

Equality Impact Assessment (EqIA) Form for Systematic Reviews: Guidance Notes

The Equality Impact Assessment (EqIA) process is an approach designed to improve research practice. It helps to determine and understand how what we do may affect people differently. ARC EM is committed to embedding consideration of the needs of people who share the Protected Characteristics and others (see Question 2) into its research, evaluation and review work. This will help to ensure that research meets the health needs of our diverse communities.

This EqIA is in two parts:

SECTION A must be carried out **prior to the commencement** of the Systematic Review in order to understand its potential to include equality issues.

SECTION B must be completed **after finishing your Systematic Review** in order to record equality issues evident in your analysis as well as any impact and recommendations for action.

A thorough EqIA can only enhance the quality and reach of your research and should be an integral part of the entire research process.

Guidance on the EqIA process is provided through the Centre for Ethnic Health Research (specifically through attendance at an Interactive Seminar) and must be undergone prior to completion of this form.

For equality-related support in completing your EqIA, please contact the Centre for Ethnic Health Research on ethnichealthresearch@leicester.ac.uk (See the Centre's website - ethnichealthresearch.org.uk - for further information).

PLEASE RETURN THIS FORM, TOGETHER WITH A COPY OF YOUR STUDY PROTOCOL, TO THE CENTRE FOR ETHNIC HEALTH RESEARCH USING THE ABOVE EMAIL ADDRESS AFTER YOU HAVE COMPLETED EACH SECTION. IN OTHER WORDS SEND YOUR COMPLETED SECTION A BEFORE YOU COMMENCE YOUR SYSTEMATIC REVIEW, AND SECTION B AFTER YOU HAVE FINISHED.

SECTION A – TO BE COMPLETED AND SUBMITTED PRIOR TO COMMENCING YOUR SYSTEMATIC REVIEW

1. Entitle and give a brief description of the Systematic Review

Use sub-headings e.g. Review title, Review type, Planned analysis, Inclusion/Eligibility criteria, Planned PPIE, Dissemination pathway.

Consider these questions:

- What is the current research saying?
- Will the research replace or complement existing approaches?

There are important equality considerations in relation to Inclusion/Eligibility criteria. For example, to only include larger studies would likely exclude research studies conducted in specific community and low/middle income contexts, which may then potentially exclude specific protected characteristic groups.

Try to use Plain English and language that can be understood by a potential participant. From 1st August 2016 onwards, all organisations that provide NHS care and/or publically-funded adult social care are legally

required to follow the **Accessible Information Standard**. The Standard sets out a specific, consistent approach to identifying, recording, flagging, sharing and meeting the information and communication support needs of patients, service users, carers and patients with a disability, impairment or sensory loss.

Even if your research doesn't legally come under this particular Standard, it is worthwhile looking at what it says and meeting its stipulations so that your research study is understood by all, participants and otherwise.

For further information and detail on the **Accessible Information Standard**, please go to the relevant NHS England website page: [NHS England » Accessible Information Standard](#)

2. Identify who – from the Protected Characteristic groupings or other relevant underserved or disadvantaged communities – will (or may) be affected and how

Consider each Protected Characteristic individually and in relation to the main aim(s) of the Review, Inclusion/Eligibility criteria, Planned sub-group analysis, PPIE and Dissemination pathways as relevant.

Protected Characteristics (Equality Act 2010)

Age	A person belonging to a particular age (e.g. 32 year olds) or range of ages (e.g. 18 to 40 year olds). This includes all ages, including children and young people. A person can, of course, belong to a number of different age groups (as in this example).
Disability	A person has a disability if they have a physical or mental impairment which has a substantial and long-term adverse effect on that person's ability to carry out normal day-to-day activities. (NOTE: Consideration must be given to the full range of disabilities – physical, sensory, learning, mental illness etc). The European Court of Justice has a broader definition of disability in relation to work that – it has been clarified legally – also applies in the UK.¹ Cancer, HIV and Multiple Sclerosis are automatically regarded as disabilities from the point of diagnosis². Long-term impairments include those that last or are likely to last for at least 12 months. In addition, The Convention on the Rights of Persons with Disabilities (CRPD) is an international legal agreement. It exists to protect and promote the human rights of disabled people. Consideration of the 'social model of disability' is particularly important in addressing access and other equality-related disability issues.³
Gender Reassignment	The process of transitioning (reassigning) from one sex to another. A person has the protected characteristic of gender reassignment if the person is

