

# Equalities Impact Assessment

Camden Council

## What is an Equality Impact Assessment?

An Equality Impact Assessment (“EIA”) is a way of analysing a proposed organisational policy or decision to assess its effect on people with protected characteristics covered by the Equality Act 2010\*. To meet the Council’s statutory duty the EIA should also address issues of advancing opportunities and fostering good relations between different groups in the community.

The Council has a strong tradition of ensuring equality both in terms of service delivery and within its workforce. To help us maintain this tradition it is essential that you start to think about the EIA process before you develop any new activity or make changes to an existing activity. This is because the EIA needs to be integral to service improvement rather than an ‘add-on’. If equality analysis is done at the end of a process it will often be too late for changes to be made.

The courts place significant weight on the existence of some form of documentary evidence of compliance with the Public Sector Equality Duty\* when determining judicial review cases. Having an EIA as part of the report which goes to the decision makers and making reference to the EIA within that report helps to demonstrate that we have considered our public sector equality duty and given “due regard” to the effects the decision will have on different groups.

The EIA must be considered at an early stage of the formation of a policy/decision and inform its development, rather than being added on at the end of the process. The EIA form should be completed and updated as the policy / decision progresses and reviewed after the policy or change has been implemented.

If a staff restructure of organisational change is identified as necessary following the review of an activity then an EIA needs to be completed for both stages of the process, i.e. one when the activity is reviewed and one when the restructure or organisational change is undertaken.

Please note all sections must be completed. However the obligation is to have due regard and it may be that while an issue requires the completion of an EIA, the matters at hand may not lend themselves to some of the obligations, for example fostering good relations. As long as this has been properly considered it is legitimate to conclude that this cannot be applied in a particular case.

\*Please read the notes at the end of this document.

Name of proposed decision/policy being reviewed:

Brunswick Square scheme – Proposed Cycling and Walking Improvements

## Question 1

What is changing and why?

If the issue is going for decision, e.g. at Cabinet meeting, what are the decision makers being asked to decide? If you are reviewing a policy what are its main aims? How will these changes affect people?

**[You can use this space to capture your reader's attention with a quote from the document or to emphasise a key point.]**

### **Background**

In March 2013, the Mayor of London launched his Vision for Cycling in London to improve provision for cycling through the Central London Cycle Grid and other road and physical infrastructure projects.

The Central London Cycle Grid is a set of connected routes for cyclists across central London, comprising Quietways and Cycle Superhighway routes. The proposed cycling routes are being delivered by a partnership of Transport for London (TfL) and the London boroughs. (Quietways link key destinations and complement other cycling initiatives by providing for less confident cyclists, of all ages and abilities, who want to travel at a gentler pace, away from busy traffic. Cycle Superhighways are cycle routes running from outer London into and across central London. They are generally on popular commuter routes and provide safer, faster and more direct journeys into Central London.

The report of which this Equality Impact Assessment (EIA) forms a part sets out the results of a public consultation for improvements at Brunswick Square. This is a key part of the Central London Grid network, connecting north-south cyclist desire lines between King's Cross and High Holborn, and eastbound movements between Russell Square and Guilford St.

Brunswick Square also acts as a hub for pedestrians and cyclists travelling to and from Russell Square station, The Brunswick Centre, Brunswick Square Gardens, Coram's Fields and the North-South Cycle Superhighway.

### **Public engagement and consultation**

On 13 October 2014, Council officers and project consultants held an engagement event with local groups to discuss objectives, site constraints and design options, including whether to close Lansdowne Terrace to all vehicles except cyclists or to keep it open to motor traffic. Substantial local support was identified for the full closure of Lansdowne Terrace to motor vehicles to reduce the volume of motor traffic using Lansdowne Terrace and Brunswick Square as a short cut to access Judd St and Euston Road. The closure of Lansdowne Terrace to motor vehicles at Brunswick Square would allow the layout at the junction of Brunswick Square with Lansdowne Terrace, Grenville St and Bernard St to be simplified, pedestrian, public realm and cycle route improvements to be made and through traffic to be reduced.

Following the public engagement meeting, proposals to remove access between Lansdowne Terrace and Brunswick Square to motor vehicles were progressed to public consultation.

The objectives of the proposals are to:

- improve cyclist and pedestrian safety and comfort,
- reduce volumes of motorised through traffic,

- reduce traffic dominance in the streetscape,
  - improve local air quality, and
  - improve the public realm by better balancing the allocation of space between transport modes.
- The proposals cover parts of the **Bloomsbury, Kings Cross and Holborn and Covent Garden** wards.

The Council carried out a public consultation exercise in February and March 2016 as to whether:

- (a) access for motor vehicles between Lansdowne Terrace and Brunswick Square should be removed, in order to improve the public realm e.g. increase pedestrian space, new trees, seating and lighting.
- (b) the road on Brunswick Square should be raised to pavement level and improvements made for pedestrians such as; widening pavements, improving existing zebra crossings and providing two new zebra crossings.
- (c) improvements should be made for cyclists, such as reducing road widths to slow motor vehicles, introducing a cycle track between Brunswick Square (west) and Lansdowne Terrace, and simplifying the junction of Brunswick Square with Bernard St and Grenville St.
- (d) respondents had any other comments, suggestions or objections to the proposals.
- (e) respondents had any disabilities that would need to be taken into account if the proposals were agreed by the Council.

The report to the Leader of the Council, to which this EIA is appended, outlines the feedback from the consultation and amendments proposed to the design in response to comments received. It considers the implications for surrounding schemes and provides officers' recommendations for proposals to be progressed to detailed design and implementation. Consultation material can be found in Appendix A and the results of the consultation with officer responses can be found in Appendix B. This EIA includes an assessment of the positive and negative impacts on people with protected characteristics, should a decision be made to proceed to implementation of the proposals.

Following public consultation, the most commonly occurring positive comments were:

- General support for the scheme/ support with minor changes.
- Support for improvements to safety/current layout feels unsafe.

The most commonly occurring negative comments were:

- Concern that the scheme would cause congestion, traffic reassignment and delays to motor vehicles.
- Security/antisocial behaviour on Brunswick Square North.
- Access issues for residents and businesses using motor vehicles.
- Waste of public money.
- No changes needed/no current problem.
- More greenery required/rethink public space.
- Cyclists are dangerous to pedestrians.
- Too much being done for cycling.

### **Policy considerations**

Subject to separate decision-making, Brunswick Square would form part of a local network of walking and cycling facilities to reduce north-south severance caused by Euston Road. Proposals in the surrounding area include:

- Torrington Place to Tavistock Place Experimental Traffic Changes
- North-South Cycle Superhighway (CS6) (approved)
- Midland Road and Euston Road/Judd St Junction Proposed Walking and Cycling Improvements
- West End Project (WEP) (approved)

The Brunswick Square project aims to support the Council's strategic objective "to invest in our communities to ensure sustainable neighbourhoods and create conditions for economic growth" as set out in The Camden Plan 2012-17<sup>1</sup>.

The recommended outcomes of the project are aligned to key objectives of Camden's Transport Strategy<sup>2</sup>. These include Objective 1: Reduce car use, Objective 2: Facilitate an increase in cycling and modal shift by providing high quality, safe routes and Objective 5: improve the public realm, acknowledging that streets are places where people socialize and interact, dwell and enjoy in their own right.

The proposal covers physical and access changes to the streetscape, including restricting access by motor vehicles to Lansdowne Terrace. Therefore, pedestrians, wheelchair and mobility scooter users, and people who have pushchairs, as well as road user groups including cyclists, car users, taxi/PHV drivers and taxi/PHV passengers would be affected by the proposal.

This Equality Impact Assessment (EIA) is being carried out in order to identify potential positive and negative impacts of the proposed scheme on groups with protected characteristics, as defined by the Equality Act 2010. It is intended to enable the Council, and individual decision makers, to make sure that they personally have due regard to all of the needs set out in section 149 of the Equality Act. Further, this EIA seeks to ensure that the Council complies with all of its equality duties, and acts on its commitment to reduce inequality, which is reflected in the Camden Plan, the outcomes of Camden's Equality Taskforce and Camden's Transport Strategy.

#### **Public Sector Equality Duty (section 149 of the Equality Act 2010)**

Under Section 149 of Equality Act, public bodies are required to have due regard to the need to eliminate discrimination, advance equality of opportunity and foster good relations between different groups of people when carrying out their activities. Detailed information on the Public Sector Equality Duty can be found on p 34 of this EIA document. The relevant protected characteristics are:

age;  
disability;  
gender reassignment;  
pregnancy and maternity;  
race;  
religion or belief;  
sex;  
sexual orientation.<sup>3</sup>

The Leader of the Council should also bear in mind the **United Nations Convention on the Rights of Persons with Disabilities**, which refers to promoting, protecting and ensuring the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and promoting respect for their inherent dignity (Article 1). The full text of the Convention can be found here:

<https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities.html>

In relation to children, the Council's decision makers should bear in mind the **United Nations Convention on the Rights of the Child**, which refer to ensuring children's rights, protection and safety, promoting health and self-reliance and access to play and recreational activities. The full text of the convention can be found here:

<https://www.unicef.org.uk/what-we-do/un-convention-child-rights/>

This Equality Impact Assessment will set out actions that will be taken to mitigate or minimise any negative impacts of the proposed scheme. Where mitigating action cannot be taken, or the impacts cannot be wholly mitigated, the reason why will be explained.

