



Communities and Equalities Scrutiny Committee

Date: Thursday, 3 September 2020

Time: 2.00 pm

Venue: Virtual meeting at https://manchester.public-i.tv/core/portal/webcast_interactive/485333

Advice to the Public

The Local Authorities and Police and Crime Panels (Coronavirus) (Flexibility of Local Authority and Police and Crime Panel Meetings) (England and Wales) Regulations 2020

Under the provisions of these regulations the location where a meeting is held can include reference to more than one place including electronic, digital or virtual locations such as internet locations, web addresses or conference call telephone numbers.

To attend this meeting it can be watched live as a webcast. The recording of the webcast will also be available for viewing after the meeting has concluded.

Membership of the Communities and Equalities Scrutiny Committee

Councillors - Hacking (Chair), Andrews, Battle, Chambers, Collins, M Dar, Doswell, Douglas, Evans, Grimshaw, Hitchen, Kirkpatrick, Rawlins and Rawson

Agenda

1. Urgent Business

To consider any items which the Chair has agreed to have submitted as urgent.

2. Appeals

To consider any appeals from the public against refusal to allow inspection of background documents and/or the inclusion of items in the confidential part of the agenda.

3. Interests

To allow Members an opportunity to [a] declare any personal, prejudicial or disclosable pecuniary interests they might have in any items which appear on this agenda; and [b] record any items from which they are precluded from voting as a result of Council Tax/Council rent arrears; [c] the existence and nature of party whipping arrangements in respect of any item to be considered at this meeting. Members with a personal interest should declare that at the start of the item under consideration. If Members also have a prejudicial or disclosable pecuniary interest they must withdraw from the meeting during the consideration of the item.

4. Minutes

To approve as a correct record the minutes of the meeting held on 23 July 2020.

5 - 10

5. Peterloo Memorial - to follow

6. Proposed Public Spaces Protection Order Wynnstay Grove

Report of the Head of Compliance, Enforcement and Community Safety

11 - 160

This report provides an update on the outcome of the consultation for the proposed Public Spaces Protection Order for Wynnstay Grove.

7. Update on COVID-19 - to follow

8. Overview Report

Report of the Governance and Scrutiny Support Unit

161 - 168

This report provides the Committee with details of key decisions that fall within the Committee's remit and an update on actions resulting from the Committee's recommendations. The report also includes the Committee's work programme, which the Committee is asked to amend as appropriate and agree.

Information about the Committee

Scrutiny Committees represent the interests of local people about important issues that affect them. They look at how the decisions, policies and services of the Council and other key public agencies impact on the city and its residents. Scrutiny Committees do not take decisions but can make recommendations to decision-makers about how they are delivering the Manchester Strategy, an agreed vision for a better Manchester that is shared by public agencies across the city.

The Communities and Equalities Scrutiny Committee examines the work of the Council and its partners relating to reducing levels of crime, community cohesion, older people and equality and inclusion.

The Council wants to consult people as fully as possible before making decisions that affect them. Members of the public do not have a right to speak at meetings but may do so if invited by the Chair. Speaking at a meeting will require a video link to the virtual meeting.

Members of the public are requested to bear in mind the current guidance regarding Coronavirus (COVID19) and to consider submitting comments via email to the Committee Officer. The contact details of the Committee Officer for this meeting are listed below.

The Council is concerned to ensure that its meetings are as open as possible and confidential business is kept to a strict minimum. When confidential items are involved these are considered at the end of the meeting and the means of external access to the virtual meeting are suspended.

Joanne Roney OBE
Chief Executive
3rd Floor, Town Hall Extension,
Lloyd Street
Manchester, M60 2LA

Further Information

For help, advice and information about this meeting please contact the Committee Officer:

Rachel McKeon
Tel: 0161 234 4497
Email: rachel.mckeon@manchester.gov.uk

This agenda was issued on **Tuesday, 25 August 2020** by the Governance and Scrutiny Support Unit, Manchester City Council, Level 3, Town Hall Extension (Lloyd Street Elevation), Manchester M60 2LA

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Communities and Equalities Scrutiny Committee

Minutes of the meeting held on 23 July 2020

This Scrutiny meeting was conducted via Zoom, in accordance with the provisions of the Local Authorities and Police and Crime Panels (Coronavirus) (Flexibility of Local Authority and Police and Crime Panel Meetings) (England and Wales) Regulations 2020.

Present:

Councillor Rawlins - In the Chair
Councillors Andrews, Collins, M Dar, Doswell, Douglas, Hitchen, Kirkpatrick and Rawson

Also present:

Councillor N Murphy, Deputy Leader
Councillor Akbar, Executive Member for Neighbourhoods
Councillor Craig, Executive Member for Adult Health and Wellbeing
Councillor Rahman, Executive Member for Skills, Culture and Leisure
Councillor Stogia, Executive Member for Environment, Planning and Transport

Apologies:

Councillors Grimshaw and Hacking

CESC/20/26 Chair

The Committee Support Officer informed Members that the Chair had sent his apologies for the meeting and asked for nominations for a Member to chair the meeting. A Member nominated Councillor Rawlins, which was seconded by another Member and agreed by the Committee.

Decision

To appoint Councillor Rawlins as Chair for the meeting.

CESC/20/27 Minutes

Decision

To approve the minutes of the meeting held on 25 June 2020 as a correct record.

CESC/20/28 Update on COVID-19 Activity

The Committee received a report of the Strategic Director (Neighbourhoods) which provided a further update summary of the current situation in the city in relation to COVID-19 and an update on the work progressing in Manchester in relation to areas within the remit of the Committee.

Officers and Executive Members referred to the main points and themes within the report, which included:

- the impact and challenges relating to residents at risk, community resilience and equality and inclusion;
- Key planning and recovery activity being undertaken in relation to these areas; and
- the residents and communities workstream which aimed to enable residents and communities affected by COVID-19 to live independent and fulfilling lives.

