Equality Impact Assessment

The Health Protection (Coronavirus) (Restrictions and Requirements) (Local Levels) (Scotland) Regulations 2020

Introduction

1. The COVID-19 pandemic has led to unprecedented calls on the health system as well as policy and financial decisions that have made fundamental changes to everyday life for people in Scotland. While it has been necessary to take these extraordinary measures to respond to the pandemic, in order to protect the right to life and the right to health for Scotland's population, the unequal impact of the pandemic and the need to advance equality, eliminate discrimination and foster good relations (as per our Public Sector Equality Duty), and take an integrated and balanced approach to ensuring the proportionality of the measures taken, have also been at the forefront of consideration of these actions during this emergency situation.

2. The Coronavirus (COVID-19): Framework for Decision-Making and *Scotland's route map through and out of the crisis* ("the Route Map") published earlier this year made clear that COVID-19 is first and foremost a public health crisis, and the measures to combat it have been necessary to save lives. The *Framework for Decision-Making* identified four main categories of harm: **direct health impacts, non-COVID-19 health harms, societal impacts and economic impacts**. These harms are deeply inter-related: health harms impact on society and the economy, just as the societal and economic effects impact on physical and mental health and wellbeing.

3. On Friday 23 October, we published *COVID-19: Scotland's Strategic Framework*. This new framework sets out how we intend to respond to the crisis over the coming period, across the four key harms of the virus. It details how we will work to suppress the virus and sets out our proposal to move to a strategic approach to outbreak management based on five levels of protection, across many aspects of our lives.

4. Some harms will be felt over different time horizons: short, medium and long-term. Some may not be fully understood for many months or even years, such as the long term impacts on mental health and school attainment. However, even in these initial stages, it is clear that impacts have not been felt equally across the population. Consideration of the continued, but differential, impacts at the different levels is therefore critical to the decision making process.

Legislative background

5. The UK Coronavirus Act 2020 received Royal Assent on 25 March 2020. The Scottish Government immediately used powers conferred by that Act to bring forward the Health Protection (Coronavirus) (Restrictions) (Scotland) Regulations 2020 ("the first regulations"), to implement physical distancing and impose restrictions on gatherings, events and operation of business activity. They came into force on Thursday 26 March 2020.

6. The Health Protection (Coronavirus) (Restrictions and Requirements) (Scotland) Regulations 2020 came into force on 14 September 2020 and revoked and replaced the first regulations. They make provision which is substantially similar to the first regulations, as amended at the date on which they were revoked.

7. On 9 October 2020, the Health Protection (Coronavirus) (Restrictions and Requirements) (Additional Temporary Restrictions) Regulations 2020 ("the additional temporary restrictions") set out additional restrictions, both nationally and specific to the central belt. These regulations suspended the effect of the Health Protection (Coronavirus)

(Restrictions and Requirements) (Scotland) Regulations 2020 while the additional temporary restriction regulations were in force. The additional temporary restriction regulations were due to expire on 26 October but were extended by amendment until 6.00 am on 2 November to allow for consultation on the levels-based approach.

8. The Health Protection (Coronavirus) (Restrictions and Requirements) (Local Levels) (Scotland) Regulations 2020 implement the new strategic framework and will be published on 30 October and come into effect at 0600 hours on 2 November 2020. These regulations will revoke the additional temporary restrictions regulations and the Health Protection (Coronavirus) (Restrictions and Requirements) (Scotland) Regulations 2020.

9. Decision-making under the new Strategic Framework system will be more straightforward and transparent. It will build on existing structures and processes and will include engagement with local leadership as decisions to move up and down levels are taken. However, decisions will be made by Ministers, with input from relevant advisers, because implementing levels decisions is the exercise of a statutory power for the protection of public health, for which Ministers are responsible and accountable.

10. As soon as the Scottish Ministers consider that any restriction or requirement is no longer necessary to prevent, protect against, control or provide a public health response to the incidence or spread of infection in Scotland with coronavirus, they must revoke that restriction or requirement. Under the new levels approach, Scottish Government will work closely with local authority leaders when making these decisions.

11. As soon as the Scottish Ministers consider that it is no longer necessary or proportionate for the Level 1 Restrictions, Level 2 Restrictions, Level 3 or Level 4 Restrictions to apply to a specified area, the Scottish Ministers must amend the Regulations so that those restrictions no longer apply to that area.

12. The *Framework for Decision Making* makes clear that the reviews will be informed by assessments of options for relaxation or restriction under their impact on the four harms, their viability, and broader considerations including equality impacts, the impact on individual rights and consideration of measures, for example, for specific geographies and sectors.

13. The Scottish Government considered from the outset whether the lockdown provisions were consistent with the Equality Act 2010 and also considered whether the provisions could constitute indirect discrimination. In many cases, the provisions have applied to all persons irrespective of protected characteristic, although we acknowledge that the same provision may not have equal impacts. Equality Impact Assessments (EQIAs) have been carried out to consider the likely or anticipated impact of the measures contained in the Coronavirus (Scotland) Act 2020 and for the respective legislation thereafter, as mentioned in paragraphs five, six and seven above. Where some possible negative impacts have been identified, the Scottish Government has considered these to be justified as both a necessary and proportionate means of achieving the legitimate aim of protecting the general public from the threats posed by the outbreak of the Coronavirus pandemic and, therefore, the threat to human life in Scotland; and has sought to mitigate disadvantage wherever possible, e.g. developing exemption cards for people whose health or disability makes the wearing of face coverings unsuitable. However, from the beginning, measures were put in place to support people with protected characteristics as they complied with lockdown guidance, such as the £350 million of community funding announced on the 18 March 2020.

14. The impact assessment has identified some potential positive impacts on one or more of the protected characteristics. Reductions in the spread of coronavirus are designed to positively affect the whole population, but will particularly affect the health of those people who are more severely affected by the disease.

15. This includes older people (age), those with underlying health conditions (some disabled people are more likely to experience severe ill-health from contracting COVID-19 than the general population), ethnicity and sex. Early data showed that the COVID-19 virus was more deadly for people with underlying health conditions. Prevalence of some of these health conditions is known to be higher in certain ethnic groups[1], for example Type 2 diabetes is 6 times more likely in people of South Asian descent and over 2 times more likely in African and Afro-Caribbean people[2].

16. As we follow the levels approach, some changes will be delivered through regulations, such as amending regulations to allow for local areas to move in or out of a level. Other measures will be delivered through changes to guidance, such as expectations for employers to support the wellbeing of those who return to work in hospitality settings. However, all measures are given thorough consideration on the basis of their impact, including on equality and human rights[3].

Policy Objectives

17. We published our Strategic Framework and levels table in response to the rising number of COVID-19 cases seen recently in Scotland, and increase in hospital and intensive care unit (ICU) admissions. A paper published on 7 October 2020 sums up the evidence on infection trends, confirmed cases, hospital use and deaths, and how these vary across Scotland and is available at https://www.gov.scot/publications/coronavirus-covid-19-evidence-paper-october-2020/.

18. The framework moves Scotland from the Route Map, which applies countrywide, into something that allows us to flex, on a much more transparent basis, depending on rates of transmission across different areas of the country. However, we recognise that many of the restrictions and requirements in place have a negative impact on some aspects of people's lives, such as increasing loneliness and social isolation, and have potential to deepen inequalities and damage our economy.

19. The hospitality industry is an important employer in Scotland – we estimate that 13,855 business units in the Food and Beverages Services sector in Scotland, employ 155,000 people directly with many more employed in its supply chains[4]. Alongside the UK Government Job Support Schemes, Scottish Government has provided closure grants and hardship payments to help ease the difficulties caused by the necessary restrictions on the hospitality industry. However, we know that what many want is to return to work. Reopening the sector would be positive for the economy and for many people's wellbeing but we must do it in a way that does not increase the health risk for the

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[1]

SAGE:https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/895841/S0483_Ethnicity_and_Covid-19.pdf

[2] https://www.diabetes.co.uk/south-asian/
https://www.diabetes.co.uk/news/2013/jan/those-of-african-caribbean-descent-more-likely-to-have-diabetes-92672091.html

[3] A summary of equality and Fairer Scotland evidence was published for Phase 1 and 2 of the RouteMap. An update for Phase 3 is forthcoming. https://www.gov.scot/publications/equality-fairer-scotland-impact-assessment-evidence-gathered-scotlands-route-map-through-out-crisis/

[4] Business Register and Employment Survey 2018

vulnerable, many of whom are employed in this sector. The Strategic Framework aims to strike a balance between the two, allowing most hospitality venues to open at almost all levels and for the public to enjoy them, while ensuring this happens in a way that is safe and gives the virus limited opportunity to spread.

20. Since the start of the pandemic, we have engaged directly with the hospitality sector on an ongoing basis, as well as trade unions and other relevant bodies, on our response to the virus.

21. Among others, we have worked in partnership with the Scottish Licensed Trade Association, the Scottish Beer and Pub Association, UK Hospitality, the Scottish Hospitality Group, their industry legal advisers and the Scottish Trades Union Congress (STUC), Unite the Union and Prospect. We also established the Scottish Tourism Emergency Response Group (STERG) and have ensured that all guidance has taken account of EHRC protocols.

22. Our engagement with the industry has covered a variety of issues, and has contributed to a number of positive outcomes, including: the easing of restrictions affecting hospitality following the initial lockdown; exemption from two-metre distancing rule for the industry; implementation of additional mitigating measures; detailed sectoral guidance; and a comprehensive support package.

23. The Scottish Government has continued to engage proactively and meaningfully with the hospitality industry throughout the development of the new Strategic Framework, and as we move towards its implementation.

24. Throughout our extensive engagement we have listened to all of the concerns raised by industry representatives, and have worked in partnership with them to mitigate these concerns as far as the public health emergency has made that possible. We are aware that it has not been possible to fully address all of the issues raised, but we have always sought to balance our continued support for the sector with our primary objective of suppressing the virus and saving lives.