<sup>1</sup> (<https://www.camden.gov.uk/ccm/navigation/council-and-democracy/camden-plan/>)

<sup>2</sup> (<http://camden.gov.uk/ccm/content/transport-and-streets/transport-strategies/camdens-local-implementation-plan/>)

<sup>3</sup> The duty to have due regard to the need to eliminate discrimination also covers marriage and civil partnerships in relation to employment issues.



## Question 2

Who will be affected by this decision and how?

In particular, do those from protected groups benefit or will they experience specific and disproportionate impacts? Will there be any direct or indirect discrimination?

[You can use this space to capture your reader's attention with a quote from the document or to emphasise a key point.]

### (1) Data about groups with protected characteristics

Detailed data on protected characteristics of individual respondents was not requested as part of the consultation, although respondents were asked, as part of the consultation questionnaire, to advise the Council of any disabilities:

*If you have any disabilities (e.g. mobility or visual difficulties) please use this space let us know so that we may take this into account if the proposals are agreed by the Council and before works start.*

In addition, as well as reports and studies referenced below, the Census 2011 provides some equality data on the resident population in the Bloomsbury, King's Cross and Holborn wards. So it is possible to make some assumptions about the effects that the proposal could have on resident groups with protected characteristics. Further, local groups representing people with protected characteristics were contacted following the consultation in order to prepare this assessment. Where these groups responded, their comments are addressed in the consultation section below. It is acknowledged that pedestrians and road users who are not residents in the Bloomsbury, Kings Cross and Holborn and Covent Garden wards would also be affected by the proposal. For this reason, other information, such as Freedom and Taxicard data, and TfL London-wide data on how protected groups travel, has been referred to in order to help inform this Equality Impact Assessment.

### Age

#### Bloomsbury

	Area No	Area %	Camden %
<b>All Ages</b>	<b>10,892</b>	<b>100%</b>	<b>100%</b>
0-4	294	2.7%	6.0%
5-15	483	4.4%	10.1%
16-29	4,914	45.1%	26.6%
30-44	2,412	22.1%	27.0%
45-59	1,326	12.2%	15.2%
60-74	990	9.1%	10.1%
75-89	434	4.0%	4.5%
90+	39	0.4%	0.5%

#### Holborn and Covent Garden

	Area No.	Area %	Camden %
<b>All Ages</b>	<b>13,023</b>	<b>100%</b>	<b>100%</b>
0-4	581	4.5%	6.0%
5-15	1,094	8.4%	10.1%
16-29	3,914	30.1%	26.6%
30-44	3,509	26.9%	27.0%
45-59	2,141	16.4%	15.2%
60-74	1,241	9.5%	10.1%
75-89	494	3.8%	4.5%
90+	49	0.4%	0.5%

## King's Cross

	Area No	Area %	Camden %
<b>All Ages</b>	<b>11,843</b>	<b>100%</b>	<b>100%</b>
0-4	561	4.7%	6.0%
5-15	1,157	9.8%	10.1%
16-29	5,043	42.6%	26.6%
30-44	2,481	20.9%	27.0%
45-59	1,366	11.5%	15.2%
60-74	840	7.1%	10.1%
75-89	362	3.1%	4.5%
90+	33	0.3%	0.5%

According to data from the 2011 census, 7.1% of the population of Bloomsbury ward, 12.9% of the Holborn and Covent Garden ward and 14.5% of the population of Kings Cross ward is under 16. The Camden average for the proportion of the population that is under 16 is 16.1%.

13.4%, 13.7% and 10.4% of the population of the Bloomsbury, Holborn and Covent Garden and King's Cross wards respectively is over 60. This compares to the borough average of 15.1%.

The proportion of older residents and under 16s in the project area is lower than the borough average.

### *Age: Freedom Pass and Taxicard usage data*

The Freedom Pass and Taxicard usage data shows that older people use buses more often than taxis. With regard to Camden, 9.2 million public transport trips were made by Camden residents with an older person's Freedom Pass in 2014/15 (the latest available data from Transport for London). Of these 6.9 million (76%) were made by bus over other forms of public transport.

The Camden Transport Strategy Equalities Impact Assessment states that, on the whole, older people are less likely to travel than younger people; the number of journeys made declines with age and the trips get shorter, due to changing needs, income and disability/reduced mobility. Older people's travel purposes also differ from those of younger people, mainly due to retirement from work. Older people are also more dependent on walking and public transport, particularly women – who also comprise the majority of older people. Walking is the most frequently used type of transport by older Londoners aged 65 and over (86 per cent walk at least once a week)<sup>4</sup>. Therefore, transport strategies should seek to improve the walking environment and access to public transport.

For older people in Camden, transport is a key issue. When the Council undertook public consultation as part of developing the London Borough of Camden's Older People's Plan 2008, reliable and accessible transport was often cited as a crucial element for quality of life, enabling people to visit friends and families and take part in activities. The Blue Badge, Freedom Pass and Taxicard schemes were appreciated by many. There were also calls for better parking solutions for family and visiting carers and also for accessible transport services at night to enable participation in evening activities. The quality of public transport provision, particularly buses, was also cited as a major concern. However, there was also recognition that Camden is privileged to have access to a wide range of transport options.

## **Disability**

### Bloomsbury

	Area No	Area %	Camden %
<b>All people</b>			
Day-to-day activities limited	1,337	12.3%	14.4%
Not limited	188,507	1730.7%	85.6%

<sup>4</sup> Travel in London: Understanding our diverse communities (Transport for London, Sept 2015)

## Holborn and Covent Garden

	Area No.	Area %	Camden %
<b>All people</b>			
Day-to-day activities limited	2,050	15.7%	14.4%
Not limited	188,507	1447.5%	85.6%

## King's Cross

	Area No	Area %	Camden %
<b>All people</b>			
Day-to-day activities limited	1,583	13.4%	14.4%
Not limited	188,507	1591.7%	85.6%

In the 2011 census, 12.3% of the population of Bloomsbury ward, 15.7% of Holborn and Covent Garden and 13.4% of King's Cross ward self-reported as having an activity-limiting illness. This compares with a Camden average of 14.4%.

TfL data<sup>5</sup> shows that the main modes of transport used by disabled Londoners at least once a week are: walking (78%), bus (56%), car as a passenger (47%) and car as a driver (26%). Disabled Londoners are less likely to use a car as a driver (26%) than non-disabled Londoners (41%) and are slightly less likely to use the car as a passenger (47%) compared to non-disabled Londoners (48%). A slightly lower level of use between disabled and non-disabled Londoners is also seen for black cabs (4% and 5% respectively) but a slightly higher level of use for other taxis / minicabs (8% for disabled people compared to 6% for non-disabled people). 15% of disabled Londoners cycle at least once a week compared to 18% of non-disabled Londoners<sup>6</sup>.

### *Disability: Freedom Pass and Taxicard usage data*

The data shows that disabled people use buses more often than taxis. Trips by bus specifically are higher amongst disabled residents than the London population – 0.44 compared with 0.40 per person per day.

For disabled people under the age of 64, 2.8 million public transport trips were made by Camden residents registered for the Freedom Pass, of which 2.2 million (79%) were made by bus. The bus is clearly an important transport mode for disabled people and improvements to bus stop accessibility, bus journey times and reliability would provide significant benefits for people who rely on them.

According to Taxicard usage data to date for 2015/16, the average number of trips made per month by Camden residents is 3,965, making the number of trips per year approximately 47,500.<sup>7</sup>

The volume of trips made by Taxicard users is clearly far lower than the number of trips made by Freedom Pass users (the ratio is 1:25).

### **Gender reassignment**

There is no data available on the numbers of people in the area covered by this protected characteristic. Primary Care Trusts and Specialist Commissioning Groups collect data on the number of commissioning decisions made in relation to gender reassignment treatment. However, this data is not publicly available and does not include the number of people in the trans population who are refused treatment or who may require treatment but are unable to access it.

<sup>5</sup> Travel in London: Understanding our diverse communities (Transport for London, Sep 2015)

<sup>6</sup> Ibid.

<sup>7</sup> (The London Taxicard scheme provides subsidised door to door journeys, via a capped allowance, in licensed taxis and private hire vehicles for London residents who have serious mobility or visual impairments. A Freedom Pass provides free London travel (and free bus travel nationally) to older people and people with disabilities).



## Pregnancy and maternity

There is no data available on the numbers of people in the area under this protected characteristic. However, 2011 census data shows that, compared to a borough average of 6.4% lone parent households with dependent children, there is a higher proportion of lone parent households with dependent children in King's Cross ward (8.6%) and a lower proportion in Bloomsbury and Holborn and Covent Garden wards (3.4% and 5.5% respectively).

In terms of numbers of births, there are approximately 3,120 births a year in Camden, equivalent to a fertility rate of 52 births per 1,000 women. Bloomsbury, Holborn and Covent Garden and King's Cross wards have lower birth rates than Camden as a whole. Compared to England and London, Camden has a high proportion of births to older mothers (34% to mothers over 35 years of age compared to 26% (London) and 20% (England). The risk of conditions such as Down's Syndrome and other congenital abnormalities increases with maternal age, so more frequent screening and interventions are likely to be required). Camden also has a higher rate of Caesarean sections. This information indicates that there is a need for good access to hospital, including access for emergency services.