Some of the key points that arose from the Committee's discussions were:

- Support for the approximately 2200 Manchester residents who had been receiving a food box from the national government scheme, but not local food support, when the national scheme was paused on 31 July 2020, including communication with the affected people, whether the Council had capacity to support them and whether there was any ward-level data on the number of residents affected by this and the number of people receiving support who were medically vulnerable rather than financially vulnerable;
- How domestic abuse victims could seek help and children affected by domestic abuse could receive support during lockdown;
- Request for more information on the Sanctuary Scheme;
- Digital exclusion and work to address this;
- What the definition of most vulnerable should be in the Our Manchester Strategy and that the Committee might want to consider this more at a future meeting;
- The valuable role of volunteers during the pandemic and how this could be recognised;
- Whether services had been resumed to residents who had previously been able to have library books delivered to their home;
- What measures were being put in place to ensure that play areas in parks could safely re-open;
- The re-opening of leisure centres and whether changes such as classes only being available at some leisure centres could have a greater impact on people with some protected characteristics;
- Summer youth provision;
- the Voluntary Community and Social Enterprise (VCSE) sector, including areas that the Committee would like to consider in a future report; and
- How COVID-19 was impacting differently on different groups.

The Head of Work and Skills assured the Committee of the Council's capacity to cope with additional demand from residents who had previously received support through the national government scheme. The Head of Neighbourhoods reported that the national government had already written to the affected people a few weeks ago and the Council was now following this up with a letter reiterating the support available locally. She advised Members that GPs had also been contacting their patients who were affected by this. The Head of Work and Skills reported that the Council had been mapping levels of need for food support across the city and had a good understanding of this. The Head of Neighbourhoods confirmed that the Council also had data on the number of medically-shielding people per ward and that work was currently taking place to map this against other datasets to get a better understanding of the situation and that this could be shared at a later date.

The Domestic Abuse Reduction Manager reported that during lockdown schools had continued to be notified of reports of domestic abuse affecting their pupils so that they could provide additional checks and support. She advised that, as in previous years, these notifications and support via the school's Safeguarding Lead would continue during the summer holidays. The Strategic Director (Neighbourhoods) reported that the Council's targeted summer play offer would be available to some children who were affected by domestic abuse, although she recognised that there would be other children affected by domestic abuse which the Council was not aware of.

The Domestic Abuse Reduction Manager reported that the Sanctuary Scheme, operated by the Independent Domestic Violence Advisory Service, was available to private tenants, owner-occupiers and tenants whose housing providers did not have a similar scheme and that it installed security measures in the homes of those affected by domestic abuse. She informed Members that the messaging in relation to domestic abuse support had been reviewed in light of the lockdown to inform victims that services were still available to them and could be accessed by phone or online. She advised the Committee that her service had also been training universal services on how to identify domestic abuse and safely communicate with victims.

The Deputy Leader informed the Committee that the Council was looking at how the work of volunteers during the pandemic could be properly recognised. He also highlighted that the Lord Mayor had carried out virtual drop-ins to voluntary groups and that the High Sheriff and the Queen's Representative in Manchester had written letters of thanks to organisations.

The Head of Libraries, Galleries and Culture informed Members that the home delivery of library books had been resumed in mid-June for people who had their own front door and that the service was looking to expand this offer in the coming months.

The Head of Parks, Leisure, Youth and Events advised Members that strict guidelines for re-opening play areas had been set by the relevant governing body working closely with the national government. He informed the Committee that not all play areas had re-opened yet as the Council wanted to ensure that the right measures were in place first but the plan was to have all play areas safely re-opened before the end of the month with appropriate measures in place, such as sanitisers and signs about how to safely use the play area.

The Head of Parks, Leisure, Youth and Events reported that it was expected that only about 40% to 50% of leisure centre users would want to return within the next month, which would have a major effect on income, but that the Council was lobbying the national government for additional money to help cover these losses. He advised that, if it was left to market forces, it was likely that only leisure centres in areas of high demand would be re-opened; however, he reported that the Council was undertaking an Equality Impact Assessment (EIA) to make sure that there was as much coverage across the city as possible and that a range of activities were available which met the needs of people with different protected characteristics, while being mindful of financial viability and the current COVID-19 guidelines. The Chair welcomed the service's use of EIAs to inform its decision-making. She requested that a future report on Equalities include information on how the different Directorates

across the Council were using EIAs, for example in relation to COVID-19 recovery work.

The Executive Member for Skills, Culture and Leisure advised that he had circulated information on youth provision to all Members but that he would re-circulate this.

The Executive Member for Adult Health and Wellbeing reported that the Health Scrutiny Committee had been looking at health and inequalities, including in relation to COVID-19. She advised that there were three different pieces of work currently taking place in relation to equalities: one on the disproportionate impact of COVID-19 on particular communities, another on work to address longer-term structural inequalities (primarily relating to health but connected to wealth) and a broader piece of work on equalities and inclusion led by the Equalities, Diversity and Inclusion Team. She reported that the Health Scrutiny Committee was interested in further scrutinising inequalities in relation to COVID-19, possibly in conjunction with the Communities and Equalities Scrutiny Committee. The Chair advised that she would ask the Committee's regular Chair, Councillor Hacking, to discuss this with the Chair of the Health Scrutiny Committee.

In response to a question from the Chair on data-gathering and engagement with residents, the Strategic Director (Neighbourhoods) advised Members that engagement with residents was a key element of the refresh of the Our Manchester Strategy, which had been referred to in the report considered at the Committee's 25 June meeting.