¹ Namely 'That the definition of disability must be understood as specifically covering a person's ability to participate in working life on an equal basis with other workers.' See [The Equality Act 2010 \(Amendment\) Regulations 2023 \(publishing.service.gov.uk\)](#)

² See [Conditions automatically treated as a disability – The Equality Act and Cancer, MS and HIV. | Acas](#)

³ See [Social model of disability | Foundation for People with Learning Disabilities](#); [First Steps | Professional services | Royal College of Nursing \(rcn.org.uk\)](#); and [Social model of disability | Disability charity Scope UK](#)



	proposing to undergo, is undergoing or has undergone a process (or part of a process) for the purpose of reassigning the person's sex by changing physiological or other attributes of sex. Trans people are protected from discrimination on the ground of gender reassignment. The Equality and Human Rights Commission also stated: <i>"The Equality Act 2010 says that you must not be discriminated against because you are transsexual, when your gender identity is different from the sex assigned to you when you were born... In essence therefore, all transsexual people share the common characteristic of gender reassignment."</i> Non-binary and/or gender fluid people are also protected under the Equality Act under the 'Gender Reassignment' categorisation. See https://www.lawgazette.co.uk/legal-updates/non-binary/gender-fluid-claimants/5105968.article and Non-binary people are now protected from discrimination under the UK Equality Act for more information. The Equality Act actually uses the term 'transsexual' (whilst recognising that some people consider this term to be 'outdated') for individuals who have the protected characteristic of gender reassignment. The term 'trans' is also used (e.g. in specific Equality and Human Rights Commission guidance and as mentioned previously) to refer to a person who has the protected characteristic of gender reassignment. This refers only to persons who fall within the Act's definition of gender reassignment. It does not include persons who may identify as trans or transgender but are outside of this definition. Protection extends to those treated less favourably because they are perceived to be transsexual. It is far better to be inclusive for the purposes of assessing and addressing discrimination and therefore consider viewing Transgender as a more complete term for a variety of identities.⁴ For further information: • Equality and Human Rights Commission (EHRC): Gender reassignment discrimination: Gender reassignment discrimination EHRC • EHRC: Code of practice consultation 2025: changes to chapter 2: Code of practice consultation 2025: changes to chapter 2 EHRC
Marriage and Civil Partnership	Marriage is a union between a man and a woman or between a same-sex couple. Same-sex and heterosexual couples can also have their relationships legally recognised as 'civil partnerships'. Civil partners must not be treated less favourably than married couples (except where permitted by the Equality Act – see below). The Equality Act 2010 states that people do not have this characteristic if they are: a) Single; b) Living with someone as a couple neither married nor civil partners; c) Engaged to be married but not married; d) Divorced or a person whose civil partnership has been dissolved.

⁴ Identities such as non-binary, gender fluid or diverse, intersex, genderqueer, agender or indeed any other, **related** identity heading. In this manner, gender is seen as a 'spectrum', not a binary polarisation.



