

Equality Impact and Outcome Assessment (EIA) Template - 2019

EIAs make services better for everyone and support value for money by getting services right first time.

EIAs enable us to consider all the information about a service, policy or strategy from an equalities perspective and then action plan to get the best outcomes for staff and service-users¹. They analyse how all our work as a council might impact differently on different groups². They help us make good decisions and evidence how we have reached these decisions³.

See end notes for full guidance. Either hover the mouse over the end note link (eg: Age¹³) or use the hyperlinks ('Ctrl' key and left click).

For further support or advice please contact:

- **BHCC: Communities, Equality and Third Sector Team on email: Equalities@Brighton-Hove.gov.uk**
- **CCG: Engagement and Equalities team (Jane Lodge/Debbie Ludlam)**

1. Equality Impact and Outcomes Assessment (EIA) Template

First, consider whether you need to complete an EIA, or if there is another way to evidence assessment of impacts, or that an EIA is not needed⁴.

Title of EIA⁵	Let's Get Moving Brighton & Hove - Physical Activity Strategy	ID No.⁶	HASC54
Team/Department⁷	Healthy Lifestyles Team – Public Health		
Focus of EIA⁸	<p>Brighton & Hove City Council is developing a City Physical Activity Strategy (Let's Get Moving Brighton & Hove) to inform the development of support for people in the city to lead more physically active lifestyles.</p> <p>Low levels of activity are a serious public health issue associated with numerous health conditions including cancer, diabetes, obesity and hypertension. Physical inactivity is responsible for one in six UK deaths (equal to smoking).</p>		

There are significant inequalities between the regular physical activity that is undertaken by different demographic groups, and this can lead to poorer health and wellbeing outcomes and the widening of health inequalities in the population.

The factors that influence a person's individual capability, motivation and opportunity to be physically active in the city are many and complex and require work that must consider the educational experiences, societal relationships, community services, built environments and policy. It is also understood the factors that influence lifestyle behaviour are complex, interrelated and changeable, also difficult to be fully understood at any one time by any organisation or individual.

The Physical Activity Strategy aims to best respond to these challenges by developing work to understand and address influences on physical activity behaviours by adopting a whole system approach that will create opportunity for ongoing community engagement, representation and shared leadership in local plans to reduce inactivity and increase physical activity in the city.

The strategy will outline the approach and principles by which these inequalities will be addressed and identify key policy areas for collective action to guide and inform local work.

The purpose of the Physical Activity Strategy is to:

- Focus resources and effort towards supporting communities who are identified as less active to have the greatest impact on local health outcomes.
- Support a coordinated approach to increasing physical activity, allowing a wide range of partners to pool resources, collaborate and increase impact of local interventions.
- Raise awareness of the contribution of sport and physical activity towards improving the health and wellbeing of local residents, addressing inequality and improving social and economic and environmental outcomes in the city.

2. Update on previous EIA and outcomes of previous actions⁹

What actions did you plan last time? (List them from the previous EIA)	What improved as a result? What outcomes have these actions achieved?	What further actions do you need to take? (add these to the Action plan below)
This is a new EIA for the Let's Get Moving Brighton & Hove Physical Activity Strategy		

3. Review of information, equality analysis and potential actions

Groups to assess	What do you know ¹⁰ ? Summary of data about your service-users and/or staff	What do people tell you ¹¹ ? Summary of service-user and/or staff feedback	What does this mean ¹² ? Impacts identified from data and feedback (actual and potential)	What can you do ¹³ ? All potential actions to: • advance equality of opportunity, • eliminate discrimination, and • foster good relations
Age ¹⁴	<p><u>Local Population:</u></p> <p>Census data (2021) shows that in Brighton and Hove, the population size has increased by 1.4%, from around 273,400 in 2011 to 277,200 in 2021.</p> <p>In Brighton & Hove it is estimated that:</p> <ul style="list-style-type: none"> - 41,600 people (15%) are aged 0 to 15 years old, 	<p>Community feedback through the "Let's Talk Active for Life Consultation"¹ identified the following:</p> <p>Older adults (50+)</p> <ul style="list-style-type: none"> • A need to improve information on what is available in the city for older adults. This should be made available online and in community 	<ul style="list-style-type: none"> • There are people who are currently not meeting recommended guidelines for physical activity across all age groups in the city. Therefore, it is important to ensure local plans support increased physical activity 	<p>See key actions identified in Section 5.</p>

¹ Let's Talk Active for Life - Older People's Survey 2022 and Focus Groups, Brighton & Hove City Council

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	<ul style="list-style-type: none"> - more than two thirds (72%, 200,200 people) are aged 16 to 66 years old, - one in ten (10%, 29,000 people) are aged 67 to 84 years old. - 5,600 people (2%) are aged 85 years or older. <p>Since 2011, the population has got older. There has been an increase in people aged 65 years and over, an increase of 1.7% in people aged 15 to 64 years, and a decrease of in children aged under 15 years.</p> <p>Around 1 in 3 people (33.1%) in the city are aged over 50.</p> <p>Brighton & Hove has a much higher proportion of people aged 19–38 years (33%, 90,100 people) compared to only 24% in the Southeast and 26% in England. Nearly a fifth of Brighton & Hove's</p>	<p>locations as some people may be digitally excluded.</p> <ul style="list-style-type: none"> • Some older people reported a need for more adapted or gentle activities that were suitable for a wider range of ability as they did not feel that activities were suitable. • To address concerns around accessibility and costs of travelling, people were keen opportunities were near to where they live. • Feedback indicated that some older people have become less active since Covid-19 and have less confidence/motivation to restart. • Accessible transport is an important enabler for older 	<p>across all age groups.</p> <ul style="list-style-type: none"> • Due to the potential for physical activity behaviours to be similar between children and young people and parents/care givers, “family” focussed interventions could be an effective way to tackle inactivity across age groups. • It is important to increase understanding of lived experience and the impact of intersectionality for people of different age groups living in the city to inform future action. 	

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	<p>total population (18%, 49,600 people) is aged 19 to 28, compared to only 11% in the South East and 12% in England.</p> <p>Multiple long-term conditions (which can be associated with lower rates of physical activity) become progressively more common with age.¹</p> <p><u>Physical activity by age:</u></p> <p>Data from the Sport England Active Lives Survey² identifies that across all age groups there are people who do not meet the recommended levels of physical activity.</p> <p>The Active Lives Survey indicates that across England, and in Brighton & Hove inequalities exist between the physical activity of adults of different ages.</p>	<p>people seeking to attend local parks / green spaces or community sport and leisure opportunities.</p> <ul style="list-style-type: none"> • Obstructed pavements seen as a barrier to more active travel for people with limited mobility to travel more actively. • Ageism and negative stereotypes can lead to older people being excluded included in promotion of active living and sport opportunities, <p>Children and Young People:</p> <ul style="list-style-type: none"> • School experiences can have a considerable influence on a person's relationship with sport and physical activity. Too 	<ul style="list-style-type: none"> • Promoting positive and inclusive campaigns to share varied ways people can gain benefits of moving more could help challenge ageist attitudes and encourage people with less confidence to try different ways to move more. Promoting relatable role models can help break down negative stereotypes and cultural norms. • Materials created to promote the strategy should 	

¹ Adults with Multiple Long term health conditions Brighton & Hove, Brighton & Hove Joint Strategic Needs Assessment 2018.

² Active Lives Adult Survey, Sport England, Nov 21-22

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	<p>Older adults are typically less active than younger adults. Amongst children and young people data¹ tells us that secondary school aged children are less likely/not as likely to meet recommended levels of physical activity than younger children.</p> <p>Adults:</p> <p>Data from the Office for Health Improvement and Disparities (OHID)² shows that in England significantly fewer adults aged 75-84 (55.3%) and aged 85+ (32.0%) were identified as physically active, compared to the average for all adults (67.3%). Across all other adult 19+ age groups, the proportion of physically active adults was significantly better than the national average. The highest participation was</p>	<p>much focus on competitive sport or technique can be discouraging for some young people.</p> <ul style="list-style-type: none"> • Some young people feel there is a lack of affordable beginner friendly sports opportunities in the community for young people. • Sport and fitness promotion that focuses on body image can have a negative impact on a young people's attitude towards physical activity or contribute to unhealthy behaviours, or discourage young people from participating. • Young people wanted more opportunity to influence the types of 	<p>include a diverse range of age groups.</p> <ul style="list-style-type: none"> • Due to the currently identified inequalities, behavioural insight and population trends in the city, it is important to focus resources towards promoting equity in physical activity participation with a focus on the following age groups: <ul style="list-style-type: none"> • Children and Young people, particularly secondary school age (12-16). 	