Decisions

1. To request a report on Domestic Abuse including details of the Sanctuary Scheme and the number of security installations carried out and information on how many families fleeing domestic abuse had been housed outside of the city and why.
2. To request a report on digital exclusion including how this varies across different parts of the city.
3. To note that the Executive Member for Skills, Culture and Leisure will re-circulate the information on youth provision to all Members.
4. To request a report on the VCSE sector, including what support the infrastructure support services are providing, whether this has changed during the pandemic and whether they will continue to work differently to meet the changing needs of VCSE groups. To also look at equalities monitoring of groups which are being funded and groups which are closing down or are otherwise impacted by COVID-19. To consider in a future report what is being done to ensure that groups which are funded are carrying out work which meets the Council's priorities.
5. To ask that the Chair speak to the Chair of the Health Scrutiny Committee about how the issue of COVID-19 and inequalities will be scrutinised.

6. To request that a future report on Equalities include information on how the different Directorates across the Council are using EIAs, for example in relation to COVID-19 recovery work.
7. To consider engagement with residents at a future meeting.

CESC/20/29 Overview Report

A report of the Governance and Scrutiny Support Unit was submitted. The overview report contained a list of key decisions yet to be taken within the Committee's remit, responses to previous recommendations and the Committee's work programme, which the Committee was asked to approve.

Decision

To note the report.

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**Manchester City Council
Report for Information**

Report to: Communities and Equalities Scrutiny Committee - 3 September 2020

Subject: Proposed Public Spaces Protection Order Wynnstay Grove

Report of: Head of Compliance, Enforcement and Community Safety

Summary

This report provides an update on the outcome of the consultation for the proposed Public Spaces Protection Order for Wynnstay Grove.

Recommendations

To consider and comment on the contents of the report.

Wards Affected: Fallowfield, Withington, Old Moat

Environmental Impact Assessment - the impact of the issues addressed in this report on achieving the zero-carbon target for the city

Alignment to the Our Manchester Strategy Outcomes (if applicable)

Manchester Strategy outcomes	Summary of how this report aligns to the OMS
A thriving and sustainable city: supporting a diverse and distinctive economy that creates jobs and opportunities	
A highly skilled city: world class and home grown talent sustaining the city's economic success	
A progressive and equitable city: making a positive contribution by unlocking the potential of our communities	
A liveable and low carbon city: a destination of choice to live, visit, work	This report will highlight how the Public Spaces Protection Order can support women to access healthcare services without harassment or intimidation.

A connected city: world class infrastructure and connectivity to drive growth	
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Contact Officers:

Name: Fiona Sharkey
Position: Strategic Lead Compliance and Community Safety
Telephone: 0161 234 1220
E-mail: f.sharkey@manchester.gov.uk

Name: Sam Stabler
Position: Community Safety Lead
Telephone: 0161 234 1284
E-mail: s.stabler@manchester.gov.uk

Background documents (available for public inspection):

The following documents disclose important facts on which the report is based and have been relied upon in preparing the report. Copies of the background documents are available up to 4 years after the date of the meeting. If you would like a copy please contact one of the contact officers above.

Community Safety Strategy 2018/21
ASB Policy and Procedure

1.0 Introduction

- 1.1 This report provides details of the consultation on a proposed Public Spaces Protection Order (PSPO) for the Wynnstay Grove area of Fallowfield. This includes a summary of the evidence that led to a public consultation, the findings from the consultation and the rationale for the resulting proposed order. **Appendix 4** includes the results of the consultation, **Appendix 5** is the analysis of the consultation responses by Enventure.

2.0 Background

- 2.1 To achieve our strategic objectives of a safe, clean and welcoming city the Council and the police use a wide range of informal and formal powers to protect the public and tackle crime and antisocial behaviour. Officers have undertaken analysis to explore the options available to address the specific circumstances in this case and some of these options have been tried (see 5.0). The options analysed included no action, issuing warnings and advice, mediation, changes to the physical environment or the Marie Stopes clinic itself, Section 222 Local Government Act Injunction, civil ASB Injunction, Criminal Behaviour Order, use of police powers, Community Protection Notice, Protection of Harassment Act Injunction 1997, byelaws and a PSPO. The conclusion of the options analysis was that the proposed PSPO (ASB, Crime and Policing Act 2014) is the most appropriate solution. A copy of the options analysis is available to Members on request.
- 2.2 A PSPO is a place based order which is intended to control or restrict activities, within a specific area, which are having, or may have, a detrimental effect on the quality of life of those in the vicinity. The terms of a PSPO can prohibit or require particular acts. They can apply to particular groups or to the public as a whole.

Under section 59 of the 2014 Anti-Social Behaviour Crime and Policing Act, local authorities must be satisfied on reasonable grounds that each type of activity included in an Order;

- has a detrimental effect on the quality of life of those in the locality (or it is likely that activities will take place and have such an effect)
- the effect is (or is likely to be) persistent and continuing in nature
- the effect is (or is likely to be) unreasonable
- the effect justifies the restrictions to be imposed

The sanction for breaching a prohibition or requirement included in a PSPO is solely a monetary penalty - either a Fixed Penalty Notice (£100) or a prosecution, criminal conviction and a fine (up to £1000). There is no provision for a community order, for positive requirements to be attached to a breach of the order or a custodial sentence.

Prior to introducing a PSPO the Council is legally obliged to publish the text of the proposed order and consult with;

- the chief officer of police, and the local policing body, for the police area that includes the restricted area;
- whatever community representatives the local authority thinks it appropriate to consult; and
- the owners or occupiers of land within the restricted area.

A PSPO can last for up to three years. Before a PSPO expires it must be reviewed and if the review supports an extension, it may be extended for up to a further three years. There is no limit on the number of times an Order can be reviewed and extended. PSPOs can also be varied or discharged. When PSPOs are varied, extended or discharged, there are statutory requirements regarding publishing or publicising this and councils are required to undertake a further consultation process.

