

## Equality Impact Assessment

### The Health Protection (Coronavirus) (Restrictions and Requirements) (Local Levels) (Scotland) Amendment (No. 10) Regulations 2021

#### 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 came into effect at 0600 hours on 2 November 2020. These regulations 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 is 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. It always remained possible to introduce additional restrictions beyond those specified in the 2020 Regulations. It is necessary now urgently to go beyond the requirements and restrictions set out in the 2020 Regulations. This is because of a changed assessment of the risks of transmission of the virus in light of the emergence of a new strain (VUI 202012/01) of COVID-19 in November 2020. The latest evidence from Imperial College, published on 31 December presents a consensus that this new variant has a substantial transmission advantage, with an estimated increased rate of transmission between 0.4 and 0.7.<sup>1</sup> The percentage of cases composed of this new variant is increasing rapidly, from 42.7 per cent on 31 December to 47.5 per cent on 3 January. It is very likely that this strain will further increase in dominance in Scotland in a similar way to that already seen in London and SE England. Strengthening Level 4 restrictions is needed immediately in order to try to curb exponential growth. Further changes may be required in the coming weeks.
11. 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.
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

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<sup>1</sup> [Report 42 - Transmission of SARS-CoV-2 Lineage B.1.1.7 in England: insights from linking epidemiological and genetic data | Faculty of Medicine | Imperial College London](#)

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<sup>2</sup>, 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<sup>3</sup>.
16. All measures are given thorough consideration on the basis of their impact, including on equality and human rights<sup>4</sup>.

## Policy Objectives

17. These Regulations amend the Health Protection (Coronavirus) (Restrictions and Requirements) (Local Levels) (Scotland) Regulations 2020 to introduce a requirement to stay at home for those living in a Level 4 area, subject to a range of reasonable excuses. This is similar to the requirement included in legislation in March 2020. These Regulations also reduce the number of people who can meet in public indoors, and outdoors. The limit is now 2 people from 2 households, rather than 6 people from 2 households. Existing socialisation rules still apply for those under 12 but the rules for 12-17 year olds have been amended to introduce a new 2 people from 2 households limit in line with adults. These Regulations adjust the rules on organised outdoor activity for under 18s and for outdoor exercise, to prohibit those aged 12 and over from undertaking such activities unless the 2 people from 2 household limits are followed.
18. People will continue to be able to go outdoors with members of their own household, including an extended household. Children under the age of 12 will continue not to count

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<sup>2</sup>

SAGE:[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/895841/S0483\\_Ethnicity\\_and\\_Covid-19.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/895841/S0483_Ethnicity_and_Covid-19.pdf)

<sup>3</sup> <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>

<sup>4</sup> A summary of equality and Fairer Scotland evidence was published for Phase 1 and 2 of the Route Map. 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/>

towards household nor person limits allowing them to continue to interact and play with peers. This will help mitigate the impact of these necessary restrictions.

19. These measures complement each other, and are intended to produce a substantial reduction in inter-household socialising and gathering. Introducing these measures together, and in law, would also significantly enhance the capability of enforcement authorities to take practical steps to secure compliance where this proves necessary. In essence, as in April and May, the police would have a lawful basis to question any group of more than two adults to ensure that they are adhering to the restrictions. These provisions are currently justified and proportionate steps to reduce the opportunities for the virus to spread.

## 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<sup>5</sup>, 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.

SARS-CoV-2 transmission occurs primarily through 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.<sup>6</sup> A variety of interventions to combat the transmission of the virus have been adopted across the UK.<sup>7</sup> 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. Since 2 November 2020, when the Local Levels Regulations came in to force, there has been a ban on in house socialising in level 3 and 4 areas and since 26 December most indoor areas where people can socialise have been closed. These measures introduce a statutory stay at home requirement (with a number of exceptions) to level 4 areas and extend the restrictions on outdoor socialising by reducing the number of people who can meet from 6 from 2 households to 2 from 2 households. Although outdoor socialising presents less of a risk, particularly if people remain physically distanced this is low risk rather than no risk. The risk also increases as the number of people meeting increases.