¹ Active Lives Children and Young People Survey, Academic Year 21-22

² OHID – Physically Active Adult Indicator – based on Active Lives Adult Survey, Sport England, Nov 21-22

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	<p>amongst adults aged 19-24 (73.0%).</p> <p>Data released by Sport England on Adults aged 16+ in Brighton & Hove identifies similar inequalities¹. Older adults (aged 65-74) are less likely (64.2%) to be identified as active than younger adults (Aged 35-44, 81%), and compared to all adults aged 16+ (71.8%).</p> <p>Across England, this data also shows that inequalities widen as people get older if someone also identifies as</p> <ul style="list-style-type: none"> - Female, or who did not identify as either Male or Female. - Disabled - Black, Asian, Chinese or Other ethnic backgrounds. - Muslim or Hindu <p>Children and Young People</p>	<p>activities they could take part in at school or in their local community.</p> <p>National Sport England insight¹ indicates:</p> <ul style="list-style-type: none"> • Individual attitudes towards physical activity can vary from positive, to neutral to negative intentions to be physically active by people of different age groups. • More physically literate children are more likely to be active into adulthood – if children are confident, competent, knowledgeable and understanding of physical activity they are more likely to participate in physical activity as they get older. • Families, and in particular parents and 	<ul style="list-style-type: none"> • Older adults (55+). - It is important to review and develop and maintain involvement of different age groups and representative stakeholders within local working groups developing associated plans and initiatives. 	

¹ [Children and young people | Sport England](#)

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	<p>Sport England Active Lives data on children and young people's activity levels tells us that less than half (46.6%) of children and young people in Brighton & Hove are active for the recommended 60 minutes per day. This is similar to the average across England (47.2%).</p> <p>Across England, this data indicates that the proportion of children and young people undertaking 60 minutes per day:</p> <ul style="list-style-type: none"> - Infants (Years 1 and 2): 52% - Junior (Years 3 - 6): 43.1% - Secondary (years 7-11) 48.7% <p>Local for Brighton & Hove data taken from the Safe and Well at School Survey¹ indicates that:</p>	<p>caregivers, play a key role in shaping a child's attitudes and behaviours towards physical activity, both positively and negatively. Children and young people are less physically active are more likely to have parents who are less physically active.</p>		

¹ Safe and Well at School Survey, Brighton & Hove City Council, 2021

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	<ul style="list-style-type: none"> - Of primary school pupils aged 8-11 years, under a third (29%) meet the recommendation for at least one hour of physical activity every day. This falls to 23% of 11-14 year olds and to 19% of 14-16 year olds. - Secondary school pupils are statistically significantly less likely to actively travel to school (this includes walking, cycling and by skateboard/scooter). 			
Disability¹⁵	Local population: <ul style="list-style-type: none"> - Census 2021 data indicates that around 1 in 5 (18.7%) of the population are estimated to be disabled as defined by Equality Act 2010. 	People with a disability or long-term health condition in the city were less likely to agree that they felt able to be physically active or that opportunities in the city were easy for them to access. ¹	Disabled people are significantly less likely to be physically active and there should be explicit focus in work to remove barriers and enable the increase of physical activity in the city in this	Please see key actions in section 5.

¹ Let's Talk Active for Life Survey - 2022 Brighton & Hove City Council

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	<ul style="list-style-type: none"> ○ 8.0% of Brighton and Hove residents were identified as being disabled with day-to-day activities limited a lot. This figure decreased from 9.1% in 2011. ○ Around one in nine people (11.5%) in the city identified that their day-to-day activities were limited a little, compared with 10.6% in 2011. ○ The proportion of Brighton and Hove residents who were not disabled increased from 	<p>Community feedback obtained during focus groups and stakeholder engagement events as part of Let's Talk Active for Life 2022 identified the following concerns:</p> <ul style="list-style-type: none"> - Need for information and guidelines to be available in accessible formats, for example Easy Read or British Sign Language. - Need for better public information about the accessibility of the community sport and physical activities and facilities, parks, downland and seafront. This could support people to feel more confident/motivated to visit these spaces/activities. 	<p>group to promote equity in the city.</p> <p>There is a need to collate and improve the level of information about accessibility of different activities, facilities, and spaces in the city for people with different access requirements and ensure that this effectively promoted. It is also important to ensure that this information is provided in formats suitable for people with different access requirements.</p> <p>There are reported gaps in local sport and leisure provision that is suitable for people with specific access requirements (e.g. D/deaf and Neurodiverse).</p> <p>Interventions and future changes to facilities and open spaces should be</p>	

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	<p>80.3% to 80.5% between 2011 and 2021.</p> <ul style="list-style-type: none"> - Residents with a disability under the Equality Act are concentrated in central/ eastern area of the city, particularly in East Brighton, Queens Park, and Hollingbury & Stanmer wards. There are also higher proportions of disabled people in the east in Woodingdean and to the west in Hangleton & Portslade. - Proportionally more households with at least one person with a disability living there are in the city's more deprived neighbourhoods 	<ul style="list-style-type: none"> - Need for improving accessibility of parks and green and blue spaces and the public realm (e.g. cluttered streets). and improving the information provided about the accessibility of public spaces. - Some people felt that language and images used to promote physical activity are not always inclusive of or sensitive towards people who may have mobility impairments. - Improving access to leisure activities across the week is an identified priority in the Brighton & Hove Adult Learning Disability Strategy. 	<p>informed by/co-designed with disabled people and representative groups to ensure these best support people who may have different access requirements.</p> <p>There is a need to developing further insight on local participation rates amongst people with different types of disability in the city and better understand intersectionality, and influences on their activity levels.</p> <p>Physical activity campaigns should ensure that they reflect diversity and promote inclusion of people living with disabilities/long term health conditions - identifying relatable role models, and promoting different ways people can increase physical</p>	

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	<p>(Index of multiple deprivation).</p> <ul style="list-style-type: none"> - In 2020/21 1,703 people were registered at their GP practice as having a learning disability.¹ - 122 people aged 18-64 with a serious visual impairment and 3,294 aged 65 or over with a moderate or severe visual impairment. - 5,841 people aged 18-64, and 16,303 aged 65 or over, with a moderate or severe hearing impairment; and 48 people aged 18-64 and 455 aged 65 or over, with a profound hearing impairment. For 145 residents their main or preferred language 	<p>People with learning disabilities would like:</p> <ul style="list-style-type: none"> ○ more information on the support available to help them be active in the city. ○ information on local opportunities to be sent to individuals / carers more directly, alongside making information generally available online. ○ Community sport and leisure opportunities to offer more inclusive and 	<p>activity, and inclusive opportunities in the city.</p>	

¹ [National General Practice Profiles - Data - OHID \(phe.org.uk\)](https://www.phe.org.uk/data/national-general-practice-profiles)

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	<p>is a sign language. 120 residents use British Sign Language.</p> <ul style="list-style-type: none"> - Multiple long-term conditions become progressively more common with age. Women are identified to have more multiple long-term conditions than men at all ages. ¹ <p>Physical activity participation:</p> <ul style="list-style-type: none"> - In England, there has been an increase in physical activity amongst adults with a disability or long-term health condition from 49,7% in 2015/2016 to 53.1% in 2021/2022. However people who are living 	<p>welcoming environments, opportunities and support to introduce people to facilities and activities.</p> <ul style="list-style-type: none"> - There are limited “Buddy” roles where people offer support to others with low confidence or who have additional support needs. Some stakeholders were keen so see these types of roles increased in the city. - Cluttered streets (weeds/obstructions) can be obstructive for people who may have limited mobility or sensory impairments, and this can prevent or 		

¹ Adults with Multiple Long term health conditions Brighton & Hove, Brighton & Hove Joint Strategic Needs Assessment 2018.

