

Equality Impact and Fairer Scotland Impact Assessment
The Health Protection (Coronavirus) (International Travel and Operator Liability)
(Scotland) Amendment (No. 5) Regulations 2021

Introduction

The Scottish Government, along with the UK Government and the other Devolved Administrations, have introduced emergency public health measures at the UK border, designed to reduce the public health risks posed by Coronavirus (Covid-19), by limiting the further spread of the disease.

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. However, the unequal impact of the pandemic and the need have due regard to 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.

[The Coronavirus \(Covid-19\): Framework for Decision-Making](#) published in 2020 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 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.

The measures contained within these Regulations have been introduced by emergency public health legislation to reduce the public health risks posed by the spread in Scotland of severe acute respiratory syndrome Coronavirus 2 (SARS-CoV-2) ("Coronavirus"), which causes the disease Covid-19, by limiting the further spread of the disease.

This impact assessment discusses the impact of The Health Protection (Coronavirus) (International Travel and Operator Liability) (Scotland) Amendment (No. 2) Regulations, The Health Protection (Coronavirus) (International Travel and Operator Liability) (Scotland) Amendment (No. 4) Regulations and The Health Protection (Coronavirus) (International Travel and Operator Liability) (Scotland) Amendment (No. 5) Regulations.

Legislative background

The Health Protection (Coronavirus) (International Travel) (Scotland) Regulations 2020 and the Health Protection (Coronavirus, Public Health information for Passengers Travelling to Scotland) Regulations 2020 came into force on 8 June 2020.

The Health Protection (Coronavirus) (Pre-Departure Testing and Operator Liability) (Scotland) Regulations 2021 came into force on 15 January (with some specified provisions coming into force on 1 February 2021).

The above Regulations were due to expire on 20 September 2021 and were revoked and replaced by the Health Protection (Coronavirus) (International Travel and Operator Liability) (Scotland) Regulations 2021 (“the consolidated International Travel Regulations”) on that date. The 2021 Regulations consolidated the provision in the Regulations being replaced and are time limited and are due to expire on 16 May 2022.

The consolidated International Travel Regulations set out requirements for people arriving into Scotland including:-

- to provide particular passenger information before or on arrival into Scotland;
- to possess a notification of a negative Coronavirus (Covid-19) test;
- to possess a testing package for the detection of Coronavirus (Covid-19) before or upon arrival into Scotland and to undertake such tests;
- to stay in specified premises (e.g. at home) for a specified period upon arrival into Scotland;
- to stay in managed isolation accommodation for a specified period upon arrival into Scotland.

The application of these requirements varies depending on a person’s vaccination status, which country outside the Common Travel Area a person has arrived from or travelled through, as well as whether any particular exemption is applicable. It is a criminal offence to fail to comply with the requirements in accordance with the Regulations.

The Regulations also impose related requirements on persons (“operators”) operating commercial services for international passengers travelling to Scotland.

Eligible Vaccinated Arrivals - Background

Following positive progress in the vaccine rollout in Scotland and across the UK, as of 19 July 2021, amendments to the regulations introduced the concept of ‘eligible vaccinated arrivals’, which offered those eligible an exemption from mandatory self-isolation and day 8 testing when arriving from amber list countries. At that time, those eligible under the policy included those who:-

- had completed a course of doses of an authorised Coronavirus (Covid-19) vaccine,
- had participated in, or were participating in, a clinical trial for an authorised vaccine,
- were under the age of 18 and ordinarily resident in the UK,
- had completed a course of vaccine under the UK overseas vaccine roll-out programme, or who was a dependant of such a person.

We assessed the impacts of recognising the UK vaccination programme and a traveller’s vaccination status as a way to remove restrictions placed on international

travellers in those regulations and the findings were published on the Legislation.gov website¹.

It was noted that any negative impacts and measures designed to mitigate them would be kept under close scrutiny considering any newly identified evidence in relation to the impacts of these regulations, as it relates to each of the protected characteristics, and make further adjustments, as appropriate, in line with the requirements of the Public Sector Equality Duty (PSED).