	The Equality Act only protects you from discrimination in employment because you are married or in a civil partnership. In some specified circumstances, an employer can refuse to employ you because you are married or in a civil partnership if the work is for the purposes of an organised religion, e.g. as a Catholic priest. For further information, go to: Marriage and civil partnership discrimination Equality and Human Rights Commission (equalityhumanrights.com)
Pregnancy and Maternity	Pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth, and is linked to maternity leave in the employment context. In the non-work context, protection against maternity discrimination is for 26 weeks after giving birth, and this includes treating a woman unfavourably because she is breastfeeding. There are also specific measures relating to paternity. The Equality and Human Rights Commission published an updated Toolkit in April 2024 to provide employers with clear advice on what they should do to prevent pregnancy and maternity discrimination at work. This updated guidance reflects changes to the law which came into effect in April 2024. See Equality watchdog advises employers on updated pregnancy and maternity protections in the workplace EHRC (equalityhumanrights.com)
Race	Refers to the protected characteristic of race. It refers, in this (legal) context, to a group of people defined by their race, colour, ethnic or national origins or nationality (including their citizenship). Note that although both are included under the 'Race' umbrella term for the purposes of the Equality Act, there are essential differences in definition between 'race' and 'ethnicity'.
Religion and Belief	Religion refers to any religion, including reference to a lack of religion. Belief refers to a religious or philosophical belief and includes a lack of belief. Generally, a belief should affect your life choices or the way you live for it to be included in the definition. For a philosophical belief to be protected under the Equality Act, it must: a) Be genuinely held; b) Be a belief and not just an opinion or viewpoint based on the present state of information available; c) Be about a weighty and substantial aspect of human life and behaviour; d) Attain a certain level of cogency, seriousness, cohesion and importance; and e) Be worthy of respect in a democratic society, not incompatible with human dignity and not in conflict with fundamental rights of others. For example, Holocaust denial, or the belief in racial superiority are not protected.⁵ In addition, people also have an absolute right to hold (with a qualified right to manifest) a religion or belief under Article 9 of the Human Rights Act 1998. See religion-or-belief-guide-to-the-law.pdf (equalityhumanrights.com)

⁵ This article is interesting in the context of political beliefs. [Political Beliefs & the Equality Act 2010 \(harpermacleod.co.uk\)](https://harpermacleod.co.uk/political-beliefs-the-equality-act-2010/)

Sex	In the Equality Act 2010, sex means ‘biological sex’ (a person’s sex at birth) and is understood as binary being either male or female. It can mean a group of people like men or boys, or women or girls.⁶ The UK Supreme Court (April 2025)⁷ ruled that a Gender Recognition Certificate does not change a person’s legal sex for the purposes of the Equality Act 2010. The ruling also made it clear that if a space or service is designated as women-only, a person who was born male but identifies as a woman does not have a right to use that space or service. For further information: • House of Commons Library: Supreme Court judgment on the meaning of ‘sex’ in the Equality Act 2010: For Women Scotland: Supreme Court judgment on the meaning of "sex" in the Equality Act 2010: For Women Scotland - House of Commons Library • Equality and Human Rights Commission (EHRC): An interim update on the practical implications of the UK Supreme Court judgment EHRC • Equality and Human Rights Commission (EHRC): UK Supreme Court ruling on the meaning of sex in the Equality Act: our work EHRC • EHRC: Guide for service providers (anyone who provides goods, facilities or services to the public) who are looking to establish and operate a separate or single-sex service⁸: Separate and single-sex service providers: a guide on the Equality Act sex and gender reassignment provisions EHRC Women who are breastfeeding are explicitly protected from less favourable treatment under the sex discrimination provisions of the Equality Act and – alongside pregnancy and maternity – the Equality Act 2010 (Amendment) Regulations 2023.
Sexual Orientation	Whether a person’s sexual attraction is towards their own sex, the opposite sex, to both sexes, or having a lack of sexual attraction to anybody.

Specific sources of help and guidance:

- Equality and Human Rights Commission, Technical Guidance on the Public Sector Equality Duty: England (Updated March 2023)
- Explanatory Memorandum to The Equality Act 2010 (Amendment) Regulations 2023 [The Equality Act 2010 \(Amendment\) Regulations 2023 \(publishing.service.gov.uk\)](#)⁹
- [Protected characteristics | Equality and Human Rights Commission \(equalityhumanrights.com\)](#)
- [Social model of disability | Foundation for People with Learning Disabilities](#)
- [First Steps | Professional services | Royal College of Nursing \(rcn.org.uk\)](#)

⁶ See [Sex discrimination | EHRC \(equalityhumanrights.com\)](#)

⁷ See [For Women Scotland Ltd \(Appellant\) v The Scottish Ministers \(Respondent\)](#)

⁸ This guidance is important to read ahead of any public engagement activities.