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	<p>with a limiting long term health condition or disability are less likely to be “physically active” (53.1%) compared to people without (72.0%).</p> <ul style="list-style-type: none"> - This inequality gap has narrowed slightly since 2015/2016. - National data also indicates people living with multiple impairments are less likely to be physically active (3 or more in 10 = 39%) - In Brighton & Hove latest Active Lives (Nov 2021/2022) data shows that 53.7% of people living with a disability or long-term health condition (aged 16+) were physically active compared to 77.6% without. This is similar to 2015/2016. 	<p>discourage from using these spaces to travel more actively.</p> <ul style="list-style-type: none"> - Lack of transport and one to one support for young people means that there can be limited to afterschool or school holiday opportunities for people requiring this support to access community activities. - There is demand for more sport and leisure opportunities and weight management support in the city catering for neurodiversity. - Feedback indicated that challenges accessing accessible resources and opportunities have a compounding effect on reducing 		

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	<ul style="list-style-type: none"> - Nationally, people with a disability or long-term health condition are less likely (25.8%) to be a member of a sports club compared to those without (39%). 	<p>motivation and confidence towards being physically active.</p> <p>Research undertaken by Possability People with D/deaf community in Brighton and Hove (2017)¹ identified a lack of inclusive community physical activity opportunities for people who used British Sign Language.</p>		
Gender reassignment¹⁶	<p>Local population:</p> <p>In the Census 2021 around 1% of the population (around 2 300 people) said that they did not identify as their sex assigned at birth, this is higher than the population across in the South East (0.5%) and England (0.5%).</p> <p>The Trans Needs Assessment (October 2015) identifies that a significant</p>	<p>Experience of and fear of transphobia discourage people from accessing local community sport and leisure opportunities.</p> <p>There are some good, targeted community opportunities for (e.g. Trans Can Sport, BLAGSS and LGBTQIA+ targeted activities),</p> <p>Community feedback has highlighted these</p>	<ul style="list-style-type: none"> - There is limited data on physical activity participation in the Trans-Nonbinary and Intersex population in the city. Future research should seek to develop greater insight on participation rates and trends for this population 	Please see key actions in Section 5

¹ [Barriers to active living and healthy eating in the deaf community](#), Possability People (2017)

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	<p>number of trans people do not identify their gender identity in surveys, so true figures may be higher than survey estimates.</p> <p>The Needs Assessment also highlights that data suggests trans people:</p> <ul style="list-style-type: none"> - are represented in all age groups but have a younger age distribution. - live throughout the city, with no concentration in any particular area. - include diverse gender identities, including non-binary identities. - are more likely to have a limiting long-term illness or disability than the overall population. - come from a diverse range of ethnic backgrounds - have diverse sexual orientations 	<p>opportunities are more focussed towards adults and there is a lack of suitable opportunities for younger people within the LGBTQIA+ community.</p> <p>Previously the Brighton & Hove Trans Needs Assessment 2015 identified the following themes/needs:</p> <ul style="list-style-type: none"> • Trans people feel less safe outside in their local area and in the city centre than the general population, especially after dark. • A high proportion of community survey respondents did not go to a gym or participate in organised sports. • Stakeholders felt that sports groups needed to be more aware of trans issues. 	<p>and intersectionality with other protected characteristics.</p> <ul style="list-style-type: none"> - Despite limited data being available, inequalities are identified between trans- and cis-gender populations. There is evidence that Trans people are less likely to be enabled to participate in sport and physical activity and should be prioritised in work to promote equity in physical activity participation. - Due to fears of experiencing transphobia and feeling unsafe in city spaces, 	

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	<ul style="list-style-type: none"> - are more likely to live in private sector rented housing than the overall population <p>Physical activity participation:</p> <p>There is limited information comparing physical activity rates between cisgender and transgender people. Data on comparing transgender and cisgender participation is not currently available through the Sport England Active Lives survey.</p> <p>Studies have indicated that people who are transgender are less physically active¹ or less likely to participate in sport.²</p> <p>The Safe and Well at School Survey 2018 identified that amongst secondary school</p>		<p>working with and through trusted TNBI organisations will be important to engage with people who may feel less confident accessing activities provided by other organisations.</p> <ul style="list-style-type: none"> - There is a need to support providers of sport and leisure opportunities to develop skills, knowledge and develop initiatives that offer more inclusive provision in the city for TNBI community. 	

¹ The Levels and Predictors of Physical Activity Engagement Within the Treatment-Seeking Transgender Population: A Matched Control Study. J Phys Act Health. 2018 Feb

² Sport, physical activity and LGBT report, Pride Sport, 2016

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	<p>aged children in Brighton & Hove pupils who did not or did not always identify as the sex assigned at birth were statistically significantly less likely (15%) to meet recommended guidelines for physical activity compared to those that did (23%).</p> <p>Barriers to participation in sport and exercise for Transgender people that have been identified in studies include inadequate changing facilities, revealing and heavily gendered sport clothing, body dissatisfaction and fears around not being accepted by others.</p>		<ul style="list-style-type: none"> - Campaigns and initiatives developed through the strategy should seek to promote and champion inclusion of TNBI community, celebrating inclusive opportunities in the city. 	
Pregnancy and maternity¹⁷	<p>Local population:</p> <p>Office for National Statistics (ONS) data identifies there were 2 099 live births in Brighton & Hove in 2021. The standardised mean age of mothers was 33.3 years old.</p>	<p>There are Tier 2 weight management services and activities offered through the Active for Life Programme to support activity during the pregnancy and post-natal period.</p> <p>There is opportunity to increase information containing guidance,</p>	<p>Physical activity is known to benefit physical and mental health across the life course including during pregnancy and post-natal periods, however evidence indicates this is a time when people can become less active, particularly those who</p>	<p>See key actions in Section 5.</p>

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	<p>Physical activity participation:</p> <p>Sport England Active Lives Survey (Nov 2021/2022) identifies that in England people who are pregnant or with a child under 1 years old are less likely to be physically active (35.2%) compared to people who do not/are not pregnant (44%).</p> <p>There is not a sufficient sample size to provide insight specifically for Brighton & Hove.</p>	<p>resources and support on staying active through pregnancy and maternity on the council's Healthy Lifestyles webpages.</p> <p>A national report from the Active Pregnancy Foundation (June 2023)¹ identified the following barriers that can lead to a decrease in physical activity during pregnancy and maternity:</p> <ul style="list-style-type: none"> - nausea, fatigue and lack of time - concerns about risks - social pressures from family and friends. <p>The report also identified that a lack of confidence, knowledge and experience of healthcare professionals to support people to remain active or become active through pregnancy and maternity can mean some people are not offered</p>	<p>are pregnant, due to a range of physiological, social and environmental influences.</p> <p>It is important to ensure there is good information and resources on being physically active support available for the public and professionals working with people during pregnancy and postnatal stages.</p> <p>Professionals working with people during pregnancy and postnatal stages should be supported to feel confident providing brief advice and information about staying active and becoming more active.</p>	

¹ [The Active Pregnancy Foundation](#). Overlooked and Underserved: Pregnant and Postnatal women's engagement, Opportunities and resources for physical activity during COVID-19 Lockdowns in the United Kingdom. 2023

Groups to assess	What do you know¹⁰? Summary of data about your service-users and/or staff	What do people tell you¹¹? Summary of service-user and/or staff feedback	What does this mean¹²? Impacts identified from data and feedback (actual and potential)	What can you do¹³? All potential actions to: <ul style="list-style-type: none"> • advance equality of opportunity, • eliminate discrimination, and • foster good relations
		support when interacting with services.		
Race/ethnicity¹⁸ Including migrants, refugees and asylum seekers	<p>Local population:</p> <p>Data from the Census 2021 identifies that in Brighton & Hove there is a lower proportion of the population from Black and Racially Minoritised groups in the city's population compared to England:</p> <ul style="list-style-type: none"> - 4.8% Asian, Asian British or Asian Welsh (England 9.6%) - 2.0% Black, Black British, Black Welsh, Caribbean or African (England 4.2%) - 4.8% Mixed or multiple ethnic groups. (England 3.0%) - 85.4% White (England 81%) - 3.1% Other ethnic groups (England 2.2%) <p>Migrant communities:</p>	<p>In some cultures, the general notion of regular or routine, every-day exercise is not as popular or prevalent as it is in Western cultures or has an association purely with pursuit of fitness for sport.</p> <p>There is a demand for better access to sport and exercise opportunities including access to gym facilities amongst the Gypsy and Traveller community.</p> <p>There is a need for more access to community sport and physical activity opportunities that support cultural differences (e.g. female only activities) or provide spaces where people from different backgrounds feel safer.</p> <p>Racism, and negative stereotypes can make</p>	<p>Data suggests that people from some Black and Racially Minoritised communities (Black, Asian) are less likely to be undertaking the recommended amount of regular physical activity, and that these inequalities may be greatest if these characteristics also intersect with identifying as female, having a limiting long term health condition or disability or a Hindu or Muslim faith.</p> <p>It is important to develop insight to better understand the lived experience and wider influences of physical activity behaviours for people of different ethnic backgrounds living in the city and the</p>	Please see key actions in Section 5.