Since the eligible vaccinated arrival policy was introduced, there has been a gradual expansion of the exemption for eligible vaccinated arrivals and the introduction of a new travel regime, implemented by the Health Protection (Coronavirus) (International Travel and Operator Liability) (Scotland) Amendment (No. 3) Regulations 2021², which, amongst other things, abolished the traffic light system for all but the highest risk 'red list' countries and provided that eligible vaccinated arrivals would no longer be required to take a pre-departure test prior to arrival in Scotland. The impact of those changes were assessed and the findings published [here](#).

Measures

The Health Protection (Coronavirus) (International Travel And Operator Liability) (Scotland) Amendment (No. 5) Regulations 2021³ came into force on the 15 October 2021 further updating Scotland's approach to International Travel. This instrument

- makes technical changes to update the terms of the exemption for diplomatic staff and their dependents;
- expands the category of persons who meet the definition of "eligible vaccinated arrival" in terms of regulation 3 of the International Travel Regulations to include persons in Scotland or England who are not vaccinated for medical reasons;
- makes technical amendments which update the requirements in relation to how some individuals should complete the PLF. This relates specifically to travellers who meet the COVID-19 vaccine eligibility criteria (which means those persons are eligible vaccinated arrivals), including those who are participating in clinical trials or who are not vaccinated for medical reasons;
- removes the requirement for passengers to provide their seat number on the Passenger Locator Form (PLF); and
- makes outstanding amendments that relate to COP26.

This document assesses the impacts of the amendments to the eligible vaccinated traveller policy taken forward by:

- The Health Protection (Coronavirus) (International Travel and Operator Liability) (Scotland) Amendment (No. 2) Regulations 2021⁴ amended the

¹ [The Health Protection \(Coronavirus\) \(International Travel etc.\) \(Miscellaneous Amendments\) \(Scotland\) \(No. 5\) Regulations 2021 \(legislation.gov.uk\)](#)

² [The Health Protection \(Coronavirus\) \(International Travel and Operator Liability\) \(Scotland\) Amendment \(No. 3\) Regulations 2021](#)

³ [The Health Protection \(Coronavirus\) \(International Travel and Operator Liability\) \(Scotland\) Amendment \(No. 5\) Regulations 2021](#)

⁴ [The Health Protection \(Coronavirus\) \(International Travel and Operator Liability\) \(Scotland\) Amendment \(No. 2\) Regulations 2021](#)

principal regulations to allow for electronic certification issued by NHS Scotland to be used as proof of COVID vaccination status for the purpose of international travel. This enabled the use of the NHS Scotland COVID Status App.

- The Health Protection (Coronavirus) (International Travel and Operator Liability)(Scotland) Amendment (No. 4) Regulations 2021⁵ further expanded the list of countries from where a person vaccinated with an authorised vaccine may be an eligible vaccinated arrival;
- The Health Protection (Coronavirus) (International Travel and Operator Liability) (Scotland) Amendment (No. 5) Regulations 2021 as per the measures above.

Protected Characteristics

Differential Impacts by Protected Characteristic

Age - Children and Young People

The Joint Committee of Vaccination and Immunisation (JCVI) provided advice about the vaccination of children and young people aged 12 to 17⁶ with follow-up advice for children aged 12 to 15⁷. The UK Chief Medical Officers (CMO's) recommended the Coronavirus (Covid-19) vaccine on public health grounds, given consideration of impacts such as education and mental health. The joint statement from the UK CMO's provides advice on the universal vaccination of children and young people aged 12 to 15 years against Coronavirus (Covid-19)⁸.

Two doses of the vaccine (eight weeks apart) are recommended for Children and young people aged 12 to 17 years:

- who are at increased risk from Coronavirus (Covid-19) due to underlying health conditions
- who live with someone who is immunosuppressed
- who are aged 16 or 17 years and are an unpaid carer, a frontline health or social care worker or are within three months of their 18th birthday

All other children and young people aged 12 to 17 years will be offered a first dose of the vaccine. The timing of a second dose will be confirmed later.

