KENT COUNTY COUNCIL
EQUALITY ANALYSIS / IMPACT ASSESSMENT (EqIA)

This document is available in other formats, please contact Stephanie.holt@Kent.gov.uk or telephone on 03000 412064

Directorate: Highways, Transportation and Waste

Name of project: Active Travel Strategy

What is being assessed? Draft Active Travel Strategy

Responsible Owner/ Senior Officer: Stephanie Holt

Date of Initial Screening 02/07/15, initial screening repeated 12/02/16 on worked up draft

Date of Full EqIA: 15/03/2016

<table>
<thead>
<tr>
<th>Version</th>
<th>Author</th>
<th>Date</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>S Holt</td>
<td>12/2/16</td>
<td>Reworked initial screening based on detail of draft strategy</td>
</tr>
<tr>
<td>3</td>
<td>J Hill</td>
<td>9/03/2016</td>
<td>E &amp; D Comments</td>
</tr>
<tr>
<td>4</td>
<td>K Ireland,A Fairhurst</td>
<td>15/03/2016</td>
<td>Revision following E&amp;D Comments</td>
</tr>
<tr>
<td>5</td>
<td>Akua Agyepong</td>
<td>1 April 2016</td>
<td>E&amp;D Comments</td>
</tr>
<tr>
<td>6</td>
<td>K Ireland</td>
<td>5 April 2016</td>
<td>Final for consultation</td>
</tr>
<tr>
<td>7</td>
<td>G Martin</td>
<td>25/11/16</td>
<td>Revision following consultation</td>
</tr>
<tr>
<td>8</td>
<td>C Owen</td>
<td>09/01/2017</td>
<td>Further Revision following consultation</td>
</tr>
<tr>
<td>9</td>
<td>C Owen</td>
<td>01/02/2017</td>
<td>Further revision following project group meeting and consideration of Active Strategy Action Plan</td>
</tr>
<tr>
<td>Characteristic</td>
<td>Could this policy, procedure, project or service, or any proposed changes to it, affect this group less favorably than others in Kent? YES/NO If yes how?</td>
<td>Assessment of potential impact</td>
<td>Provide details: a) Is internal action required? If yes what? b) Is further assessment required? If yes, why?</td>
</tr>
<tr>
<td>----------------</td>
<td>------------------------------------------------------------------------------------------------</td>
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<tr>
<td>Age</td>
<td>Yes – older residents who are less mobile may benefit less from this strategy than others</td>
<td>Medium</td>
<td>Medium</td>
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<td></td>
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<tr>
<td><strong>Disability</strong></td>
<td>Yes – not all active travel infrastructure investment will benefit certain disabled communities to the same extent as certain non-disabled communities</td>
<td>Medium</td>
<td>Low</td>
</tr>
<tr>
<td><strong>Gender</strong></td>
<td>Yes – evidence suggests that fewer women cycle than men</td>
<td>Medium</td>
<td>Low</td>
</tr>
<tr>
<td><strong>Gender identity</strong></td>
<td>No</td>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td><strong>Race</strong></td>
<td>No</td>
<td>Low</td>
<td>Low</td>
</tr>
<tr>
<td><strong>Religion or belief</strong></td>
<td>No</td>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td><strong>Sexual orientation</strong></td>
<td>No</td>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td>Table Heading</td>
<td>Yes</td>
<td>None</td>
<td>None</td>
</tr>
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</tr>
<tr>
<td>Pregnancy and maternity</td>
<td>No</td>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td>Marriage and Civil Partnership</td>
<td>No</td>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td>Carer's responsibilities</td>
<td>No</td>
<td>None</td>
<td>None</td>
</tr>
</tbody>
</table>
Part 1: INITIAL SCREENING

Proportionality - Based on the answers in the above screening grid what RISK weighting would you ascribe to this function – see Risk Matrix