Groups to assess	What do you know¹⁰? Summary of data about your service-users and/or staff	What do people tell you¹¹? Summary of service-user and/or staff feedback	What does this mean¹²? Impacts identified from data and feedback (actual and potential)	What can you do¹³? All potential actions to: <ul style="list-style-type: none"> • advance equality of opportunity, • eliminate discrimination, and • foster good relations
	<ul style="list-style-type: none"> - The city's international migrant population (19%) is similar to both South East (14%) and England (16%). - 90.9% of people in the city identify their main language is English. 1.0% cannot speak English very well and 0.1% cannot speak English at all. - 5.9% of the population had been living in the UK for less than 5 years, and 2.9% for less than 2 years. - The International Migrants Needs Assessment (2019) identified Refugees, asylum seekers and undocumented migrants are likely to be among the more vulnerable migrant communities in the city. 	<p>people from Black and Racially Minoritized communities feel excluded from sport and physical activities and also from spaces that can support active living (e.g. parks and outdoor spaces).</p> <p>Sport and physical activity can provide an effective forum to support integration of people from diverse backgrounds, refugees and migrants within local communities. There are some good examples of provision in practice within the city (e.g. Brighton City Table Tennis Club).</p>	<p>intersection of this with other characteristics.</p> <p>As current data is limited, there is a need also to increase understanding of physical activity participation by people of different ethnic backgrounds in Brighton & Hove and the intersectionality of ethnic background with other factors and characteristics.</p> <p>It will be important to strengthen links with representative organisations who can offer insight and opportunities to engage effectively with diverse local communities.</p> <p>Interventions to support physical activity behaviour change should consider individual and wider social influences</p>	

Groups to assess	What do you know¹⁰? Summary of data about your service-users and/or staff	What do people tell you¹¹? Summary of service-user and/or staff feedback	What does this mean¹²? Impacts identified from data and feedback (actual and potential)	What can you do¹³? All potential actions to: <ul style="list-style-type: none"> • advance equality of opportunity, • eliminate discrimination, and • foster good relations
	<p>Physical activity participation:</p> <p>Nationally, there are inequalities in physical activity across different ethnic background. Fewer people from Black and Asian backgrounds are identified as physically active compared to the average for England¹.</p> <ul style="list-style-type: none"> - These inequalities have been persistent over time (2015-2023). - Research² has identified evidence of wider inequalities with the intersectionality if people identify with the characteristics: <ul style="list-style-type: none"> o Limiting long term health condition or disability 		<p>including individual and systemic racism that can lead to persistent inequality and disadvantage.</p> <p>It will be important for initiatives to increase physical activity consider the needs people who may be less able to understand spoken or written English.</p> <p>Campaigns developed to promote physical activity should consider diverse cultural motivations and attitudes towards active living and adopt bespoke targeted campaigns when appropriate.</p> <p>Materials produced to support the implementation of the</p>	

¹ Active Lives Adult Survey, Nov 2021-2022, Sport England

² [Sport for All, Sport England \(2020\)](#)

Groups to assess	What do you know¹⁰? Summary of data about your service-users and/or staff	What do people tell you¹¹? Summary of service-user and/or staff feedback	What does this mean¹²? Impacts identified from data and feedback (actual and potential)	What can you do¹³? All potential actions to: <ul style="list-style-type: none"> • advance equality of opportunity, • eliminate discrimination, and • foster good relations
	<ul style="list-style-type: none"> ○ People identifying as female ○ Lower socio-economic status/family affluence ○ Muslim and Hindu faith <p>Due to small sample size, it is not possible to compare Active Lives data for adults in Brighton & Hove across ethnic groups.</p> <p>In Brighton & Hove Health Counts 2012, identified no significant differences between proportion of respondents aged 18+ from White British (25%) and “Black and Minority Ethnic” backgrounds (“BME” 26%).</p> <p>Inequalities between participation rates are identified amongst secondary aged children in the Safe and Well at School Survey 2021. Asian or Asian British pupils were</p>		<p>strategy should reflect the diverse populations in the city. Resources and materials are distributed through representative local groups and networks to help reaching people from diverse ethnic backgrounds including migrants and asylum seekers to support awareness and engagement in local opportunities.</p>	

Groups to assess	What do you know¹⁰? Summary of data about your service-users and/or staff	What do people tell you¹¹? Summary of service-user and/or staff feedback	What does this mean¹²? Impacts identified from data and feedback (actual and potential)	What can you do¹³? All potential actions to: <ul style="list-style-type: none"> • advance equality of opportunity, • eliminate discrimination, and • foster good relations
	<p>statistically significantly less likely (16%) to meet recommended guidelines for physical activity compared to White British pupils (22%).</p> <p>Inequalities amongst Black and Racially Minoritized communities also are present in wider measures of engagement and representation in sport and physical activity with people from these backgrounds also under-represented in attendance at sporting events, sports volunteering and sports governance roles.</p> <p>National research¹ identifies:</p> <ul style="list-style-type: none"> - Experiences of racism meant people from Black and Racially Minoritized communities to feel excluded, and unheard within sport. - Inequalities in sports coaching and 			

¹ [Provision of tackling racism and racial inequality in sport - data gathering and analysis services, Shibli et al, \(2021\)](#)

Groups to assess	What do you know¹⁰? Summary of data about your service-users and/or staff	What do people tell you¹¹? Summary of service-user and/or staff feedback	What does this mean¹²? Impacts identified from data and feedback (actual and potential)	What can you do¹³? All potential actions to: <ul style="list-style-type: none"> • advance equality of opportunity, • eliminate discrimination, and • foster good relations
	leadership roles and can lead to reinforcing negative stereotypes and biased decision making leading to persistent inequalities.			
Religion or belief¹⁹	<p>Local population: Census data (2021) indicates that 55.2% of the population in Brighton & Hove has no religion or belief. This is higher than England (36.7%).</p> <p>Of people with a faith or belief, the two most common in Brighton & Hove are Christian (30.9%) and Muslim (3.1%) faiths. The number of people in those faith groups in the city is lower compared to England (46.3% Christian, Muslim 6.7%)</p> <p>Physical activity participation:</p>	<p>Lack of faith sensitive/ female only facilities and exercise opportunities can cause barriers for groups due to cultural reasons.</p> <p>The importance of access to female only sessions was identified through focus group held with Hangleton & Knoll Multicultural Women’s Group during Let’s Talk Active for Life Consultation 2022.</p>	<p>National data suggests that people of Muslim or Hindu faiths are less likely to be physically active, and that these inequalities widen amongst people also identifying as female.</p> <p>There is a need to improve understanding of physical activity participation by people of different faith groups within the city and how this intersects with other characteristics.</p> <p>Increased access to facilities and exercise opportunities that allow for female only spaces could enable some</p>	Please see section 5 for key actions.

Groups to assess	What do you know¹⁰? Summary of data about your service-users and/or staff	What do people tell you¹¹? Summary of service-user and/or staff feedback	What does this mean¹²? Impacts identified from data and feedback (actual and potential)	What can you do¹³? All potential actions to: <ul style="list-style-type: none"> • advance equality of opportunity, • eliminate discrimination, and • foster good relations
	<p>The Health Counts Survey 2012 did not identify significant differences by populations between adults with a religion and those without a religion in Brighton & Hove.</p> <p>Active Lives Adults survey data for England however shows that people who state they have no religion are more likely to be physically active compared to those that belong to a faith group. People of Hindu and Muslim faith were least likely to be identified as physically active</p> <p>Sport England Active Lives research identifies that:</p> <ul style="list-style-type: none"> - There are differences in the types of sport and physical activity that people of different faiths do. - For some faith groups, there is a larger difference between levels of physical activity 		<p>people who feel currently less able to access community opportunities.</p> <p>It will be important to develop engagement with communities of different faiths to support implementation of the physical activity strategy to better understand lived experiences and influences of different faith groups.</p> <p>This could be supported by increased collaboration and involvement in local strategic working groups by faith-based organisations and the delivery of targeted initiatives.</p>	

Groups to assess	What do you know¹⁰? Summary of data about your service-users and/or staff	What do people tell you¹¹? Summary of service-user and/or staff feedback	What does this mean¹²? Impacts identified from data and feedback (actual and potential)	What can you do¹³? All potential actions to: <ul style="list-style-type: none"> • advance equality of opportunity, • eliminate discrimination, and • foster good relations
	<p>between men and women. This is influenced by certain cultural expectations around what they should wear or how they behave.</p> <ul style="list-style-type: none"> - Patterns in sport participation by faith reflect those seen between different ethnicities, which highlights the closeness of the relationship that exists between faith and ethnicity amongst many groups and communities. <p>It is not possible to compare Active Lives data for people in Brighton & Hove by different faiths due to small sample size.</p>			
Sex/Gender²⁰	<p>Local population:</p> <p>In 2021 Census data estimates there to be 141,000 female (51%) and</p>	<p>Feedback from the Let's Talk Active for Life Survey 2022 indicated that:</p> <ul style="list-style-type: none"> - Lower cost of activities was identified as 	<p>There is a need to develop initiatives to increase physical activity participation amongst women and</p>	<p>Please see key actions in section 5.</p>