## Race

According to data from the 2011 census, the proportion of Black and Minority Ethnic (BME) groups in Bloomsbury, Holborn and Covent Garden and King's Cross wards is 40.4%, 39.8% and 49.2% respectively. These exceed the Camden BME average of 33.7%.

### Bloomsbury

	Area No	Area %	Camden %
<b>All ethnic groups</b>	<b>10,892</b>	<b>100%</b>	<b>100%</b>
White	6,491	59.6%	66.3%
Mixed/Multiple Ethnic Groups	500	4.6%	5.6%
Asian or Asian British	2,712	24.9%	16.1%
Black or Black British	731	6.7%	8.2%
Other Ethnic Group	458	4.2%	3.8%
<b>Black &amp; Minority Ethnic Groups<sup>1</sup></b>	<b>4,401</b>	<b>40.4%</b>	<b>33.7%</b>
<b>All Minority Ethnic Groups<sup>2</sup></b>	<b>6,688</b>	<b>61.4%</b>	<b>56.0%</b>

### Holborn and Covent Garden

	Area No.	Area %	Camden %
<b>All ethnic groups</b>	<b>13,023</b>	<b>100%</b>	<b>100%</b>
White	7,839	60.2%	66.3%
Mixed/Multiple Ethnic Groups	746	5.7%	5.6%
Asian or Asian British	2,994	23.0%	16.1%
Black or Black British	990	7.6%	8.2%
Other Ethnic Group	454	3.5%	3.8%
<b>Black &amp; Minority Ethnic Groups<sup>1</sup></b>	<b>5,184</b>	<b>39.8%</b>	<b>33.7%</b>
<b>All Minority Ethnic Groups<sup>2</sup></b>	<b>7,894</b>	<b>60.6%</b>	<b>56.0%</b>

### King's Cross

	Area No	Area %	Camden %
<b>All ethnic groups</b>	<b>11,843</b>	<b>100%</b>	<b>100%</b>
White	6,015	50.8%	66.3%
Mixed/Multiple Ethnic Groups	650	5.5%	5.6%
Asian or Asian British	3,467	29.3%	16.1%
Black or Black British	1,280	10.8%	8.2%
Other Ethnic Group	431	3.6%	3.8%
<b>Black &amp; Minority Ethnic Groups<sup>1</sup></b>	<b>5,828</b>	<b>49.2%</b>	<b>33.7%</b>
<b>All Minority Ethnic Groups<sup>2</sup></b>	<b>8,098</b>	<b>68.4%</b>	<b>56.0%</b>

TfL research also shows that BME Londoners are less likely than other groups to cycle. Improvements to provision for walking and cycling in Bloomsbury and King's Cross could therefore benefit BME groups and encourage more people from this protected group to cycle. The proposal could therefore have a positive impact on the health of the ethnicity protected group.

Use of cars among BME Londoners is lower than for white Londoners. Use of buses is particularly high among black Londoners, with 77% catching the bus at least once a week.

### **Religion or belief**

Published data and information about religion and beliefs is available from the 2011 Census. However, the figures for Camden are being updated by ONS due to an error made in the original calculations. The published figures are provided below but should be treated with an element of caution.

#### **Bloomsbury**

	<b>Area No</b>	<b>Area %</b>	<b>Camden %</b>
<b>All</b> (including Not Stated and No Religion)	<b>10,892</b>	<b>100%</b>	<b>100%</b>
Christian	3,343	30.7%	34.0%
Buddhist	231	2.1%	1.3%
Hindu	267	2.5%	1.4%
Jewish	151	1.4%	4.5%
Muslim	948	8.7%	12.1%
Sikh	38	0.3%	0.2%
Other religion	72	0.7%	0.6%
No religion	3,049	28.0%	25.5%
Religion not stated	2,793	25.6%	20.5%

#### **Holborn and Covent Garden**

	<b>Area No.</b>	<b>Area %</b>	<b>Camden %</b>
<b>All</b> (including Not Stated and No Religion)	<b>13,023</b>	<b>100%</b>	<b>100%</b>
Christian	4,323	33.2%	34.0%
Buddhist	182	1.4%	1.3%
Hindu	166	1.3%	1.4%
Jewish	141	1.1%	4.5%
Muslim	1,995	15.3%	12.1%
Sikh	35	0.3%	0.2%
Other religion	64	0.5%	0.6%
No religion	3,128	24.0%	25.5%
Religion not stated	2,989	23.0%	20.5%

#### **Kings Cross**

	<b>Area No</b>	<b>Area %</b>	<b>Camden %</b>
<b>All</b> (including Not Stated and No Religion)	<b>11,843</b>	<b>100%</b>	<b>100%</b>
Christian	3,551	30.0%	34.0%
Buddhist	235	2.0%	1.3%
Hindu	201	1.7%	1.4%
Jewish	100	0.8%	4.5%
Muslim	2,137	18.0%	12.1%
Sikh	47	0.4%	0.2%
Other religion	63	0.5%	0.6%
No religion	2,945	24.9%	25.5%
Religion not stated	2,564	21.6%	20.5%

Camden is home to a wide range of faiths including Christian, Muslim, Sikh, Jewish, Hindu and Buddhist. The largest faith population is Christian at 34% of the population. Muslims comprise the second largest faith group; in 2011, 12.1% of people living in Camden classified themselves as Muslims.

The Camden Transport Strategy EIA notes that many of the issues associated with ethnicity also apply to faith. While much of the research does in fact group these two equalities groups together, religion is considered a more defining characteristic for some minority 'ethnic' groups than ethnicity (Camden: Census Fact Sheet 2001).

Religious observance may affect when and where people travel. Places of worship and faith-based schools are major destinations for large populations from different groups, particularly on certain dates and at certain times of the day. It is therefore important that routes to and around these destinations are safe and accessible.

## Sex/gender

### Bloomsbury

	Area No	Area %	Camden %
Male	5,686	52.2%	49.0%
Female	5,206	47.8%	51.0%

### Holborn and Covent Garden

	Area No.	Area %	Camden %
Male	6,908	53.0%	49.0%
Female	6,115	47.0%	51.0%

### Kings Cross

	Area No	Area %	Camden %
Male	5,926	50.0%	49.0%
Female	5,917	50.0%	51.0%

According to data from the 2011 census, there are more men than women in Bloomsbury and Holborn and Covent Garden wards, and approximately equal proportions of men and women in King's Cross ward.

In Camden as a whole, there are more older women than older men, more boys than girls, while the working-age population is split 51/49 women to men. Results of a Camden Talks survey in 2010 show that men and women rate road safety almost equally, with 36% of men and 35% of women saying it was a priority concern. However, in the case of women, safety was their top priority, while for men addressing congestion was the top priority (cited by 38%).

Research shows that women's multiple roles, often encompassing both work and family responsibilities, mean that their travel needs can be far more complex than those of men. Women are likely to be the chief carers of children, elderly, sick and disabled people. Therefore, their journeys are likely to involve travelling with an additional, dependent and/or vulnerable person: women make 67% of all escorting trips and are almost five times as likely as men to be making trips with children aged under five. In addition, women make 77% of all escorted trips to school (TfL: An Action Plan for Women, 2004).

Both distance to work and the amount of time available for work means many more women look for work close to home and take lower paid, part-time work than men. Women comprise 70% of the part-time workforce, and work trips are likely to be within the same borough (TfL: Action Plan for Women, 2004). These trips are therefore more likely to be walkable and/or cycleable.

Women's transport needs tend to differ to those of men because of these multiple roles. Their lifestyles involve more complex and multiple journey "chains". They often take shorter, more frequent and more local routes as well as commuter journeys, and are more dependent on buses and walking (Local Travel Demand Survey, TfL, 2011). Household survey data shows that women make 24% of their journeys by public transport and make 15% more trips than men, mainly due to a higher number of walking and bus trips. Women are heavy users of public transport.

In terms of cycling, cycle routes which provide protection from motor traffic attract higher proportions of women, as well as older people and children, than unprotected cycle routes.

### **Safety and personal security**

Perceptions of road safety and personal security can have a significant impact on the way that both men and women travel. Women's choice of how, and how far, to travel due to cost and time, may also be limited by fears about personal security. Women are four times more likely than men to be worried about safety at night (TfL: An Action Plan for Women, 2004). This is likely to influence their travel choices, and could potentially restrict the places they visit and times of travel - or they may choose not to travel at all. Further, women are more likely than men to say that fear of crime affects their quality of life.

Although women walk longer distances and walk more frequently, men are more likely to be killed or seriously injured on all modes of transport, including as pedestrians (DfT, 2003).

### **Sexual orientation**

There is no data available on the numbers of people in the area under this protected characteristic. However, in 2005, when conducting research into the impact of the Civil Partnerships Act, the Government's Treasury Department estimated that 6% of the UK population was lesbian, gay and bisexual. Estimates suggest that the figure in London is in the region of 10% with an approximate lesbian, gay and bisexual population in Camden of around 22,500.<sup>8</sup> The GLA report noted that hate crime continues to blight the lives of many lesbian, gay and bisexual people. It also noted that a number of issues make personal safety a particular concern for the community, including: poor lighting or visibility at bus stops, stations and car parks, physical environments that feel unsafe (e.g. long subways, isolated bus stops), and security concerns about travelling from stations and bus stops, particularly at night. The GLA report recommends that in order to help design out crime and create an environment which makes lesbian, gay and bisexual people, feel safer and less vulnerable to homophobic hate crime, in line with the London Plan, routes and spaces should be legible, overlooked and well-maintained to maximise activity throughout the day and night. Pedestrian, cyclist and vehicular routes should be well-defined and integrated, and limit opportunities for concealment.