25. We invited feedback when we published the Strategic Framework and proposed levels on 23 October and have received written submissions from the Scottish Beer and Pub Association, the Scottish Licensed Trade Association, UK Hospitality, and the Scottish Hospitality Group. These representations acknowledge our efforts to simplify the measures currently in place for the sector, while also highlighting issues of continued concern for their members – in particular the hospitality restrictions proposed for Level 3.

26. The key current asks from the sector include: allowing the consumption of alcohol outdoors and indoors with a main meal; introducing different time restrictions for different levels and changing the 10 pm curfew to a cut off for last entry; allowing business meetings in hospitality settings; enabling flexibility around the definition of outdoor space; and recommencing night-time events in Levels 0 and 1.

27. We welcome the industry's engagement on all the key issues they have raised, as we have throughout the pandemic. We listened to the sector's calls for exemption from the two-metre distancing rule, the implementation of additional mitigating measures, and a significant financial support package, and we acted. We continue to listen to their legitimate concerns and have made amendments to the new levels system to reflect as many of these as it is safe to do so at this time, including enabling pubs and restaurants who have the ability to serve substantial meals to remain open in level 3 (though alcohol must not be sold), allowing alcohol to be served with meals in level 2, and extending opening hours in level 2.

28. We are continuing our constructive engagement with the sector, and are analysing the clinical evidence to determine whether it is possible to allow alcohol to be sold with meals in level 3, as well as continuing our discussions with the sector – in addition to planning, licensing and environmental health colleagues – on options for the definition of 'outdoor space'. We are examining how best to implement different time restrictions across the respective levels.

29. We are continuing to work constructively to address all their requests for further clarity and certainty as we move into the new levels system.

30. The framework will be implemented following a debate and agreement on the strategic approach and the necessary new regulations in the Scottish Parliament on 27 October, and will come into effect from 2 November.

Socialising Measures

31. The Regulations take progressively more restrictive steps, such as limiting the numbers of people that can meet indoors and outdoors. Our aim in doing this is to reduce the chance for the virus to spread, while allowing households the opportunity to socialise.

32. Level 0 allows indoors socialising of 8 people from up to 3 households (with limited exceptions). Outdoor gatherings of 15 people are allowed from up to 5 households.

33. At Level 1 no in-home socialising is allowed (with limited exceptions). Other indoor public places and outdoors, 6 people can socialise from a maximum of 2 households.

34. At Level 2 no in-home socialising is allowed (with limited exceptions). Outdoors and in public places, e.g., hospitality settings, 6 people from a maximum of 2 households can socialise.

35. At Level 3 no in-home socialising is permitted (with limited exceptions). Outdoors and in public places, e.g., hospitality settings, 6 people from a maximum of 2 households can meet.

36. At the strictest level, Level 4, no in-home socialising is permitted (with limited exceptions). Outdoors and in public places, e.g., hospitality settings, 6 people from a maximum of 2 households can socialise.

Hospitality Measures

37. The Regulations take progressively more restrictive steps, such as limiting operating hours, as the levels increase. Our aim in doing this is to reduce the chance for the virus to spread, while allowing households to socialise with one another in hospitality settings, something we know many have been missing.

38. Level 0 is the closest we can get to normality, without a vaccine or effective treatment in place, and will see hospitality settings operate under normal licensing times.

39. At level 1, indoor and outdoor establishments must not admit new customers after 9.30 pm and must close by 10.30 pm. Where a premises is licensed to do so, they can provide food and drink, including alcoholic beverages, for consumption.

40. At level 2, indoor hospitality must close their premises to the public by 8 pm (last entry 7.30 pm) and may only sell alcohol for consumption with a main meal. Where a premises

is licensed to do so, they can provide food and drink, including alcoholic beverages, for consumption outdoors but they must not admit new customers after 9.30 pm and be closed by 10 pm. 'Wet pubs' (defined as pubs without the ability to prepare and serve main meals on the premises) will be mandated to close from level 2 onwards.

41. At level 3, no premises is permitted to serve alcohol indoors or outdoors and must close by 6 pm, with last entry being no later than 5 pm. At level 4, which would see the introduction of measures close to a return to full lockdown, all premises must close. Across the levels takeaways are permitted for alcohol and food.

42. The Regulations require customers to be seated at tables in order to eat or drink and to wear a face mask when not seated. There are also a range of exceptions found in the regulations such as for hospitals, schools, student accommodation, airside premises and hotel room service.

43. Life events such as weddings, civil partnerships, funerals and the associated receptions and wakes can continue in these premises under the corresponding level restrictions for life events detailed in the framework.

44. The Scottish Government's guidance has been updated to reflect these changes and to make other changes for the purpose of implementing proposals in the Strategic Framework. The revised guidance is available at www.gov.scot/collections/coronavirus-covid-19-guidance.

HOSPITALITY MEASURES

These measures are intended to reduce the spread of the virus while acknowledging that Scotland's hospitality industry has been particularly hard-hit by the pandemic because of its customer-facing nature.

Data extracted from the Business Register and Employment Survey from 12 June 2020[5] shows that across Scotland there are 155,000 people working in the hospitality sector, and that in some areas some local authorities (such as Highland and Argyll and Bute) are disproportionately dependent on the hospitality sector.

Re-opening of the hospitality sector has been conditional on supportive scientific and public health evidence and compliance with sector and public health guidance, including physical distancing and suitable hygiene measures. These new restricted measures are also based on this evidence.

Re-opening the sector has been important to the recovery of Scotland's economy. It will have been of benefit to the operators directly, and those employed within it, but also allows for the potential of wider benefits from customer expenditure to begin to be restored. Furthermore, it has had a wider positive impact on socialisation and general wellbeing. Restrictive measures, particularly at the higher levels, could have a negative impact on this progress.

The University of Edinburgh's Business School has assessed that if a second full lockdown occurred, it could see the loss of 90,000 jobs in the hospitality and tourism sector, which equates to 1 in 4 jobs.[6]

Detailed guidance has been published to support hospitality businesses to implement measures to reduce the risk of virus transmission.[7] This included mitigating measures to allow a reduction in physical distancing rules from 2 metres to 1 metre.

Within Scotland there is a relatively high proportion of people working part-time within the hospitality sector. Table 1 below shows that the majority of people working within hospitality work part time. This is particularly pronounced in relation to public houses and bars where over two thirds of employees work part time. The only sub sector of hospitality where there are more full time than part time employees is in relation to hotels and similar accommodation.

Table 1: Employees working in hospitality by employment status

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[5] Business Register and Employment Survey 2018
[6] More than 1 in 4 hospitality businesses in Scotland at risk of going under
https://www.bighospitality.co.uk/Article/2020/0904/More-than-1-in-4-hospitality-businesses-in-Scotland-at-risk-of-going-under-Coronavirus-lockdown
[7] https://www.gov.scot/publications/coronavirus-covid-19-tourism-and-hospitality-sector-guidance/pages/hospitality-statutory-guidance/

Employment Status	Hotels and similar accommodation	Licensed restaurants	Unlicensed restaurants and cafes	Other food service activities	Public houses and bars	Total
Full time employees	25,000	17,000	12,000	5,000	9,000	68,000
Part-time employees	19,000	22,000	17,000	6,000	20,000	84,000
Column Total	44,000	39,000	29,000	11,000	28,000	151,000

Source: Data extracted from the Business Register and Employment Survey from 12 June 2020[8.]

Socio-economic disadvantage	Baseline	People who are socio-economically disadvantaged, including those who may have lost jobs or have seen their incomes reduced during lockdown, may be less able to afford to use many non-essential shops or hospitality businesses. The opening of these in Phase 3 may only have had limited beneficial impact to socio-economically disadvantaged people as customers especially where customers are required to buy a meal in order to buy an alcoholic drink.

Any increase in risk of contracting COVID-19 due to meeting up with others would disproportionately affect people in the most deprived areas. Those living in more deprived areas are more likely to have longstanding illnesses. These new restricted measures should reduce the risk of infection.

Table: 2 Median Weekly Gross Pay (£): Hospitality compared to Scotland

	Median Weekly Gross Pay (2018)
Hotels and similar accommodation	361.6
Restaurants and mobile food services	328
Beverage serving activities	347.7
Scotland	563.2

Source: Annual Survey of Hours and Earnings[9]

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[8] The level of rounding applied varies by estimate. Please see article for further information on how rounding is applied https://www.nomisweb.co.uk/articles/1103.aspx.
[9] Data has been extracted from the Annual Population Survey 2019, and the Annual Survey of Hours and Earnings 2018

| | | | Level 1 | Accommodation and food services make up a substantial part of the tourism sector, throughout which there is a high incidence of low pay.[10] 58% of adult tourism workers earn less than the living wage (an hourly rate set at £8.75 in 2018), compared to 19% overall in Scotland. It is therefore likely that a higher proportion of low income households will be impacted by measures in the hospitality sectors, losing hours, jobs and income. The proportion earning below the living wage is highest for young workers (82%), but remains high across all age ranges (39%-50%), it's also higher for women (63%) than for men (52.5%) and more prevalent across part-time workers (73.2%), than full-time workers (40.4%).[11]

Data from the Annual Population Survey Jan-Dec 2019 shows that people working in the tourism sector when compared to the workforce as a whole are several times more likely to be low skilled. 36.8% work at a low skill level compared to 27.5% at high skill level across the Scottish workforce. This indicates that reducing operating hours or complete closures of the hospitality industry (as is seen in higher levels) could have a disproportionate effect on low-skilled workers or those on minimum wage.

If hospitality is open, but experiencing reduced custom and revenue, then employees and businesses may not be able to access the full support scheme causing increased financial hardship for those on low-incomes/already at an economic disadvantage.

Even where there are minimal restrictions the sector is likely to suffer from lower demand, negatively impacting low skilled and low paid workers. |
| | | | Level 2 | Preventing people meeting in their own homes and therefore limiting social interaction to hospitality settings may disproportionately impact those on low incomes as they will be less able to afford to visit such settings.

