

H&F Equality Impact Analysis Tool

Conducting an Equality Impact Analysis

An EIA is an improvement process which helps to determine whether our policies, practices, or new proposals will impact on, or affect different groups or communities. It enables officers to assess whether the impacts are positive, negative, or unlikely to have a significant impact on each of the protected characteristic groups.

The tool is informed by the <u>public sector equality duty</u> which came into force in April 2011. The duty highlights three areas in which public bodies must show compliance. It states that a public authority must, in the exercise of its functions, have due regard to the need to:

- 1. Eliminate discrimination, harassment, victimisation, and any other conduct that is prohibited under the Equality Act 2010
- 2. Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it
- 3. Foster good relations between persons who share a relevant protected characteristic and persons who do not share it

Whilst working on your Equality Impact Assessment, you must analyse your proposal against these three tenets.

General points

- 1. In the case of matters such as service closures or reductions, considerable thought will need to be given to any potential equality impacts. Case law has established that due regard cannot be demonstrated after the decision has been taken. Your EIA should be considered at the outset and throughout the development of your proposal, it should demonstrably inform the decision and be made available when the decision is recommended.
- 2. Wherever appropriate, the outcome of the EIA should be summarised in the Cabinet/Cabinet Member report and equalities issues dealt with and cross referenced as appropriate within the report.
- 3. Equalities duties are fertile ground for litigation and a failure to deal with them properly can result in considerable delay, expense, and reputational damage.
- 4. Where dealing with obvious equalities issues e.g. changing services to disabled people/children, take care not to lose sight of other less obvious issues for other protected groups.
- 5. If you already know that your decision is likely to be of high relevance to equality and/or be of high public interest, you should contact the Strategy & Communities team for support.

Further advice and guidance can be accessed online and on the intranet:

https://www.gov.uk/government/publications/public-sector-equality-duty

https://officesharedservice.sharepoint.com/sites/Governance/SitePages/Reports.aspx

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Overall Information	Details of Full Equality Impact Analysis
Financial Year and	Q3 / 2024
Quarter	
Name and details of	Title of EIA: H&F Food Plan 2025-2030
policy, strategy, function, project,	Short summary:
activity, or programme	Approval is sought by Cabinet to:
	1. agree to adopt the H&F Food Plan 2025 – 2030 principles and framework for delivery, attached at appendix one.
	2. agree the development of a detailed local action plan which will enable the H&F Food for All Partnership to drive forward key initiatives based on our sphere of influence and the resources available to us.
	Hammersmith and Fulham Council and the H&F Food for all Partnership have created a 5-year food plan, building on the H&F Food Matters: Action Plan 2019-2024. This collaborative approach addresses immediate food needs while aiming to reduce long-term causes of food insecurity; create a sustainable local food culture; and lessen reliance on crisis support.
	The plan promotes healthier lifestyles and improves access to nutritious food for the community and emphasises the importance of food in daily life, from nutrition to community-building. Developed in line with national guidance and good practice from other areas, the plan focuses on creating a comprehensive delivery plan where shared ownership of actions will be encouraged for all partnership members to contribute their expertise.
Lead Officer	Name: Susan Hughes Position: Programme Lead Email: susan.hughes@lbhf.gov.uk
Date of completion of final EIA	24/02/2025

Plan for completion	Timing: 2025-2030 Resources: H&F Food for All Partnership		
Analyse the impact of the policy, strategy, function, project, activity, or programme	more than one pi	act of the policy on the protected characteristics (including where people / groups ma rotected characteristic). You should use this to determine whether the policy will have eve impact on equality, giving due regard to relevance and proportionality.	
	Protected characteristic	Analysis	Impact: Positive, Negative, Neutral
	Age	Older People Social isolation and loneliness are associated with reduced physical activity, accessing less healthy food and increased risk of under-nutrition among older people, with one in ten older people in the UK are suffering from or at risk of malnutrition. 25.6% of residents aged 60+ are experiencing income deprivation, particularly in the northern parts of H&F and who may be experiencing or at risk of food poverty.	
		Early Years A good diet is crucial from the prenatal stage and throughout early childhood. It sets the foundation for healthy growth and development. Breastfeeding offers numerous health benefits for both infants and mothers. Early years are also key for establishing positive eating habits and attitudes towards food, which can influence a child's openness to trying new foods later. A poor diet during this critical time can increase the risk of developing chronic conditions like type 2 diabetes, impact mental and emotional well-being, lead to dental issues, and have other long-term negative health effects. There is also a need for support and education for families around healthy cooking, using value for money recipes and making the most out of a limited income.	Positive
		Working Age Groups Employed residents are increasingly seeking food aid due to cost of living. Food bank usage is not evenly distributed across H&F, with wards like White City showing higher percentages of individuals who were previously considered food	