National research estimates that there are between 300,000 and 500,000 transgender people living in the UK, or between 0.6% and 1% of the population, which would equate to between 1,446 and 2,411 people in Camden (assuming a population of 241,059). It should be noted that this figure does not include the number of people in the trans population who are refused treatment or who may require treatment but are not able to access it. It would appear to be a reasonable assumption that personal safety issues that affect lesbian, gay and bisexual people also affect transgender people.

### **(2) Information gathered about impacts of the proposal**

A feasibility study was conducted by council transport planners and engineers. The study considered a range of factors including; traffic volumes and patterns in and around the project area (from survey data), collision data, geometric site constraints, interactions with other local schemes (proposed and committed), historic/heritage considerations, public realm usability, local demographics and key desire lines for pedestrians and cyclists.

Full closure of Lansdowne Terrace to motor vehicles at Brunswick Square is the key intervention which will enable simplified junction layout at the junction of Brunswick Square with Lansdowne Terrace, Grenville St and Bernard St. This will provide pedestrian and public realm improvements, and filter out motor traffic, complementing the adjacent cycling routes that form part of the Central London Grid and Cycle Superhighway programmes. As the scheme hinges on this intervention, options which allow motor vehicle access between Lansdowne Terrace and Brunswick Square were not explored further.

### **Consultation and engagement**

After the engagement event in 2014 described in Section 1, the public consultation ran for five weeks from 15 February 2016 to 20 March 2016. Consultation materials were sent to 5067 consultees, including 4967 letters which were posted to properties within the consultation area and to 50 local groups/associations, Camden Councillors and statutory groups (including the emergency services). As stated above, detailed information on protected groups was not collected as part of the consultation. However, respondents were asked in the Comments section of the questionnaire to advise of any disabilities (such as mobility or visual impairments) so that the Council could take these into account in decision making and scheme design.

In total, after removal of duplicate responses, 318 responses were received via the questionnaire (by post and online). This represents a response rate of approximately 6.4%. The proposals as a whole were supported by 68% of respondents. 29% did not support the proposal and 3% did not express an opinion.

<sup>8</sup> Joint Strategic Needs Assessment, Camden Council, 2013

Views expressed as part of the consultation are summarized in the report to the Leader of the Council. However, particular reference is made below to comments which have been expressed by organisations or individuals from protected groups, and by others who are concerned about potential effects of the scheme on protected groups.

68 of all respondents (21%) were concerned about congestion, traffic reassignment and journey delays. i.e. taking road space away from motor traffic would reassign traffic onto unsuitable roads, increase the cost of taxi journeys and be detrimental to air quality.

41 respondents (13%) commented on security or anti-social behaviour on Brunswick Square north, stating that the pedestrian route between UCL School of Pharmacy and William Goodenough House is dimly lit and a hot-spot for muggings.

40 respondents (13%) were concerned about access by motor vehicle, including access to hospitals and businesses, getting taxis and deliveries. Some respondents felt that closing Lansdowne Terrace was not necessary. 17 respondents (5%) commented on cyclists' behaviour. They stated that they were dangerous to pedestrians and should be better managed, that older people and disabled people have trouble seeing and/or hearing them, that they disobey traffic laws and should have to pay road tax and have insurance.

Eight respondents (3%) felt the proposals did not go far enough. Views included the following: vehicles should be restricted on Bernard St; contra-flow cycling should be permitted; Handel St should be closed to motor traffic; cycle priority should be emphasised and more done for pedestrians.

Seven respondents (2%) were concerned about noise pollution worsening on Grenville St due to increased queuing.

Other comments expressed concern that:

- there would be impacts on visually impaired people in relation to kerb upstands, lack of tactile paving and irregular road layouts.
- raised roads were confusing for children.

Comments from respondents generally supporting the scheme, but proposing minor improvements, included:

- use chamfered kerbs in cycle lanes
- More/better lighting
- increase footway and cycle track widths
- ensure proposals suit partially-sighted people.

Of the three respondents who identified as using wheelchair and/or mobility scooters, one supported all of the proposals, one did not support the closure of Brunswick Square but supported the pedestrian and cycle improvements. The other respondent had no opinion regarding the closure of Brunswick Square or the improvements for cyclists, but supported the improvements for pedestrians.

**Organisations** representing protected groups and a summary of their response, where provided, are listed below. In addition, responses from **individuals** that made comments in relation to the protected groups are included.

### **Age**

The groups below were contacted during the consultation or in preparing this assessment:

#### Young people

- Calthorpe Project Children's Facilities, Gray's Inn Road, WC1X 8LH. No response was received.
- Camden Chinese Community Centre Youth Club, Tavistock Place, WC1H 9SN. No response received.
- Chadswell Healthy Living Centre, Harrison St, WC1H 8JF - running groups and classes for young and older people and Bengali, Chinese and Somali people. No response received.
- Coram's Fields under 3s and under 5s drop in sessions, Guilford St, WC1N 1DN. No response received.

- Kings Cross Neighbourhood Centre, Argyle St, WC1H 8EF – services and activities for young, older and disabled people in the Bangladeshi, Chinese and Somali communities. No response received.

Two responses from individuals specifically mentioned potential impacts of the scheme on children:

Positive:

- *I'm very impressed. Congratulations for the scheme. I can see so many people with children walking along miserable pavements to reach Coram's Fields. The environment will be much less polluted and less stressful once the rat-running traffic is removed.*

Negative:

- *If the aim of this is to create more pedestrianized spaces, it will be at the cost of creating traffic nuisance to the big hospitals in the area (Great Ormond Street Hospital for Children and the National Hospital) and both these hospitals have very specialised intensive care units for very sick patients with paediatric or neuro-emergency. And there is a danger of making it difficult for emergency vehicles to get to these hospitals in a hurry.*

In addition, one respondent requested changes to the location of the zebra crossing to access Coram's Fields and queried the use of making the road the same level as the pavement. Another commented on the balance between local pedestrians and cyclists.

- *Zebra crossing should be at south east corner of Brunswick Centre at the bottom of the slope and linking Brunswick square. This is the desire line for people coming from the slope (with pushchairs, mobility scooters and small children). Most people heading down Lansdowne Terrace by foot are going to Coram's Field, and by putting the zebra crossings as you have they end up on the wrong side of Lansdowne Terrace. Not sure about road and pavement at same height - toddlers can't tell the difference. All of this should be considered from the perspective of people and kids accessing Coram's Fields.*
- *Quality of city life is greatly dependent upon space, trees, seating and lighting - particularly important for families in the area living in small flats with no gardens ..... I have also seen the impact of too many cycle/pedestrian accidents due to cyclist arrogance and I think if we have a choice between providing a cycle lane for what is often a commuter or tourist or some much-needed space in a busy area for local residents and local children then I absolutely agree that the residents needs must come first.*

#### Older people

- Age UK, Tavistock Square, WC1H 9NA. No response received.
- Chadswell Healthy Living Centre, Harrison St, WC1H 8JF - running groups and classes for young and older people and Bengali, Chinese and Somali people. No response received.
- Kings Cross Neighbourhood Centre, Argyle St, WC1H 8EF – services and activities for young, older and disabled people in the Bangladeshi, Chinese and Somali communities. No response received.

Four individual responses mentioned potentially negative impacts on older people:

- *Worry about cyclists as they are a larger danger to pedestrians especially to the older and elderly people. Traffic can heard and seen. Cyclists are not. The danger is from being knocked over by cyclists etc.*
- *I am a reasonably mobile 92-year-old but I feel I have to take enormous care in crossing the local streets thanks to the cyclists and cycle lanes. Cycle lanes are not helpful to pedestrians - they encourage cyclists to go faster..... Our experience of the one-way traffic, 2 separate cycle lanes in Tavistock Place is that we now have far more traffic - especially in rush-hours in Judd St and Hunter St. These are vehicles trying to find an alternative route west. (if they come of Grays Inn Road there is nothing to warn them that they can't drive straight on). They wait of course with engines running, increasing pollution in an area already most polluted in London. The suggestion in your Brunswick Square proposals that they would help to reduce traffic congestion*

and improve air quality is way off the mark. So please don't close of Lansdowne Terrace; and also make sure that motor traffic has room to pass another vehicle.

- Reduced traffic flows are good (as long as residents who need to use cars are not seriously inconvenienced by one-way systems -it has already become more difficult to get into the Brunswick carpark in Marchmont St approaching Brunswick Sq from Gray's Inn Rd). Elderly and disabled people in the Brunswick are finding it increasingly difficult to get taxis, as drivers are unwilling to take the circuitous route involved to make a pick-up. Increased numbers of cyclists can be a problem for pedestrians, as they take little notice of them.
- We, the elderly, are more at risk from fast, aggressive cyclists than from motor vehicles. We are also against reducing the parking any further. It is difficult enough as it is (putting in the extra cycle lane on the south sides of Tavistock and Gordon Sq and making it one way is very inconvenient.
- Cars need access from Guilford St via Lansdowne Terrace. Otherwise, all will be funnelled around Russell Square and down Bernard St. Too many cyclists already make it dangerous. They are a greater menace than before. They cannot be seen or heard, a major problem for the elderly. The traffic flow varies and has peak times. Cyclists are always around. Brunswick Park is more than adequate for trees and walking no need for more pavement space.