- 2.3 Since early 2018, Manchester City Council, in conjunction with colleagues from Greater Manchester Police (GMP) have been investigating concerns raised about behaviours associated with individuals and represented groups involved in protests and vigils outside the Marie Stopes UK Manchester Centre. By law, anyone has the right to access abortion care. The Council is committed to protecting people from harassment and intimidation, including when using health services. The details of the investigations undertaken are identified below.
- 2.4 Marie Stopes UK is situated at 5 Wynnstay Grove in Fallowfield, Manchester. The Marie Stopes building is approximately three quarters of the way down the Grove (approximately 175 metres long) leading off Wilmslow Road. Careful consideration of the physical environment of Wynnstay Grove and the surrounding area is particularly important. Wilmslow Road is a very busy road because it is an arterial route into Manchester city centre. At the top of Wynnstay Grove at the junction with Wilmslow Road there are a number of well used bus stops. On the opposite side there is a Wetherspoon Public House (entrance on Wilmslow Road). People usually attend at Marie Stopes Clinic UK on foot, by taxi or in a vehicle. Marie Stopes Clinic UK is a relatively large building with an adjacent car park for staff and visitors. From the pavement there is a paved area leading up to steps to the main entrance of the building. Wynnstay Grove is a very narrow road. Due to the width of the road and people parking in the area it is only usually possible to allow one car in and out of the Grove at a time. Wynnstay Grove is a relatively quiet area which makes it an ideal place for the clients of Marie Stopes UK. It is not a through route. It is reasonable to expect that people would only need to enter the area if they lived there or were visiting the clinic or another property. There are a number of residential buildings but no shops or restaurants along Wynnstay Grove. Directly opposite the Marie Stopes Clinic, across the narrow road, there is a small pavement area and a few car parking spaces. This is where people usually stand to protest or hold 'vigils.' This is by no means a convenient place for people to protest due to the area being small and in immediate proximity, directly opposite, the entrance to the Marie Stopes Clinic. At the bottom of Wynnstay Grove is a block of flats and a residential car park. Further down the road on the same side as the car parking spaces there is an area of inaccessible very overgrown land.

Photographs of the area described and a map can be found at **Appendix 1**.

3.0 Evidence of Issues of Concern

3.1 As part of the investigation the Council has received numerous reports from residents, individuals and organisations. The organisational reports include information from Sister Supporter, Marie Stopes UK, British Pregnancy Advisory Service and 40 Days for Life. The anti-social behaviour is reported to be associated with groups or individuals expressing approval or disapproval of people accessing abortion services. These reports allege these behaviours have been ongoing for several years.

The reported behaviours outside the centre include:

- protesting with posters and boards by up to ten people
- posters and signage being put up
- displays of graphic images
- people being unreasonably persistent with visitors to the Centre
- distribution of rosary beads and leaflets showing graphic images
- abusive language
- intimidation and harassment
- flicking or throwing of holy water
- people being observed and filmed
- amplified music or recordings being played

In addition to the above, the information provided by 40 Days for Life explains that vigils outside the Marie Stopes clinic exist to offer support and help to often vulnerable and, at times, very frightened pregnant women, some of whom really want to keep their babies, but feel as though they don't have any option but to have an abortion.

Examples of reports of antisocial behaviour and the investigations that have taken place are detailed below:

- 3.2 On 24 January 2018, a motion was put forward by Manchester City Councillors, with regard to the protection of individuals from harassment when accessing healthcare services. In response, officers from the Anti-social Behaviour (ASB) Action Team made contact with the local Neighbourhood Police Team and the staff at the Marie Stopes clinic to investigate whether anti-social behaviour was taking place at the clinic on Wynnstay Grove, and collated accounts of ongoing anti-social behaviour. It was found that the Neighbourhood Police Team had been attending the clinic and had dealt with a number of reports. The ASB team began to monitor and record incidents from this point forward, although reports of incidents have also been received about incidents before this time.
- 3.3 In February 2018 an individual accessing the clinic reported that there were individuals holding posters and signs with images and fetuses on them. This was reported to the British Pregnancy Advisory Service at the clinic who reported the client felt frightened, intimidated and confused about why it was

allowed. They felt shocked that this happens in the UK, and would have made sure they were accompanied if they had known protesters may have been outside the clinic.

- 3.4 In March 2018 it was reported by a member of Sister Supporter, a Pro-choice organisation, that “40 Days for Life” protestors were approaching clinic users presenting them with models of fetuses and envelopes which said “Ask to see the scan”. They reported that it was likely to be upsetting for those attending the clinic.
- 3.5 In May 2018 Council staff undertook a door knock with local residents to gather further evidence of the behaviours experienced on Wynnstay Grove. Residents reported seeing signs, being approached by protestors to pray with them, and a protestor being rude. Residents reported feeling uncomfortable and feeling it would cause the people that attended the clinic upset.
- 3.6 In July 2018 it was reported to Greater Manchester Police by staff at the clinic that protestors were outside the building filming staff as they went to work. There is also an incident recorded of 8 protestors outside the building from both anti-abortion and Pro-choice groups.
- 3.7 In October 2018 there were several reports from staff at the clinic and members of Sister Supporter of individuals protesting outside the clinic with signs, and the protestors approaching staff and clients of the clinic. One incident described two males screaming at the staff and being very aggressive.
- 3.8 In February 2019 reports were received from staff attending the clinic of protestors outside the clinic with signage “You shall not murder” and approaching staff as they attended the building shouting “You murdering bastard”, “God is judging you”. Reports were received by Greater Manchester Police with regard to both staff and those accessing the healthcare at the facility being photographed and shouted at as they attended the premises. It was reported that staff and service users were distressed and upset.
- 3.9 In early March 2019 further reports were received from staff at the clinic about protestors outside the clinic handing out leaflets and pictures of pregnancies at different stages of gestation.

Officers from the Anti-social Behaviour Team at Manchester City Council attended and spoke to staff who reported that an individual accessing the health services was visibly upset and had counselling in her follow up appointment.

Additional reports were received from staff two days later with regard to five or six protestors standing in front of the clinic with posters and model fetuses. Officers attended and took a statement from the mother of the woman attending the clinic. Both mother and daughter were visibly upset.