Groups to assess	What do you know¹⁰? Summary of data about your service-users and/or staff	What do people tell you¹¹? Summary of service-user and/or staff feedback	What does this mean¹²? Impacts identified from data and feedback (actual and potential)	What can you do¹³? All potential actions to: <ul style="list-style-type: none"> • advance equality of opportunity, • eliminate discrimination, and • foster good relations
	<p>135,400 male (49%) residents in the city.</p> <p>There is a relatively even distribution of males and females across all ages up until the age of 75 years old. Similar to England, beyond the age of 75 years old the proportion of female residents increases. There are an estimated 18,000 residents aged 75 or older, of which 59% (10,500 people) are female and 41% (7,400 people) are male. By the age of 90 or older the difference is more than two to one with 1,500 female (68%) to 700 male (32%) residents.</p> <p>Physical Activity levels:</p> <p>Data indicates that females are less likely to be physically active than males. This inequality in participation is observed from secondary school age (12+) into adult hood.</p>	<p>important across all gender groups, it was more commonly reported by females.</p> <ul style="list-style-type: none"> - Females were also more likely to identify a need for more activities being available closer to where they live. <p>Access to gendered activity sessions is important for some people who prefer to participate in group activities with others of their own gender. Some people responding to the Let's Talk Active For life consultation were seeking more female only exercise opportunities to be available in the city.</p> <p>Negative gender stereotypes can make people of different genders feel excluded from different activities and feel less able to take part in local opportunities.</p>	<p>girls to address currently identified inequalities.</p> <p>It is important to increase and share understanding of the lived experience of women and girls in the city and the factors that influence physical activity behaviour across the life course to inform local action.</p> <p>Materials produced for the strategy and local physical activity campaigns resources should seek to promote positive role models with different gender identities, tackle fear of judgement and avoid imagery that may reinforce negative stereotypes.</p> <p>Developing targeted female or male only activities, could enable some people to participate who currently</p>	

Groups to assess	What do you know¹⁰? Summary of data about your service-users and/or staff	What do people tell you¹¹? Summary of service-user and/or staff feedback	What does this mean¹²? Impacts identified from data and feedback (actual and potential)	What can you do¹³? All potential actions to: <ul style="list-style-type: none"> • advance equality of opportunity, • eliminate discrimination, and • foster good relations
	<p>Safe and Well at School Survey Data 2021: Females (16%), in secondary school age groups were significantly less likely to meet physical activity recommendation compared to males (28%)</p> <p>Adult males in Brighton & Hove were identified in Health Counts Survey (2012) as significantly more likely than females to meet the recommended guidelines for physical activity (27% for males and 22% for females).</p> <p>Sport England Active Lives Adult survey data (2021-22) also identifies females aged 16+ (69.5%) as physically active compared to males (73.4%) in Brighton & Hove, and that fewer females (45.6%) felt they had the ability to be physically active compared to males (55.2%).¹</p>	<p>Campaigns such as “This Girl Can” and high-profile sporting events (e.g. Women’s Euro 2022) can play a positive role in changing cultural attitudes, offering positive role models and support action towards creating more equal access.</p> <p>Binary gender provision of community opportunities can create barriers for people who do not identify as either male or female.</p>	<p>feel excluded or less confident accessing mixed gender opportunities.</p>	

¹ Active Lives Survey Adults, Nov 2021-22, Sport England

Groups to assess	What do you know¹⁰? Summary of data about your service-users and/or staff	What do people tell you¹¹? Summary of service-user and/or staff feedback	What does this mean¹²? Impacts identified from data and feedback (actual and potential)	What can you do¹³? All potential actions to: <ul style="list-style-type: none"> • advance equality of opportunity, • eliminate discrimination, and • foster good relations
	<p>Similar inequalities are also identified for children and young people (under 16), with fewer (35.7%) girls identified as meeting the recommended levels compared to males (55.6%).¹</p> <p>Across Sussex, females aged 16+ (12.3%) are less likely to have volunteered to support sport at least twice in the past 12 months compared to males (15.3%). In Sussex, females aged 16+ who taken part in sport or exercise in past 28 days were also less likely (34.8%) to be members of a sports club than males (38.6%).</p> <p>Active Lives Survey data also indicates that the inequalities in physical activity widen when intersected with other characteristics such as age and ethnic background.</p>			

¹ Active Lives Survey Children and Young People – Academic Year 2021-22, Sport England

Groups to assess	What do you know¹⁰? Summary of data about your service-users and/or staff	What do people tell you¹¹? Summary of service-user and/or staff feedback	What does this mean¹²? Impacts identified from data and feedback (actual and potential)	What can you do¹³? All potential actions to: <ul style="list-style-type: none"> • advance equality of opportunity, • eliminate discrimination, and • foster good relations
	Sport England research identifies that fear of judgement, not enough time and lacking confidence as important influences that stop many females from being as active as they would like. Traditional marketing and values associated with sport can also make some women and girls feel excluded. ¹			
Sexual orientation²¹	<p>Local population:</p> <p>Around one in ten residents in Brighton & Hove identify with a Lesbian, gay, bisexual or Asexual orientation. At least 25,247 residents age 16+ (10.6%) identified as Gay or Lesbian, Bisexual or Other sexual orientation.</p> <p>This proportion is three times higher than seen in the South East (3.1%) and England (3.1%) and the highest proportion seen in</p>	<p>People identifying their sexuality as Lesbian Gay, Bisexual or other were less likely agree they felt able to lead an active lifestyle in the city compared to people who identified as heterosexual (Let's Talk Active for Life Survey 2022).</p> <p>Community feedback from the Let's Talk Active for Life consultation 2022 identified:</p>	<p>There are statistically significant inequalities amongst secondary school aged pupils identifying as LGBTQIA+.</p> <p>There are limited data sources measuring physical activity rates by sexual orientation, therefore it will be important to use local research (e.g. Safe and Well at School Survey and Health Counts) to</p>	See key actions in Section 5.

¹ Go Where Women Are – insight on engaging women and girls in sport - Sport England

Groups to assess	What do you know¹⁰? Summary of data about your service-users and/or staff	What do people tell you¹¹? Summary of service-user and/or staff feedback	What does this mean¹²? Impacts identified from data and feedback (actual and potential)	What can you do¹³? All potential actions to: <ul style="list-style-type: none"> • advance equality of opportunity, • eliminate discrimination, and • foster good relations
	<p>any upper tier authority in England.</p> <p>Physical Activity levels:</p> <p>National data from Sport England Active Lives Adults Survey indicates that people who identify their sexuality as Gay or Lesbian (75.6%), Bisexual (70.2%) are more likely to be active than people identifying as Heterosexual (63.9%) or Other (56.9%).</p> <p>Comparative Active Lives data on activity rates by sexual orientation in Brighton & Hove is not available due to small local sample size.</p> <p>The Health Counts Survey 2012 identified fewer people meeting recommended activity levels amongst Lesbian, Gay, Bisexual, unsure and other groups (22%) compared to Heterosexual (26%), but this</p>	<ul style="list-style-type: none"> - Fear of homophobia can discourage some people from taking part in community activities. - There are some good examples of sports and community organisations offering sport and leisure targeted sports opportunities for LGBTQIA+ community in the city (e.g. BLAGSS, Out to Swim). - Young people attending Allsorts LGBTQIA+ youth groups felt there are not enough specific community sport and physical activity opportunities in the city offered specifically for younger people identifying as LGBTQIA+. 	<p>increase insight and identify impacts of intersectionality with other characteristics.</p> <p>There is a need to develop better access to activities for LGBTQIA+ young people that provide safe welcoming experiences for people who do not feel confident accessing other opportunities.</p> <p>Supporting local activity providers to develop understanding on how to offer welcoming and inclusive opportunities for LGBTQIA+ community in the city, and to increase collaboration with organisations trusted by the LGBTQIA+ community could help increase people's confidence accessing community opportunities.</p>	