Recognising that the advice to vaccinate children and young people aged 12 to 17 was announced on 12 September, there is the potential for a real age differential experience due to the current vaccine roll out programme. Many children and young

⁵ [The Health Protection \(Coronavirus\) \(International Travel and Operator Liability\) \(Scotland\) Amendment \(No. 4\) Regulations 2021](#)

⁶ [JCVI statement on COVID-19 vaccination of children and young people aged 12 to 17 years: 4 August 2021 - GOV.UK \(www.gov.uk\)](#)

⁷ [JCVI statement on COVID-19 vaccination of children aged 12 to 15 years: 3 September 2021 - GOV.UK \(www.gov.uk\)](#)

⁸ [Universal vaccination of children and young people aged 12 to 15 years against COVID-19 - GOV.UK \(www.gov.uk\)](#)

people will not be fully vaccinated and not able to take advantage of the policy for international travel compared with the older age groups.

To mitigate this issue, there are exemptions in the regulations which provide that as long as they have not been in a red list country in the 10 days before arriving in Scotland, children under 18 do not need to take a test before they travel to Scotland or self-isolate when they arrive, as long as they either normally live in the UK or a relevant country, or are a dependent of someone who has been fully vaccinated under the UK overseas rollout programme. Further expansion of the list of relevant countries, means that more children are covered by the policy, therefore minimising the negative impact on young people. Following arrival in Scotland, such children and young people aged 11 to 17 must take a COVID-19 PCR test within 2 days but are no longer required to take a pre-departure test, take a 'day 8' test or self-isolate on arrival. Children under 11 do not need to take these tests. For children who normally live in the UK or a relevant country, or are a dependent of someone who has been fully vaccinated overseas this test may be either a PCR or LFD⁹.

Summary:

The mitigations put in place through exemptions in the regulations help ensure that the negative effects on younger people are minimised. Provisions in the measures that allow children to travel may help to advance equality of opportunity. Direct discrimination against children has been largely eliminated through exemptions for children relating to testing and other requirements in the Regulations and help facilitate family group travel.

Age - Older people

Under-65s have a higher propensity to travel for leisure.^{10/11} Pre-departure testing within three days of travelling is already used as a requirement for entry in most countries.¹² A single repository for vaccination and testing status would make meeting the requirement easier and be therefore of particular benefit. Being a fully vaccinated traveller removes the requirement to take a pre-departure test, take a 'day 8' test or self-isolate on arrival into Scotland.

Digital access usually reduces with age. As of 2019, 20% of over-55s in the UK do not own a smartphone¹³ and only 47% of adults aged 75+ use a smartphone to access the internet, compared to 98% of 16-24 year olds.¹⁴ Therefore, a solely app-based vaccine certificate would disproportionately negatively impact older people, exacerbating the risk of exclusion if used to determine access to spaces or services. To mitigate this

⁹ As amended in [The Health Protection \(Coronavirus\) \(International Travel and Operator Liability\) \(Scotland\) Amendment \(No. 6\) Regulations 2021](#)

¹⁰ Bernini, C.; Cracolici, MF. (2015). Demographic change, tourism expenditure and life cycle behaviour. *Tourism Management*, [s. l.], v. 47, p. 191–205.

¹¹ Riker, D. (2014). Population aging and the economics of international travel. *Tourism Economics*, 2014, 20 (1), 21–38

¹² International Comparators Join Unit (ICJU) (21)020 – International Travel (1) – 12 March 2021

¹³ Deloitte (2019). [Global Mobile Consumer Survey: UK cut. Plateauing at the peak: the state of the smartphone](#). UK-representative sample (n = 4,150).

¹⁴ Scottish Government (2019). [Scotland's People Annual Report](#).

the regulations provide the app as well as paper and electronic versions of certification issued by NHS Scotland are acceptable for this purpose.

The vaccination programme has followed the JCVI risk-based prioritisation for delivery of vaccine in Scotland. This is largely age-related, and so the proportion of individuals who are fully vaccinated and could benefit from this policy change to expand the category of persons who meet the definition of “eligible vaccinated arrival” increases through older age cohorts. Everyone aged 18 and over has now been invited for a vaccine¹⁵. Over 4 million people have received their first dose and 3.8 million are fully vaccinated¹⁶.

Summary:

There is the potential for a real age differential experience due to the current vaccine roll out programme as vaccines are still being offered to the younger age groups and therefore as many will not be fully vaccinated and not able to take advantage of the new policy for international travel compared with the older age groups.

Vaccine certification and removing the requirement to self-isolate on return to Scotland for those fully vaccinated, expanding the list of countries in which a traveller can be vaccinated and allowing for mixed doses of the vaccine will benefit this group as it will be a means of enhancing freedom to travel.