<table>
<thead>
<tr>
<th>Low</th>
<th>Medium</th>
<th>High</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low relevance or Insufficient information/evidence to make a judgement.</td>
<td>Medium relevance or Insufficient information/evidence to make a Judgement.</td>
<td>High relevance to equality, /likely to have adverse impact on protected groups</td>
</tr>
</tbody>
</table>

Low Risk.
The overall ambition of the Active Travel Strategy is to improve access to walking and cycling routes in Kent, ensuring they are maintained, appropriate and promoted. Whilst some risks have been noted in the initial screening, the overall impact of the Strategy has positive outcomes for the identified groups. Any risks identified above are targeted in the below Action Plan, showing how we intend to reduce any negative impacts.

Context

What is Active Travel?
Active travel means walking or cycling as a way of getting to a particular destination such as work, the shops or social visits. For the purpose of this draft Active Travel Strategy, it does not include walking and cycling done purely for pleasure or for health.

Why is Kent writing an Active Travel Strategy?
KCC wants to make active travel a real and viable option for people who are making short journeys in Kent – more information can be found in the Aims and Objectives section below.

In the current economic climate of reducing budgets, a strategy will provide a basis on which KCC will be able to prioritise internal resources, influence how new communities are developed and to support bids for external funding for a range of active travel measures.

What is the policy context behind the Strategy?
Improving transport is identified in the KCC Strategic Statement 2015-2020 under outcome 2: Kent Communities feel the benefits of economic growth by being in-work, healthy and enjoying a good quality of life.

The Strategy will contribute to outcomes in the Kent County Council Strategic Outcomes Framework by improving the health, environment and sustainability opportunities for Kent. This Strategy will also support delivery of the below:

Public Health Outcomes Framework
• Indicator 2.13i - Percentage of physically active and inactive adults - active adults
• Indicator 2.13ii - Percentage of physically active and inactive adults - inactive adults

NICE Commissioning Guidance
• PH8 – Physical Activity and the Environment
• PH41 – Physical Activity – Walking and Cycling

Growth without Gridlock - Launched in December 2010, Growth without gridlock is KCCs transport delivery plan. The plan sets out our priorities for the county and our offer to government to deliver them. It also identifies new ways to raise revenue in response to reduced government funding. Through delivering the plan we aim to create new jobs, new opportunities for businesses and boost economic growth in Kent.


What are the benefits of active travel?
• Improve health and can contribute to lower chances of some health conditions
• It can be cheaper to travel actively by saving money on fuel/vehicle running costs/parking charges
• Reduces the number of vehicles on the road
• Can contribute to improved air quality
• Can be quicker – journey times can be reduced as active travel can take advantage of routes not accessible to motor vehicles.
• Can deliver value for money in achieving health, transport and wider policy objectives.

What are the barriers to active travel?
• A lack of suitable routes for journeys between homes and community services, workplaces or schools; a lack of facilities such as showers, lockers and secure parking; and obstacles in cycle lanes and in footways.
• A lack of knowledge of available active travel routes.
• Individual issues such as not having the time or motivation to choose active travel, the ease of using a car, the need to carry heavy or bulky loads and the need to make ‘linked’ trips, such as a school drop off on the way to work.
• Safety: including pedestrians and cyclists being involved in collisions, and perceptions of safety and security.
• Reduced local authority budgets making it challenging to implement active travel measures

Aims and Objectives

Our overarching ambition of this Active Travel Strategy is to make active travel
an attractive and realistic choice for short journeys in Kent.

This ambition is supported by the following outcomes:

- More people making active travel journeys
- Improved population health through an increase in physical activity
- Reduced congestion on the highway network by providing better travel choices
- Improved safety of the active travel network.

These outcomes will be realised by delivering the following actions:

**Action 1: Integrate active travel into planning**

This Strategy will influence commissioning decisions and ensure active travel are prioritised in future planning processes. In addition, the Strategy will encourage active travel to be better integrated with other types of transport e.g. walking to the bus stop or cycling to the train station. This will be led by current commissioning guidance and best practice, existing KCC policies and strategies, and key partners’ policies and strategies with a commitment to encouraging active travel.