While the Scottish Government is of the view that a legally enforced stay at home requirement in level 4 areas alongside restrictions on socialising outdoors 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 SARS-CoV-2 spreading, especially in light of the emergence of a new strain (VUI 202012/01) of COVID-19 in November 2020.

For some people the restrictions may decrease pressure to meet up (and the resulting anxiety) when they would rather stay at home. However, it is accepted that tightening the restrictions is likely to have substantial negative impact for many people's mental health and wellbeing. The lack of social interaction and the ability to spend time outside socialising has significant negative impacts for most people but is particularly impactful on those with cramped homes and no private outdoor space.

It is recognised that the continued ability to meet with one other person outdoors, even with restrictions on mixing, will be of particular benefit to mental health and wellbeing, allowing some limited social activities.

<sup>5</sup> Section 4 of the Equality Act 2010

<sup>6</sup> <https://www.gov.uk/government/publications/transmission-of-sars-cov-2-and-mitigating-measures-update-4-june-2020>

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<sup>7</sup> <https://www.gov.uk/government/publications/summary-of-the-effectiveness-and-harms-of-different-non-pharmaceutical-interventions-16-september-2020>

<b>Differential impacts</b>	<b>Age: Children and Younger People</b>	<p>The tightening of restrictions could decrease the chances of children and younger people contracting COVID-19 and transmitting it to others.</p> <p>Some children and young people may be at a greater risk of neglect, physical abuse, emotional abuse or sexual abuse in the home.</p> <p>Although the regulations retain the existing exceptions for children under the age of 12 they do introduce further restrictions on the number of adults with whom they can meet outside of their household.</p> <p>The proposals tighten the restrictions with regards to young people between the ages of 12 – 17 by reducing the number of peers that can meet from 6 to 2 from 2 households in recognition that the virus is transmitting amongst this age group and that can spread into the family. We recognise this could have adverse impacts on young people’s well being given they primarily socialise with friends rather than family.</p> <p>For young people experiencing adverse home conditions, the limiting of the ability to see people outside the home may worsen their wellbeing, limit the extent to which they gain emotional support from others and restrict access to specialist support organisations to on-line only.</p> <p>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. Younger people can rely on peers rather than households for support and social interaction.<sup>8</sup></p> <p>The Commissioner for Children and Young People, among others, has made very strong representations about the importance of mixing within peer groups rather than households. There was very little benefit to socialisation and wellbeing for these groups to be able to mix with their own household outdoors, but significant benefits to be able to mix with peers particularly when schools are closed.</p> <p>Younger people (18-24) are more likely to be working in sectors that are most affected by the coronavirus restrictions. The limitations on opportunities to socialise more generally, will have an impact on their emotional wellbeing.</p>
	<b>Age: Older People</b>	<p>The tightening of restrictions 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. 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+.</p> <p>Older people are more likely to have long-term health conditions. Adults aged 75 and over have the highest rates of limiting longstanding 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.</p> <p>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. The findings from the 2019 Scottish Household Survey show that, as people get older they were more likely to live alone.</p>

		<p>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 be more reliant on public transport to access local shops. An older person might also not be as able to access other public spaces due to mobility issues.</p> <p>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) will be more likely to feel isolated and experience negative mental health impacts. Being less able to undertake social activity 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.</p> <p>These measures maintain the current extended household arrangements and 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.</p> <p>Older people may be more likely to have caring responsibilities towards a partner who, for mental or physical health reasons, cannot be left alone at home while they go outdoors to meet one other adult. This could lead to social isolation and/or safety risks for those who have to be left home while the other benefits from outdoor social contact.</p>
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<sup>8</sup> Scottish Association for Mental Health (SAMH) <https://www.samh.org.uk/about-us/news-and-blogs/coronavirus-research>