Restricting alcohol sales with a requirement to purchase a main meal may result in only those who can afford to do so having the option to attend certain hospitality settings, cutting off the poorer members of society from social settings and increasing the risk of isolation. |
| | | | Level 3 | In higher levels the negative impact on the sector, and the socio-economically disadvantaged people who depend upon it, will inevitably be more severe than in lower levels. |
| | | | Level 4 | In higher levels the negative impact on the sector, and the socio-economically disadvantaged people who depend upon it, will inevitably be more severe than in lower levels. |

[10] Annual Population Survey 2019, and the Annual Survey of Hours and Earnings 2018
[11] Annual Population Survey 2019, and the Annual Survey of Hours and Earnings 2018

Differential impacts	**Age: Children and Younger People**	Baseline	The hospitality sector has a disproportionately young workforce compared to other sectors. 36.7% of the accommodation and food services sector workforce is aged 16-24 compared to 12.3% of the workforce as a whole. Re-opening indoor hospitality is likely to allow more young people to return to work. For young people returning to work, reopening will therefore positively increase their income and mental wellbeing, but could also negatively increase their health risks, potentially raising anxieties about returning to work and infection transmission within households. Younger people may be at particular risk of loneliness during the pandemic. The relaxations earlier in Phase 3 may have reduced younger people feeling as limited in the number of social meetings that they could have had.
		Level 1	Accommodation and food services make up a substantial part of the tourism sector. Data from the Annual Population Survey Jan-Dec 2019 shows that people working in the tourism sector when compared to the workforce as a whole are three times more likely to be in the 16-24 age category and make up 54.7% of Scottish employees. This indicates that reducing operating hours or complete closures of the hospitality industry could have a disproportionate effect on young people. If hospitality is open employees may not be able to access full jobs support schemes, causing increased financial hardship for those on low-incomes/already at an economic disadvantage.
		Level 2	We know that before the pandemic, younger people were more likely than those in older age groups to meet socially with friends, relatives, neighbours or work colleagues at least once a week. These new restrictions will reduce the social engagement for some young people. These measures could have a negative impact for some young people, both in terms of employment and socialising.
		Level 3	As above: reducing operating hours or complete closures of the hospitality industry could have a disproportionate effect on young people as both workers and customers. These negative impacts will increase as the restrictions heighten in the higher levels.
		Level 4	As above: reducing operating hours or complete closures of the hospitality industry could have a disproportionate effect on young people as both workers and customers. These negative impacts will increase as the restrictions heighten in the higher levels.
	Age: Older People	Baseline	Older people may come under increased risk of infection while possibly interacting with others while attending or working at hospitality businesses. However, businesses' compliance with tourism and hospitality guidance should help mitigate this risk, alongside the recently published mitigating measures for reducing physical distancing to 1m.

| | | Level 1 | These temporary restrictions on pubs and bars will provide a reduced risk of infection.

Older people are more likely to live alone, which has potentially significant implications for their wellbeing. Reduced opportunities to meet other people may therefore have a negative impact for older people as they may experience increased isolation.

Older people are more likely to have underlying health conditions, making them more susceptible to the severe negative health effects of COVID-19. The tightening of restrictions should decrease that chance. Figures show that older people are more likely to be adversely affected by the virus.[12]

Accommodation and food services make up a substantial part of the tourism sector. Data from the Annual Population Survey Jan-Dec 2019 shows that 19.6% of those working in the tourism industry are over the age of 50. This means that restrictions or closures could disproportionately impact this relatively older workforce.

If hospitality is open, but experiencing reduced custom and revenue, then employees and businesses may not be able to access the full support scheme causing increased financial hardship for those on low-incomes/already at an economic disadvantage. |
		Level 2	See Level 1. While further restrictions will help protect older people who are more vulnerable to the virus, negative economic and wellbeing impacts will likely increase as the restrictions heighten in the higher levels.
		Level 3	While further restrictions will help protect older people who are more vulnerable to the virus, negative economic and wellbeing impacts will likely increase as the restrictions heighten in the higher levels.
		Level 4	While further restrictions will help protect older people who are more vulnerable to the virus, negative economic and wellbeing impacts will likely increase as the restrictions heighten in the higher levels.
	Sex: Women	Baseline	Women have been affected disproportionately during this pandemic. This is due to structural inequalities in the labour market and more specifically the fact that women tend to be responsible for the majority of childcare which places considerable burdens on them during periods of restrictions. Lone parents, the majority of whom are women, face additional difficulties[13]. School and nursery reopening has reduced this impact.

Before the pandemic, women met socially with friends, relatives, neighbours or colleagues more regularly than men (although we are not |

[12] See Deaths involving COVID-19 and COVID-19 statistical report
[13] Scottish Household Survey, 2018

			clear whether this happened in hospitality settings) and so might be more likely to miss doing so[14]. The increased opportunities for women to meet with others may therefore have helped in decreasing loneliness and may also help to increase access to support networks. Women are more likely than men to work in the accommodation and food sector industry. Women constitute 52.3% of the tourism workforce.[15] This increases the risk of infection for women given the customer-facing nature of many of the roles. Women are the majority of those employed in many 'shut down' sectors, such as Retail trade, except vehicles (60% women), Accommodation (58%) and Food and beverage service activities (53%).[16] If hospitality is open, but experiencing reduced custom and revenue, then employees and businesses may not be able to access the full support scheme causing increased financial hardship for those on low-incomes/already at an economic disadvantage. Women make up a high proportion of this workforce/are more likely to work part-time and more likely to be earner in single-parent households.
		Level 1	With a higher proportion of women employed in the sector, reducing operating hours or complete closures of the hospitality industry could have a disproportionate effect on women. 54.8% of the accommodation and food services workforce are women. Therefore women may be affected more by further restrictions. New measures may negatively impact on women being able to meet socially with friends. Whilst it is recognised that this may have a negative effect, it is considered a proportionate means of fulfilling the legitimate aim of protecting the general public from the threats posed by the outbreak of the Coronavirus pandemic and, therefore, the threat to human life in Scotland. Women are more likely than men to have longstanding illnesses.[17] These new restrictions should reduce the risk of COVID-19 infection.
		Level 2	Negative social and economic impacts on women will inevitably increase as the restrictions heighten in the higher levels.
		Level 3	Negative social and economic impacts on women will inevitably increase as the restrictions heighten in the higher levels.
		Level 4	Negative social and economic impacts on women will inevitably increase as the restrictions heighten in the higher levels.
	Sex: Men	Baseline	Men, including singe men who live alone, may have felt less isolated with the relaxing of restrictions through the Route Map, improving mental wellbeing, but further restrictions may now reduce that with fewer opportunities to meet with other people.

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[14] https://www.gov.scot/publications/scotlands-people-annual-report-results-2018-scottish-household-survey/pages/4/

[15] Annual Population Survey 2019, and the Annual Survey of Hours and Earnings 2018

[16] Scottish Household Survey, 2018 ; Annual Population Survey 2019 ; Sick Pay for All ; Public Health Scotland COVID-19 Statistical Report & Deaths involving coronavirus in Scotland

[17] Women are more likely than men to have longstanding illnesses (Scottish Health Survey 2018)

		Level 1	Negative social impacts will inevitably increase as the restrictions heighten in the higher levels.
		Level 2	Negative social impacts will inevitably increase as the restrictions heighten in the higher levels.
		Level 3	Negative social impacts will inevitably increase as the restrictions heighten in the higher levels.
		Level 4	Negative social impacts will inevitably increase as the restrictions heighten in the higher levels.
	Race	Baseline	The industry sector with the highest proportion of non-UK nationals in the workforce is distribution, hotels and restaurants – 12.7% of its workforce are non-UK nationals. Given the acknowledged increased risks of COVID-19 to Minority Ethnic populations, employers will need to ensure safety and guidance is fully adhered to in order to protect these and all other employees. According to Close The Gap's recent report[18], Black and Minority Ethnic women are more likely to work in a sector that has been shut down; more likely to be in insecure work which puts them at increased risk of loss of hours and earnings; and are concentrated in low-paid service sectors which are more susceptible to redundancies over the course of the crisis. This has the potential to further entrench labour market inequality for Black and Minority Ethnic women who already face multiple barriers to good quality employment. In Scotland's 2011 Census, people describing their ethnicity as one of the 'Asian' categories (columns J to N in the table) were more likely to live in a household with two or more families. Of those living in households, around 1 in 7 (15%) of people describing their ethnicity as Pakistani lived in a household with two or more families. This compared to only 1 in 50 (2%) of the population as a whole. These differences are pertinent in regard to the spread of COVID-19 and highlight particular risks for people from Minority Ethnic groups who are elderly or have pre-existing health conditions. If household members work in customer-facing roles in the hospitality sector they may face higher risk of being exposed to the virus and subsequently bringing its back to their home setting. Around 11% of those working in the Accommodation and Food Services Sector were from Minority Ethnic backgrounds, compared with 4% in the economy overall.[19] Minority Ethnic individuals are overrepresented in the distribution, hotels and restaurant industry, which encompasses food and retail sectors. The reopening of businesses will have an increased risk of transmission and infection for this group. These new restricted measures should reduce the risk of infection.

[18] https://www.closethegap.org.uk/content/resources/Disproportionate-Disruption---The-impact-of-COVID-19-on-womens-labour-market-equality.pdf

[19] ONS, Annual Population Survey, January to December 2019

			The re-opening of the sector will have had beneficial employment impacts for these groups which are disproportionately represented in the hospitality sector. These new restrictions may therefore have a negative impact on the employment terms for these groups, with opening times restricted and enforced closures. The Tourism Recovery Taskforce, including trades union representatives, will consider business and employee support as part of its focus. It will report shortly.
			If hospitality is open, but experiencing reduced custom and revenue, then employees and businesses may not be able to access the full support scheme causing increased financial hardship for those on low-incomes/already at an economic disadvantage. A significant proportion of the sector's workforce are from Minority Ethnic backgrounds.
			Without accessible formats of information or through a lack of access to an interpreter / support worker both customers and workers may find the changes to restrictions more difficult to understand.
		Level 1	Feelings of loneliness are highest in single-occupier households[20] and people of 'Black, Black Scottish or Black British' ethnicity were most likely to be living alone at the time of the last census in 2011[21]. They may be negatively impacted from not being able to meet up as easily with other people due to the tightening of the other socialising measures.