Sex – Men and Women

Throughout the pandemic, women have tested positive in larger proportion than men. This is partly explained by the fact that women, if in employment, are more likely to work as a ‘key worker’ in a role that carries greater infection risk¹⁷.

The direct harm of Coronavirus (Covid-19) also extends to mental health. Scottish research into mental health impacts during the first wave of the pandemic shows that women reported higher levels of psychological distress than men across all ages, as well as depressive and anxiety symptoms. They also reported more suicidal thoughts than men in the 18 – 29 age bracket. This is consistent with UK-wide research on the mental health gender gap which, looking at data from the first wave, found that having a larger social network before the pandemic was strongly associated with larger well-being declines after the pandemic’s onset: women reported more close friends before the pandemic than men, and higher loneliness than men after the pandemic started.¹⁸

As at the 17 November, there are currently a greater number of females vaccinated which reflects both there being more females in the older population due to higher life

¹⁵ [Who is being offered the coronavirus vaccine in Scotland | The coronavirus \(COVID-19\) vaccine \(nhsinform.scot\)](https://nhsinform.scot)

¹⁶ https://public.tableau.com/app/profile/phs.covid.19/viz/COVID-19DailyDashboard_15960160643010/Overview

¹⁷ [Coronavirus and key workers in the UK - Office for National Statistics \(ons.gov.uk\)](https://ons.gov.uk)

¹⁸ Etheridge, B.; Spantig, L. (2020). [The Gender Gap in Mental Well-Being During the Covid-19 Outbreak: Evidence from the UK](#). Institute for Social and Economic Research, No. 2020-08, June 2020.

expectancy and a greater proportion of females in the health and social care workforce¹⁹.

Summary:

Vaccine certification and expanding the list of countries in which a traveller can be vaccinated and allowing for mixed doses of the vaccine will benefit those whose mental health has suffered disproportionately as a result of Coronavirus (Covid-19) restrictions. Removing the requirement to self-isolate on return to Scotland, for those fully vaccinated will benefit this group as it will mitigate the issues of loneliness and isolation that can occur from isolating at home. It is recognised that for many, the easing of restrictions brings opportunities to resume contact with others, however, for some the prospect is still a worry, especially to those more vulnerable to the virus or those with mental health concerns. The Mental Health Organisation provide some help and advice on coping with the easing of restrictions²⁰.

Pregnancy and Maternity

The advice from the Joint Committee on vaccinations and immunisations was that pregnant women, women who planned to become pregnant within 3 months, and women who were breastfeeding should not be vaccinated against Coronavirus (Covid-19). This advice changed from 16 April, so that pregnant women should be offered the vaccine at the same time as others in their age group. The change was based on data from the United States, where around 90,000 women had been vaccinated against Coronavirus (Covid-19) with no negative impacts identified. The recommendation was also informed by positive evidence of increased risk to pregnant women, particularly those in the third trimester, of becoming severely ill or hospitalised with Coronavirus (Covid-19) should they contract Coronavirus (Covid-19), including an increased risk of premature birth.

Given pregnant women are being offered the vaccine, any impact of the relaxation of the self-isolation rules for those returning from international travel that is specific to pregnancy is likely to be attributable to a greater degree of vaccine hesitancy among pregnant women than among the non-pregnant population. This may be due to a perception that while vaccination is being offered to pregnant women, the recommendation is based not on a positive assessment that vaccination poses no risk to a pregnant woman or her baby, but on data suggesting that vaccination is considered less risky than becoming seriously ill with Coronavirus (Covid-19) during pregnancy. Some pregnant women may therefore conclude that in their circumstances, the greater risk lies with vaccination, and they may choose to take other measures to mitigate against catching Coronavirus (Covid-19) e.g. voluntary shielding, physical distancing etc.

Vaccine hesitancy has been assessed as relevant in relation to a number of the protected characteristics, including those of race and religion and work is ongoing in Government to address the underlying causes of vaccine hesitancy among different

¹⁹ [Coronavirus \(COVID-19\): Vaccinations in Scotland – latest data – SPICe Spotlight | Solas air SPICe \(spice-spotlight.scot\)](#)

²⁰ [From lockdown to relaxation of covid rules: tips on looking after your mental health | Mental Health Foundation](#)

groups which may vary across the relevant protected characteristics, and to ensure the vaccination programme is as inclusive as possible.