**Action 2: Provide and maintain appropriate routes for active travel**

Kent needs fit-for-purpose active travel routes that people want to use. Kent’s existing cycling and walking routes have developed over time as resources have allowed. They are not always continuous or direct, and may not serve important community services, which means that some people who would like to actively are unable to do so. There is a need to provide facilities such as safe crossings along routes and secure cycle storage at destinations. It is also important that these routes are well maintained and designed to be as inclusive as possible.

**Action 3: Support active travel in the community**

There is a need to encourage and promote active travel in our community. People need the skills, confidence, information and, most importantly, the motivation to make active travel their preferred choice. Initiatives needed to support this change include pedestrian and cycle training, road safety campaigns, projects to encourage travelling actively to schools and businesses, and promotion of available routes.

**Beneficiaries**

Increasing the number of journeys made by active modes of travel will have benefits for the residents and visitors to Kent – see the above benefits to Active Travel.

**Information and Data**

By 2050, the NHS cost attributable to obesity and overweight will be £9.7 billion and the total costs will be £49.9 billion. The direct costs of illness as an
outcome of physical inactivity to the NHS are quoted to be as much as £1.0 billion per annum, while costs to the whole economy are estimated at £20 billion per annum.

Over 26% of adults in Kent are classed as physically inactive and at a high risk of developing disease conditions as a result of their sedentary lifestyle. Over 43% fail to meet recommended levels of activity required to maintain good health. 21% of children in Kent are above a healthy weight when starting primary school, increasing to 33% by the time they leave.

Robust evidence has highlighted how active travel, specifically journeys made by cycle and on foot, can contribute to a wide range of outcomes. Active travel gives people an opportunity to be physically active as part of their daily routine, which will contribute to improved health as well as preventing or managing a range of chronic diseases. It can also contribute to improve air quality, reduced congestion and reduced carbon emissions through reducing the number of cars on the road. Kent currently has no strategic policy to meet these objectives through increasing active travel.

**Involvement and Engagement**

The consultation and engagement process commenced with two half day workshops held on the 1st and 7th October 2015 which involved over 70 key stakeholders and representative groups. Additional engagement was also held with the West Kent Health and Wellbeing Board, a workshop with Further Educational representatives, a workshop with 20 Mid Kent College Students on 7th January 2016, and a facilitated discussion at Kent Youth County Council on 20th March 2016.

Invitations to the pre engagement workshops were sent to groups including Guide Dogs, District Access Groups, CILK, and KAB. The feedback specifically regarding access issues were that:

- Infrastructure needs to be appropriate for all user types, e.g. tactile paving for visual impairment
- Any signage should take into account all user types including visually impaired

This was included in the summary of the workshops and considered when drafting the Strategy.

An eight week public consultation is planned commencing in May 2016.

**What is the consultation asking?**

The consultation is asking Kent residents to read the proposed Strategy and to provide feedback on the content, including views on our proposed aims and objectives (above) and whether we have missed anything which is important to the respondent. The consultation will also ask about the respondent’s current level of active travel activity as well as the standard EqIA About You questions so that we can ensure that we have responses from a diverse range of the
A mid consultation review will take place to identify if there are any groups which we have not had responses from, and efforts will be made to consult with them.

When will it be reported on?

The consultation will begin following Environment and Transport Cabinet Committee approval on the 4th May. It will run from 18th May to the 13th July 2016.

There will be a mid-consultation review meeting of the Active Travel Strategy Project Group which will analyse the responses so far and identify if there are any gaps in the profiles of the responses received compared to those that we wish to target (i.e. those identified in the screening grid above). Where any gaps are identified, efforts will be made to engage with these groups.