- 3.10 Further reports were received two days later, from a member of Sister Supporter with regard to an individual attending the clinic. It was reported that this individual approached the protestors and shouted and swore at them, and threw the protestor's placards and other items over a fence. It was reported that the protestors were visibly distressed. This matter was subsequently resolved between all parties concerned through a Restorative Justice disposal, facilitated by the Police.
- 3.11 Also in March 2019, reports were received from a member of Sister Supporter involving an incident when a protestor from 40 Days for Life approached two individuals who were sitting on the wall by the clinic, and she handed them a leaflet. The member of Sister Supporter witnessed the individual telling the protestor that she's not interested, and intervened. An argument ensued and the Police were called as the member of Sister Supporter felt the protestor was harassing the individual. A PCSO came out of the clinic and challenged the protestor about her conduct and for breaching their own code of conduct. As part of the subsequent criminal proceedings, the PCSO stated that the protestor shouted "You're killing babies, they are killing babies in there and you're helping them, you're killing babies and when you come to judgement day, what will God do to you". The protestor was subsequently convicted of a Section 5 Public Order offence and received a 12 month conditional discharge, along with a Restraining Order for 12 months, which prohibited the individual from being within 100 metres of the Marie Stopes clinic.
- 3.12 In April 2019 a complaint was made by staff who worked at a unit of supported accommodation on Wynnstay Grove. The accommodation provides supported housing service for adults aged 18-65 years, with enduring mental health issues. It was reported that residents felt uncomfortable and intimidated when walking past the protestors and that this type of conduct can be detrimental to their recovery.
- 3.13 In June 2019 Manchester City Council's Communities and Equalities Scrutiny Committee considered an e-petition coordinated by volunteer group Sister Supporter. The petition made a request for the Council to introduce Public Space Protection Orders outside all abortion providing clinics in Manchester to protect service users and clinic staff from harassment and intimidation. From our enquiries the only area within Manchester where specific anti-social behaviour concerns have been raised is Wynnstay Grove. The committee expressed support for officers to continue their investigations and take appropriate action in relation to Wynnstay Grove.
- 3.14 In September and October 2019 officers from Anti-social Behaviour and compliance teams attended the clinic to speak to staff and make observations. Staff reported incidents of protestors with signs. On one occasion it was reported that seven individuals were present with a blackboard and an easel with "Everything you do is for love" written on it. Staff reported that this had upset some of the women attending the clinic.
- 3.15 In December 2019 further reports were received of protestors with placards outside the clinic.

- 3.16 During the “40 days for life” campaign period from 26 February to 5 April 2020 more reports were received and incidents witnessed by GMP and MCC staff of protest and counter protests outside the clinic. Those present were reported to be praying, holding rosary beads and signs and offering leaflets.
- 3.17 A number of historic reports have also been received by the council with activity dating back to 2009 from the British Pregnancy Advisory Service and Sister Supporter. Reports of anti-social behaviour have been received throughout the year but increase in intensity during the “40 Days for Life” periods that take place annually in March/April and October/November. During this period the number of protestors increases from both the Pro-life supporters and the Pro-choice supporters. As detailed in the evidence this can also result in incidents between the different protestors and organisations, in addition to the detriment caused to the individuals attending the clinic either as staff or those attending the clinic. A significant challenge in addressing the behaviour is the unorganised and unpredictable nature of the protests. Different individuals use different materials, for example different visual aids, leaflets, fetuses and toy babies and have their own way of protesting, be it praying, engaging with those attending the clinic or shouting at those attending.

4.0 Impact of the behaviour

The impact of these activities has been articulated by those attending the clinic for an abortion, those accompanying people to the clinic, the staff at the clinic and the local residents.

- 4.1 For local residents
Local residents have been contacted in the course of the investigation and local residents have also contacted the police and clinic directly to report concerns. Residents have reported that they felt angry and upset by the presence of the protestors. A resident reported feeling affronted and unsafe. “The protestors there had the ability to intimidate me and made me feel like an awful person having had an abortion in the past”
- 4.2 For staff at the clinic
For staff at the clinic they have reported that it is distressing for clients coming to the clinic. But also that it is distressing and intimidating for the staff attending their place of work. Staff at the clinic have reported, “It upset me seeing the young women being approached uninvited when they were already upset”
- 4.3 For those attending for healthcare services
The impact on those attending the clinic for services has been more difficult to collate as individuals attending the clinic are dealing with significant emotional, mental and physical health issues and understandably do not always want to speak directly to council or police officers to talk about the impact of the behaviour they experience. We have had some direct testimony, but have also had details of people’s experience shared by those who are

accompanying people visiting the clinic and those staff at the clinic that are supporting the service users.

The impact has been described as people feeling intimidated, anxious, distressed and people feeling judged. People have also reported feeling harassed and unsafe.

One individual attending with a service user said they found the situation unbearable and caused upset to the point they could not get out of their car. "They took my decision away from me. Choosing abortion isn't easy, it's emotionally and mentally draining and is a private matter. I just couldn't face walking through them"

A woman reported "I felt extremely tense and threatened, and the intensity of the interaction triggered my anxiety"

5.0 Action Taken to address the issues reported

Manchester City Council and Greater Manchester Police have worked together to both investigate and respond to the reports of anti-social behaviour from the Marie Stopes clinic on Wynnstay Grove. Evidence has been collated from reports from staff and service users at the clinic as well as organisations that support the provision of abortion services such as British Pregnancy Advisory Service and Sister Supporter. Officers have engaged with individuals and organisations protesting at the clinic including 40 Days for Life and Society for the Protection of the Unborn Child, and also sought information from local residents and businesses. Officers have also attended the clinic regularly, to observe behaviours at different times and to take witness statements from those experiencing anti-social behaviour.

