health Profile 2017. Available at: https://www.wirralintelligenceservice.org/media/1159/wirral-health-profile-2017.pdf

Key issues and objectives

3.59   The following key issues emerge from the context and baseline review :

- Although life expectancy in Wirral is in line with regional and national averages, there are significant changes to the structure of the population anticipated with a 30% increase in people aged 65 and over by 2030. This will have implications for the types of development and services that will be required to meet the needs of society. Social care, in particular, will be placed under additional pressure over the plan period as a result of population ageing.

- Public realm accessibility is a key issue, particularly for younger and older people, as is a need for community facilities and/or meeting places to reduce isolation and vulnerability. Quality street design and design measures to reduce the fear of crime in the public realm and safe and accessible public transport will help promote accessibility to the public realm, including to key services.

- Approximately one fifth of Wirral residents have a long-term health problem or disability. The Local Plan can help to provide for the needs of people who have a disability. This could include the delivery of suitable housing to meet the needs of this community group and ensuring that services and facilities are accessible.

- All improvements to infrastructure facilities, design, housing, natural and physical environment could have some impact on LGBT groups. There are specific issues experienced by this group such as concern for personal safety and fear of crime and harassment in the public realm. Good urban design to reduce crime and the fear of crime has the potential to benefit this group.

- An increase in the number of elderly people will require appropriate housing that meets their needs. Housing implications include increased demand for both specialist accommodation for older people and for services and home adaptations to enable older people to remain 'at home' living independently.

- It is important that the housing needs of families with children are met, through the provision of sufficient, good quality family accommodation in sustainable locations. However, the provision of family housing should be balanced against the requirement for smaller housing to meet the needs of an ageing population with increasing numbers of single person households.

- Housing affordability is a key issue in Wirral. This is a particular challenge for both young and elderly people who are unable to access affordable housing. The availability of affordable housing also disproportionately affects BAME households, as evidence suggests that rents are less affordable for most ethnic minority groups when compared to White British households.

- There are areas of entrenched deprivation within the Borough, particularly in Birkenhead in the north east, creating a complex and nuanced range of community needs.

- Despite higher proportions of the population with high levels of qualifications, the proportion of 16-18 year olds not in Education, Employment or Training (NEET) remains higher than regional and national averages, particularly in deprived areas.

- Poor health is an issue in Wirral with higher proportions of people experiencing "bad" and "very bad" health when compared with regional and national levels. Health inequalities are also evident and there is significant health deprivation in Birkenhead and the north east of the Borough.

- Air pollution is an issue in Wirral, particularly in traffic hotspots, and adversely affects the health of the Borough's residents. This is a particular issue for individuals living or working close to major traffic thoroughfares as they are often exposed to higher levels of air pollution. Children, older people and those with pre-existing diseases are also particularly sensitive to the effects of poor air quality.

3.60   In light of the key issues discussed above it is proposed that the EqIA framework should include the following objectives:

- To support good access to existing and planned community infrastructure for new and existing residents, mindful of the potential for community needs to change over time.

- To improve perceptions of safety and fear of crime to help remove barriers to activities and reduce social isolation.

- To ensure that the provision of infrastructure is managed and delivered to meet local population and demographic change. This includes providing infrastructure that maximises accessibility for all and connects new housing developments to the public realm, including key services.

- To provide an adequate quantity and mix of good quality, affordable and specialist housing that meets the needs of Wirral's residents, particularly older people, people with disabilities (particularly those with accessibility issues) and families with children.

- To ensure that the provision of infrastructure is managed and delivered to meet local population and demographic change. This includes providing infrastructure that maximises accessibility for all and connects new housing developments to the public realm, including key services.

- To support a diverse and resilient economy that provides opportunities for all and promotes regeneration. This could include support for the social enterprise, voluntary and community sectors.

- To provide employment opportunities in the most deprived areas, particularly to disadvantaged groups.

- To enable older people and people with physical and mental health conditions and disabilities to stay in employment.

- To ensure that education and skills provision meets the needs of Wirral's existing and future labour market and improves life chances for all.

- To improve the physical and mental health and wellbeing of Wirral residents and reduce health inequalities across the Borough and between local communities.

- To locate and design development so that current and future residents, including vulnerable groups, will not regularly be exposed to poor air quality.

4. Next steps

Subsequent steps for the EqIA process

4.1   Scoping is the first stage in a five-stage EqIA process:

1.   Scoping - Document review and development of an EqIA Scoping Report (NPPG Stage A)

2.   Appraising reasonable alternatives, with a view to informing preparation of the draft plan, and subsequent assessment of the positive and negative equality effects of the draft plan on protected characteristic groups (NPPG Stage B)

3.   Preparation of the EqIA Report with a view to informing Regulation 18 consultation (NPPG Stage C)

4.   Consultation on the EqIA Report (NPPG Stage D)

5.   Publication of an updated EqIA Report (as part of Regulation 19 Consultation) (NPPG Stage E)

4.2   Accordingly, the next stage will therefore involve the development and assessment of reasonable alternatives for the Local Plan. An EqIA Report will accompany the Regulation 18 Draft Local Plan Document for public consultation in due course.

Consultation on the scoping report

4.3   Public involvement through consultation is a key element of the EqIA process. At this scoping stage, the SEA Regulations require consultation with statutory consultation bodies but not full consultation with the public. This report is, however, also being published for consultation more widely.

4.4   The statutory consultation bodies are the Environment Agency, Historic England and Natural England. The EqIA Scoping Report will be released to these three statutory consultees for comment on the content of this report, in particular the evidence base for the EqIA, the identified key issues and the proposed EqIA Framework.

4.5   All comments received on the EqIA Scoping Report will be reviewed and will influence the development of the EqIA where appropriate.

Appendix A – the EqIA Framework

Topic	EqIA objectives
Population and communities	• Support good access to existing and planned community infrastructure for new and existing residents, mindful of the potential for community needs to change over time. • Improve perceptions of safety and fear of crime to help remove barriers to activities and reduce social isolation.
Housing	• Provide an adequate quality and mix of good quality, affordable and specialist housing that meets the needs of Wirral's residents, particularly older people, people with disabilities (particularly those with accessibility issues) and families with children.
Transport	• Ensure that the provision of infrastructure is managed and delivered to meet local population and demographic change. This includes providing infrastructure that maximises accessibility for all and connects new housing developments to the public realm, including key services.
Economy and employment	• Support a diverse and resilient economy that provides opportunities for all and promote regeneration. This could include support social enterprise, voluntary and community sectors. • Provide employment opportunities in the most deprived areas, particularly to disadvantaged groups. • Enable older people and people with physical and mental health conditions and disabilities to stay in employment. • Ensure that education and skills provision meets the needs of Wirral's existing and future labour market and improves life chances for all.
Health	• Improve the physical and mental health and wellbeing of Wirral residents and reduce health inequalities across the Borough and between local communities. • To locate and design development so that current and future residents, including vulnerable groups, will not regularly be exposed to poor air quality.