The reduced opportunity to meet households outside of the home and visit external settings will have a negative impact for those living in overcrowded households which may be detrimental to their mental and physical health. Those identifying as 'White: Polish', 'Bangladeshi' or 'African' were the most likely to live in overcrowded households in 2011. |
		Level 2	Negative economic and social impacts will inevitably increase as the restrictions heighten in the higher levels.
		Level 3	Negative economic and social impacts will inevitably increase as the restrictions heighten in the higher levels.
		Level 4	Negative economic and social impacts will inevitably increase as the restrictions heighten in the higher levels.
	Religion or Belief	Baseline	No evidence of a differential impact identified at this time.
		Level 1	No evidence of a differential impact identified at this time.
		Level 2	No evidence of a differential impact identified at this time.
		Level 3	No evidence of a differential impact identified at this time.
		Level 4	No evidence of a differential impact identified at this time.
	Disability	Baseline	The re-opening of the indoor hospitality sector will have allowed greater choice for disabled people with a wider selection of accommodation being opened. This may have a positive impact in terms of accessibility and reducing social isolation and loneliness. The reduced hospitality opportunities may therefore have a negative impact for some disabled people. However, this must be balanced against the need to protect more vulnerable disabled people from the risk of the virus.

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[20] Scottish Household Survey 2018
[21] Census 2011: Detailed Characteristics on Population and Households in Scotland

			26.6% of the accommodation and food services sector workforce have a long-term condition or illness. Employers will need to ensure safety and guidance is fully adhered to in order to protect these and all other employees. Relaxation of restrictions around meeting up with others earlier in Phase 3 could lead to an increased risk of contracting COVID-19. This could disproportionately affect some disabled people. Around 170,000 adults in Scotland have been defined on medical grounds as clinically extremely vulnerable due to having an existing health condition that puts them at very high risk of severe illness from COVID-19. Therefore, measures designed to protect people who are at greater risk from COVID-19 will have a positive effect for disabled people. Disabled people are overrepresented as employees in the distribution, hotels and restaurant industry as a whole (which includes food and retail sectors). Disabled workers may find it more challenging, or not be able to attend work and undertake physical distancing, but the severity of impacts will be dependent on individuals and specific job circumstances. If hospitality is open, but experiencing reduced custom and revenue, then employees and businesses may not be able to access the full support scheme causing increased financial hardship for those on low-incomes/already at an economic disadvantage. Some may not be able to gauge properly the required physical distance between themselves and other members of the public in hospitality settings. This is likely to be a cause of anxiety for many visually impaired people and learning disabled adults and children. A full risk assessment process should be undertaken by individual businesses to mitigate such risks. Without accessible formats of information or through a lack of access to a support worker some people may find the changes to this measure more difficult to understand. Information on both the Scottish Government and Health and Safety Executive websites have a range of accessibility options.
		Level 1	Loneliness was more prevalent among disabled people prior to the pandemic and for many disabled people this has been exacerbated during the lockdown. In 2018, a higher percentage of disabled adults in Scotland (39%) said that they felt lonely some, most, or all of the time in the preceding week compared with all adults (21%) and non-disabled adults (16%). People with mental health issues may be at greater risk of the impacts of social isolation. These measures could therefore negatively impact on disabled people. To reduce feelings of isolation, we have allowed non-licensed hospitality premises and also licensed cafes to remain open to support meetings (in line with other guidance).
		Level 2	Both the negative social and wellbeing impacts and the positive impact

			on the potential to be infected with the virus will increase as we move into the higher levels with more restrictions.
		Level 3	Both the negative social and wellbeing impacts and the positive impact on the potential to be infected with the virus will increase as we move into the higher levels with more restrictions.
		Level 4	Both the negative social and wellbeing impacts and the positive impact on the potential to be infected with the virus will increase as we move into the higher levels with more restrictions.
	Sexual Orientation	Baseline	Inviting LGBTI people into the home may not be an option for people who live in a homophobic environment, so the opportunity for some to meet outside of their household in hospitality settings may be positive.
		Level 1	The opportunity to attend informal social meetings in hospitality settings with a wider range of friends in the earlier part of Phase 3, who could offer support, will have been beneficial for an LGBTI person's mental health. Reduced opportunities to meet other people may have a negative impact. The Scottish Government has provided a package of support to organisations who support LGBTI people across Scotland to help mitigate negative effects.[22]
		Level 2	Further restrictions in higher levels will reduce opportunities for LGBTI people to socialise and subsequently may increase the negative impact on their wellbeing.
		Level 3	Further restrictions in higher levels will reduce opportunities for LGBTI people to socialise and subsequently may increase the negative impact on their wellbeing.
		Level 4	Further restrictions in higher levels will reduce opportunities for LGBTI people to socialise and subsequently may increase the negative impact on their wellbeing.
	Marriage and Civil Partnership	Baseline	No evidence of a differential impact identified at this time.
		Level 1	No evidence of a differential impact identified at this time.
		Level 2	No evidence of a differential impact identified at this time.
		Level 3	No evidence of a differential impact identified at this time.
		Level 4	No evidence of a differential impact identified at this time.
	Pregnancy and Maternity	Baseline	Being able to meet people outside the home in hospitality settings may provide some help to those who are the main carers, especially lone mothers (who account for the majority of lone parents). Allowing households with younger children to meet in hospitality settings will enable mutual support and bonding, improving the mental health of the parents and the children. The opportunity for children aged 11 and under to play with friends without physical distancing may reduce anxiety for those accompanying or supervising them during outdoor meetings. It is recognised that relaxations earlier in Phase 3 were more beneficial than the restrictions that were put in place on 10 September. The opportunity to attend informal social meetings in hospitality settings (for example new Mums meeting for coffee) with a wider range of friends in the earlier part of Phase 3, who could offer support, will have

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[22] https://www.equality-network.org/emergency-funding-for-lgbtq-organisations-and-groups/

			been beneficial for a pregnant woman's mental health. Reduced opportunities to meet other people may have a negative impact especially for lone mothers (who account for the majority of lone parents), although changes with regard to physical distancing for children under 12 years of age may mitigate this. The particular risks for employees who are pregnant should be considered and all relevant workforce guidance adhered to.
		Level 1	Further restrictions in higher levels will reduce opportunities to meet in hospitality settings, potentially negatively impacting pregnant women and new mothers for the reasons outlined in baseline.
		Level 2	Further restrictions in higher levels will reduce opportunities to meet in hospitality settings, potentially negatively impacting pregnant women and new mothers for the reasons outlined in baseline.
		Level 3	Further restrictions in higher levels will reduce opportunities to meet in hospitality settings, potentially negatively impacting pregnant women and new mothers for the reasons outlined in baseline.
		Level 4	Further restrictions in higher levels will reduce opportunities to meet in hospitality settings, potentially negatively impacting pregnant women and new mothers for the reasons outlined in baseline.
	Gender Reassignment	Baseline	The opportunity to attend informal social meetings in hospitality setting with a wider range of friends in the earlier part of Phase 3, who could offer support, will have been beneficial for a trans or transgender person's mental health. Reduced opportunities to meet other people may have a negative impact. The Scottish Government has provided a package of support to organisations who support LGBTI people across Scotland to help mitigate negative effects.[23]
		Level 1	Further restrictions in higher levels will reduce opportunities to meet other people in hospitality settings, potentially causing an increased negative impact.
		Level 2	Further restrictions in higher levels will reduce opportunities to meet other people in hospitality settings, potentially causing an increased negative impact.
		Level 3	Further restrictions in higher levels will reduce opportunities to meet other people in hospitality settings, potentially causing an increased negative impact.
		Level 4	Further restrictions in higher levels will reduce opportunities to meet other people in hospitality settings, potentially causing an increased negative impact.

Stakeholder engagement

Organisations representing hospitality and licensed trade businesses, as well as trade unions and other relevant bodies, have been consulted on the easing of restrictions, exemption from 2 metre distancing rule and additional mitigating measures to be put in place. They have been consulted on detailed guidance, marketing and support measures. These organisations include:

- Scottish Licensed Trade Association
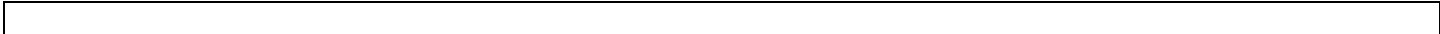- Scottish Beer and Pub Association
- UK Hospitality
- Unite the Union

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[23] https://www.equality-network.org/emergency-funding-for-lgbtq-organisations-and-groups/

- Prospect
- Information Commissioner's Office
- Public Health Scotland

Scottish Government also established the Scottish Tourism Emergency Response Group (STERG) and have ensured that all guidance has taken account of EHRC protocols.

Mitigating actions:	Baseline / all	A range of mitigations have been considered and implemented through comprehensive guidance (including risk assessments for businesses) to minimise the risk to all employees and customers, with specific consideration to those with protected characteristics.
		The comprehensive sector-specific guidance designed in collaboration with the industry sets out a range of mitigations to help protect and support all groups working in and engaging with the hospitality sector. The measures will support groups sharing protected characteristics in relation to the health, economic and wellbeing issues outlined above.
		Measures set out in the guidance designed to facilitate the necessary reduction in physical distancing include:
		• No standing – all customers seated • Face coverings by staff • Clear systems for safe ordering and payments • Clear systems for safe use of toilet facilities, including disabled and baby changing facilities • Use of screens between seating areas • Good ventilation • Good signage and alternative mechanisms in place for those with communication difficulties (including guides or staff on hand to assist) • Measures to reduce noise to avoid the raising of voices • Clear and accessible messaging on need to provide contact details to support Test & Protect • Single household occupancy of visitor accommodation
		We have implemented a comprehensive financial support package for both businesses and employees in the hospitality sector negatively impacted by the ongoing restrictions.
		The new financial support will provide:
		• A grant of £2,000 or £3,000 (depending on rateable value) for businesses required to close by law, payable every four weeks for the duration protective measures are in place
		• A hardship grant of £1,400 or £2100 (depending on rateable value) for businesses that remain open but are specifically required to modify their operations by protective measures, payable every four weeks for the duration measures are in place
		These grants will be provided regardless of level, to eligible businesses, and paid in fortnightly instalments (subject to discussions with local authorities).