Groups to assess	What do you know¹⁰? Summary of data about your service-users and/or staff	What do people tell you¹¹? Summary of service-user and/or staff feedback	What does this mean¹²? Impacts identified from data and feedback (actual and potential)	What can you do¹³? All potential actions to: <ul style="list-style-type: none"> • advance equality of opportunity, • eliminate discrimination, and • foster good relations
	<p>difference was not statistically significant. New data from the Health Counts survey will be available in spring 2024.</p> <p>In Brighton & Hove, pupils in secondary schools who identified as Lesbian, Gay and Bisexual or other (15%) were significantly less likely to meet physical activity recommendations than young people identifying as Heterosexual (25%) (SWASS 2021).</p>		<p>Future engagement activities should seek to increase insight against intersectionality of sexual orientation with other protected characteristics and prioritising less active population groups to gather insight on lived experience to inform local action.</p>	
Marriage and civil partnership²²	<p>Local population:</p> <p>The Census 2021 identifies that amongst the population aged 16+ within Brighton & Hove:</p> <p>45.5% have never married or registered for civil partnership. 36.4% are currently married or in a civil partnership. 2.2% are currently separated but still legally</p>	<p>No feedback identified at time of writing.</p>	<p>There is currently no specific local insight identifying inequalities in physical activity by marriage/civil partnership status.</p> <p>Due to limited studies or local information assessing physical activity by marriage/civil partnership status there may be currently unidentified inequalities.</p>	<p>See prioritised action plan in section 5.</p>

Groups to assess	What do you know¹⁰? Summary of data about your service-users and/or staff	What do people tell you¹¹? Summary of service-user and/or staff feedback	What does this mean¹²? Impacts identified from data and feedback (actual and potential)	What can you do¹³? All potential actions to: <ul style="list-style-type: none"> • advance equality of opportunity, • eliminate discrimination, and • foster good relations
	<p>married on in a civil partnership. 10.2% are divorced or were formerly in a civil partnership. 5.7% are widowed or a surviving partner from a civil partnership.</p> <p>Physical activity participation:</p> <p>Health Counts Survey 2012 did not identify any significant differences in physical activity participation by marriage/civil partnership status.</p> <p>No data was collected as part of engagement work as at the time it was not part of the council's standard equalities questions. We plan to ask this question in future engagement work.</p>			
Community Cohesion²³	No specific data in relation to the Let's Get Moving Strategy.	No known negative impacts on community cohesion in relation to the Let's Get Moving Strategy		No current actions identified.

Groups to assess	What do you know¹⁰? Summary of data about your service-users and/or staff	What do people tell you¹¹? Summary of service-user and/or staff feedback	What does this mean¹²? Impacts identified from data and feedback (actual and potential)	What can you do¹³? All potential actions to: <ul style="list-style-type: none"> • advance equality of opportunity, • eliminate discrimination, and • foster good relations
Other relevant groups²⁴	<p>Local population: The Brighton and Hove Joint Strategic Needs Assessment identifies that:</p> <ul style="list-style-type: none"> • 1 in 12 residents (20,800 people, 7.8%) provide un-paid care (9%). • At the end of March 2022, there were 382 children aged 0-17, 82 per 10,000, living in care in Brighton & Hove (England 70 per 10,000). • 5,600 residents stated on the 2021 Census that they had previously served in the armed forces (2.4% of those aged 16+, England 3.8%). <p>Insight on participation of the following groups is not available from Active Lives Data Sets as it does not</p>	<p>Feedback through the Let's Talk Active for Life consultation indicated that:</p> <ul style="list-style-type: none"> - People who identified as Carers were less likely to agree that local opportunities felt easy to access, and less likely to agree that they felt able to lead a physically active lifestyle, compared to people who did not. - Some stakeholders identified there were few formal sport /physical activity sessions inclusive to people with drug and alcohol addiction. <p>People responding to the Let's Talk Active for Life Adult Survey who lived in most deprived quintile (IMD) were more likely to disagree (31%) when asked if they felt there were lots of</p>	<p>It will be important to develop increased insight on physical activity participation on groups where data on current physical activity behaviour is limited:</p> <ul style="list-style-type: none"> - Care leavers - People with drug and alcohol misuse - Homeless - People experiencing domestic and/or sexual violence. <p>Due to the potential for physical activity to promote and support health and wellbeing it will be important to ensure there are clear and effective pathways to physical activity support and opportunities available in the city and local services supporting vulnerable groups.</p>	<p>See actions in Section 5.</p>

Groups to assess	What do you know¹⁰? Summary of data about your service-users and/or staff	What do people tell you¹¹? Summary of service-user and/or staff feedback	What does this mean¹²? Impacts identified from data and feedback (actual and potential)	What can you do¹³? All potential actions to: <ul style="list-style-type: none"> • advance equality of opportunity, • eliminate discrimination, and • foster good relations
	<p>assess physical activity rates across the following groups:</p> <ul style="list-style-type: none"> - Carers - Care leavers - People with substance misuse - Homeless - Armed forces <p>The Safe and Well at School Survey 2021 identified young carers in of Primary and Secondary school age were less likely to be doing 60 minutes of activity.</p> <p>Areas of deprivation: Brighton & Hove ranks 131st most deprived local authority in England (of 317) according to the 2019 Index of Multiple Deprivation (IMD). Around 50,000 residents live in areas identified within the 20% most deprived areas in England.</p> <p>Sport England Active Lives data identifies that adults</p>	<p>opportunities for them to be active in the city, compared to people living in the least deprived quintile (17.5%).</p>	<p>It will be important to engage with services and staff working with these groups to review existing support ensure there is good awareness of existing support and brief advice and access to resources and information that can support signposting to local services where needed.</p>	

Groups to assess	What do you know¹⁰? Summary of data about your service-users and/or staff	What do people tell you¹¹? Summary of service-user and/or staff feedback	What does this mean¹²? Impacts identified from data and feedback (actual and potential)	What can you do¹³? All potential actions to: <ul style="list-style-type: none"> • advance equality of opportunity, • eliminate discrimination, and • foster good relations
	living areas with higher levels of deprivation are more likely to be inactiv			
Cumulative impact²⁵				

Assessment of overall impacts and any further recommendations²⁶

Overall, the Let's Get Moving Strategy is assessed to have a positive equality impact across all protected characteristics. The Physical Activity Strategy has strategic priorities towards:

- Tackling inequality and promoting equity.
- Promoting inclusion and celebrating diversity.
- Developing interventions informed by the needs of groups who are less active.
- Engagement and co-production of interventions with less active communities.
- Development of resources to improve public information on guidelines in accessible formats.
- Improving access to safe and suitable built environments and facilities that support physical activity.
- Supporting community sport and leisure providers to develop and offer inclusive opportunities.
- Increasing collaboration with local stakeholders who represent and support different communities through the development of a new Let's Get Moving partnership.
- Developing and sharing insight on local participation and opportunities that can support people who are less active to increase their physical activity.

Negative stereotypes and discrimination are identified to lead to negative impact on participation in physical activity for some groups. Work to promote and deliver the Let's Get Moving strategy should ensure sensitive and inclusive messaging, drawing on diverse imagery and promoting positive role models that reflect the diversity of the city and challenge negative stereotypes.

However, there is potential for negative impacts if actions taken to implement the strategy are not informed by the needs of diverse groups in the city or if services and support are not utilised by people who are less active.

Groups to assess	What do you know¹⁰? Summary of data about your service-users and/or staff	What do people tell you¹¹? Summary of service-user and/or staff feedback	What does this mean¹²? Impacts identified from data and feedback (actual and potential)	What can you do¹³? All potential actions to: <ul style="list-style-type: none"> • advance equality of opportunity, • eliminate discrimination, and • foster good relations
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Due to the complex and changeable influences on participation in physical activity the Physical Activity Strategy takes a whole system approach. Working in a complex system means that there may be unforeseen outcomes or changes that can impact groups disproportionately and that these influences can change over time.

Ongoing work to better understand the lived experience of different population groups within the city should be undertaken through the term of the strategy to identify and take action where necessary.

It is important to undertake periodic reviews of this equality impact assessment and associated action plans in light of new insight and include feedback from representative stakeholders throughout the term of the strategy to best promote equity.