Two comments were made about the impacts on both young and older people; one positive and one negative:

- We support any proposal which makes things safer for vulnerable users such as people who walk and people who cycle. We want cyclists to include people aged 3 to 103 years old. The Brunswick Centre is a large shopping, entertainment and housing complex and the visitors and residents need their surrounding environment to be safer, and this includes making some streets car free. In addition, we have a shocking health crisis with regard to obesity, and this is preventable. Pollution is also a massive health problem - and anything to reduce motorised transport is welcome.
- My objection to closure of Lansdowne Terrace is it will leave Grenville St as the only southbound traffic access generally and to GOSH, Neurology Hospital and others. This will mean a very significant rise of traffic through Grenville St which includes HGVs, delivery transports and taxis - all of which will add to pollution to residents and pedestrians on Grenville St, especially the elderly and young children. ...GOSH of course treats children often accessed by walking through, and the council properties to the south often have school children and elderly proceeding north through Grenville St. And you know these types of vehicles are more likely to be diesel, which only increases their air pollution capability.

### Disability

The groups below were contacted during the consultation or in preparing this assessment:

- Centre for Accessible Environments, Red Lion Court, EC4A 3EB. No response received.
- Deaf Parenting UK Harmond Centre drop in, c/o Gordon Square, WC1H 0PD. No response received.
- Guide Dogs UK, Melton St NW1 2EJ: **Response:** The proposals will stop guide dog owners from moving around the area confidently. Guide Dogs shares all concerns raised by RNIB.
- Kings Cross Neighbourhood Centre, Argyle St, WC1H 8EF – services and activities for young, older and disabled people in the Bangladeshi, Chinese and Somali communities. No response received.
- MIND in Camden. No response received
- Royal National Institute for the Blind (RNIB). **Response:** RNIB expressed concern about lack of pre-consultation and Equalities Impact Assessment, impact of shared space on blind people. Kerb heights should be a minimum of 60mm where road is raised to the level of pavement, concerned about cyclist compliance and the danger this poses to visually-impaired people. Crossing points are not appropriate, crossing over cycle track is ambiguous and there are bollards in the desire line. Turning circle is hazardous for all users, footway is too narrow outside the Brunswick Centre (1.2m), concerned about continuous pavement at Brunswick Square north and at-grade parking. Council should seek design advice from professional accessibility consultant.
- Royal Association for Deaf People Advice Service, 5 Pancras Square, N1C 4AG. No response received.

- Visually Impaired in Camden (VIC), Somers Town Community Centre, Ossulston St, NW1 1EE. No response received.
- Wheels for Wellbeing, Brixton Road, SW9 7AA. No response received.

Eight comments were also made by wheelchair or mobility scooter users, or other individual respondents with regard to the impact of the scheme on disabled people. With the exception of those mentioned at the beginning of this section, these are set out below.

Positive comment:

*I use a wheelchair, so anything that improves access for the disabled is good in my view. The area is also in need of aesthetic improvements. Your proposals sound very good, I approve.*

Negative comments:

- *As a disabled person I rely on my car to get around, it seems that cyclists are getting preferential treatment over motorists.*
- *The project seems impressive (?) and perhaps useful for some people. Concern is the practical and reasonableness of this project, as we are already experiencing delays, congestion and noise in this area. As a wheelchair user - taxis, ambulances and other transport facilities seem to have been ignored. Where is the consideration to us!!!*
- *There is too much being done to favour cyclists in our area. Lip service paid to pedestrians but no real improvements. There are not enough bikes to warrant all of this - traffic is becoming increasingly congested. ....Access to our home is becoming increasingly hard with these changes (will also be commenting on the Tavistock trial). My husband is visually impaired - it makes access much more difficult and limited. ...Very disruptive. Cabs have to go a long way round as it is - so not very green, having to drive further. Please stop favouring cyclists - it is not the only story going on in London. I know traffic is a problem but cramming it in to ever decreasing street options is not helping.*
- *...Reduced traffic flows are good (as long as residents who need to use cars are not seriously inconvenienced by one-way systems -it has already become more difficult to get into the Brunswick carpark in Marchmont St approaching Brunswick Sq from Gray's Inn Rd). Elderly and disabled people in the Brunswick are finding it increasingly difficult to get taxis, as drivers are unwilling to take the circuitous route involved to make a pick-up. Increased numbers of cyclists can be a problem for pedestrians....,*
- *Partial disability necessitates use of a car. The proposed changes will make negotiating Bloomsbury practically impossible by car. Traffic congestion in the area will be appalling affecting residents and businesses. The scheme is not necessary and will be detrimental.*
- *I am worried about extra traffic flows on Bernard St which would affect me particularly badly with my disabilities and lack of quality sleep in this area.*

Other comments included:

- *I have a physical disability and am a wheelchair user. I would greatly appreciate if the works did not prevent me from accessing the Brunswick via the passageway/street that passes by Coram's Fields Nursery as this is where I do my grocery shopping and is also on the way to my university. Aside from that, I welcome the proposed changes. The passageway that passes Coram's Fields Nursery could also do with better lighting and security than what is currently in the proposed plans. Though this has not been my personal experience, it is my understanding that many other residents who utilize this passageway feel unsafe doing so and have experienced muggings. It is definitely the case that it could be improved with further lighting and possibly security cameras.*
- *Consider removing one large tree on the corner of Bernard St and Brunswick Square to improve pedestrian safety and comfort, in anticipation of increased footfall arriving via the proposed zebra crossing, particularly wheelchair users and parents with buggies.*



### Gender reassignment

- Beaumont Society, Old Gloucester St, WC1N 3XX – offering help and support for the transgender community. No response received.
- LGBT forum Camden. No response received.

### Pregnancy and maternity

- Coram's Fields under 3s and under 5s drop in sessions, Guilford St, WC1N 1DN. No response received.
- Calthorpe Project Children's Facilities, Grays Inn Road, WC1X 8LH. No response received.
- National Childbirth Trust, Euston Square, NW1 2FB. No response received.

### Race

- Camden Chinese Community Centre Youth Club - Tavistock Place. No response received.
- Chadswell Healthy Living Centre, Harrison St, WC1H 8JF – running groups and classes for young and older people and Bangladeshi, Chinese and Somali people. No response received.
- Hopscotch Asian Women's Centre, Hampstead Road, NW1 2PY. No response received.
- Kings Cross Neighbourhood Centre, Argyle St, WC1H 8EF – services and activities for young, older and disabled people in the Bangladeshi, Chinese and Somali communities. No response received.

### Religion or belief

- Camden Faith Communities Partnership, Wakefield St, WC1N 1PG. No response received.
- The Catholic Apostolic Church Trust, Gordon Square, WC1E 7JJ. No response received.
- Forward in Faith, the English Chapel, Gordon Square, WC1H 0AG. No response received.
- Holy Cross Church, Cromer St, WC1H 8JU. No response received.
- Kings Cross Mosque, Cromer St, WC1H 8DU. No response received.
- League of Jewish Women, Albert St, NW1 7NE. No response received.
- Lumen United Reform Church, Tavistock Place, WC1H 9RS. No response received.
- Muslim World League London Office, Goodge St, W1T 4LU. No response received.
- West Central Liberal Synagogue, Maple St, W1T 4BE. No response received.

### Sex

- Hopscotch Asian Women's Centre, Hampstead Road, NW1 2PY. No response received.
- League of Jewish Women, Albert St, NW1 7NE. No response received.
- London West End Women's Institute, Little Russell St, WC1A 2HR. No response received.

Three responses were received from individuals in relation to gender:

- *There have been many instances where young boys have harassed women and other people passing by through the passageway from the School of Pharmacy to William Goodenough House, which passes by the Coram's Field Nursery. There needs to be better lighting in that area and more security...*
- *I consider that the pedestrianisation is unnecessary and as a local resident (and a pedestrian without either a bike or car) I worry that the displacement of traffic is likely to increase congestion and noise in surrounding roads. I also think it's important that if any redevelopment work takes place then the lighting on the north side of Coram's Fields is improved. This alleyway feels unsafe and I've heard about groups of young men making people alone (particularly women, I understand) feel uncomfortable.*
- *Please make the space properly lit as it has long been a place where people, especially women, got mugged.*

### Sexual orientation

- LGBT Forum Camden. No response received.

### Other

- Great Ormond Street Hospital. **Response:** *Great Ormond Street Hospital supports the scheme. The current junction and layout is confusing and illegible. We believe the majority of out-patients, staff and families approach the hospital from the north and will often encounter the Brunswick Square junction. The proposals rectify the current deficiencies in the layout providing clear lines and obvious routes. The proposal improves*

*access and safety for cyclists which is consistent with our travel plans as is the desire to make it easier for people to walk to the hospital. The improved landscaping is an additional benefit.*

### **Information gaps**

Data on protected characteristics was not collected as part of the public consultation in that respondents were not asked to state whether they had any of the protected characteristics, although respondents were asked in the consultation questionnaire Comments section to advise the Council of any disabilities (such as mobility or visual impairments). Some also volunteered information indicating that they had one or more protected characteristics (eg relating to age and gender). In addition, the Census 2011 provides some equality data on resident population in Bloomsbury, King's Cross and Holborn and Covent Garden wards, and information from other reports and studies (eg by Transport for London) has been used to gather data on characteristics including pregnancy, maternity and sexual orientation. There is very limited public data available in relation to gender identity and reassignment.<sup>9</sup>

Although there are, as indicated, gaps in the information available it is considered that the information set out above is sufficient to carry out this Equalities Impact Assessment.