H&F Food Plan		
H&F Food Plan	secure. The wards with the highest usage of foodbanks were White City 16%, Conningham 10%, Addison 8%, College Park & Old Oak 8%, Sands End 7% and Shepherds Bush Green 7% Young people and young adults In the development of the food plan, we found how food insecurity can negatively impact a young person's mental health, their engagement in education and employment, and over time contributes to nutritional deficiencies and health issues, further a young people's ability to move out of poverty. Despite these concerning findings, young people are typically under-represented in food insecurity research which mostly focuses on families, children or food bank users.	
	Stakeholders working with young people also spoke about education and the need to support young people to eat healthily. Some young people, particularly care leavers, may not have been taught the importance of eating healthily and so spend most of their money on fast food and takeaways out of convenience, taste preferences and relative cheapness. Young people in the UK are exposed to 15 billion ads for foods high in sugar, salt and fat every year. It is important that services and community organisations working with young people are given the necessary resources to promote and encourage healthy eating.	
Disability	Disabled people with physical impairments may have issues regarding access to food aid provision and transport to food retailers. People with learning disabilities are at higher risk of being overweight or obese. (Public Health England). This may have issues regarding access to food such as transport. In addition, understanding and ability to shop and cook is a key issue. Disabled residents or those with long-term health conditions face a higher likelihood of food insecurity, with 18% of such families affected, more than double the rate of families without disabled members.	Positive
Gender reassignment	There are no identified impacts in relation to gender reassignment.	Neutral
Marriage and Civil Partnership	There are no identified impacts for marriage and civil partnerships.	Neutral

F Food Plan	Pregnancy and maternity	A good diet is crucial from the prenatal stage and throughout early childhood. It sets the foundation for healthy growth and development. Breastfeeding offers numerous health benefits for both infants and mothers. Early years are also key for establishing positive eating habits and attitudes towards food, which can influence a child's openness to trying new foods later. A poor diet during this critical time can increase the risk of developing chronic conditions like type 2 diabetes, impact mental and emotional well-being, lead to dental issues, and have other long-term negative health effects. There is also a need for support and education for families around healthy cooking, using value for money recipes and making the most out of a limited income.	Neutral
	Race	The proposed plan aims to engage more with communities who typically do not use services, particularly Black, Asian, and Multiethnic groups. Third Sector organisations and faith groups will help create and support the actions in the Food Delivery Plan. This plan seeks to tackle health inequalities with focused outreach and culturally aware solutions. It will promote positive messaging, presenting services as chances to: - Share food knowledge about growing, shopping, and cooking - Learn new skills related to food and cooking - Reduce food waste - Build communities through food sharing and cross-cultural gatherings.	Positive
		It is important to eliminate the stigma around food poverty and health problems like obesity, offering support in respectful, non-judgmental ways. Programs should be inclusive, addressing various backgrounds, health, and cultural needs. Targeted support will focus on the most deprived areas, especially those with high child poverty, food bank usage, and populations like asylum seekers and disabled individuals, ensuring access to suitable and nutritious food.	
		Community organisations, allotments, food banks, and faith groups will play vital roles in delivering the Food Plan and enhancing community resilience. Events celebrating cultural food significance will foster unity while promoting healthy eating habits. Through our work, celebrate the diverse cultures in our community through food, whilst also promoting 'a culture of healthy eating	

H&F	Food	Plan
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There are no identified impacts on religion/belief.	Neutral
 Unhealthy eating is a major contributor to obesity and other diet related ill health. Local action on raising awareness of diet and enabling access to healthier choices will help to tackle heart disease, cancer, diabetes, stroke, high blood pressure, high cholesterol and many factors critical to health. In H&F. more men are diagnosed with diabetes ages over 55 than women. More women suffer from coronary heart disease than men. Diabetes is being diagnosed increasingly in younger men. H&F has a lower child obesity rate compared to London and England however we know that children growing up in the most deprived wards in London are twice as likely to leave primary school obese as those in the least deprived areas. Lille, Hammersmith Broadway, Addison, Fulham Town and White City have the highest child obesity rates in H&F in which the majority are girls particularly for girls from white British and black Caribbean backgrounds 	Positive
There are no identified impacts on sexual orientation.	Neutral
When a child is not fed frequently and reliably by their primary caregiver, they can develop food anxiety. Food is often used by foster children as a way to gain some control over their lives that have often been turbulent and unstable. It's also used as a way for children to self-soothe when they're upset. It may also be a survival instinct. It's often a coping mechanism to deal with intense emotions and past trauma – something most children in care will experience. The H&F Food plan promotes a collaborative approach whereby Children's Services will be supported by Public Health and NHS colleagues to promote good mental health in care experienced young people.	Positive
	Unhealthy eating is a major contributor to obesity and other diet related ill health. Local action on raising awareness of diet and enabling access to healthier choices will help to tackle heart disease, cancer, diabetes, stroke, high blood pressure, high cholesterol and many factors critical to health. In H&F. • more men are diagnosed with diabetes ages over 55 than women. • More women suffer from coronary heart disease than men. • Diabetes is being diagnosed increasingly in younger men. • H&F has a lower child obesity rate compared to London and England however we know that children growing up in the most deprived wards in London are twice as likely to leave primary school obese as those in the least deprived areas. Lille, Hammersmith Broadway, Addison, Fulham Town and White City have the highest child obesity rates in H&F in which the majority are girls particularly for girls from white British and black Caribbean backgrounds There are no identified impacts on sexual orientation. When a child is not fed frequently and reliably by their primary caregiver, they can develop food anxiety. Food is often used by foster children as a way to gain some control over their lives that have often been turbulent and unstable. It's also used as a way for children to self-soothe when they're upset. It may also be a survival instinct. It's often a coping mechanism to deal with intense emotions and past trauma – something most children in care will experience. The H&F Food plan promotes a collaborative approach whereby Children's Services will be supported by Public Health and NHS colleagues to promote good mental health in care