⁹ Amongst other things, this includes the following statement: ‘That a claimant without a relevant protected characteristic, who suffers a disadvantage arising from a discriminatory provision, criterion or practice (“PCP”) together with persons with the protected characteristic may bring a claim of indirect discrimination’. There are also important provisions regarding recruitment in an employment context, specifically if a discriminatory statement is made regarding recruitment, even when there is not an active recruitment process underway.



- [Gender reassignment discrimination | Equality and Human Rights Commission \(equalityhumanrights.com\)](https://equalityhumanrights.com/)
- [Social model of disability | Disability charity Scope UK](https://www.scope.org.uk/)
- <http://beyondthebinary.co.uk/the-equality-act-2010-are-non-binary-people-protected/>
- [Marriage and civil partnership discrimination | Equality and Human Rights Commission \(equalityhumanrights.com\)](https://equalityhumanrights.com/)
- [religion-or-belief-guide-to-the-law.pdf \(equalityhumanrights.com\)](https://equalityhumanrights.com/religion-or-belief-guide-to-the-law.pdf)
- [Political Beliefs & the Equality Act 2010 \(harpermacleod.co.uk\)](https://harpermacleod.co.uk/)
- [Sex discrimination | Equality and Human Rights Commission \(equalityhumanrights.com\)](https://equalityhumanrights.com/)

Though the Equality Act refers only to nine protected characteristics, good equality practice (**including an assessment of health inequalities**) encourages consideration of other groups of underserved, marginalised or disadvantaged people.

In this respect, examples of categories may include:

- Socio-economic status
- Employment status
- Carers
- Location (geography)
- Migrant status (e.g. asylum seekers, refugees, economic migrants)
- Looked-after children
- Homeless people

Consider if any of these (or others) apply to your research and use the same criteria and practice to analyse impact as you have done for the Protected Characteristics.

There is a socio-economic duty (Section 1 of the Equality Act) that requires public bodies to adopt transparent and effective measures to address the inequalities that result from differences in occupation, education, place of residence or social class. Successive governments refused to enact it as law.

In March 2021, the socio-economic duty came into force in Wales. This requires public bodies, when making strategic decisions, to ‘have due regard to’ (consciously consider) how their decisions could reduce inequalities linked to socio-economic disadvantage. There is also a socio-economic duty in Scotland (‘The Fairer Scotland Duty’) and – voluntarily – in 40 local council areas in England¹⁰.

The current Labour Government has committed to bringing Section 1 of the Equality Act 2010 into force across Great Britain. This places core public sector bodies under a duty to make decisions of a strategic nature with “due regard” to exercising them in a way that reduces “inequalities of outcome which result from socio-economic disadvantage”.

¹⁰ See [Socio-economic duty adoption across England - Resolve Poverty](#)

Human Rights

Public authorities, and other organisations when they are carrying out ‘functions of a public nature’, have a duty under the Human Rights Act 1998 (HRA) not to act incompatibly with rights under the European Convention for the Protection of Fundamental Rights and Freedoms (the Convention). The Public Sector Equality Duty uses the same definition of functions of a public nature as the HRA.

Because of the close relationship between human rights and equality, it is good practice for those exercising public functions to consider equality and human rights together when drawing up equality or human rights policies.

Health inequalities refer to the gap in health status and in access to health services, which exists between different social classes, ethnic groups, and populations in different geographical areas. Where possible, systematic reviews should consider health inequalities when evaluating intervention effects. This is because the beneficial effects of many interventions may be substantially lower for some population sub-groups. Many interventions may thus increase rather than reduce health inequalities, since they primarily benefit those who are already advantaged.

Evans and Brown (2003)¹¹ suggest that there are a number of factors that may be used in classifying health inequalities (captured by the acronym PROGRESS¹²)

Place of residence

Race / ethnicity

Occupation

Gender

Religion

Education

Socio-economic-status

Social capital

It may be useful for a review to evaluate intervention effects across different sub-groups, perhaps identified in terms of the PROGRESS/PROGRESS-Plus factors.