5.1 Initial activity focussed on individuals committing crime and anti-social behaviour where there was witness support. Individuals were invited to an investigatory interview with regard to reported activities and behaviours. This, however, was more challenging where witnesses did not want to make a formal statement. On one occasion an investigatory interview led to admission and restorative justice was employed to address the behaviour. As a result of another investigatory interview an individual was summoned to court for a public order offence. The individual pleaded guilty and received a conditional discharge and a restraining order. However despite the work to address individual behaviours this approach was not effective in addressing the ongoing issues at the clinic, for a number of reasons:

- Individuals attending the clinic that were subjected to the behaviour, were often very upset and experiencing trauma and consequently did not feel able to support enforcement activity as a witness.
- Whilst some individuals regularly attended the clinic as protestors or as supporters of those attending the clinic, there were often many different individuals in attendance over a period of time. Action taken against individuals did not address the cumulative impact of the ongoing behaviours from the range and volume of people attending the clinic.

- 5.2 Engagement with all parties involved in supporting the clinic and the protests continued and efforts were made to bring representatives together in a facilitated meeting. This was sought to enable the organisations to come to an agreement about acceptable behaviours and protests that could take place without causing distress to employees and visitors to the clinic. A meeting was arranged on 24 April 2019 and took place with representatives from Marie Stopes, British Pregnancy Advisory Service, Society for the Protection of the unborn Child, 40 days for Life, Greater Manchester Police and Manchester City Council's Anti-social Behaviour Team. The meeting was facilitated by an independent Mediation Service. Whilst a discussion did take place with all the parties involved, they were not able to reach a compromise that would be acceptable to everyone.

As a part of the ongoing investigation officers from the Council and Police have listened to representatives of groups and organisations who express support for the introduction of a PSPO and those who do not. Engagement with representatives from groups and organisations from all sides has been used to explore the possibility of reaching a negotiated agreement. Unfortunately, this has not been successful.

- 5.3 The Council has carried out an options analysis to look at whether there are alternatives to making a PSPO which could deal with the detrimental effects being experienced. The main difficulties with the other options are that they would require victims of the behaviour to come forward in order to pursue a civil or criminal sanction when the sensitive nature of seeking an abortion means that many will be unwilling to be identified in this public way. In addition, the people involved in the activities differs from day to day, a solution which attaches to the public space (as opposed to a named individual) is more appropriate given the nature of the activities. As stated above, a copy of the analysis is available to Members on request.
- 5.4 It became clear, through the course of the investigations, that actions to address individuals' behaviour was not proving effective in addressing the detriment caused to those affected by the behaviour. After the attempts to reach a negotiated agreement also failed to make an impact on the behaviour a Public Spaces Protection Order was then considered as a means to regulate the behaviours taking place outside the clinic.

6.0 Area for consultation

- 6.1 Based on the findings from the investigation, data on reports of crime and ASB and taking into account the possibility of displacement, the area of the prohibitions and requirements of the proposed PSPO for consultation is identified in Appendix 2. The area was defined to take into account the local geography and the routes that those attending the clinic for work or health services may take to access the clinic, for example the bus stop on Wilmslow Road and the main roads to the clinic, Wilmslow Road, Moseley Road and Wilbraham Road.

- 6.2 In addition to this, following a site survey of the local neighbourhood a number of sites within the proposed prohibition area were selected for consultation on providing a designated zone that would facilitate protest within the prohibition area. These were identified using site surveys to assess the impact of protests to the local community and the likelihood of detriment to those accessing the clinic. Consideration was given to line of sight to the clinic and public transport as well as the width of the pavement and likely obstruction for local residents, businesses and visitors to the area.
- 6.3 The proposal that was included in the consultation sought to gain the views of local residents, those accessing and working at the clinic and others that may be affected by an order, about how designated areas of protest may impact them and whether they would be an appropriate way to facilitate the protest, or whether they could potentially displace antisocial behaviour to other local areas. This was the approach taken to address detrimental behaviours that had been experienced outside a clinic in Ealing.

7.0 Consultation on a PSPO

- 7.1 The consultation provided the opportunity to seek a broad range of views on the issues and determine the most appropriate way forward to address the detrimental effects of the activities taking place on Wynnstay Grove.
- 7.2 The Council undertook an eight week consultation from 20 September 2019 to 15 November 2019. Information and an online survey was published on the Council's website. In accordance with relevant guidance the information included;
- Why the Council was undertaking the consultation together with a summary of the evidence in relation to each of the behaviours
 - A draft PSPO including the proposed behaviours, requirements and maps outlining the geographical areas where the terms may apply
 - The consequences of breaching a PSPO
 - The right to appeal a PSPO.
- 7.3 The survey included closed and open questions regarding the proposed order. Respondents were given the option to choose which questions they answered in relation to each of the behaviours and requirements. The Respondents were able to complete free text fields to provide additional feedback and suggestions.

The draft proposed order which was the subject of the consultation and lists the prohibitions and requirements which were originally under consideration can be found at Appendix 3.

- 7.4 Awareness of the consultation was promoted extensively through a communications and stakeholder plan. Methods of communication included social media and hard copies of the survey were available in local libraries. It was reported in the media and promoted on the council's social media channels and website. Officers also engaged with residents in the Fallowfield

area who may be impacted by the proposed PSPO and drop in sessions were held locally.

- 7.5 Awareness of the consultation was raised through resident and business groups who live or work in the area, councillors, the Community Safety Partnership, Macc and local partnership meetings, and meetings with voluntary and community organisations. Written correspondence was sent to owners and occupiers of land in the proposed area inviting them to participate in the online survey.

Consultation took place with statutory consultees;

- Greater Manchester Police
- Police and Crime Commissioner
- Community representatives
- Occupiers and owners of land in the proposed PSPO area.

8.0 Consultation Responses

- 8.1 The consultation received 2,172 responses (2,015 completed online questionnaires and 152 public written responses. Five responses were from organisations with an interest in the PSPO. 1,098 email responses were also received during the consultation period. These were identical in nature and had the same responses, these will be commented on separately later in the report.

Details of the survey responses can be found at Appendix 4. An independent organisation was commissioned to provide an analysis of the free text fields completed in the consultation, this analysis is provided in Appendix 5.