		This support is in addition to the Job Support Scheme whereby employees working for businesses legally mandated to shut will receive 67% of their salary paid for by government.

Employees working for businesses affected by restrictions but not fully shut, will also receive support to encourage businesses to keep employees on part time. This would include businesses limited to certain opening times or table service, and businesses adversely impacted by social distancing rules. The employee will receive 73% of their normal salary, but must work a minimum of 20% of their normal hours. The employer must pay for that 20% (as the employee is working), plus 5% of salary costs for the time not worked, plus national insurance and pension contributions.

These support measures are designed to support both businesses and employees across all of the levels, with particular consideration given to the often enhanced negative economic impacts of restrictions on those with protected characteristics.

We have also provided bespoke support packages to a number of organisations, such as LGBTI groups, to help mitigate some of the specific potential harms they face around loneliness and wellbeing.

We are committed to ensuring that all of our decisions are made on the basis of the best available evidence, and will therefore continue to work with the sector on proposed additional mitigations, and keep the current measures within each of the levels under review.

For example, we will explore proposals for innovations to raise compliance amongst operators and customers, such as industry standards, staff training and sharing of best practice. We continue to discuss flexibility around the definition of outdoor space in order to facilitate more distanced sociability, as well as important issues relating to guidance and customer information.

While we are aware that it has not been possible to fully address all of the issues raised by the sector, we have always sought to balance our continued support for the sector with our primary objective of suppressing the virus and saving lives. Business support continues to be a central issue during the period of disruption. |
| | Level 1 | Stakeholders highlighted the benefits of a 'last entry' and 'closed' time, as opposed to setting a last orders/closure time etc. They proposed that, from a health perspective, using a last entry is preferable to a hard close because it enables exits to take place in a more staggered way, thus avoiding any crowding of exit points where people will come into greater proximity and potentially gathering on the street.

It was agreed that a later closing could both reduce interactions and have the desired impact on the reproduction (or 'R') rate. It was therefore determined that, in line with clinical advice, levels 0 and 1 will have the closing time of 22:30. |
| | Level 2 | Discussions with stakeholders highlighted that the option of allowing a modest amount of alcohol to be served with food should be considered. |

		Further mitigating measures, such as implementing the stadia drink limitations model or introducing time slots for sales to reduce the alcohol consumed, were suggested. Discussions with stakeholders highlighted that by enabling businesses to provide a dinner service rather than being limited solely to lunch, with closing times moving to 20.00 rather than 18.00, it would be possible to maintain some kind of night-time economy and therefore greater economic activity. Offering a dinner service could also potentially mitigate some of the risk of displacement of socialising into household settings, thereby supporting wider adherence to the restrictions. It could also provide an opportunity for people who might be unable to meet up during the day due to work or childcare commitments to socialise, further reducing the risk of enforced isolation. Stakeholder discussions also indicated that it would be more advantageous to 'wet pubs' (that is, pubs without the ability to prepare and serve main meals on the premises) to close in law from level 2 onwards because of the viability issues they see for businesses and the potential for it to lead to job losses and higher unemployment. Closure at this level allows wet pub hospitality venues and their employees to draw on support for closed businesses, namely the Job Support Scheme – Closed from the UK Government and support grants from Scottish Government, which should help mitigate the economic impacts we know result from increased restrictions.
	Level 3	Following engagement with the sector, it was agreed that elements of the hospitality industry that had been previously forced to close would now be able to reopen in level 3, albeit without the sales of alcohol. Due to more extensive restrictions in Level 3, it is envisaged that more businesses and employees would be able to access the financial support package we have set out in order to mitigate the negative financial impacts as far as possible.
	Level 4	Due to the significant restrictions and closures in Level 4, it is envisaged that at this stage the majority of businesses and employees would be able to access the highest levels of the financial support package we have set out in order to mitigate the negative financial impacts as far as possible.

SOCIALISING MEASURES

In completing this assessment we are mindful of the three needs of the Public Sector Equality Duty (PSED): to eliminate unlawful discrimination, advance equality of opportunity, and foster good relations between people who share a protected characteristic and those who do not. The impact assessment identifies where measures may positively impact on one or more of the protected characteristics[24], and also recognises that the introduction of the measures may have a disproportionate negative impact on one or more of the protected characteristics. Where any negative impacts are identified, we have sought to mitigate/eliminate these. We are also mindful that the equality duty is not just about negating or mitigating negative impacts, as we also have a positive duty to promote equality. We have sought to do this through support and guidance available.

COVID-19 virus transmission occurs primarily though close contact between individuals. Evidence continues to indicate that the virus can be transmitted by respiratory droplets and aerosols and direct contact with surfaces contaminated with virus. Close-range transmission is likely to be the most significant and is strongly associated with proximity and duration of contact in indoor environments. A range of social and residential settings have been associated with transmission, which includes crowded indoor settings.[25] A variety of interventions to combat the transmission of the virus have been adopted across the UK.[26] Limiting socialisation, particularly indoors, is one of the main interventions adopted to limit the number of individuals meeting up to reduce the risk of transmission.

While the Scottish Government is of the view that restrictions on socialising are currently justified and a proportionate means of helping to achieve the legitimate aim of reducing the public health risks posed by coronavirus, thereby safeguarding the right to life, it is also recognised that these measures are only required to respond to the current set of circumstances, and are only necessary as long as the potential public health benefits can justify any negative impacts caused. The Regulations therefore require the Scottish Ministers to review the measures imposed by the Regulations at least once every 21 days and must terminate any restriction or requirement as soon as it is no longer necessary to prevent, protect against, control or provide a public health response to the incidence or spread of coronavirus in Scotland.

Impact: These measures are intended to reduce the impact of the virus spreading while enabling households and people to still meet, to maintain essential social networks.

The measures allow people to connect, with variable restrictions, to groups of family and friends. They may be of particular benefit to mental health and wellbeing, allowing some social activities.

The measures represent a restriction to normal life, although not as impactful as the Lockdown phase.

Physical distancing requirements still apply.

For some people the tighter limits in these measures may decrease anxiety and pressure to meet

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[24] Section 4 of the Equality Act 2010
[25] https://www.gov.uk/government/publications/transmission-of-sars-cov-2-and-mitigating-measures-update-4-june-2020
[26] https://www.gov.uk/government/publications/summary-of-the-effectiveness-and-harms-of-different-non-pharmaceutical-interventions-16-september-2020

up with friends and families when they would rather stay at home. At the same time, the limits may increase anxiety and feelings of social isolation for people wishing to spend time with a wider range of families and households.

If hygiene and physical distancing measures are not followed, the measures could lead to increased rates of infection.

Differential impacts	Age: Children and Younger People	Baseline and Level 1	Before the pandemic, younger people were more likely than those in older age groups to meet socially with friends, relatives, neighbours or work colleagues at least once a week. Some children and young people may be at a greater risk of neglect, physical abuse, emotional abuse or sexual abuse in the home due to increased family pressures. For children and young people experiencing adverse home conditions, the ability to see more people inside and outside the home may alleviate the situation, gaining emotional support from others, and support to access specialist support organisations. The measures in these Levels could help improve a child's wellbeing by giving them access to a wider range of relatives or family friends from another household. Play is a right for children under United Nations Convention on the Rights of the Child (UNCRC), so anything that could impact on children's opportunity to play needs to be carefully considered. Although there can be anxiety about peer pressure not to comply with distancing rules, this may be reduced for some by maintaining the revised guidance making clear that children under 12 need not physically distance.[27] Younger people (18-24) are more likely to be working in low paid jobs and sectors that are most affected by the restrictions. The mental health benefits and life opportunities for those entering and new to the work place, and the limitations on opportunities to socialise in the home and more generally, will have an impact on their emotional wellbeing.
		Level 2 - 3	Some children and young people may be at a greater risk of neglect, physical abuse, emotional abuse or sexual abuse in the home due to increased family pressures. Younger people can rely on peers rather than households for support and social interaction.[28] Various exemptions through the Route Map have allowed children and young people greater opportunity to gather or to play and this will be replicated in these measures.
		Level 4	Various exemptions through the Route Map have allowed children and young people greater opportunity to attend education, childcare, gather

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[27] http://www.gov.scot/publications/coronavirus-covid-19-phase-3-staying-safe-and-protecting-others/pages/seeing-friends-and-family/

[28] Scottish Association for Mental Health (SAMH) https://www.samh.org.uk/about-us/news-and-blogs/coronavirus-research

		or to play and this will be replicated in these measures.
Age: Older People	Baseline and Level 1	These measures allow for continued enhanced households to meet and, even in higher levels, exemptions are made to ensure that older people can continue to be provided with care. This may be particularly beneficial for older people living alone and for those older people who are unable to live independently, for whom time with family may be particularly precious. Although, the likelihood of feeling lonely did not vary by age pre-pandemic, those living in lone households, where the inhabitant is over-65, are more likely than average to experience loneliness. More generally, older people may be at greater risk of social isolation and more likely to have hearing loss and vision issues impacting on their ability to e.g. communicate on the phone, listen to the radio, watch TV, etc. They will be taking enhanced physical distancing precautions but may find it harder to distance if they can't hear or see very well. They are also less likely to use the internet/online communication (especially if aged 75 or older), and are more reliant on public transport to access local shops which could increase risk and isolation. Older people who live independently are more likely to be unable to leave their house or more likely to feel most comfortable in home surroundings. Older people are less likely to benefit from opportunities in these measures to meet other people out of doors, particularly if they do not have a private garden, or are unable to tolerate colder weather (if they have a health condition, which many older people have - those aged 55+ are more likely to have a long-term health condition than not to have one)[29], they will be able to meet some friends or family indoors (at level 0). The measures could, therefore, partially mitigate against loneliness for such people. These measures could particularly benefit grandparents. The ongoing opportunity to form extended households may also help some single older people who have no family. Older people who live in a care home may feel anxious about minimal restrictions, as almost half of deaths (46%) in Scotland involving COVID-19 up to 31 May 2020 had happened in care homes; but they may also derive wellbeing benefits from being able to have more visitors.
	Level 2 - 3	The tightening of restrictions at higher levels could decrease the chances of older people contracting COVID-19. Figures show that older people are more likely to be adversely affected by the virus.[30] Nine in ten (90%) deaths involving COVID-19 in Scotland have been among those aged 65+ and two-fifths (43%) have been among those aged 85+. Older people are more likely to have long-term health conditions. Adults aged 75 and over have the highest rates of limiting longstanding

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[29] Older people are more likely to have a long-term health condition than not to have one (55+) and more likely to be disabled (have a limiting long-term health condition) than not to be (75+). Source: https://www.gov.scot/publications/inequalities-by-age-in-the-context-of-covid-19-slide-pack/

[30] See Deaths involving COVID-19 and COVID-19 statistical report

| | | | illness, followed by those aged 65-74. For those aged 75 and over, rates were higher among women (60%) than men (51%) in 2018 which may partly reflect women's longer life expectancy.