Summary:

Some people may want to travel internationally, such as to give birth in another country or seek medical treatment. Expanding the list of countries in which a traveller can be vaccinated and allowing for mixed doses of the vaccine and expanding the vaccination status policy means the policy is more accessible by a wider range of people. The further opening of international travel could positively impact people who share this protected characteristic.

Pregnant women who have chosen to be vaccinated and who have completed a course of doses of an authorised vaccine will be able to benefit from the relaxation immediately. As noted in relation to the issue of disability, we would flag that there are circumstances in the International Travel Regulations where an individual may leave self-isolation, such as to access medical services (including maternity or pregnancy-specific services), or to access other public services which are critical to the wellbeing of the individual.

We will continue to consider newly identified evidence, as it relates to each of the protected characteristics, and will make further adjustments, as appropriate.

Race

Minority ethnic people in Scotland face significant societal and health inequalities. In terms of health, mortality rates are lower than the general population, partly due to the fact that minority ethnic groups are younger. However, prevalence of some health conditions are higher for some ethnic groups, such as Type 2 diabetes and coronary heart/cardiovascular disease among people of South Asian and African descent. In 2011, despite having a much younger age profile, 37% of Gypsy/Travellers reported having long-term health conditions compared to 30% of the population as a whole.²¹

The protected characteristic of 'race' also includes 'nationality'. Many British people or British residents have family and social connections who live outside the UK. Throughout the pandemic international travel has been restricted and compromised the ability to see friends and family which in turn can have negative impacts on people's development and wellbeing.

This policy mitigates these negative impacts by making international travel more accessible allowing people to see friends and family outside of the UK without the need to self-isolate if fully vaccinated on their return to Scotland if they have the means to take advantage of travel.

People on low incomes, adults living in the most deprived areas and those living in social rented housing are all less likely to use the internet.²² Although minority ethnic

²¹ Scottish Government (October 2020). [Impact of COVID-19 on Equality Groups – Ethnicity Analysis](#)

²² Scottish Government (2019). [Scottish Household Survey Annual Report](#)

adults are more likely than average to use the internet²³, undocumented migrants, who stakeholders stress suffer from high levels of deprivation, face higher rates of digital exclusion and so digital-only certification may disproportionately impact them. Stakeholders also said that all migrants have concerns about their status, not just migrants with insecure status, as even those with secure status can have that revoked. To mitigate this the regulations provide the app as well as a paper versions of certification issued by NHS Scotland are acceptable for this purpose. While an option of non-digital certificates is a mitigation, access to them would still be problematic for some minority ethnic groups, such as some Gypsy/Travellers, who do not have a fixed address. Individuals may be able to organise a mail redirection with Royal Mail to arrange delivery to a different address such as temporary accommodation or a friend/family member's address. An alternative option may be to download a PDF version from the NHS Inform website.

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Summary:

Amending the meaning of an eligible vaccinated arrival to include people who have received doses of different vaccines in the UK or a relevant country, or in the UK vaccine roll-out overseas and adding countries to the list of relevant countries where a person may be vaccinated with an authorised vaccine will benefit people of varying race.

Given the differential uptake of vaccination, certification would place a disproportionate financial burden on minority ethnic people through potential lost earnings. This is because travellers who are not fully vaccinated will have to self-isolate for 10 days and purchase two tests following their return to Scotland. The vaccination policy goes some way to mitigating negative impacts by making international travel more accessible for eligible vaccinated travellers. Allowing people to see friends and family outside of the UK and by doing so fostering good relationships without the need to self-isolate or take a day 8 test if fully vaccinated on the return to Scotland. Although we have considered individuals not fully vaccinated, we have to balance the need to remove or lessen restrictions on International Travel where that approach is consistent with clinical evidence and advice while balancing the need for continued public health measures to be applied where needed.

Disability

According to the 2019 Scottish Health Survey, 32% of men and 37% of women in Scotland reported living with a limiting long-term condition. For people aged 75 and over, 58% had a limiting long-term condition.²⁴ 1 in 5 Scots identify as disabled and more than a quarter of working age people have an acquired impairment.²⁵ This group also reports much higher levels of loneliness (39%) than non-disabled people (16%).