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<sup>9</sup> Office for National Statistics: Gender Identity: An overview of our work  
<https://www.ons.gov.uk/methodology/classificationsandstandards/measuringequality/genderidentity>  
Accessed 12 Jan 2018

### Question 3

Does the proposed decision have an impact (positive or adverse) on our duty to eliminate discrimination/harassment and victimisation, promote equality of opportunity or foster good relations between different groups in the community (those that share characteristics and those that do not)?

#### Positive impacts

The Brunswick Square proposed cycling and walking improvements project supports a more balanced transport network, in which motor traffic, with its significant health and environmental impacts, is less dominant. A key objective is to make transport in Camden safer, more affordable and reliable, and to create a more attractive street environment, in which healthier and more sustainable travel, such as walking and cycling are more attractive. The proposals, if implemented, would have a positive impact on pedestrians, including some users of wheelchairs and mobility scooters, and people who use pushchairs, as well as cyclists, (including those with cycles adapted to disability). The proposed scheme would have a positive impact on the majority of residents in the local area (and in the borough) who do not have access to cars, and who are reliant upon walking, cycling and access to public transport, which this assessment has shown to include women, older people, younger people, and disabled people.

This EIA has identified that there would be the following **positive** impacts on protected groups (particularly for young people, older people, disabled people and people with impaired mobility, women, pregnant women and BME groups).

Additional (zebra) pedestrian crossings on Greville St and Bernard St will make the street easier and safer to cross for all users, particularly people using wheelchairs and mobility scooters. A more pleasant walking environment in the area, with fewer motorised vehicles (and less noise, air pollution and road danger), would contribute to health and well-being for all (in particular women, older people and disabled people, who tend to make a higher proportion of their journeys on foot). An environment improved in this way will encourage people to spend more time in the street and interact with one another, fostering good relationships between protected groups and others.

Great Ormond Street Hospital (GOSH) supports the scheme as it facilitates access by staff, patients and their families.

There is strong evidence from transport studies in the UK and elsewhere that improved cycle facilities, with more space and enhanced safety, encourage protected ethnic groups and women to cycle. There would also be benefits for older people who wish to cycle for reasons including tackling physical inactivity and social isolation, and for people with disabilities, for whom a cycle can be an important mobility aid, as well as a mode of transport. (Wheels for Wellbeing, which works to facilitate cycling by disabled people, has pointed out that some people with disabilities find cycling easier than walking<sup>10</sup>).

Despite the closure between Lansdowne Terrace and Brunswick Square, access by motor vehicles, including taxis and servicing vehicles, would be maintained as part of this proposal.

<sup>10</sup> <https://wheelsforwellbeing.org.uk/campaigning/campaigning-resources/>

The section below outlines the specific benefits for each protected group.

## **Age**

### Age: Younger people

The proposals would have a positive impact on **younger** people by:

- Reducing road danger at source, by calming traffic in the area
- Improving the environment for walking and cycling, thereby encouraging independent mobility. Wider pavements, new trees, seating and better lighting are likely to create an environment more conducive to social interaction among younger people, which can contribute to good mental health.
- Improving east-west and north-south walking routes to school by widening pavements, introducing new zebra crossings, reducing through traffic. This helps to address the impact of severance on pedestrians and the wider community.
- Safer to walk and cycle with children to local facilities, such as Coram's Fields, with reduced traffic dominance, less pollution, noise and a generally more pleasant environment.
- Encouraging active lifestyles in young children by enabling people to walk and cycle.
- Easier to cross the roads with children (due to new crossing facilities eg on Bernard St and Grenville St near the junctions with Brunswick Square)
- Calmer traffic and potentially more considerate drivers as a result.

### **Age: Older people**

The proposals would have a positive impact on older people in that they :

- create a less traffic dominated environment, with lower speeds, less noise and air pollution, enabling and encouraging older people to make more local journeys on foot, by bike and with mobility scooters and wheelchairs.

Improves access to local facilities, such as parks, shops, sports and leisure facilities.

- An improved public realm and better crossing facilities are also likely to make the area more attractive and accessible to older people, offering opportunities for social interaction and physical activity.

## **Disability**

The proposals would have a positive impact on disabled people in that:

- Traffic free/lightly trafficked routes such as Landsdowne Terrace provide essential links and mobility routes for people with disabilities who use cycling for transport, leisure and as a mobility aid.
- A calmer street environment due to reduced through traffic, improved lighting, additional seating, new and improved crossings and wider pavements will increase opportunities to rest in a safe and attractive environment.
- Proposals which improve the environment for pedestrians, such as removing traffic from Landsdowne Terrace where it meets Brunswick Square, will also have benefits for people who use mobility scooters and wheelchairs

## **Pregnancy and maternity**

Camden's Joint Strategic Needs Assessment has commented on the impact of maternal lifestyle on the chance of having a healthy baby, including physical activity and maintaining a healthy weight before and during pregnancy. Creating a less traffic-dominated environment, in which walking and cycling are safer and more attractive, is likely to encourage pregnant women and mothers to undertake healthy physical activity.

## Race

With reference to race as a protected group, the analysis in this EIA shows that the proportion of residents from BME groups living in Bloomsbury and King's Cross is higher than the borough average. It is anticipated that the scheme would have positive impacts. Research by Transport for London shows that BME Londoners are slightly more likely than other groups to cycle. Improvements which make walking and cycling safer and more attractive in this area could benefit BME groups and encourage more people from this protected group to walk and cycle, with associated health and other benefits.

## Negative Impacts

This Equality Impact Assessment recognises there may be some negative impacts on protected groups including young and older people, disabled people, and pregnant women.

Potentially negative impacts (NI) that have been identified by consultees are shown below, followed by the Council officer response and proposed mitigation (where necessary and possible):

- **NI1: *Concerned about congestion, traffic reassignment and journey delays, detrimental to air quality.***

Officer response: By making the area more attractive for walking, cycling and other sustainable forms of transport, the Council seeks to reduce the number of short local journeys undertaken by car. Walking and cycling are very space efficient modes of transport, so a shift to these modes could free limited road capacity for journeys which have to be made by motor vehicle. Proposals to restrain traffic are expected to improve air quality in the Brunswick area, which will benefit older people, younger people and those suffering ill health, in particular. However, if traffic reassigns to other residential streets, there may be some local deterioration in air quality in these streets, which could have a negative impact on these protected groups.

- **NI2: *Concerned about security or anti-social behaviour on Brunswick Square north; pedestrian route between UCL School of Pharmacy and William Goodenough House is dimly lit and a hot-spot for muggings.***

- **Officer response:** Improving the public realm in the Brunswick Square area is likely to increase footfall, thereby reducing the likelihood of antisocial behaviour. However, officers have informed the police and Camden's lighting team of concerns raised during the consultation, with a view to their making improvements.

- **NI3: *Concerned about access, including access to hospitals and businesses, getting taxis and deliveries. Closure of Lansdowne Terrace is not required.***

- **Officer response:** The closure of Lansdowne Terrace is a key aspect of the proposed scheme, which will facilitate public realm improvements and access for sustainable, active transport modes, while reducing the negative impacts of motor traffic on the area. Access to hospitals and businesses by motor vehicle will continue to be permitted, though it is accepted that some journeys may become slightly less direct. Great Ormond Street Hospital has advised the Council that it supports the scheme.

- **NI4: *cyclists are dangerous to pedestrians and should be better managed. Older people and disabled people have trouble seeing and/or hearing them.***

- **Officer response:** To address concerns about perceived danger to pedestrians from cycling, the Council recently commissioned independent research relating to potential conflicts between people on bicycles, pedestrians and those alighting from buses close to cycle lanes. These local studies did not find evidence of increased danger to pedestrians due to the presence of cycling. Further, a large body of statistical evidence shows that motor vehicles pose a far greater danger to pedestrians than people on bicycles (due to factors such as their weight and average speeds). However, Camden Council offers (and actively promotes, via a range of media) free cycle training to anyone who lives, works or studies within the borough, to encourage safe and respectful cycling, including appropriate use of cycle bells. A key benefit of cycling is that it does not contribute to noise pollution. This is clearly a good thing, but it is recognized that it will take time for Londoners to adapt

to interacting with the growing number of cyclists - and quiet electric vehicles - which are using the city's streets. In relation to the comment on visibility, officers will ensure that measures are taken to ensure that cyclists, pedestrians and other road users are able to see each other (eg by ensuring that parked vehicles do not obscure sightlines).

- **N15: noise pollution would worsen on Grenville St due to increased queuing.**

- **Officer response:** As mentioned above, by improving the environment for healthy, active travel, the Council seeks to encourage a shift to walking and cycling, rather than driving, for most local trips. By reducing motor vehicle trips, officers seek to free up limited road capacity for journeys that have to be made by motor vehicle. Reducing the number of vehicles on local streets can also be expected to cut noise pollution from traffic

- **N16: Impacts on visually impaired people in relation to kerb upstands, lack of tactile paving and irregular road layouts.**

- **Officer response:** Where proposals raise the carriageway level it is intended to heighten the awareness of drivers as it indicates they are in a pedestrian area, resulting in slower speeds. There are also significant benefits at crossing points for all users, particularly people with limited mobility and those using wheelchairs, mobility scooters and pushchairs. At crossing points, standard maximum of 5mm kerb upstand will be provided. In all other areas, the interface between the carriageway and the footway will have a 60mm kerb upstand where possible. This is above the minimum height that is considered a trip hazard (20mm) and is detectable by guide dogs and users of white canes. As there are expected to be low volumes of motor traffic and the footway will feature trees and street furniture, officers consider that footway overrun is very unlikely. To further distinguish the interface, standard tactile paving will be used to identify designated crossing points and street furniture/planting will be located so as to direct pedestrians toward appropriate crossing points. Should the scheme be approved then officers will engage with RNIB and Guide Dogs for Blind on the detail design; this has been undertaken with RNIB on the N-S cycle superhighway project.