Human Rights or Children's Rights

H&F Food Plan	
	If your decision has the potential to affect Human Rights or Children's Rights, please contact your Equality Lead for advice
	Will it affect Human Rights, as defined by the Human Rights Act 1998? No
	Will it affect Children's Rights, as defined by the UNCRC (1992)?

Section 03	Analysis of relevant data Examples of data can range from census data to customer satisfaction surveys. Data should involve specialist data and information and where possible, be disaggregated by different equality strands.
Documents and data reviewed	
New research	Further research will be required during the development of specific actions identified in the Food Delivery Plan.

Section 04	Consultation
Consultation	Stakeholder consultation is ongoing, but themes have emerged, through Food for all partners engagement with residents, that have informed the development of the draft food plan. A key priority in year 1 of the Food Delivery Plan will be to design and undertake an engagement plan to periodically gather the views of residents experiencing and no longer experiencing food insecurity. The output would be used to further inform food plan actions which will empower and help people access affordable healthy food. Residents engaged with so far have included those representing low-income households, disabled people, older people, unpaid carers, people in receipt of other welfare support or council care services, young care leavers, homeless and those in temporary housing or hostels, people with no recourse to public funds and families, particularly those with infants or young children (including, but not limited to those eligible for free school meals).
	Hammersmith & Fulham Council is committed to doing things with residents, not to them, and understand that this food plan and its objectives cannot be achieved by any one group, sector or setting. We will work with partners across sectors to create a stronger food system in the borough. Voluntary and Community Sector (VCS) partners bring first-hand experience of working with communities and businesses have a responsibility to improving access to healthy affordable food and supporting their employees and community.

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	This Food Plan has been developed in line with guidance from the National and London Food Strategy which recommends that local authorities should put in place a food strategy in partnership with the communities they serve. It incorporates input from residents with lived experience and is co-created with the Food for All partnership. The plan aligns with the Council's goal to collaborate with third sector organisations to meet shared priorities and strengthen partnerships. We will work with communities and local groups to create a delivery plan that respects the borough's diversity and promotes independence and resilience.
Analysis of consultation outcomes	Public health have undertaken significant consultation with key stakeholders, in the established multi-agency Food for all Partnership. This has involved consulting with all partnership members to coproduce a 5-year borough wide approach to achieving the following:
	 Food Security: Ensuring no one goes hungry or is malnourished Healthy Eating: Enabling everyone to eat healthily Connecting Communities: Preventing social isolation around food Sustainable Food Systems: Enabling environmentally conscious eating
	Through this process the partnership has consulted residents with lived experience. These ambitions are considered to encompass most of the important issues for food in H&F and much work has been done to look at other food

Section 05	Analysis of impact and outcomes
Analysis	What has your consultation (if undertaken) and analysis of data shown? You will need to make an informed assessment about the actual or likely impact that the policy, proposal, or service will have on each of the protected characteristic groups by using the information you have gathered. The weight given to each protected characteristic should be proportionate to the relevant policy (see guidance).

plans and strategies Nationally. We have also utilised feedback gathered from the development of other Council

Strategies, the Tier Two Wight Management service and the Oral Health Promotion plan for example.

Section 06	Reducing any adverse impacts and recommendations
Outcome of Analysis	No adverse impacts are anticipated.

Section 07	Action Plan					
Action Plan	Note: You will only	need to use this se	ction if you have ide	entified actions as a	result of your analy	sis
	Issue identified	Action (s) to be taken	When	Lead officer and department	Expected outcome	Date added to business/service plan

Section 08	Agreement, publication and monitoring			
Senior Managers' sign-	Name: Dr Nicola Lang			
off	Position: Director of Public Health			
	Email:			
	Telephone No: 07769 199 396			
	Considered at relevant DMT: Y			
Key Decision Report	Date of report to Cabinet/Cabinet Member: June 25			
(if relevant)	Key equalities issues have been included: Yes			
Equalities Advice	Name: Yvonne Okiyo			
(where involved)	Position: Strategic Lead Equity, Diversity and Inclusion			
	Date advice / guidance given: 04.03.25			
	Email: Yvonne.okiyo@lbhf.gov.uk			
	Telephone No: 07824 836 012			