How to assess impact:

Positive Impact: If your research is targeting one or more groups (Protected Characteristic and others) to advance equality of opportunity or if it will directly address disadvantage – thereby creating a benefit – it can be said to have a positive impact.

Negative Impact: A negative impact occurs if your research has the potential to disadvantage, discriminate, discourage participation, treat unfairly or not meet the different needs of people from Protected Characteristic groupings.

A negative impact has to demonstrably have an adverse effect on one or more of the Protected Characteristic groups (plus any identified others). Or the potential to have that affect. If your research focuses on one group in particular, then it may not necessarily have a negative impact on others. However, you do need to assess if this is – intentionally or otherwise – actually the case.

¹¹ See ‘Road Traffic Crashes: Operationalizing Equity in the Context of Health Service Reform’ (<https://trid.trb.org/view/662981>)

¹² More recent work on PROGRESS now includes further Equality Act protected characteristics such as Sexual Orientation, Age and Disability and is referred to as PROGRESS-Plus. See [Chapter 16: Equity and specific populations | Cochrane Training](#) and [Resources for Review Authors | Cochrane Equity](#)

If your work doesn't have that negative impact, then you will need to say that it has 'no impact'.

No Impact: The evidence identifies that your research doesn't have the potential to impact on different groups in either a positive or a negative way. This may also be described as 'neutral impact'.

Impact Not Known: A situation where there is no available data, not even anecdotal, to assess the impact. In reality, there should always be some information on which to base a judgement of 'positive', 'negative' or 'no impact'. Work by the Equality and Human Rights Commission in Wales prior to the implementation of the Equality Act 2010 states that: *"Lack of data is never a reason for not assessing impact and does not provide an excuse for not completing an assessment. Different types of evidence, for example, can be used. Decisions will need to take into account information deficiencies and reach the best judgement possible using what is available."*¹³

Consultation is the most obvious answer to any situation where there is little apparent evidence. This may even amount to a reliance on a limited number of sources. Should you think that this is insufficient¹⁴, you should still include what is known, but indicate such a deficiency on the form.

General considerations:

- There is a significant difference between the research context and that of public sector policy, procedures or practice. Principally, that research may focus very specifically on one issue/matter and one group of people e.g. diabetes in elderly South Asian people. It therefore doesn't have to be 'comprehensive' in the same way that public sector policies etc tend to be. That being said, there may be impacts that – unintentionally or otherwise – do have a bearing on one or more groups through things such as access to opportunity, engagement techniques and communication etc¹⁵. These need to be picked up during the EqIA process, and – where negative – be subject to mitigation.
- Accordingly, a specific focus on one Protected Characteristic group need not necessarily amount to a 'negative impact' on all the others. It may well be the case that your research is designed to assist a particular group of people over others because of issues related to that group that – historically and currently – have caused and constitute disadvantage.¹⁶
- A thorough examination of potential negative impact will enable you to make this sort of judgement.
- You will need to consider the fact that there may be more than one identified impact with respect to protected characteristic groups. For instance, equality impact can, in some instances, be both 'positive' and 'negative'. 'Positive' for one group or community within a particular protected characteristic 'span', and 'negative' for another'.

3. Provide a summary of the main equality considerations detailed in your answers to Question 2

Summarise the **key** equality considerations that you have raised in your answers to Question 2. This will help to give focus to your post-Review analysis (see **SECTION B**)

¹³ See [Equality impact assessments | Equality and Human Rights Commission \(equalityhumanrights.com\)](https://equalityhumanrights.com/equality-impact-assessments/)

¹⁴ See the wording of the last sentence in the EHRC quote, i.e. *"Decisions will need to take into account information deficiencies and reach the best judgement possible using what is available."*

¹⁵ Consider, for example, if you are arranging a focus group whether the arrangements you make enable all people to attend and fully participate without causing unnecessary obstacles. Does your venue have wheelchair access facilities? Are you varying your promotion to enable people to attend with visual impairments or whose English language skills are limited?