<b>Sex: Women</b>	<p>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.</p> <p>In these circumstances women may find it more difficult to leave at home those for whom they are caring to go outdoors to meet one other adult. This could lead to social isolation and/or safety risks for those who have to be left home. There may be a case for introducing further exemptions for those with relevant caring responsibilities towards another adult.</p> <p>The ability to socialise can be beneficial especially for lone 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. The extended household arrangements remain in force and will help mitigate the position in relation to single parents.</p> <p>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.</p> <p>Tightening of measures will impact on women's physical and mental wellbeing. Restrictions are likely to be more concerning if they impact on support networks, particularly where domestic abuse is being experienced. Some women may feel isolated, confined or frustrated in their homes.</p> <p>We know that women are more likely to undertake sport and physical activity in a group setting and so further restrictions around outdoor sports may be likely to increase the inequalities that already exist in this area.</p>
<b>Sex: Men</b>	<p>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-19-related death<sup>9</sup>. 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.</p> <p>We know that group exercise is particularly important for mental health in men who take part, and that many young men rely on football for support mechanisms and structure in their lives.</p>
<b>Race</b>	<p>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.<sup>10</sup> For these groups there will be a</p>

<sup>9</sup> <https://www.gov.scot/publications/inequalities-by-gender-in-the-context-of-covid-19-slide-pack/>

<sup>10</sup> <https://beta.isdscotland.org/find-publications-and-data/population-health/covid-19/covid-19-statistical-report/12-august-2020/>

	<p>balance between welcoming the measures in these levels with the potential at these levels for a higher risk of transmission.</p> <p>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.</p> <p>The ability for people living alone to interact with people 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<sup>11</sup> 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.<sup>12</sup></p> <p>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 is 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 not keeping pace. Community discussion of the current measures can augment other dissemination processes.</p> <p>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 is very important, with additional value to people with limited or no private outdoor space.</p> <p>There is some evidence at UK level <sup>13</sup> 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.</p> <p>There is a higher likelihood of minority-ethnic communities living in multi-generational families.<sup>14</sup> 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.</p> <p>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.</p> <p>If information is not available in different languages and formats, some people may not understand the measures. Communication and information is delivered in a range of different languages and formats other than English to mitigate this risk.</p>
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<sup>11</sup> [Scottish Household Survey 2018](#)

<sup>12</sup> [Census 2011: Detailed Characteristics on Population and Households in Scotland](#)

<sup>13</sup> <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,includ%20independent%20sector%20providers%2C%20to%20submit%20MHSDS%20data.>

<sup>14</sup> <https://www.gov.scot/publications/inequalities-by-ethnicity-in-the-context-of-covid-19-slide-pack/>

<b>Religion &amp; Belief</b>	<p>The restrictions could decrease the chances of people contracting COVID-19. However, this could also further impact on their physical and mental wellbeing. This will leave many people feeling very isolated, confined or frustrated in their homes.</p> <p>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.</p>
<b>Disability</b>	<p>Tightened restrictions could lead to a decreased risk of contracting COVID-19 for disabled people. 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.</p> <p>These measures maintain the current extended household arrangements and exemptions are made to ensure that people with disabilities can continue to be provided with care.</p> <p>It may be the case that disabled people need more support to leave their homes and that restricting contact to one other adult will impact on this. For example, it may be that to leave the house two adults are required to help those with physical disabilities to move safely or that to support those with mental health difficulties, carers rely on support from another adult. Restricting the ability to all on support from an additional adult could increase pressure on carers and/or limit the ability of those with a disability to access outdoor exercise and socialise with those from outside their households.</p> <p>Loneliness was more prevalent among people with disabilities prior to the pandemic and for many people with disabilities this has been exacerbated during the pandemic, so being able to meet up with friends and family 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%).</p> <p>People with disabilities 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.</p> <p>Without information in accessible formats, information may not be understood or be more difficult to understand. Measures are in place to make information available in a range of formats including braille, large print and easy read</p>
<b>Sexual Orientation</b>	<p>The restrictions could decrease the chances of people contracting COVID-19. However, as with other groups, 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.</p>
<b>Marriage and Civil Partnership</b>	<p>No evidence of a differential impact identified at this time. 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.</p>