Older people may be at greater risk of social isolation and more likely to have hearing loss and vision issues impacting on their ability to e.g. communicate on the phone, listen to the radio, watch TV, etc. They will be taking enhanced physical distancing precautions,   will also find it harder to distance if they can't hear or see very well, less likely to use the internet/online communication (especially if aged 75 or older), and more reliant on public transport to access local shops.

Those with health conditions may feel more anxious about allowing people into their homes due to the increased risk of infection (although some older people need to have carers in their homes daily due to having a health condition or impairment). They may feel relief to be able to restrict the visitors indoors at these higher levels.[31] An older person might also not be as able to access other public spaces due to mobility issues. However, some older people may prefer to be allowed to have visitors and find it difficult to understand the difference to meeting someone in a cafe rather than at home.

Exemptions are in place for care purposes but there is a fine line between provision of care and support and socialising that improves wellbeing for older people. It is recognised that older people's wellbeing has suffered through the pandemic and that some socialising is important for their wellbeing, particularly as we approach winter weather. For some people concerns about whether they are breaking restrictions or not could negate some of the wellbeing impacts of visits. |
| | | Level 4 | The restrictions could further decrease the chances of older people contracting COVID-19. However, the restrictions will also be likely to affect older people's physical and mental wellbeing. Many older people may feel isolated, confined or frustrated in their homes. Those older people who provide unpaid care (older people are more likely than others in the population to provide 50 hours or more of care a week[32]) will be more likely to feel isolated and experience negative mental health impacts. Being less able to undertake exercise outside may result in more older people becoming less active. This can lead to poorer balance, loss of muscle tone and an increased risk of falls.

Just over a quarter (28%) of older households were estimated to be in fuel poverty in 2018, so there is a risk of older people who have to be at home all of the time being unable to properly heat their homes, being cold and becoming unwell as a result. |
| | **Sex: Women** | Baseline and Level 1 | Women are more likely to be main carers, including for any sick, disabled, or frail person, or children, and are twice as likely to give up work to carry out unpaid care and support.

The ability to socialise with a wider number of people at these levels, as long as physically distanced, could be beneficial especially for lone |

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[31] Scottish Health Survey 2018
[32] https://www.gov.scot/publications/inequalities-by-age-in-the-context-of-covid-19-slide-pack/

			parents, the majority of whom are women. Women spent far more time than men caring for children on average in 2014-15 and were more likely to be looking after the home or family in 2018. Time use data for Great Britain shows that although men are spending more time doing unpaid childcare in lockdown than they did in 2014-15, women continue to spend more time doing so.

Allowing non-cohabiting couples or extended households to meet will benefit women who are lone parents. Being able to make use of informal networks to share the work of unpaid caring (as well as childcare and other unpaid work) could reduce pressures on women's time and make it somewhat easier for them to balance unpaid work with employment, as well as improving their wellbeing. At all levels, there is an exemption from the restrictions on gatherings for childcare.

The opportunity for children to play in public spaces is good for children's physical and mental health. Women tend to be responsible for most of the childcare, and the opportunity for children to play in public spaces may make it easier for women with caring responsibilities. This is particularly the case for women who do not have access to a private outdoor space.

Before the pandemic, women met socially with friends, relatives, neighbours or colleagues more regularly than men and so might be more likely to have missed doing so. Opportunities for women to meet with others may therefore help in decreasing loneliness and may also help to increase access to support networks. The measures may in turn help them increase their economic activity.

For women experiencing domestic abuse, the ability to see more people inside and outside the home may alleviate the situation, help them to gain emotional support from others, and offer more opportunities to seek support. |
| | | Level 2 - 3 | At higher levels, tightening of measures will impact on women's physical and mental wellbeing. Restrictions at these levels are likely to be more concerning if they impact on support networks, particularly where domestic abuse is being experienced.

Women are more likely than men to have longstanding illnesses. Those with health conditions might feel anxious about allowing people into their homes due to the increased risk of infection, but perhaps feel pressure to do so or may not be given the option if visitors or other household members make the decision. They may feel relief to be able to restrict the visitors indoors given the restrictions at these levels. |
| | | Level 4 | The restrictions could decrease the chances of women contracting COVID-19. However, this may also have further impacts on women's physical and mental wellbeing. Some women may feel isolated, confined or frustrated in their homes. The restrictions could also lead to a decrease in women's ability to manage in situations of domestic violence and abuse. |
| | **Sex: Men** | Baseline | No evidence of a differential impact identified at this time. Positive |

		and Level 1	benefit of these limited restrictions for men as allows them to engage in activities such as work, leisure and socialising.
		Level 2 - 3	Tighter restrictions could decrease the chances of men contracting COVID-19. Age-standardised death rates (adjusting for the age structure of the population) were almost 50% higher for men than for women (for deaths occurring in Scotland in April 2020) so these measures would take account of the higher risk to men of a Covid-related death[33]. However, the restrictions could further impact on men's physical and mental wellbeing. This will leave some men feeling isolated, confined or frustrated in their homes.
		Level 4	The restrictions could decrease the chances of men contracting COVID-19. Age-standardised death rates (adjusting for the age structure of the population) were almost 50% higher for men than for women (for deaths occurring in Scotland in April 2020) so these measures would take account of the higher risk to men of a Covid-related death[34]. However, this will further impact on men's physical and mental wellbeing. This will leave more men feeling very isolated, confined or frustrated in their homes.
	Race	Baseline and Level 1	People from minority ethnic groups have a greater risk of the most serious outcomes of contracting the virus. There is clearer evidence of increased risks of serious illness due to COVID-19 in those of South Asian origin. There is evidence of an increased risk of hospital admission due to COVID-19 among those of Black, Caribbean or African ethnicity.[35] For these groups there will be a balance between welcoming the measures in these levels with the potential at these levels for a higher risk of transmission. The ability for people living alone to interact with more households and people indoors (at level 0) and outdoors is important to combat the negative effects of loneliness, which is disproportionately higher for this group. Feelings of loneliness are highest in single-occupier households[36] and people of 'Black, Black Scottish or Black British' ethnicity were most likely to be living alone at the time of the last census in 2011.[37] For people for whom English is not their first or only language, the ability to take part in social meetings with other people who speak their preferred language will be helpful for sharing knowledge and getting emotional and practical support. This can be particularly beneficial when public health information is changing rapidly and translations are

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[33] https://www.gov.scot/publications/inequalities-by-gender-in-the-context-of-covid-19-slide-pack/
[34] https://www.gov.scot/publications/inequalities-by-gender-in-the-context-of-covid-19-slide-pack/
[35] https://beta.isdscotland.org/find-publications-and-data/population-health/covid-19/covid-19-statistical-report/12-august-2020/
[36] Scottish Household Survey 2018
[37] Census 2011: Detailed Characteristics on Population and Households in Scotland

| | | | not keeping pace. Community discussion of the current measures can augment other dissemination processes.

As people from a minority ethnic background are more likely to live in flats, potentially leading to overcrowding, the opportunity to meet with friends and family outside will be very important, with additional value to people with limited or no private outdoor space. At level 0 the ability to meet more people outdoors will be particularly beneficial.

There is some evidence at UK level [38] to suggest a high prevalence of mental health issues amongst minority ethnic communities so these levels will still provide opportunities for individuals to connect with family socially, alleviating the impact of restrictions for people suffering a range of mental health issues, including anxiety and depression. However, the restrictions may still be a barrier for larger households wishing to meet together. There is a higher likelihood of minority-ethnic communities living in multi-generational families.[39]

When restrictions are lowest, there may be a need for further advice on self-isolation or shielding for members of minority ethnic communities living in multigenerational households, as it may be more difficult for them to be apart from other people.

Some people may find it harder to self-isolate including Gypsy/Travellers living in cramped accommodation; seasonal migrants in communal accommodation; and asylum seekers and refugees in shared accommodation. This level may make it easier for these groups to self-isolate as the people with whom they share accommodation will be able to go out and meet with others more often.

If information is not available in different languages and formats, some people may not understand the measures. It is important that communication and information is delivered in a range of different languages and formats other than English. |
| | | Level 2 - 3 | People from minority ethnic groups have a greater risk of the most serious outcomes of contracting the virus. Therefore they may have been more concerned about spending time with different households. They may feel relief to be able to restrict the visitors indoors during these Levels.

Some minority ethnic people may find it more difficult to access support, so higher levels of restriction at these levels may have a negative impact. In 2018, 12.8% of minority ethnic households said that they did not have anyone in their neighbourhood that they could rely on for help.[40] |

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[38] https://www.ethnicity-facts-figures.service.gov.uk/health/mental-health/adults-using-nhs-funded-mental-health-and-learning-disability-services/latest#:~:text=Ethnic%20group%20is%20a%20required%20piece%20of%20information,including%20independent%20sector%20providers%2C%20to%20submit%20MHSDS%20data.