¹⁶ In this context, a consideration of the issue of **Positive Action** may be useful.

SECTION B – TO BE COMPLETED AND SUBMITTED AFTER FINISHING YOUR SYSTEMATIC REVIEW

4. Provide a summary of the main equality issues identified in your Systematic Review and how this Review will (or may) then affect or impact upon equality

Summarise the **key** issues identified from your Systematic Review and then any equality impact in relation to any of the Protected Characteristics, other considerations or more broadly.

We would recommend that you re-visit Questions 2 and 3 as an aid to your summary. Obviously, if any further or unexpected equality issues were identified in your Review you will need to add a description here. Please just write 'as expected' if nothing additional was identified.

5. Use the Equality Summary to record the issues identified in Question 4 and any recommendations for action to address them

The Equality Summary has three columns. Each row should focus on a specific issue

Think about any monitoring procedures that could be used as part of this task, considering how they need to be equality-orientated, both generally and specifically in relation to any of the Protected Characteristics.

Are there any monitoring and evaluation gaps to which you need to draw attention?

APPENDIX 1 – GLOSSARY

Equality Act 2010: The Equality Act 2010 is the UK's current equality legislation. This is what governs UK society in terms of equality and diversity. It became law in October 2010, replacing previous individual legislation e.g. Race Relations Act, Disability Discrimination Act. It thereby brought equality areas together under a single Act. It refreshed what are known as the 'Protected Characteristics' and made specific demands on Public Sector bodies (see Public Sector Equality Duty).

Health Inequalities: Health inequalities are the preventable, unfair and unjust differences in health status between groups, populations or individuals that arise from the unequal distribution of social, environmental and economic conditions within societies, which determine the risk of people getting ill, their ability to prevent sickness, or opportunities to take action and access treatment when ill health occurs. (NHS)

Intersectionality: The interconnected nature of social categorizations such as those identified as Protected Characteristics as they apply to a given individual or group, regarded as creating overlapping and interdependent systems of discrimination or disadvantage. Essentially what is being considered are multiple and connected areas of discrimination and disadvantage (e.g. sexism, racism, xenophobia etc), prompting further examination and consideration of just how these different areas and experiences impact on individuals and groups.

Positive Action: Actions or a range of measures aimed at addressing a recognised disadvantage or imbalance of opportunity. Such actions/measures are legal under the Equality Act 2010 as they are a proportionate means of achieving a legitimate aim. Do not confuse this with 'positive discrimination' which amounts to giving preferential treatment and is illegal under the Act.¹⁷

Protected Characteristics: Identity areas or groups (of which there are nine) 'protected' by equality legislation. Previously (prior to the Equality Act 2010) known as equality 'strands'. Everybody has at least four Protected Characteristics (Age, Race, Sex and Sexual Orientation). Many people have more.

Public Sector Equality Duty (PSED): Requires public sector organisations to have 'due regard' to the need to 1) Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Act; 2) Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it; and 3) Foster good relations between persons who share a relevant protected characteristic and persons who do not share it. These are known as the three aims of the 'general equality duty'. The 'specific duties' of the PSED require each organisation to 1) Publish sufficient information to demonstrate compliance with the three general duties; 2) Publish priority equality objectives every four years; and 3) Ensure that this and other information is published in a manner that is reasonably accessible to the public.

Underserved or disadvantaged: Such descriptions are preferred to the still widely used phrase 'hard to reach'. The reality is that many groups of people that are characterised as the latter are actually easy to find, but are also 'easy to ignore' and are 'seldom heard'. Other descriptions such as 'marginalised' or 'socially excluded' are also more preferable as they are, essentially, more accurate.

¹⁷ See [Positive Action - NHS Employers](#) for further clarity.

APPENDIX 2 – EQUALITY-RELATED SOURCES OF INFORMATION

It may be important to consult reports or data that highlight the experiences of people from the Protected Characteristic groups with regard to health outcomes in general and specifically in relation to your Systematic Review topic.