Jan 2017 update - it was identified in the mid-consultation review that that there was a lack of responses from young people, disabled people, GP’s and health organisations. Therefore an email was sent directly to all GP surgeries, Health and Wellbeing Boards and Clinical Commissioning Groups. The consultation was promoted again directly to the KCC Youth County Council and organisations representing disabled people were contacted. Following the close of the consultation, responses will be reviewed and reported on at an Active Travel Strategy Project Group meeting. The responses will be used to amend the Strategy where appropriate, and a final version of the Strategy will then be submitted to Environment and Transport Cabinet Committee for adoption.

Consultation Feedback

561 responses were received to the consultation. A detailed Consultation Report was written and available on the Consultation webpage.

Disabled people were less likely to agree with the Active Travel Strategy itself. 43% of disabled respondents strongly agreed with the strategy; 55% of all respondents strongly agreed. 15% of disabled respondents strongly disagreed or disagreed with the strategy; 6% of all respondents strongly disagreed or disagreed.

Upon further analysis into these responses it was found that none referred to a specific illness or impairment being the reason for their disagreement with the strategy, instead it seemed they did not consider it relevant to them or disagreed for other reasons. For example ‘Ignores demands on people’s lives and need for choice of transport’; ‘Waste of public money’; ‘Difficult to achieve’.

Of the 561 responses to the consultation, 91 included a comment on the EqIA. Those comments which were expressed more than 2 times are shown in the table below.

<table>
<thead>
<tr>
<th>Comment</th>
<th>No. responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Well written / Agree with the views expressed / sensible / easy to read</td>
<td>20</td>
</tr>
</tbody>
</table>
Disabled / Elderly must be considered / needs more support for disabled / elderly | 17
Not sure how it impacts on equality / how EqIA will be implemented | 10
Waste of time / EqIAs should be scrapped | 6
Need to encourage more women to cycle / use active travel | 5
Open to all / likely to benefit everyone / good infrastructure benefits everyone | 3

Of note is that 17 responses referred to the need to give more consideration to the elderly or disabled.

**Verbatim comments from disabled respondents about the Equality Impact Assessment (EqIA)**

"You say older residents who are less mobile may benefit less - they will not benefit at all, no matter what their age if they are not actively mobile. If we're narrowing roads and pavements to include cycle lanes how much room will be left for mobility scooters? This scheme will do NOTHING for the elderly/disabled. We now have too much traffic on our roads for this to be a 'safe' way to travel. We need to reduce how many cars per household are permitted before we introduce any other 'soppy' ideas."

"Yes and you just say that some disabled people would not benefit. I feel that is like saying that because your white you cannot go or because you're black? So why discriminant?"

"I am registered disabled and I would have a huge fear of walking around the roads of Upchurch, as there's no footpath on the vast majority of routes."

"The Assessment rightly indicates that older and less mobile ('disability') residents are less likely to benefit from the Strategy. I am not certain that the statements address this (for instance 'Adult cycling courses' - I suspect not many over 70's will take this up!)

"Better support for Disabled people, Learning Disability etc."

"The sector most likely to feel left out would be those with physical disabilities preventing active participation. However, those with electric buggies would possible be safer with an improved pedestrian/cycling infrastructure. Signage would need to highlight the safety issues urging cyclists to be constantly aware (safe cyclists already are) of the needs of other users. For those with mental health issues and suffering from the effects of stress or anxiety, walking and cycling, even for shopping and appointments, can reap positive health benefits."

"You appear to have fulfilled the requirements of an EqIA adequately."
"A very well written and executed assessment plan. Some thought has definitely gone into this. Please congratulate the author."

"Looks to have been well thought out and examined. With respect to the limitation on Active Travel envisaged for mobility impaired (Disabled and/or elderly or infirm) people, it is likely that the provisions for Active Travel will in fact actually benefit them. Even surfaced traffic free routes will be a lot more accessible, even for people who need assistance to use wheelchairs."

"A necessary evil . . ."

"Why is this necessary?"