[39] https://www.gov.scot/publications/inequalities-by-ethnicity-in-the-context-of-covid-19-slide-pack/
[40] Scottish Household Survey 2018

			People of some ethnicities tend to have bigger households (children or multi-generational) so further restrictions on numbers of people able to meet might be more of an issue for families of these ethnicities. The ongoing opportunity to form extended households may help some people of some ethnicities who have found it harder to meet up all together due to having larger households; for example, a single adult may be able to visit their family home. If information is not available in different languages and formats, some people may not understand the measures. It is important that communication and information is delivered in a range of different languages and formats other than English.
		Level 4	The restrictions could decrease the chances of people contracting COVID-19. However, this may also further impact on people's physical and mental wellbeing. This will leave people feeling very isolated, confined or frustrated in their homes. There is a higher prevalence of poverty in some minority ethnic groups which may increase the risk of food insecurity, and the tightest restrictions could make it harder for some communities to access food. Mitigations such as food delivery schemes need to be culturally sensitive and provide appropriate provisions. People in ethnic minority communities are more likely to say that they don't have support in times of crisis, so restrictions at this level could lead to more people feeling unsupported. The restrictions may be a barrier for larger households wishing to meet together. There is a higher likelihood of minority-ethnic communities living in multi-generational families. In 2014-19, people from non-white minority ethnic groups were more likely to be in relative poverty after housing costs compared to those from the 'White - British' and 'White - Other' groups. Therefore there may be fuel poverty considerations for minority ethnic households who have to stay at home more. If information is not available in different languages and formats, some people may not understand the measures. It is important that communication and information is delivered in a range of different languages and formats other than English.
	Religion & Belief	Baseline and Level 1	Hindus, followed by Buddhists and Muslims, were most likely to be living in 'flats or temporary structure' accommodation in 2011 and so may be less likely to have access to private outdoor space. They may therefore benefit from the measures at these levels, including the increased outdoor activity being permitted.
		Level 2 - 3	The restricted measures in these Levels, reducing the numbers of people and households able to meet, could have a negative effect for some people because of their religion or belief The decrease to the number of people that can meet will cause issues for households who

			have found it harder to meet up all together due to having larger households.
		Level 4	The restrictions could decrease the chances of people contracting COVID-19. However, this could have a negative effect for some people because of their religion or belief and will further impact on their physical and mental wellbeing. This will leave many people feeling very isolated, confined or frustrated in their homes.
	Disability	Baseline and Level 1	Loneliness was more prevalent among disabled people prior to the pandemic and for many disabled people this has been exacerbated during the pandemic, so being able to meet up with friends and family at these lower levels might have particularly positive impacts. In 2018, a higher percentage of disabled adults in Scotland (39%) said that they felt lonely some, most, or all of the time in the preceding week compared with all adults (21%) and non-disabled adults (16%). Disabled people may be more likely to be unable to leave their house, or feel more comfortable inside (especially if their home has adaptations or specialist mobility equipment) and therefore may particularly benefit from being able to have visitors at home at these levels. Disabled people are more likely to be financially vulnerable, with many working in the sectors most affected by Covid restrictions, such as hospitality, so meeting in homes can be more viable than meeting in cafes or other settings that incur expense. Measures at these levels allow for a range of sources of support for disabled people, in addition to the carers permitted. This could have a positive impact on mental wellbeing from reduced isolation while feeling protected from the virus. Those with health conditions might feel anxious about allowing people into their homes due to the increased risk of infection but may perhaps feel pressure to do so, or may not be given the option if visitors or other household members make the decision. Measures around meeting up with others could lead to an increased risk of contracting COVID-19. This would disproportionately affect some disabled people. There may be anxiety about face coverings/masks, and communication may be problematic for some people such as deaf people and BSL signers. This may create further anxiety and disadvantages. Without information in accessible formats, information may not be understood or be more difficult to understand.
		Level 2 - 3	Disabled people may be at greater risk of the impacts of social isolation. The tightening of measures at these higher levels may negatively impact on disabled people. More relaxed restrictions around meeting up with others could lead to an increased risk of contracting COVID-19. This would disproportionately affect some disabled people. Tightened restrictions could lead to a decreased risk of contracting COVID-19 for disabled

			people.
			Disabled people may be more likely to be unable to leave their house, or feel more comfortable inside, and therefore may particularly be impacted from not being able to have visitors at home.
			Those with health conditions might feel anxious about allowing people into their homes due to the increased risk of infection. They may feel relief to be able to restrict visitors indoors at these levels.
			A higher proportion of disabled adults compared to non-disabled adults provide regular support or care for a sick, disabled or frail person.[41] Not being allowed to meet people from other households indoors may discourage physical unpaid caring and support in cases where the carer does not live with the person they provide care for.
			Without information in accessible formats, information may not be understood or be more difficult to understand.
		Level 4	The restrictions could decrease the chances of disabled people contracting COVID-19. However, this may further impact on disabled people's physical and mental wellbeing. This will leave people feeling isolated, confined or frustrated in their homes.
			Disabled people are more likely to live in a household in poverty so increased restrictions could exacerbate fuel poverty especially as people with reduced mobility may need to have the heating on more often. Disabled people are less likely to take part in physical activity. Tighter restrictions could exacerbate difficulties accessing food and other essential supplies. [42] Some people may be unable to access support in the first instance. We know that many disabled people decided to self-isolate in the first phase of the outbreak without a letter from the CMO, and these people will likely self-isolate again even if shielding is not formalised. This has led, and will again, to difficulty accessing food, medicine and money.
			Without information in accessible formats, information may not be understood or be more difficult to understand.
	Sexual Orientation	Baseline and Level 1	Inviting lesbian, gay and bi-sexual (LGB) people into the home may not be an option for people who live in a homophobic environment, so the opportunity for some to meet with friends and peers who are also part of the LGB community outside of their household may be positive. This can be particularly beneficial for LGB young people who are not able to be open about their sexual orientation at home.
		Level 2 - 3	The opportunity to attend informal social meetings with a wider range of friends who could offer support is likely to be beneficial for an LGB person's mental health. This benefit will be reduced in the new tightening of the measures in these Levels.
		Level 4	The restrictions could decrease the chances of people contracting

[41] Scottish Health Survey 2018
[42] https://www.gov.scot/publications/inequalities-by-disability-in-the-context-of-covid-19-slide-pack/

			COVID-19. However, this could also further impact on LGB people's physical and mental wellbeing. This may leave people feeling isolated, confined or frustrated in their homes.
Marriage and Civil Partnership	Baseline and Level 1		No evidence of a differential impact identified at this time. If people are married or civilly partnered, and don't live alone, the restrictions will have generally less impact in terms of isolation compared to those who do live alone. It is noted that there is an exemption in the Regulations for a marriage ceremony or civil partnership registration, and that guidance specifies limits as to how many people allowed.
	Level 2 - 3		Tighter restrictions at these levels could decrease the chances of people contracting COVID-19. However, they could also further impact on people's physical and mental wellbeing. This will leave people feeling isolated, confined or frustrated in their homes.
	Level 4		Restrictions could decrease the chances of people contracting COVID-19. However, this will further impact on people's physical and mental wellbeing, and leave people feeling very isolated, confined or frustrated in their homes.
Pregnancy and Maternity	Baseline and Level 1		Loneliness is higher than average among those in lone parent households. The majority of lone parents are women. The Route Map measure allowing non-cohabiting couples or extended households to meet will have benefited women who are lone parents Being able to meet people outside the home at these levels will provide some support to those who are main carers, especially lone mothers, who account for the majority of lone parents.[43] Being able to meet people inside and outside the home at these levels will provide a source of social support and community for pregnant women, who may ordinarily (pre-Covid) have expected to attend ante-natal classes and groups. Some of these groups may be possible under these levels, with hygiene and distancing precautions. Allowing households with younger children to meet will enable mutual support and bonding, potentially improving the mental health of both parents and children. The opportunity for children aged 11 and under to play with friends without physical distancing may reduce anxiety for those accompanying or supervising them during outdoor meetings.
	Level 2 - 3		The opportunity to attend informal social meetings with friends who could offer support can be beneficial for a pregnant woman's mental health. Not being able to meet people from other households indoors at these levels may have a negative impact, especially for new mothers.
	Level 4		Restrictions could decrease the chances of people contracting COVID-19. However, the restrictions may also further impact on people's physical and mental wellbeing. This will leave people feeling isolated,

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[43] Women spent far more time than men caring for children on average in 2014-15 (Centre for Time Use Research: Time Use Survey 2014-15 Results for Scotland) and were far more likely to be looking after the home or family in 2018 (Scottish Household Survey 2018). The vast majority of single parents are also women (Household composition for specific groups of people in Scotland).

			confined or frustrated in their homes.
			Protecting the mental health of pregnant women and new mothers is vital to supporting the social and emotional development of their child. Ensuring that the right support remains available, through universal health services and wider community support, throughout pregnancy and the perinatal period is essential. Pregnancy is a time of great change and for some women, difficult home circumstances with less opportunity to meet and socialise with their peers, can exacerbate these conditions.
Gender Reassignment	Baseline and Level 1		No evidence of a differential impact identified at this time.
	Level 2 - 3		The opportunity to attend informal social meetings with friends who could offer support can be beneficial for a trans person's mental health. This benefit will be reduced by the tighter restrictions at these levels.
			There may be possible negative impacts on trans people who may be restricted to households where they cannot be open about their status.
	Level 4		Restrictions could decrease the chances of people contracting COVID-19. However, the restrictions may also further impact on trans people's physical and mental wellbeing. This could leave people feeling isolated, confined or frustrated in their homes.
			There may be possible negative impacts on trans people who may be restricted to households where they cannot be open about their status.
Socio-economic disadvantage	Baseline and Level 1		Any increase in risk of contracting COVID-19 due to the more relaxed measures on meeting up with others at these levels would disproportionately affect people in the most deprived areas. Throughout the pandemic more cases and more COVID related deaths have been identified in the more deprived areas. In the last 7 days (as of 29 October) 153 new cases were identified in the least deprived area while 292 new cases were identified in the most deprived.[44]
			Although level of deprivation does not directly lead to social isolation, as measured by the number of people meeting socially at least once a week, those living in the most deprived areas are almost twice as likely to experience feelings of loneliness as those living in the least deprived areas.[45]
			A higher proportion of people living in the most deprived areas compared to those living in the least deprived areas provide regular support or care for a sick, disabled or frail person.[46] Being allowed to meet people from other households indoors (at level 0) may encourage physical unpaid caring in cases where the carer does not live with the person that they provide care for. Caring has been permitted at all stages of the pandemic, but some carers may have felt worried or