4. List detailed data and/or community feedback that informed your EIA

Title (of data, research or engagement)	Date	Gaps in data	Actions to fill these gaps: who else do you need to engage with? (add these to the Action Plan below, with a timeframe)
Let's Talk Active for Life Consultation 2022: <ul style="list-style-type: none"> • Focus groups. • Stakeholder workshop • Community Survey Pop up events.	2022	Small sample size from overall population. Limited engagement from people with sensory needs, neurodiversity, children and young people	Undertake further engagement with local people to leading to co-production of interventions supporting groups identified in local data as less active: <ul style="list-style-type: none"> - Black and Racially Minoritised Communities - Muslim Community - Trans, Non-Binary and Intersex Community - People who are Pregnant and post-natal
Sport and Physical Activity Needs Assessment 2020	2022	Data summary of local need.	
Sport England Active Lives Data	2021	Limited sample size means inequalities between different demographic groups only observable at higher level geographies (regional or national levels)	Review equality impact assessment following results of Health Counts Survey to compare inequalities observed in activity levels between different demographic groups.
Brighton & Hove Joint Strategic Needs Assessment	2022		
Sport England: Spotlight on Older Adults and their relationship with sport and physical activity	2018	National Report - may not reflect local experience	

Brighton & Hove Safe and Well at School Survey	2018	Focuses on level of participation. Doesn't include further information on perceived barriers and enablers for children and young people	Increase understanding of physical activity participation through future Safe and Well at School Survey activities. Develop engagement and co-production of interventions supporting groups identified in local data as less active through the Physical Activity Working Group for Schools.
Community Voices - Health and wellbeing conversations in culturally and ethnically diverse communities (Trust for Developing Communities)	2022		
Priorities within the Learning Disability Community Report by the Carers Centre, PaCC and Amaze,	2019		
Go Where Women Are – insight on engaging women and girls in sport - Sport England		National research	
The Levels and Predictors of Physical Activity Engagement Within the Treatment-Seeking Transgender Population: A Matched Control Study. J. Phys. Act. Health. 2018 Feb	2017	Limited sample size, non-local population.	Develop improved data and insight on participation in physical activity rates amongst TNBI communities. Review findings from next Health Counts Survey on differences in activity levels between different demographic groups and intersectionality

Barriers and facilitators of physical activity and sport participation among young transgender adults who are medically transitioning. (Jones et al.) International Journal of Transgenderism, 18 (2), pp. 227-238.	2018	Limited sample size, non-local population	Ensure interventions are informed by and developed with support and input from local TNBI community.
Brighton & Hove Trans Needs Assessment 2015	2015	Age of publication, information may be outdated.	Plan engagement with the TNBI community in the city on experiences of participation in sport and activity in the city.
Sport England Families Fund – Final Evaluation Report	2022	National report.	

5. Prioritised Action Plan²⁷

Impact identified and group(s) affected	Action planned	Expected outcome	Measure of success	Timeframe
NB: These actions must now be transferred to service or business plans and monitored to ensure they achieve the outcomes identified.				
All Groups	Promote the Let's Get Moving Strategy to representative groups and invite them to join a Let's Get Moving Partnership and attend collaborative events to inform the development of local action plans to deliver the strategy.	<p>Representation of different groups and co-production to ensure plans reflect the needs of different communities and increase insight.</p> <p>Physical activity campaigns reflect diversity and promote inclusion of disabled people/ long-term health conditions - identifying relatable role models and promoting different accessible and inclusive ways people can increase physical activity, and inclusively access opportunities in the city.</p>	Annual review of representation in this work across equality groups.	Partnership developed in year 1 and reviewed throughout out term of strategy.
All Groups	Undertake local research to increase understanding on physical activity participation and intersectionality across different demographic groups and respond to gaps in local Active Lives Data.	<p>Increased understanding of intersectionality.</p> <p>Increased understanding of local inequalities and groups who may be less active.</p>	Completed insight reports published to BHCC website.	<p>Reviews of Health Counts Survey and Safe and Well at School Survey 2024.</p> <p>Ongoing research undertaken in phased approach throughout term of strategy.</p>

All groups Initial focuses TNBI, D/deaf, Muslim/faith groups, Pregnancy, Black and Racially Minoritised Communities (Black and Asian)	Plan and undertake community engagement to widen understanding of the experiences of less active groups to increase physical activity in the city increase local insight and support action planning.	Increased understanding of what can enable different communities to move more. Plans better informed by needs of different groups.	Engagement reports produced and shared with stakeholders.	Phased approach throughout term of strategy.
All groups	Engage with residents and local stakeholders to co-produce initiatives to support identified less active groups, tackle identified barriers and widen access to those with additional access requirements	Increased initiatives supporting fewer active people to participate in physical activity.	Active for Life Programme Reports.	Phased approach throughout term of strategy.
Age, Disability	Develop an information hub and set of resources on physical activity guidelines, support, and local opportunities for people throughout the life course (from pregnancy to older age) available in a range of formats (e.g. Easy Read) to meet the needs of people with access requirements (with specific focus on disabled people (including those who are non-visibly disabled,	Professionals and public can find it easier to access appropriate resources and information that can help them to move more. Actions plans developed with diverse and representative groups will reflect solutions to what we have identified in this EIA as gaps, particularly for disabled people and various protected characteristics.	Creation and use of information hub Resources identified, collated, and shared with relevant services.	Information Hub developed during 2024/25.

	children, young people and people over 55).			
All groups	Work with local representative stakeholders to co-produce, plan and deliver targeted and inclusive physical activity campaigns and communication resources to promote inclusion and engagement of under-represented and less active groups.	Inclusive physical activity campaigns, which encourage and support involvement from less active communities.	Physical activity campaigns delivered.	Annual calendar of campaigns delivered through term of strategy.
Areas of deprivation	Engage with stakeholders to develop directories of local opportunities, providers, facilities, and other local assets supporting active living for different groups in the city. Identify, better understand, and address barriers to engagement with sport and physical activity (intersectionally across all groups).	Greater insight on local sport and physical activity provision across the city and access for different groups. Improved information for public and professionals on local opportunities	Initiatives undertaken to address local need	Phased approach throughout term of strategy.

All groups Initial focuses: TNBI, Neurodiversity, Learning disability.	Collate and develop support for local activity providers to increase knowledge and skills to support inclusion and widen access for groups who are not enabled to be more active, and/or have access requirements.	More inclusive community opportunities. Groups feel safer and more confident accessing local opportunities.	Number of organisations receiving training and support.	Phased approach throughout term of strategy.
All groups	Review equality impact assessment in light of future research and insight. Gather more qualitative data on lived experiences and understanding barriers to engagement with physical activity or activity increasing programmes and initiatives.	Equality impact is understood throughout strategy term.	Updated equality impact assessment published.	Every three years or following new significant insight/research.

EIA sign-off: (for the EIA to be final an email must sent from the relevant people agreeing it or this section must be signed)

Staff member completing Equality Impact Assessment:

Ryan Edwards, Healthy Lifestyles Manager

Date: 12-Feb-24

Directorate Management Team rep or Head of Service/Commissioning:

Kathleen Cumming, Consultant in Public Health

Date: 12-Feb-24

CCG or BHCC Equality lead:

Zofia Danin, Equality, Diversity, and Inclusion (EDI) Officer and Sabah Holmes, EDI Manager **Date:** 21-Feb-24

Guidance end-notes

¹ The following principles, drawn from case law, explain what we must do to fulfil our duties under the Equality Act:

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- **Knowledge:** everyone working for the council must be aware of our equality duties and apply them appropriately in their work.
 - **Timeliness:** the duty applies at the time of considering policy options and/or before a final decision is taken – not afterwards.
 - **Real Consideration:** the duty must be an integral and rigorous part of your decision-making and influence the process.
 - **Sufficient Information:** you must assess what information you have and what is needed to give proper consideration.
 - **No delegation:** the council is responsible for ensuring that any contracted services which provide services on our behalf can comply with the duty, are required in contracts to comply with it, and do comply in practice. It is a duty that cannot be delegated.
 - **Review:** the equality duty is a continuing duty. It applies when a policy is developed/agreed, and when it is implemented/reviewed.
 - **Proper Record Keeping:** to show that we have fulfilled our duties we must keep records of the process and the impacts identified.

NB: Filling out this EIA in itself does not meet the requirements of the equality duty. All the requirements above must be fulfilled or the EIA (and any decision based on it) may be open to challenge. Properly used, an EIA can be a tool to help us comply with our equality duty and as a record that to demonstrate that we have done so.

² Our duties in the Equality Act 2010

As a public sector organisation, we have a legal duty (under the Equality Act 2010) to show that we have identified and considered the impact and potential impact of our activities on all people in relation to their ‘protected characteristics’ (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, sexual orientation, and marriage and civil partnership).

This applies to policies, services (including commissioned services), and our employees. The level of detail of this consideration will depend on what you are assessing, who it might affect, those groups’ vulnerability, and how serious any potential impacts might be. We use this EIA template to complete this process and evidence our consideration.