"Useless, stupid. Even sounds European. Luckily we didn't have that during the Blitz."

"Fine. So why no question about respondents sexuality? [Gay- tick]"

Potential Impact:

Some of those within specific protected characteristics groups (older persons, and disabled) may potentially find it difficult or impossible to partake in active travel at all, and will therefore benefit less from this strategy than others. However the draft strategy also seeks outcomes that will benefit and potentially grow the numbers of elderly and people with a disability that can become more confident, informed and able to actively travel. This will therefore improve their access to key services and employment, as well as their local community.

Adverse Impact:

There do not appear to be any adverse implications of implementing an Active Travel Strategy. This was supported by the preliminary consultation feedback.

Positive Impact:

The strategy and outcomes have the potential to have a significant positive impact provided Interventions and measures are inclusive and are tailored to where they can have most benefit. The positive impacts with regards to equality and diversity are:

- Increased take up in identified groups
- Routes which are accessible/have improved access
- Opportunity for all to be more physically active
- Improvements in air quality that benefit the whole population

JUDGEMENT

Option 1 – Screening Sufficient  NO
Option 2 – Internal Action Required YES
Option 3 – Full Impact Assessment Yes

A full impact assessment is required as the draft Active Travel Strategy is going out to consultation.

**Action Plan**

The draft Strategy has had two engagement workshops and will have an eight week consultation. This EqIA will be reviewed for the fourth time and updated in response to the consultation feedback.

**Monitoring and Review**

It is intended that the Strategy will include an Action Plan which will be a live piece of work and updated annually. That Action Plan will similarly be Equality Impact Assessed, and implementation adjusted accordingly.

**Sign Off**

I have noted the content of the equality impact assessment and agree the actions to mitigate the adverse impact(s) that have been identified.