Accordingly, if this is the case, the following may be of use:

Clinical Commissioning Groups (CCGs) and health providers are required to produce and publish data on the use of their services by Protected Characteristic groups. Local authorities have good Census data relating to their local population as well as key information arising from Joint Strategic Needs Assessments; and local voluntary sector organisations may have significant qualitative information that you could cite.

It may be important to use local data, quantitative and qualitative. However, where this is not available, you could use regional or national data.

The following **Sources of Data and Information** give you some idea of what can be used. Please note that these are only suggestions. You will need to find the most appropriate sources that fit the scope of your Systematic Review.

- Advocacy groups (national and local) e.g. Mind, Age UK, Stonewall, Mencap, Leicestershire Centre for Integrated Living, Action Deafness etc.
- Audits of services
- Census data - [2011 Census - Office for National Statistics \(ons.gov.uk\)](https://ons.gov.uk)
- Clinical Commissioning Groups (CCG) – e.g. [Leicester City Clinical Commissioning Group | NHS Leicester CCG](https://leicesterccg.nhs.uk)
- Consideration of health inequalities in systematic reviews: a mapping review of guidance (Michelle Maden) - [Consideration of health inequalities in systematic reviews: a mapping review of guidance - PMC \(nih.gov\)](https://pubmed.ncbi.nlm.nih.gov/31111111/)
- Customer satisfaction surveys
- Equality Act 2010: [Equality Act 2010 \(legislation.gov.uk\)](https://legislation.gov.uk/ukpga/2010/15)
- Equality Act 2010: [Equality Act 2010 | Equality and Human Rights Commission \(equalityhumanrights.com\)](https://equalityhumanrights.com/)
- Equality Act 2010: guidance: [Equality Act 2010: guidance - GOV.UK \(www.gov.uk\)](https://www.gov.uk/guidance/equality-act-2010-guidance)
- Equality Act 2010: Schedule 19: [Equality Act 2010 \(legislation.gov.uk\)](https://legislation.gov.uk/ukpga/2010/15/schedule/19)
- Equality Act 2010: (Specific Duties and Public Authorities) Regulations 2017/353: [The Equality Act 2010 \(Specific Duties and Public Authorities\) Regulations 2017 \(legislation.gov.uk\)](https://legislation.gov.uk/uksi/2017/353)
- Equality Act 2010 (Amendment) Regulations 2023: [The Equality Act 2010 \(Amendment\) Regulations 2023 \(legislation.gov.uk\)](https://legislation.gov.uk/uksi/2023/123)
- Equality and Human Rights Commission (EHRC) - [Home Page | Equality and Human Rights Commission \(equalityhumanrights.com\)](https://equalityhumanrights.com/)
- Equality Challenge Unit - [Home | Advance HE \(advance-he.ac.uk\)](https://advance-he.ac.uk/)
- Equality, Diversity and Inclusion in Science and Health (EDIS) - [Home - EDIS \(edisgroup.org\)](https://edisgroup.org/)
- Equality Impact Assessments – Wales (EHRC website): [Equality impact assessments | Equality and Human Rights Commission \(equalityhumanrights.com\)](https://equalityhumanrights.com/eia/)
- Equality monitoring
- For Equity: [FOR-EQUITY – tools and resources to help reduce social and health inequalities \(forequity.uk\)](https://forequity.uk/)
- Health and Wellbeing Boards – e.g. [Health and Wellbeing Board \(leicester.gov.uk\)](https://leicester.gov.uk/health-and-wellbeing-boards/)
- Human Rights Act 1998: [Human Rights Act 1998 \(legislation.gov.uk\)](https://legislation.gov.uk/ukpga/1998/42)