As with age, digital access is a key consideration. Glasgow Disability Alliance reports that 60% of their members do not have digital access.²⁶ While disabled people may

²³ Scottish Government (September 2020). [The Impacts of COVID-19 on equality in Scotland](#)

²⁴ Scottish Government (September 2020). [Scottish health survey 2019: volume one - main report](#)

²⁵ Scottish Government (December 2018). [A Fairer Scotland for Disabled People: employment action plan](#)

²⁶ Glasgow Disability Alliance. [GDA Connects](#)

have a smartphone, it may be too old to support certain apps.^{27/28} A disabled person may choose not to update their phone to support apps as the one they have meets their accessibility needs. Therefore, a solely digital based Coronavirus (Covid-19) Status Certification is likely to exclude many disabled people, exacerbating the risk of exclusion if used to access spaces or services or international travel

A paper based certification may also have some challenges for disabled people. According to the latest statistics, in 2019 there were 23,584 adults with learning disabilities and/or autism spectrum diagnoses known to local authorities in Scotland²⁹. Some people with learning disabilities or other diagnosis may find it more challenging to maintain either a paper or digital certificate which may lead to negative impacts if they are not able to gain access to the privileges certification confers. They may also find it confusing and distressing if they are disbarred from accessing a space or service.

Providing in the regulations that both paper based certification and the digital NHS app can be used to show vaccination status works towards mitigating these considerations. Many countries/territories offer inclusive solutions. Most global standards emphasise the importance of inclusive solutions.

When assessing the impacts of the vaccination status policy³⁰ we recognised that a distinction between being fully vaccinated and not vaccinated may impact on individuals who have particular medical conditions or disabilities which mean they cannot be vaccinated. While individuals with some medical conditions or disabilities may not be vaccinated owing to those conditions, many others with underlying health conditions or disabilities will have been vaccinated, and will have been prioritised for vaccination in the roll-out.

Nevertheless, we recognise that a distinction may impact more on individuals who have particular medical conditions or disabilities which mean they cannot be vaccinated and therefore as this policy has developed, further consideration was given to this point. From the 15 October 2021, the International travel regulations were amended so that persons who meet the definition of “eligible vaccinated arrival” include persons in Scotland or England who are not vaccinated for medical reasons. In Scotland, this covers a very small number of individuals who have already been contacted by clinical professionals. Anyone else who thinks they are in this category should contact their vaccination centre or NHS Inform.

It is also recognised that those participating in a clinical trial for vaccination against Coronavirus (Covid-19) carried out in accordance with the requirements of the Medicines for Human Use (Clinical Trials) Regulations 2004 are also unable to be classed as eligibly fully vaccinated. The regulations provide an exemption for this and as the policy develops this exemption may be extended to others.

²⁷ Disability Scotland (March 2021). [Your Say: Weekly polling on Vaccine Passports](#).

²⁸ Ada Lovelace Institute (March 2021). [The Data Divide: Public attitudes to tackling social and health inequalities in the COVID-19 pandemic and beyond](#).

²⁹ [Learning-Disability-Statistics-Scotland-2019.pdf \(scld.org.uk\)](#)

³⁰ [The Health Protection \(Coronavirus\) \(International Travel etc.\) \(Miscellaneous Amendments\) \(Scotland\) \(No. 5\) Regulations 2021 \(legislation.gov.uk\)](#)

Summary:

The impact on individuals with particular medical conditions or disabilities which mean they cannot be vaccinated, may be greater than on those who do not have medical conditions or who are not disabled. There are a number of applicable defences in the International Travel Regulations which may be relevant to individuals with particular healthcare or disability-related requirements, where an individual may leave self-isolation. These include to access medical care and medical services, or other services which are critical to the wellbeing. These defences will continue to be available to individuals who are required to self-isolate because they are not able to take advantage of the relaxation for vaccinated travellers. This policy simply makes travel more seamless for those who can demonstrate vaccination status.

The Health Protection (Coronavirus) (International Travel and Operator Liability) (Scotland) Amendment (No. 5) Regulations 2021 expands the category of persons who meet the definition of “eligible vaccinated arrival” to include persons in Scotland or England who are not vaccinated for medical reasons.