[44] https://public.tableau.com/profile/phs.covid.19#!/vizhome/COVID-19DailyDashboard_15960160643010/Overview
[45] Scottish Household Survey 2018
[46] Scottish Health Survey 2018

			anxious.
		Level 2 - 3	People living in more deprived areas may be less likely to have private outdoor space, so not being able to meet indoors at these higher levels will create a barrier for social connections, although there are still opportunities to meet outdoors. A smaller proportion of adults in deprived areas live within a five minute walk of their nearest green space compared to adults in the least deprived areas.[47] Those living in more deprived areas are more likely to have longstanding illnesses. These people might feel anxious about allowing people into their homes due to the increased risk of infection, but may either feel pressure to do so or may not be given the option if visitors or other household members make the decision themselves. They may feel relief to be able to restrict visitors indoors at these levels. The ability to meet some households in public outdoor spaces, and for some to have an extended household, may make the restrictions less of a barrier to having social connections. Any decrease in risk of contracting COVID-19 due to tighter restrictions at these levels may positively affect people in the most deprived areas.
		Level 4	Restrictions could decrease the chances of people contracting COVID-19. However, this could also further impact on people's physical and mental wellbeing. This may leave people feeling isolated, confined or frustrated in their homes.
Mitigating actions:		Baseline and Level 1	To promote the positive effects of these measures, extensive effort is being put into communications through a range of media including broadcast and social media. These measures are targeted at the maximum number of people possible to protect those who are most at risk of the worst effects of the virus, and in greatest need of support, and broadening the positive impact from earlier Route Map phases for those who are most at risk of social isolation. Actions have been and are being put in place to maximise use of outdoor areas, such as publication of guidance on the safe opening of public and customer toilets during the coronavirus pandemic.[48] Impacts, particularly for older and disabled people, as well as lone parent, have been lessened at these levels by continuing to allow households to meet indoors (at level 0) and outdoors, with children under 12 not counted in the restricted numbers for meeting. Impacts, particularly for women and other carers, have been lessened by providing specific exceptions for childcare and providing care or

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[47] Scottish Household Survey 2018
[48] Coronavirus (COVID-19): opening public and customer toilets
https://www.gov.scot/publications/coronavirus-covid-19-public-and-customer-toilets-guidance/

| | | assistance to a vulnerable person.

By allowing the opportunity to form extended households, these measures continue to mitigate the differential impacts.

Higher levels of restriction are imposed with the specific aim of being able to reduce transmission and so move more rapidly to lower levels of restriction. |
|---|---|---|
| | Level 2 - 3 | As above other than not being able to meet indoors |
| | Level 4 | As above other than not being able to meet indoors |

Assessing the impacts and identifying opportunities to promote equality

Do you think that the policy impacts on people because of their age?

Age	Positive	Negative	None	Reasons for your decision
Eliminating unlawful discrimination, harassment and victimisation			X	The measures do not constitute unlawful discrimination, harassment and victimisation. The measures may restrict choices for the age groups at higher levels of restriction, but this is necessary to suppress the spread of the virus and protect the right to life.
Advancing equality of opportunity	X	X		Different restrictions at different levels recognise the different risks and needs of the age groups and balance them according to understanding of how the virus is transmitted.
Promoting good relations among and between different age groups	X	X		Where possible good relations are promoted between age groups but the opportunities to meet are limited according to understanding of how the virus is transmitted.

Do you think that the policy impacts disabled people?

Disability	Positive	Negative	None	Reasons for your decision
Eliminating unlawful discrimination, harassment and victimisation			X	The measures do not constitute unlawful discrimination, harassment and victimisation. The measures may restrict choices for disabled people at higher levels of restriction, but this is necessary to suppress the spread of the virus and protect the right to life.
Advancing equality of opportunity	X	X		Different restrictions at different levels recognise the different risks and needs of disabled people and balance them according to understanding of how the virus is transmitted.
Promoting good relations among and between disabled and non-	X	X		Where possible good relations are promoted between disabled people and non-disabled people but the opportunities to meet are limited according to understanding of how

				the virus is transmitted.
disabled people				

Do you think that the policy impacts on men and women in different ways?

Sex	Positive	Negative	None	Reasons for your decision
Eliminating unlawful discrimination, harassment and victimisation			X	The measures do not constitute unlawful discrimination, harassment and victimisation. The measures may restrict choices for men and women at higher levels of restriction, but this is necessary to suppress the spread of the virus and protect the right to life.
Advancing equality of opportunity	X	X		Different restrictions at different levels recognise the different risks and needs of women and men, and balance them according to understanding of how the virus is transmitted.
Promoting good relations between men and women	X	X		Where possible good relations are promoted between the sexes but the opportunities to meet are limited according to understanding of how the virus is transmitted.

Do you think that the policy impacts on women because of pregnancy and maternity?

Pregnancy and Maternity	Positive	Negative	None	Reasons for your decision
Eliminating unlawful discrimination, harassment and victimisation			X	The measures do not constitute unlawful discrimination, harassment and victimisation. The measures may restrict choices for women during pregnancy and maternity at higher levels of restriction, but this is necessary to suppress the spread of the virus and protect the right to life.
Advancing equality of opportunity	X	X		Different restrictions at different levels recognise the different risks and needs of women during pregnancy and maternity, and balance them according to understanding of how the virus is transmitted.
Promoting good relations	X	X		Where possible good relations are promoted between pregnant women, or women protected by the pregnancy and maternity characteristic, and the wider community but the opportunities to meet are limited according to understanding of how the virus is transmitted.

Do you think your policy impacts on people proposing to undergo, undergoing, or who have undergone a process for the purpose of reassigning their sex? (NB: the Equality Act 2010 uses the term 'transsexual people' but 'trans people' is more commonly used, although it may include a wide range of people not covered by the Act).

Gender reassignment	Positive	Negative	None	Reasons for your decision
Eliminating unlawful discrimination, harassment and victimisation			X	The measures do not constitute unlawful discrimination, harassment and victimisation. The measures may restrict choices for trans people at higher levels of restriction, but this is necessary to suppress the spread of the virus and protect the right to life.
Advancing equality of opportunity	X	X		Different restrictions at different levels recognise the different risks and needs of trans people and balance them according to understanding of how the virus is transmitted.
Promoting good relations	X	X		Where possible good relations are promoted between trans people and non-trans people, but the opportunities to meet are limited according to understanding of how the virus is transmitted.

Do you think that the policy impacts on people because of their sexual orientation?

Sexual orientation	Positive	Negative	None	Reasons for your decision
Eliminating unlawful discrimination, harassment and victimisation			X	The measures do not constitute unlawful discrimination, harassment and victimisation. The measures may restrict choices for LGB people at higher levels of restriction, but this is necessary to suppress the spread of the virus and protect the right to life.
Advancing equality of opportunity	X	X		Different restrictions at different levels recognise the different risks and needs of LGB people and balance them according to understanding of how the virus is transmitted.
Promoting good relations	X	X		Where possible good relations are promoted between LGB people and non-LGB people, but the opportunities to meet are limited according to understanding of how the virus is transmitted.

Do you think the policy impacts on people on the grounds of their race?

Race	Positive	Negative	None	Reasons for your decision
Eliminating unlawful discrimination, harassment and victimisation			X	The measures do not constitute unlawful discrimination, harassment and victimisation. The measures may restrict choices for people of different races at higher levels of restriction, but this is necessary to suppress the spread of the virus and protect the right to life.
Advancing equality of opportunity	X	X		Different restrictions at different levels recognise the different risks and needs of people from different racial backgrounds and balance them according to understanding of how the virus is transmitted.
Promoting good race relations	X	X		Where possible good relations are promoted between people of different races, but the opportunities to meet are limited according to understanding of how the virus is transmitted.

Do you think the policy impacts on people because of their religion or belief?

Religion or belief	Positive	Negative	None	Reasons for your decision
Eliminating unlawful discrimination, harassment and victimisation			X	The measures do not constitute unlawful discrimination, harassment and victimisation. The measures may restrict choices for people of different religions and beliefs at higher levels of restriction, but this is necessary to suppress the spread of the virus and protect the right to life.
Advancing equality of opportunity	X	X		Different restrictions at different levels recognise the different risks and needs of people from different religions and belief groups and balance them according to understanding of how the virus is transmitted.
Promoting good relations	X	X		Where possible good relations are promoted between people of different religions and beliefs, but the opportunities to meet are limited according to understanding of how the virus is transmitted.

Do you think the policy impacts on people because of their marriage or civil partnership?

Marriage and Civil Partnership	Positive	Negative	None	Reasons for your decision
Eliminating unlawful discrimination, harassment and victimisation			X	The measures do not constitute unlawful discrimination, harassment and victimisation. The measures may restrict choices for people of different relationship status at higher levels of restriction, but this is necessary to suppress the spread of the virus and protect the right to life.

Conclusion

The Strategic Framework and levels approach are intended to balance the restrictions necessary to protect people from the direct harms to health from catching the virus, with the unintended potential harms the restrictions may have on isolation, wellbeing and the economy.

The challenges presented by restrictions that increase in severity as the levels go on, such as reduced opening hours (from level 1 to 3) and full closure (level 4 only) for businesses, are significant for both organisations and individuals, and are often more severe for those with protected characteristics.

These include, but are not limited to, increased risk of isolation, economic uncertainty, and undermining of wider wellbeing. We have considered the wide range of impacts, both intended and unintended, of the restrictions across all the levels and have sought to mitigate them wherever possible, while simultaneously protecting the health of employees and the public, and focussing on our primary objective of reducing the spread of the virus.

We will continue to keep the levels and restrictions under review, and take all decisions based on the best available evidence. Our approach to the hospitality sector will continue to be informed by assessments under the impact of the four harms, while also taking into account other important considerations, including equality impacts.

We will continue to work with industry representatives and other local stakeholders to ensure we are doing everything possible to support the industry and its customers and employees – including those with protected characteristics – as we take the measures necessary to suppress the virus and save lives.