**Senior Officer**

Signed: Name: Stephanie Holt

Job Title: Head of Countryside, Leisure and Sport Date: 12/02/16

**DMT Member**

Signed: Name: Tim Read

Job Title: Head of Transportation Date: 11/04/2016

Please forward a final signed electronic copy to the Equality Team by emailing diversityinfo@kent.gov.uk
<table>
<thead>
<tr>
<th>Protected characteristic</th>
<th>Issues identified</th>
<th>Action to be taken</th>
<th>Expected outcomes</th>
<th>Owner</th>
<th>Timescale</th>
<th>Cost implications</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>Older residents who are less mobile may benefit less from this strategy than others</td>
<td>Ensure consultation engages with this group to hear feedback</td>
<td>Potential to identify where we can help deliver active travel that supports older residents</td>
<td>Active Travel Group</td>
<td>In line with writing of implementation plan</td>
<td>To be determined</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Improved continuous, joined up or direct walking or cycling-designated routes could support older residents reliant on mobility scooters access local services, amenities or friends/family</td>
<td>Increased usage of active travel</td>
<td>Active Travel Group</td>
<td>In line with writing of implementation plan</td>
<td>To be determined</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Action Plan will include an action to specifically focus on bringing benefits to older people. This will be making cycle courses available to older people, and engagement with the Active Retired Association to promote to this age group.</td>
<td>Growth in number of Kent older residents regularly cycling in Kent</td>
<td>Safer Mobility Team Leader</td>
<td>Ongoing</td>
<td>To be determined</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Communication channels for older people will be used when spreading messages about any relevant ATS Action Plan activities.</td>
<td>Older people are aware of any new activities that may benefit them and more likely to engage with them.</td>
<td>Active Travel Group</td>
<td>Ongoing</td>
<td>To be determined</td>
</tr>
<tr>
<td>Safety perceptions across the age groups</td>
<td>Creating a safer (and enabling a perception of more attractive/safer) environment in which to walk/cycle will benefit both school aged children and older residents in particular. Walking and cycling initiatives aimed at school children to increase safety and promote active travel.</td>
<td>Increased usage of active travel</td>
<td>Active Travel Group</td>
<td>To be determined</td>
<td>To be determined</td>
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</tr>
<tr>
<td>Promotional material may not reflect all age groups</td>
<td>Ensuring images, training or signposting introduced to support this strategy have relevance and appeal to the local community, including different age groups</td>
<td>Increase in diversity of promotional material</td>
<td>Active Travel Group</td>
<td>To be determined</td>
<td>To be determined</td>
<td></td>
</tr>
<tr>
<td>Active Travel relies on an individual having the ability to be mobile in their own right.</td>
<td>Ensure consultation engages with this group to hear feedback</td>
<td>Potential to identify where we can help deliver active travel that supports disability</td>
<td>Active Travel Group</td>
<td>In line with writing of implementation plan</td>
<td>To be determined</td>
<td></td>
</tr>
<tr>
<td>Disability</td>
<td>Residents with a disability may benefit less from this strategy than others</td>
<td>Communication channels for disabled people will be used when spreading messages about any relevant ATS Action Plan activities.</td>
<td>Disabled people are aware of any new activities that may benefit them and more likely to engage with them.</td>
<td>Active Travel Group</td>
<td>Ongoing</td>
<td>To be determined</td>
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<tr>
<td>Gender</td>
<td>Evidence suggests that fewer women cycle than men</td>
<td>Ensure consultation engages with this group to hear feedback</td>
<td>Potential to identify where we can help deliver active travel that supports gender specific issues</td>
<td>Active Travel Group</td>
<td>In line with writing of implementation plan</td>
<td>To be determined</td>
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</tr>
<tr>
<td>Promotional material may not reflect diversity</td>
<td>Ensuring any images, training or signposting introduced to support this strategy have relevance and appeal to the local community, including a range of disabled groups</td>
<td>Increase in diversity of promotional material</td>
<td></td>
<td>Active Travel Group</td>
<td>To be determined</td>
<td>To be determined</td>
</tr>
<tr>
<td>Action Plan will include an action to specifically focus on bringing benefits to disabled people. This will be ‘Refresh guidance on inclusive design best practice’.</td>
<td>Some of the barriers to active travel for disabled people are removed. Highway environment is better designed to be accessible for disabled people.</td>
<td></td>
<td></td>
<td>Active Travel Group</td>
<td>Jan 2018</td>
<td>To be determined</td>
</tr>
<tr>
<td>Improving continuous, joined up or direct walking or cycling-designated routes will enable certain disabled communities to more easily access local services, amenities or friends/family.</td>
<td>Increased usage of active travel</td>
<td></td>
<td></td>
<td>Active Travel Group</td>
<td>Ongoing</td>
<td>To be determined</td>
</tr>
</tbody>
</table>

15
Communication channels for females will be used when spreading messages about any relevant ATS Action Plan cycling activities.

Females are aware of any new cycling activities that may benefit them and more likely to engage with them.

Active Travel Group | Ongoing | To be determined

Action Plan will include an action to specifically focus on encouraging more women into cycling. This will be ‘Encourage more women into regular cycling by establishing formal referral route between KCC adult cycle training and volunteer led Breeze rides’.

More women will start cycling more often, and be more supported in giving it a try.

Active Travel Group | Sep 2017 | None

Promotional material may not reflect gender diversity

Ensuring any images, training or signposting introduced to support this strategy have relevance and appeal to women as a targeted group, as well as adults generally

Increase in diversity of promotional material

Active Travel Group | Ongoing | To be determined

Race

Promotional material may not reflect diversity

Ensuring any images, training or signposting introduced to support this strategy have relevance and appeal across a diverse population

Increase in diversity of promotional material

Active Travel Group | To be determined | To be determined
| Ensure people from all racial groups are engaged | Communication channels for a range of racial groups will be used when spreading messages about any relevant ATS Action Plan activities. | People from all racial groups are aware of activities that may benefit them and more likely to engage with them. | Active Travel Group | Ongoing | To be determined |