<p><b>Pregnancy and Maternity</b></p>	<p>Restrictions could decrease the chances of people contracting COVID-19 and subsequently transmitting it onwards.</p> <p>The exemptions for children are also particularly important for mothers. Allowing households with younger children to meet without a limit on the number of children aged 11 and under 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.</p> <p>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.</p>
<p><b>Gender Reassignment</b></p>	<p>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.</p> <p>There may be possible negative impacts on trans people who may be restricted to households where they cannot be open about their status.</p>
<p><b>Socio-economic disadvantage</b></p>	<p>Restrictions could decrease the chances of people contracting COVID-19. Any decrease in risk of contracting COVID-19 due to tighter restrictions at these levels may positively affect people in the most deprived areas. This is because 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.<sup>15</sup></p> <p>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. 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.<sup>16</sup> The findings from the 2019 Scottish Household Survey also show that there's a correlation between living in socio-economic disadvantage and lone parenting. (115,000 people in Scotland lived in single parent household in the most deprived areas - compared with 33,000 in the least deprived areas.)</p> <p>Those sports that are able to be played by two people, such as golf and tennis, and are able to continue under the increased restrictions are more commonly played by those living in less deprived areas. These measures may therefore</p>

<sup>15</sup> [https://public.tableau.com/profile/phs.covid.19#!/vizhome/COVID-19DailyDashboard\\_15960160643010/Overview](https://public.tableau.com/profile/phs.covid.19#!/vizhome/COVID-19DailyDashboard_15960160643010/Overview)

<sup>16</sup> [Scottish Household Survey 2018](#)

		increase the inequalities that exist in this area by permitting activities that are less likely to be played/undertaken by those living in more deprived areas.
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<b>Mitigating actions:</b>	<p>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. This information is provided in a range of languages and formats.</p> <p>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:</p> <ul style="list-style-type: none"> <li>• Actions have been and are being put in place to maximise safe use of outdoor areas to the extent possible.</li> <li>• Impacts, particularly for women and other carers, have been lessened by providing specific exceptions for childcare and providing care or assistance to an individual with caring needs.</li> <li>• By allowing the opportunity to form extended households, these measures continue to mitigate the differential impacts.</li> <li>• Current exceptions allow children under the age of 12 to play outdoors with peers, and for children under the age of 12 not to be included in the number of people who can meet outdoors. This will help mitigate the impact of these measures on children.</li> <li>• 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.</li> </ul>
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**Assessing the impacts and identifying opportunities to promote equality**

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

<b>Age</b>	<b>Positive</b>	<b>Negative</b>	<b>None</b>	<b>Reasons for your decision</b>
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	X	X		Where possible good relations are promoted between age groups but the opportunities to

different age groups				meet are limited according to understanding of how the virus is transmitted.
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**Do you think that the policy impacts disabled people?**

<b>Disability</b>	<b>Positive</b>	<b>Negative</b>	<b>None</b>	<b>Reasons for your decision</b>
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, but this is necessary to suppress the spread of the virus and protect the right to life.
Advancing equality of opportunity	X	X		The measures recognise the different risks and needs of disabled people and balance them according to understanding of how the virus is transmitted. By introducing further exemptions for those with relevant caring responsibilities towards another adult, it would be possible to put in place a mitigation to ensure that this measure does not impact on disabled people and their carers.
Promoting good relations among and between disabled and non-disabled people	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.

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

<b>Sex</b>	<b>Positive</b>	<b>Negative</b>	<b>None</b>	<b>Reasons for your decision</b>
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		The measures 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?**

<b>Pregnancy and Maternity</b>	<b>Positive</b>	<b>Negative</b>	<b>None</b>	<b>Reasons for your decision</b>
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Eliminating unlawful discrimination, harassment and victimisation			X	The measures do not constitute unlawful discrimination, harassment and victimisation.
Advancing equality of opportunity	X	X		The measures 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,			X	The measures do not constitute unlawful discrimination, harassment and victimisation. The measures may restrict choices for LGB people at higher levels

harassment and victimisation				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 approach set out in these Regulations 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.