Religion and Belief

The Coronavirus (Covid-19) Health Protection restrictions have caused considerable challenges to faith and belief communities. Most notably, limitations on attendance in places of worship (including periods of full closure) have impacted on people’s ability to practice certain aspects of their faith, such as to congregate for worship in line with their Article 9 rights under the European Convention on Human Rights (freedom of religion).

Being able to attend a place of worship is seen by many as playing an important role to the spiritual and mental health for some with the faith and belief communities, as well as contributing to reducing social isolation and loneliness.

Whilst there are no major religions that prohibit vaccinations, and overall uptake in the UK has been successful, there may be individuals who are less likely to have the COVID-19 vaccination due to certain faiths or beliefs. People of certain religions may not want to take a vaccine because it goes, or is perceived to go, against their beliefs (e.g. Muslim/Jewish if they contain pork cells, or embryonic cells for orthodox religious people). Some people who hold non-religious but protected beliefs under the Equality Act 2010, such as veganism³¹, might also reject a vaccine on the grounds that it may have been tested on animals.

The Scottish Government is progressing work to address vaccination hesitancy and deliver an inclusive vaccination programme, including targeted outreach.

Summary:

Removing the requirement to self-isolate for 10 days from those who are fully vaccinated, will allow people to access and attend places of worship and could facilitate travel to attend religious festivals or undertake pilgrimages. Expanding the

³¹ UK Human Rights Blog (4 January 2020). [Ethical veganism is a protected belief, rules Employment Tribunal](#)

list of countries in which a traveller can be vaccinated, allowing for mixed doses of the vaccine and expanding the vaccination status policy means the policy is more accessible by a wider range of people. It is therefore considered that these regulations do not disproportionately impact on a person's religion and faith.

Sexual Orientation

In 2018, 2% of people in Scotland identified as lesbian, gay, or bisexual (LGB).³²

During the Coronavirus (Covid-19) pandemic, loneliness and isolation have been an issue particularly for LGB people of all ages: a survey of 2,934 secondary school pupils (1,140 of whom identified as LGBT+) by Just Like Us found that LGBT+ young people are twice as likely as their non-LGBT peers (52% vs 27%) to have felt lonely and separated from the people they are closest to on a daily basis during lockdown. 68% of LGBT+ young people surveyed also reported their mental health has worsened since the pandemic began, compared with half (49%) of non-LGBT+ young people.³³ Age UK also reported that older LGBT+ people are especially vulnerable to loneliness as they are more likely to be single, live alone, and have less contact with relatives.³⁴

Summary

Vaccine certification and removing the requirement to self-isolate on return to Scotland for those fully vaccinated, expanding the list of countries in which a traveller can be vaccinated and allowing for mixed doses of the vaccine will benefit this group as it will mitigate the issues of loneliness and isolation. It is considered that these regulations do not disproportionately impact on the person(s) sexual orientation

Gender Reassignment

Some trans and non-binary people may have different names and genders on different documents and data bases for legitimate reasons. While changing one's personal data with a GP is fairly easy, data can be incorrectly updated, records deleted and data 'miss-matched' due to issues with interoperability of systems, which could be problematic if certifications draw on incorrect or absent data. These pre-existing issues – data interoperability and challenges interacting with the health care system – could result in low uptake of Coronavirus (Covid-19) Status Certification.

Someone may have a different name and gender on their health records than the one that they use with friends, family and colleagues. If someone's name and gender is displayed on domestic Coronavirus (Covid-19) Status Certification then this may lead to unintentional 'outings', which could lead to embarrassment, trauma and discrimination.

³² Office for National Statistics (6 March 2020). [Sexual Orientation, UK: 2018](#)

³³ Just Like Us (18 February 2021). [LGBT+ young people twice as likely to feel lonely and worry daily about mental health than peers.](#)

³⁴ Age UK (February 2018). [Combating loneliness amongst older LGBT people](#)

Stakeholders have received anecdotal reports that some trans people residing in Scotland have not been able to travel abroad to receive medical treatment during the pandemic while others residing in England have.

Summary:

An individual's name on their vaccine certificate may not match the name provided on their passport which is provided to carriers. This risk can be mitigated by carriers using common fields such as date of birth to verify the traveller's vaccination status.

The further opening of international travel and expansion of the policy could positively impact people who share this protected characteristic allowing them to travel abroad to receive medical treatment.