- The Human Rights Act (EHRC website): [The Human Rights Act | Equality and Human Rights Commission \(equalityhumanrights.com\)](https://www.equalityhumanrights.com/en/human-rights-act)
- Internal (within the organisation) information, e.g. staff surveys, training evaluations.
- Joint Strategic Needs Assessments (JSNA) – e.g. [Joint Strategic Needs Assessment \(leicester.gov.uk\)](https://www.leicester.gov.uk/joint-strategic-needs-assessment/)
- Local Authorities
- Local Government Association LG Inform Plus - [LG Inform Plus \(esd.org.uk\)](https://www.lginformplus.org.uk/)
- LSR Online in Leicester and Leicestershire - [Leicester-Shire & Rutland Statistics & Research | LSR Online \(lsr-online.org\)](https://www.leicester-shire-rutland-statistics-research.org.uk/)
- NatCen - [NatCen Social Research](https://www.natcen.ac.uk/)
- NIHR CLAHRC North West Coast – Health Inequalities Assessment Toolkit (HIAT): [HIAT - Welcome](https://www.nihr.ac.uk/resources/hiat/)
- NIHR CLAHRC North West Coast – Health Inequalities Assessment Toolkit (Section Four – Planning for wider effects on health inequalities and avoiding negative ones): [HIAT - Section 4](https://www.nihr.ac.uk/resources/hiat/section-four/)
- NHS England Equality and Health Inequality NHS RightCare Packs - [NHS RightCare » Equality and Health Inequality NHS RightCare Packs \(england.nhs.uk\)](https://www.nhs.uk/rightcare/equality-and-health-inequality/)
- NHS England Health Inequalities - [NHS England » The Equality and Health Inequalities Hub](https://www.nhs.uk/rightcare/equality-and-health-inequalities/)
- NHS England Long Term Conditions Packs - [NHS RightCare » Long term conditions packs \(england.nhs.uk\)](https://www.nhs.uk/rightcare/long-term-conditions/)
- NHS Health Survey for England 2019 - [Health Survey for England 2019 \[NS\] - NHS Digital](https://www.nhs.uk/health-survey-for-england-2019/)
- NHS RightCare Intelligence products - [NHS RightCare » NHS RightCare Intelligence products \(england.nhs.uk\)](https://www.nhs.uk/rightcare/intelligence/)
- Office for National Statistics - [Home - Office for National Statistics \(ons.gov.uk\)](https://www.ons.gov.uk/)
- Other partner organisations
- Periodicals
- Previous Equality Impact Assessments
- Public Health England Health Profiles - [Public Health Profiles - PHE](https://www.phe.org.uk/publications/health-profiles/)
- Qualitative as well as quantitative information (e.g. user/focus group feedback, staff/student surveys, training feedback, complaints and grievance procedures)
- Public Health England Local Health - [Local Health - Public Health England](https://www.phe.org.uk/publications/local-health/)
- Public Health England National General Practice Profiles - [National General Practice Profiles - PHE](https://www.phe.org.uk/publications/national-general-practice-profiles/)
- Recruitment data
- UN Convention on the Rights of Persons with Disabilities (CRPD): [Convention on the Rights of Persons with Disabilities \(CRPD\) | United Nations Enable](https://www.un.org/en/conventions/treaties/08/)
- UN Convention on the Rights of Persons with Disabilities (EHRC website): [UN Convention on the Rights of Persons with Disabilities \(CRPD\) | Equality and Human Rights Commission \(equalityhumanrights.com\)](https://www.equalityhumanrights.com/en/un-convention-on-the-rights-of-persons-with-disabilities/)
- What is the Equalities Act? (EHRC website): [What is the Equality Act? | Equality and Human Rights Commission \(equalityhumanrights.com\)](https://www.equalityhumanrights.com/en/what-is-the-equality-act/)
- World Health Organisation – Disability: [Disability \(who.int\)](https://www.who.int/disability/)
- World Report on Disability 2011 (World Health Organisation website): [World report on disability \(who.int\)](https://www.who.int/disability-report-2011/)

ARC East Midlands have also produced an Equality Impact Assessment (EqIA) Toolkit, which consists of comprehensive training, a directory of useful resources, as well as ongoing advice and guidance. Click here to access - [Equality Impact Assessment \(EqIA\) Toolkit | arc-em.nihr.ac.uk](https://arc-em.nihr.ac.uk/equality-impact-assessment-eqia-toolkit/)