The following are the duties in the Act. You must give ‘due regard’ (pay conscious attention) to the need to:

- **avoid, reduce or minimise negative impact** (if you identify unlawful discrimination, including victimisation and harassment, you must stop the action and take advice immediately).
- **advance equality of opportunity.** This means the need to:
 - Remove or minimise disadvantages suffered by people due to their protected characteristics
 - Taking steps to meet the needs of people from protected groups where these are different from the needs of other people
 - Encouraging people from protected groups to participate in public life or in other activities where their participation is disproportionately low
 - Consider if there is a need to treat disabled people differently, including more favourable treatment where necessary
- **foster good relations between people who share a protected characteristic and those who do not.** This means:
 - Tackle prejudice
 - Promote understanding

³ EIAs are always proportionate to:

- The size of the service or scope of the policy/strategy
- The resources involved

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- The numbers of people affected
 - The size of the likely impact
 - The vulnerability of the people affected within the context

The greater the impacts, the more thorough and demanding the process required by the Act will be.

4 When to complete an EIA:

- When planning or developing a new service, policy or strategy
- When reviewing an existing service, policy or strategy
- When ending or substantially changing a service, policy or strategy
- When there is an important change in the service, policy or strategy, or in the city (eg: a change in population), or at a national level (eg: a change of legislation)

Assessment of equality impact can be evidenced as part of the process of reviewing or needs assessment or strategy development or consultation or planning. It does not have to be on this template, but must be documented. Wherever possible, build the EIA into your usual planning/review processes.

Do you need to complete an EIA? Consider:

- Is the policy, decision or service likely to be relevant to a specific group or groups (eg: older people)?
- How many people is it likely to affect?
- How significant are its impacts?
- Does it relate to an area where there are known inequalities?
- How vulnerable are the people (potentially) affected?

If there are potential impacts on people but you decide not to complete an EIA it is usually sensible to document why.

5 Title of EIA: This should clearly explain what service / policy / strategy / change you are assessing

6 ID no: The unique reference for this EIA. If in doubt contact your CCG or BHCC equality lead (see page 1)

7 Team/Department: Main team responsible for the policy, practice, service or function being assessed

8 Focus of EIA: A member of the public should have a good understanding of the policy or service and any proposals after reading this section. Please use plain English and write any acronyms in full first time - eg: 'Equality Impact Assessment (EIA)'

This section should explain what you are assessing:

- What are the main aims or purpose of the policy, practice, service or function?
- Who implements, carries out or delivers the policy, practice, service or function? Please state where this is more than one person/team/body and where other organisations deliver under procurement or partnership arrangements.

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- How does it fit with other services?
 - Who is affected by the policy, practice, service or function, or by how it is delivered? Who are the external and internal service-users, groups, or communities?
 - What outcomes do you want to achieve, why and for whom? Eg: what do you want to provide, what changes or improvements, and what should the benefits be?
 - What do existing or previous inspections of the policy, practice, service or function tell you?
 - What is the reason for the proposal or change (financial, service, legal etc)? The Act requires us to make these clear.

⁹ **Previous actions:** If there is no previous EIA or this assessment if of a new service, then simply write 'not applicable'.

¹⁰ **Data:** Make sure you have enough data to inform your EIA.

- What data relevant to the impact on specific groups of the policy/decision/service is available?¹⁰
- What further evidence is needed and how can you get it? (Eg: further research or engagement with the affected groups).
- What do you already know about needs, access and outcomes? Focus on each of the groups identified above in turn. Eg: who uses the service? Who doesn't and why? Are there differences in outcomes? Why?
- Have there been any important demographic changes or trends locally? What might they mean for the service or function?
- Does data/monitoring show that any policies or practices create particular problems or difficulties for any groups?
- Do any equality objectives already exist? What is current performance like against them?
- Is the service having a positive or negative effect on particular people in the community, or particular groups or communities?
- Use local sources of data (eg: JSNA: <http://www.bhconnected.org.uk/content/needs-assessments> and Community Insight: <http://brighton-hove.communityinsight.org/#>) and national ones where they are relevant.

¹¹ **Engagement:** You must engage appropriately with those likely to be affected to fulfil the equality duty.

- What do people tell you about the services?
- Are there patterns or differences in what people from different groups tell you?
- What information or data will you need from communities?
- How should people be consulted? Consider:
 - (a) consult when proposals are still at a formative stage;
 - (b) explain what is proposed and why, to allow intelligent consideration and response;
 - (c) allow enough time for consultation;
 - (d) make sure what people tell you is properly considered in the final decision.
- Try to consult in ways that ensure all perspectives can be considered.
- Identify any gaps in who has been consulted and identify ways to address this.

¹² Your EIA must get to grips fully and properly with actual and potential impacts.

- The equality duty does not stop decisions or changes, but means we must conscientiously and deliberately confront the anticipated impacts on people.

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- Be realistic: don't exaggerate speculative risks and negative impacts.
 - Be detailed and specific so decision-makers have a concrete sense of potential effects. Instead of "the policy is likely to disadvantage older women", say how many or what percentage are likely to be affected, how, and to what extent.
 - Questions to ask when assessing impacts depend on the context. Examples:
 - Are one or more groups affected differently and/or disadvantaged? How, and to what extent?
 - Is there evidence of higher/lower uptake among different groups? Which, and to what extent?
 - If there are likely to be different impacts on different groups, is that consistent with the overall objective?
 - If there is negative differential impact, how can you minimise that while taking into account your overall aims
 - Do the effects amount to unlawful discrimination? If so the plan must be modified.
 - Does the proposal advance equality of opportunity and/or foster good relations? If not, could it?

¹³ Consider all three aims of the Act: removing barriers, and also identifying positive actions we can take.

- Where you have identified impacts you must state what actions will be taken to remove, reduce or avoid any negative impacts and maximise any positive impacts or advance equality of opportunity.
- Be specific and detailed and explain how far these actions are expected to improve the negative impacts.
- If mitigating measures are contemplated, explain clearly what the measures are, and the extent to which they can be expected to reduce / remove the adverse effects identified.
- An EIA which has attempted to airbrush the facts is an EIA that is vulnerable to challenge.

¹⁴ **Age:** People of all ages

¹⁵ **Disability:** A person is disabled if they have a physical or mental impairment which has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities. The definition includes: sensory impairments, impairments with fluctuating or recurring effects, progressive, organ specific, developmental, learning difficulties, mental health conditions and mental illnesses, produced by injury to the body or brain. Persons with cancer, multiple sclerosis or HIV infection are all now deemed to be disabled persons from the point of diagnosis.

¹⁶ **Gender Reassignment:** A transgender person is someone who proposes to, starts or has completed a process to change their gender. A person does not need to be under medical supervision to be protected

¹⁷ **Pregnancy and Maternity:** Protection is during pregnancy and any statutory maternity leave to which the woman is entitled.

¹⁸ **Race/Ethnicity:** This includes ethnic or national origins, colour or nationality, and includes refugees and migrants, and Gypsies and Travellers. Refugees and migrants means people whose intention is to stay in the UK for at least twelve months (excluding visitors, short term students or tourists). This definition includes asylum seekers; voluntary and involuntary migrants; people who are undocumented; and the children of migrants, even if they were born in the UK.

¹⁹ **Religion and Belief:** Religion includes any religion with a clear structure and belief system. Belief means any religious or philosophical belief. The Act also covers lack of religion or belief.

²⁰ **Sex/Gender:** Both men and women are covered under the Act.

²¹ **Sexual Orientation:** The Act protects bisexual, gay, heterosexual and lesbian people

²² **Marriage and Civil Partnership:** Only in relation to due regard to the need to eliminate discrimination.

²³ **Community Cohesion:** What must happen in all communities to enable different groups of people to get on well together.

²⁴ **Other relevant groups:** eg: Carers, people experiencing domestic and/or sexual violence, substance misusers, homeless people, looked after children, ex-armed forces personnel, people on the Autistic spectrum etc

²⁵ **Cumulative Impact:** This is an impact that appears when you consider services or activities together. A change or activity in one area may create an impact somewhere else

²⁶ **Assessment of overall impacts and any further recommendations**

- Make a frank and realistic assessment of the overall extent to which the negative impacts can be reduced or avoided by the mitigating measures. Explain what positive impacts will result from the actions and how you can make the most of these.
- Countervailing considerations: These may include the reasons behind the formulation of the policy, the benefits it is expected to deliver, budget reductions, the need to avert a graver crisis by introducing a policy now and not later, and so on. The weight of these factors in favour of implementing the policy must then be measured against the weight of any evidence as to the potential negative equality impacts of the policy.
- Are there any further recommendations? Is further engagement needed? Is more research or monitoring needed? Does there need to be a change in the proposal itself?

²⁷ **Action Planning:** The Equality Duty is an ongoing duty: policies must be kept under review, continuing to give 'due regard' to the duty. If an assessment of a broad proposal leads to more specific proposals, then further equality assessment and consultation are needed.