Marriage and Civil Partnership

While marriage/civil partnership ceremonies have not stopped during the Coronavirus (Covid-19) crisis given that they are a legal right, attendees were initially severely restricted at the beginning of the pandemic. At present however there are no restrictions on numbers attending marriage or civil partnership ceremonies.

UK polling data gives us further indications of the extent to which couples who wanted to get married or registered as a civil partnership have been impacted by the pandemic. A poll of more than 400 couples with weddings planned between September 2020 and January 2021 revealed that, while 95% are not planning to cancel their wedding, 71% were choosing to postpone to later in the year or into 2022.³⁵

Summary:

Vaccine certification and removing the requirement to self-isolate on return to Scotland for those fully vaccinated, expanding the list of countries in which a traveller can be vaccinated and allowing for mixed doses of the vaccine will benefit this group as it could support friends and family living abroad to visit Scotland to attend a wedding or civil partnership and the reception. This could have particularly positive benefits on the couples' wellbeing if their loved ones are able to attend the event.

These amendments could also benefit couples and partners living in separate countries and affected by travel restrictions, enabling them to travel more freely or to get married abroad.

Fairer Scotland Duty Assessment

Socio-economic disadvantage: any people experiencing poverty

As recognised in this equality impact assessment, digital exclusion disproportionately impacts older people, disabled people, Gypsy/Travellers and young carers; that is, some of the people most impacted by Coronavirus (Covid-19). While people in these groups might have access to a smart phone or digital device, they may not have the

³⁵ Hitched (20 October 2020). [New Study: 71% of Couples Are Postponing Their Wedding Due to COVID-19](#)

software or data plan to support an app (for example some iPhone 5s cannot support Test and Protect). A paper based solution is a critical mitigation to ensure that certification does not exclude large proportions of the population.

The majority of the UK public is also concerned about the potential discriminatory impact of vaccine passports³⁶. While two thirds (64%) of the public are not concerned that vaccine passports will be discriminatory against themselves as individuals, slightly more than half (54%) do think it is likely they would lead to discrimination against marginalised groups. People from ethnic minority backgrounds and communities, and on lower incomes (total household income under £20,000), were also more likely to express concern about the risk of discrimination towards themselves than those who did not fall into those categories.

Whilst overall uptake of the vaccination has been good, there is a marked difference in least and most deprived areas. Moreover, some communities display higher rates of vaccine hesitancy than the general population. One of the most impactful mitigations is the inclusive vaccination programme, which is being designed and rolled out to address these issues

Summary:

Those who are required to travel by air for essential travel, for example on compassionate grounds or Scottish people needing to return to Scotland to access NHS treatment, may not have the financial resources to self-isolate for 10 days. The expansion of the eligible vaccinated arrival policy and the removal of the cost of pre-departure tests and day 8 tests for vaccine certified people will make travelling more accessible for medical, leisure and employment purposes.

Summary of considerations in relation to the protected and non-protected characteristics:

The measures contained within the regulations should positively benefit people and the economy as we develop a greater normality to our everyday lives. Whilst the view of the Scottish Government is that these regulations are justified, there is also a need to not only mitigate those negative effects identified but to advance equality of opportunity and the measures we have put in place are designed to help do this. We have sought to mitigate any negative impacts through the regulations.

To assist in the mitigation of any negative effects and to eliminate discrimination, advance equality of opportunity and foster good relations between people the regulations will be reviewed on a regular basis. The regulations therefore contain two safeguards:

- The regulations will be reviewed every 28 days, in line with the International Travel regulations as a whole, and consider the need for restrictions and requirements imposed under the regulations.
- The International Travel Regulations, and related instruments, will expire on 16 May 2022.

³⁶ [The data divide | Ada Lovelace Institute](#)

We will continue to consider any newly identified evidence in relation to the impacts of these regulations and its operation, as it relates to each of the protected characteristics, and make further adjustments, as appropriate, in line with the requirements of the Public Sector Equality Duty (PSED).

Declaration and Publication

I have read the Equality Impact and Fairer Scotland Impact Assessment (EQFSIA), and I am satisfied that it represents a fair and reasonable view of the expected equality impact of the regulations.

Signed: Kerry Morgan

Date: 24 November 2021