## Age

### Young people

The potentially negative impacts on young people in particular that have been identified by consultees are:

- **N17: Scheme would create traffic nuisance to big hospitals in the area, including Great Ormond Street Hospital for Children and the National Hospital), which have specialised intensive care units for very sick patients with paediatric or neuro-emergency. Danger of making it difficult for emergency vehicles to get to these hospitals in a hurry.**

- **Officer response:** Interventions which increase opportunities for young people to travel safely, actively and independently are supported by public health organisations, as evidence shows that physical activity has significant health benefits. Local hospitals were consulted on the proposals. Great Ormond Street Hospital supports the Brunswick Square proposals, expressing the view that they would have benefits for patients, staff and families accessing the hospital. Emergency vehicles are exempted from the road closures in emergency situations.

### Older people

Potentially negative impacts on older people in particular that have been identified by consultees include:

- **N18: Worry about cyclists posing danger to pedestrians especially to older people. Traffic can be more easily heard and seen.**

- **Officer comment:** Statistical evidence shows that motor vehicles pose a far greater danger to pedestrians than people on bicycles. Collisions involving motor vehicles are likely to be more serious, as they are heavier and generally travel at higher speeds than cycles. **Proposed mitigation:** Where there is evidence of conflict

between pedestrians and cyclists at specific locations officers will examine whether there is a need to introduce options to improve sightlines, or to introduce physical and/or other measures to encourage people using bicycles to slow down:

- **NI9:** *Need to take care in crossing local streets due to cyclists and cycle lanes. Cycle lanes not helpful to pedestrians - they encourage cyclists to go faster - often very fast. One-way traffic and 2 separate cycle lanes in Tavistock Place has created more traffic - especially in rush-hours in Judd St/Hunter St. Brunswick square proposals will not reduce traffic congestion and improve air quality.* [from "Reasonably mobile" 92 year old.]

- **Officer comment:** A key aim of the scheme is to improve environmental quality. By making the area feel safer and more attractive for walking, cycling and people in wheelchairs and mobility scooters, the objective is to encourage more people to use these modes for short local trips, thereby reducing the negative impacts of motor traffic, including road danger, congestion, noise and air pollution. (Motor vehicles are a major source of local air pollution, while walking and cycling are not). **Proposed mitigation:** A short stretch of cycle lane is proposed between Brunswick Square and Lansdowne Terrace. Where cycle lanes are introduced, they tend to benefit pedestrians as they increase clarity as to how pedestrians, cyclists (and, where applicable, other road users) might best share limited street space. However, officers will monitor use of the cycle lane, and, should unacceptably high cycle speeds, and/or conflicts between pedestrians and cyclists become apparent, physical and/or other measures to slow cyclists will be considered.

The comments below appear in italics as they are relayed verbatim:

- **NI10:** *Reduced traffic flows are good, as long as residents who need to use cars are not seriously inconvenienced by one-way systems. It has already become more difficult to get into the Brunswick carpark in Marchmont St. Elderly and disabled people in the Brunswick are finding it increasingly difficult to get taxis, as drivers are unwilling to take the circuitous route involved to make a pick-up. Increased numbers of cyclists can be a problem for pedestrians.*

- **NI11:** *We, the elderly, are more at risk from fast, aggressive cyclists than from motor vehicles. We are also against reducing parking any further.*

- **NI12:** *Cars need access from Guilford St via Lansdowne Terrace. Otherwise all will be funnelled around Russell Square and down Bernard St. Too many cyclists already make it dangerous. They cannot be seen or heard, a major problem for the elderly.*

- **Officer comment:** Measures to reduce motor vehicle use can introduce inconvenience for some drivers (eg as a result of less direct routes). However, this must be balanced against the need for the Council to address the negative impacts of motor traffic on local people, businesses and others using the streets. Further, measures which encourage a switch from motor vehicle to walking and cycling (which are very space efficient) have the potential to free up limited road capacity for journeys that can only be made by vehicle, such as heavy deliveries and trips made by people with limited mobility.

Statistical evidence shows that motor vehicles pose a far greater danger to pedestrians, including older pedestrians, than people on bicycles. Mistakes, poor behaviour or deliberate flouting of rules occur among all road users, but the consequences are likely to be more serious when motor vehicles are involved, as they are heavier and generally travel at higher speeds than people on bicycles. However, in order to promote safe and considerate cycling the Council offers free cycle training to schools as well as adults who live, work or study in Camden.

It is accepted that bicycles are quieter than motor vehicles, and that it will take time for people to adapt to the growing number of bicycles on London's streets. However, there is also environmental benefit in that journeys made by bicycle do not contribute to noise pollution, which can negatively affect the health and wellbeing of people of all ages and abilities.

**Proposed mitigation:** Where specific locations are raised in terms of conflict between pedestrians and cyclists officers will examine whether there is a need to consider and assess options to improve sightlines, encourage cyclists to slow down, or better show the separation between areas intended for cycling and walking. Officers will continue to promote cycle training to adults and children who live work and study in the borough, and to alert the police to any locations where antisocial behaviour by cyclists or other road users is reported as a problem.

One comment made relates to both younger and older people:

**• NI13: *Closure of Lansdowne Terrace will leave Grenville St as the only southbound traffic access generally and to GOSH, Neurology Hospital. This will mean a significant rise in traffic through Grenville St, including HGVs, delivery transport and taxis - all of which will add to pollution to residents and pedestrians on Grenville St, especially the elderly and young children. GOSH treats children who accessed by walking, and the council properties to the south often have schoolchildren and elderly proceeding north through Grenville St. These types of vehicles [mentioned above] are more likely to be diesel, which increases their air pollution capability.***

**Officer comment:** As explained above, a key aim of the scheme is to improve environmental quality, by making the area feel safer and more attractive for cycling, walking (including people who use wheelchairs and mobility scooters). The objective is to encourage more people to use these modes, thereby reducing the negative impacts of motor traffic (including road danger, congestion, noise and air pollution. Great Ormond Street Hospital was consulted and supports the proposals for Brunswick Square.

#### Disabled people

The potentially negative impacts on disabled people in particular that have been identified include:

- NI14: *As a disabled person I rely on my car to get around. It seems that cyclists are getting preferential treatment over motorists.***
- NI15: *We are already experiencing delays, congestion and noise in this area. As a wheelchair user, taxis, ambulances and other transport facilities seem to have been ignored. Where is the consideration to us!!!***
- NI16: *Too much being done to favour cyclists in our area. Lip service paid to pedestrians. Traffic is becoming increasingly congested. Access to our home is becoming increasingly hard with these changes. My husband is visually impaired. Cabs have to go a long way round as it is - so not very green, having to drive further. I know traffic is a problem but cramming it in to ever decreasing street options is not helping. We don't all love the bike! They get all of this for free whilst the disruption is mighty for the rest of us.***
- NI17: *Elderly and disabled people in the Brunswick are finding it increasingly difficult to get taxis, as drivers are unwilling to take the circuitous route involved to make a pick-up. Increased numbers of cyclists can be a problem for pedestrians.***
- NI18: *Partial disability necessitates use of a car. The proposed changes will make negotiating Bloomsbury practically impossible by car. Traffic congestion in the area will be appalling. The scheme is not necessary and will be detrimental.***

**Officer comment:** The scheme aims to encourage cycling and walking, as well as making it easier for people using wheelchairs and mobility scooters. In addition, it should be noted that some disabled people, including wheelchair users, use cycles for transport, or as mobility aids (for some people it is easier to cycle some journeys than to walk or use their wheelchair). According to Transport for London research, fifteen per cent of disabled Londoners sometimes use a bike to get around London, which is only a slightly smaller proportion than among non-disabled Londoners (where 18 per cent sometimes use a bike in the Capital)<sup>11</sup>.

<sup>11</sup> Travel in London: Understanding our diverse communities (Transport for London, Sept 2015)



The Brunswick Square proposals seek to prevent through traffic using residential or side streets as a short cut, but to permit access for essential local journeys, such as those made by residents, including disabled drivers, businesses and servicing vehicles. Such measures may make some local journeys less direct: facilitating access by motor vehicle and reducing the dominance of motor traffic are potentially conflicting objectives.

- **NI19: I am worried about extra traffic on Bernard St, which would affect me particularly badly with my disabilities, and lack of quality sleep.**

**Officer comment:** As outlined above, the proposed scheme seeks to reduce motor traffic in the area, which, if successful, will lead to a corresponding reduction in the negative impacts of traffic, such as congestion, air and noise pollution. It is difficult to predict how individual drivers will react to the removal of a short cut. Officers recognise that there may be some local rerouting of traffic, at least in the short term, as drivers adapt to the closure of Landsdowne Terrace. Should a decision be made to implement the Brunswick Square scheme, officers will monitor local roads for any unexpected impacts. However, experience of other schemes involving reallocation of road space indicates that some traffic will “evaporate” as drivers switch to other modes (including walking, cycling or public transport), choose alternative routes or decide that their journey is not necessary.