- 8.2 Statutory Consultee Responses:

Greater Manchester Police (GMP) supports the implementation of a PSPO stating that a PSPO would enhance the Neighbourhood Teams' ability to take positive action against the individuals involved in the intimidation and harassment of service users and staff and an order is fully supported by GMP.

The Mayor of Greater Manchester (fulfilling the Police and Crime Commissioner statutory obligation to consult) responded to say that they fully support the implementation of the PSPO but asked for some consideration to the resources that would be required to enforce this once introduced.

The views of community representatives and owners / occupiers of land were captured through the consultation survey.

- 8.3 Written responses were received from the organisations listed below. These responses include feedback on the draft PSPO, testimonials and submissions in respect of equalities and Human Rights.

- ADF International (a legal organisation dedicated to protecting fundamental freedoms)
- Aston University (Anti-Abortion Activism at Abortion Service Providers and Pregnancy Advice Services)
- British Pregnancy Advisory Service (Reproductive healthcare charity)
- The Manifesto Club (Civil liberties group)
- Marie Stopes UK (Independent provider of abortion care services)

These responses were considered alongside all other responses and are available to the Committee for review upon request.

- 8.4 All the consultation responses are considered in relation to each of the specific behaviours and requirements contained within the draft PSPO and with reference to the legal threshold. It is important to consider each behaviour individually to ensure the legal threshold for that behaviour is met, rather than comparing the survey results across the different behaviours. Proposals have been made as to whether or not the evidence justifies the prohibition/requirement being included in the final Order or if any amendments should be made. The proposed PSPO has taken into consideration, initial evidence that demonstrated the grounds to consult, further evidence provided from the consultation responses, support for the PSPO, alternative suggestions and local and national developments since the consultation was undertaken.

9.0 Consideration of the articles for a PSPO

Respondents were asked to consider which behaviours they wanted to give their views on, they were then asked the same five questions for each of the responses, the questions listed below.

1. How problematic do you think this [named] behaviour is in the proposed PSPO area?
2. How often have you personally experienced problems with this [named] behaviour?
3. Do you agree or disagree that this [named] behaviour should be included in the PSPO?
4. Has this [named] behaviour had a detrimental effect on your quality of life?
5. If yes, please tell us how you or others were affected.

Prohibitions

- 9.1 Protest - namely engage in any act of approval / disapproval or attempted act of approval / disapproval, with respect to issues related to abortion services by any means. This includes but is not limited to graphic, verbal or written means, prayer or counselling.

Of the responses 1,746 (87%) gave their views on this prohibition, Respondents were then asked how problematic they felt this behaviour was in

the area, to which 83% thought it was 'a major problem'. Respondents that were a client or visitor to Marie Stopes and supporters of Pro-choice activities were more likely to say the behaviour was a major problem than supporters of Pro-life activities.

Respondents who identified as being residents, were more likely to say the behaviour wasn't a problem (19% compared to 7%). However as detailed in 3.11 those residents that have reported experiencing problems have been vulnerable residents that live in a supported housing scheme in the neighbourhood.

606 of the 1515 respondents had personally experienced problems with this behaviour, just over a quarter (27%) of respondents said they had experienced it once, with 1% saying they experienced it daily. A total of 6% said they experienced it weekly and 5% said annually. Three in five (60%), said that they had never experienced this behaviour. Clients or visitors to the clinic were more likely to have experienced the behaviour (218 out of 264 respondents)

64 % of respondents stated that it had a detrimental impact on their quality of life.

In response to whether the prohibition be included in any PSPO, 82% agreed it should be included as a prohibition. The survey responses demonstrate the unreasonableness of the problem and whilst the persistence is less evident in total responses for the visitors there is a persistence for those visiting or clients of the clinic. Evidence demonstrates the detriment of this behaviour.

It is proposed that this article is included in the order.

9.2 Interfere, or attempt to interfere, whether verbally or physically, with a staff member or service user of the Centre

Of the responses four out of five (85%) felt interfering or attempting to interfere with staff or service users was a major problem.

36% of 1607 respondents reported personally experiencing this behaviour including one in five (18%) responded they had experienced it once and 4% had experienced it more than five times, although this rises to 68% of the 255 visitors or clients of the clinic.

88% of respondents agreed the behaviour should be included in the proposed PSPO order.

30% of respondents said that this behaviour had a detrimental effect on their quality of life. Over half the respondents (52%) who were a client or visitor said this behaviour had a detrimental effect on their quality of life.

Respondents were then asked to explain why it had a detrimental effect on them, the most common response (51%) was that it was intimidating or

frightening for service users and staff. The second most common response (46%) was it was upsetting, stressful and had a negative mental health impact on those accessing the service, nearly a quarter (24%) said people had the right to choose and it was a legal form of healthcare. The responses also showed that 60% of respondents who were clients or visitors to the service said it was upsetting and stressful and had a negative impact on mental health.

The unreasonableness of the behaviour is demonstrated in the responses to the survey and persistence for those who are visitors and clients of the clinic. The detriment of this behaviour is evidenced in the reports from staff and clients from the clinic.

It is proposed that this article is included in the order.

9.3 Intimidate or harass, or attempt to intimidate or harass, a staff member or service user of the Centre

Of the responses almost nine in ten (86%) thought it was a major problem with a further 3% saying it was a minor problem, and 4% said it was not a problem. Further analysis showed that 91% of supporters of Pro-choice said it was a major problem, compared to 38% of supporters of Pro-life activities.

When asked how often the respondents had personally experienced intimidation or harassment, one in five (20%) said they had, 8% saying more than once and a further 4% saying more than five times. Just over three in five (63%) respondents said they had never experienced this behaviour. Respondents that are a client or visitor to the service are more likely to say that they had experienced this behaviour once 48% compared to 20% overall.

When asked if the behaviour should be included in the proposed order, 89% or one in nine respondents agreed it should be included.