### Sex

The potentially negative impacts on women in particular which have been identified include:

- **NI20: *There have been many instances where young boys have harassed women and other people passing through the passageway from the School of Pharmacy to William Goodenough House, which passes by the Coram's Fields Nursery. There needs to be better lighting in that area and more security.***
- **NI21: *Displacement of traffic is likely to increase congestion and noise in surrounding roads. The lighting on the north side of Coram's Fields [should be] improved. This alleyway feels unsafe and I've heard about groups of young men making people alone (particularly women, feel uncomfortable).***
- **NI33: *Please make the space properly lit as it has long been a place where people, especially women, got mugged.***
- **Officer comment:** Improving the public realm in the Brunswick Square area is likely to increase footfall, thereby reducing the likelihood of antisocial behaviour. However, officers have informed the police and Camden’s lighting team of the concerns mentioned above, with a view to their making improvements.

### Gender reassignment, religion or belief, and sexual orientation

There is no data available to enable analysis of the impacts on the gender reassignment protected group. However, no unlawful discrimination or disproportionately negative impacts are anticipated for this group, or for the protected groups of religion or belief and sexual orientation.

## Question 4

If there is an adverse impact, can it be avoided?

If it can't be avoided, what are we doing to mitigate the impact?

**[You can use this space to capture your reader's attention with a quote from the document or to emphasise a key point.]**

The strategy for measures to mitigate any negative impacts is as follows:

Suggestions made as part of the public consultation have been incorporated into the scheme design. These include:

- Improved lighting along the pedestrian route between UCL School of Pharmacy and William Goodenough House.
- Kerb upstands at raised crossings to facilitate navigation by people with visual impairment.
- Modified tactile paving
- Chamfered kerbs in cycle track with shallow upstand to be provided to prevent cyclists encroaching on footways and minimise pedal strikes with kerbs.
- Bollards droppable if required, to allow access for emergency vehicles and located so as not to obstruct pedestrian desire lines. 'Corduroy' type tactile paving to identify inset parking bays where at-grade parking is proposed to delineate the interface between the edge of the footway and the parking provision to aid those with visual impairments.
- Materials palette will be selected in a way which clearly delineates the footway from the carriageway.
- New provision of single inset pickup/drop-off bay for taxis on the western kerb line of Brunswick Square, outside the eastern entrance to the Brunswick Centre.
- Consider relocation of refuse / recycling facilities to provide clear pedestrian desire lines.
- Ongoing engagement with groups representing people with protected characteristics:
  - Officers are working with the London Ambulance Service and Transport for London to aim to find ways to minimise delays to emergency services through the area. However, areas closed to through traffic as part of the scheme would be accessible by emergency vehicles in emergency situations.
  - Officers are engaging with RNIB on scheme proposals in the area including for Brunswick Square, Judd St and the Torrington Place / Tavistock Place traffic trial. Officers will engage with the RNIB with a view to undertaking an access audit for visually impaired people and other disabled people.
- Should the proposal be taken forward, monitoring will be undertaken to allow for changes to be made in response to identified needs, for example in relation to any potential safety issues.

It is acknowledged that the proposals, if implemented, would have some negative impacts on groups of people with protected characteristics. However, it is the view of officers that the positive impacts of the proposal, together with the proposed mitigation strategy and ongoing engagement with groups representing those with protected characteristics, outweigh the negative impacts and would address most of the issues raised.

The proposed scheme aims to accommodate the needs of all road users, including protected groups, and wherever possible, to do so in line with the Council's Transport Strategy and road user hierarchy, which prioritise walking, cycling and public transport users. Despite the negative impacts discussed in this EIA, the overall benefits that would be delivered by the proposal are significant.

It is considered that this proposal would represent the best balance achievable to meet the various demands of users while also contributing to wider Camden objectives, particularly health objectives related to road danger and deteriorating air quality.

Therefore, overall the project is considered to have a positive impact. However, officers will monitor and review this and other transport schemes for negative impacts and will investigate mitigation measures, where possible and appropriate. Officers will continue to work with local residents, businesses, organisations and other stakeholders in the area to ensure that their needs (and those of their customers, students and members) are catered for, wherever possible, within the agreed objectives and scope of the scheme.

## Question 5

Could any part of the proposed activity discriminate unlawfully?  
Can we advance equality of opportunity via this decision/policy?  
Can we foster good relations via this decision/policy?

**[You can use this space to capture your reader's attention with a quote from the document or to emphasise a key point.]**

The EIA has identified the need to make changes to the proposed scheme to ensure it does not discriminate and that all appropriate opportunities to advance equality and foster good relations have been taken. These changes are included in question 4 of this form.

The proposed scheme would bring significant gains, including for protected groups, such as providing a safer and more attractive street environment, making cycling, walking (and travelling by wheelchair and mobility scooter) safer and more attractive ways to get around. The proposal prioritises the majority of local residents who do not have access to motor vehicles, and who are reliant upon walking, cycling and access to public transport. In these ways, the project will assist in addressing health and access inequalities in the borough. The project seeks to minimise some of the potential impacts, by, for example, maintaining reasonable access by motor vehicle while introducing measures to reduce motor traffic and the associated negative impacts. These environmental improvements will benefit residents of all ages and abilities.

The project has the potential to advance equality and foster good relations between protected groups and other groups in the local community by encouraging sustainable healthy travel amongst a wider variety of groups, including people who share a protected characteristic and people who do not. Reducing the dominance of motor traffic and improvements to the public realm will encourage social interaction between all groups of people.

Overall, the project is considered to have a positive impact, and officers have sought to avoid or mitigate any negative impacts.

EIA prepared by: Charlotte May

Date: 07/06/18

EIA checked by: Michael Smith

Date: 07/06/18

EIA approved by: Simi Shah

Date: 13/6/18

(Relevant Director Sponsor)

### **What to do upon approval**

For organizational change: If your EIA relates to internal staff, please send to your HR Business Adviser.

For all other EIAs: Please upload onto Sharepoint via this link:

<http://teams.lbcamden.net/projects/equality/Pages/Home.aspx>

# Explanatory Notes

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## What is our Public Sector Equality Duty (PSED)?

Under section 149 all public authorities must, in the exercise of their functions, have 'due regard' to the need to:

1. Eliminate discrimination, harassment and victimisation and other conduct prohibited under the Act; EqA 2010 (section 149(1)(a)).
2. To advance equality of opportunity between people who share a relevant protected characteristic and those who don't; This involves having due regard to the need to:
  - o remove or minimise disadvantages suffered by persons who share a relevant protected characteristic that are connected to that characteristic;
  - o take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of persons who do not share it (section 149(4)); and
  - o encourage persons who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.

**Section 149(6)** makes it clear that compliance with the PSED in section 149(1) may involve treating some people more favourably than others, but that is not to be taken as permitting conduct that would otherwise be prohibited by or under the EqA 2010 (this includes breach of an equality clause or rule or breach of a non-discrimination rule (section 149(8))).

### (Section 149(3), EqA 2010.)

3. Foster good relations between people who share a relevant protected characteristic and those who don't (section 149(1)(c)) (which involves having due regard to the need to tackle prejudice and promoting understanding) (section 149(5), EqA 2010)..

**Under the Duty the relevant protected characteristics are: Age, Disability, Gender reassignment, Pregnancy and maternity, Race, Religion, Sex, Sexual orientation.**

- In respect of the first aim only i.e. reducing discrimination, etc. the protected characteristic of marriage and civil partnership is also relevant.
- In meeting the needs of disabled people we have a duty to take account of their disability and make reasonable adjustments to our services and policies where appropriate.
- We must be able to demonstrate that we have considered and had due regard to all three parts of this duty. We must also look for anything that directly or indirectly discriminates.

## What do we mean by “due regard”?

- This is not a question of ticking boxes, but should be at the heart of the decision-making process.
- decision-makers must be made aware of their duty to have due regard – so understand the legal requirements on them;
- There should be an analysis of the data – who is this going to affect and how will it put against the legal requirements
- We need to have thought about these duties both before and during consideration of a particular policy and we need to be able to demonstrate that we have done so
- The Duty is “non-delegable” so it is for the decision maker themselves to consider with assistance from the report and officer analysis. What matters is what he or she took into account and what he or she knew so it is important to have the relevant papers accompanying the report. The report should make explicit reference to the EIA. the duty is continuing so while this guide is aimed at the point of decision we should at appropriate points review our duties against the decision/policy
- The decision maker must assess the risk and extent of any adverse impact and the ways in which such risk may be eliminated before the adoption of a proposed policy or decision has been taken
- Officers reporting to or advising decision makers must not merely tell the decision maker what he/she wants to hear but need to be “rigorous in both enquiring and reporting to them”
- The duty should be reconsidered if new information comes to light

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What is due regard? In my view, it is the regard that is appropriate in all the circumstances. These include on the one hand the importance of the areas of life of the members of the disadvantaged ... group that are affected by the inequality of opportunity and the extent of the inequality; and on the other hand, such countervailing factors as are relevant to the function which the decision-maker is performing”

**Lord Justice Dyson**

”

**We need to take a sensible and proportionate approach to this based on the nature of the decision or policy being reviewed**