When asked if the behaviour had had a detrimental impact on the respondents life, 32% of respondents said this behaviour had a detrimental effect on the quality of their life, this rose to 58% for clients or visitors to the clinic.

Respondents were asked if it had a detrimental effect on their quality of life and were asked to explain how they or others were affected. The most common response, provided by 62% of respondents was that the behaviour was intimidating and frightening for service users and staff. The second more common response mentioned by 42% of respondents that said the behaviour had a detrimental effect on the quality of their life, was that it was upsetting, stressful and had a negative mental health impact, from these responses 56% of respondents that were clients or visitors to Marie Stopes said it was upsetting, stressful and had a negative mental health impact.

A large proportion of those responding to the survey identified this behaviour as a major problem. Experiences of this behaviour are more likely for clients and visitors to the clinic and the detriment of that behaviour is clearly identified

in the evidence from the staff service users .This is also detailed in the Marie Stopes written submission in response to the consultation.

It is proposed that this article is included in the order.

9.4 Record or photograph a staff member or service user of the Centre without the explicit consent of that person

Respondents were asked how problematic they thought recording or photographing behaviour was in the proposed PSPO area. Just over three-quarters (77%) said it was a major problem, with 6% saying it was a minor problem. A total of 5% said it was not a problem at all. This was further explored with 80% of supporters of Pro-choice stating it was a major problem, compared to 36% of supporters of Pro-life activities.

One in eight (12%) of respondents had personally experienced problems once, with 5% saying they had experienced problems more than once and 2% saying more than five times. Respondents that are a client or visitor to the service are more likely to say that they had experienced this behaviour once (29% compared to 12% overall).

Over three quarters of respondents (76%) agreed this behaviour had a detrimental effect on the quality of their life with most (40%) giving the reason for this as intimidating and frightening for service users and staff and 37% stating it was an invasion of privacy and being filmed led to a loss of anonymity for those accessing or working at the service.

The unreasonableness and detriment of the behaviour is demonstrated both from survey responses and the evidence from staff and service users. When asked if this should be included in the proposed order nine in ten (89%) of respondents agreed that this behaviour should be included in the PSPO.

It is proposed that this article is included in the order.

9.5 Display any text or images relating directly or indirectly to the termination of pregnancy

Respondents were asked how problematic they thought displaying text or images relating directly or indirectly to the termination of pregnancy was in the proposed PSPO area, just over four in five (82%) said it was a major problem, with 5% saying it was a minor problem and 7% stating it was not a problem.

When asked how frequently the respondents had personally experienced problems one in five (20%) stating they had personally experienced this behaviour. However 75% of 251 clients and visitors experienced the behaviour.

87% of respondents agreed this behaviour should be included in the proposed PSPO.

When asked if this had a detrimental effect on the respondents life, 66% agreeing it did and 61% of respondents who identified as a visitor to the service or staff said this behaviour had a detrimental effect on their quality of life.

Respondents were then asked to explain why it had a detrimental effect on their lives, the most common response at 52% was that the behaviour was upsetting, stressful and had a negative mental health impact on the respondents. The second most common response at 44% of respondents stating that the behaviour had a detrimental effect on the quality of their life, when distressing, graphic and misleading protest material was being shown.

The behaviour is identified as a major problem and evidence of the persistent and detrimental effects has been demonstrated for clients and visitors to the clinic.

It is proposed that this article is included in the order.

9.6 Distribute any text or images relating directly or indirectly to the termination of pregnancy

Respondents were asked how problematic they thought distributing text or images relating directly or indirectly to the termination of pregnancy was in the proposed PSPO area. Just over four in five (81%) said this behaviour was a major problem, with 5% saying it was a minor problem, a total of 7% said it was not a problem. Once again Pro-choice respondents (87%) said this was a major problem, compared to 27% of Pro-life respondents, however the highest number (91%) who reported this behaviour as a major problem were clients and visitors to the service.

When asked if they had personally experienced the behaviour 40% of the 1514 respondents had some experience. 19% reported they had personally experienced the behaviour once, 10% saying they had experienced it more than once and 6% confirming they had experienced the behaviour more than five times. 60% of respondents had never experienced the behaviour.

When asked if this behaviour should be included in the proposed PSPO almost nine in ten (86%) agreed that this behaviour should be included in the PSPO and 14% disagreeing.

When asked if this behaviour had a detrimental impact on the respondents 31% of respondents said the behaviour had a detrimental effect on their quality of life. 53% of the 242 respondents that identified as a visitor or service use of the clinic reported a detrimental effect.

When asked why it had a detrimental effect on their quality of life and how it affected them, the most common response (45%) was the behaviour was upsetting, stressful and had a negative mental health impact. The second more common response mentioned by 35% of respondents that said the

behaviour had a detrimental effect on the quality of their life, was that it was distressing, graphic and misleading protest material was being shown.

The unreasonableness of the behaviour is demonstrated in the consultation responses. Evidence of the persistent and detrimental effects has been demonstrated for clients and visitors to the clinic.

It is proposed that this article is included in the order.

9.7 Play amplified music, voice or audio recordings with respect to the approval or disapproval of abortion services

Respondents were asked how problematic this behaviour was in the proposed PSPO area, seven in ten (71%) said it was a major problem, with 10% saying it was a minor problem, 4% of respondents stated it was not a problem.

When asked if respondents had personally experienced the behaviour, 451 of the 1504 respondents had personally experienced the behaviour 15% of respondents said they experienced problems once, with 7% saying more than once and a further 4% saying more than five times. 70 % of respondents said they had never experienced this behaviour. Respondents who identified as a client or visitor to the service were most likely to have experienced this behaviour (32%) compared with 15% overall.

When asked if this behaviour should be included in the proposed order nine in ten (90%) of respondents agreed that this behaviour should be included in the PSPO with only 10% disagreeing.

25% of respondents said this behaviour had a detrimental effect on the quality of their life, this rose to 36% for clients or visitors to the clinic. When asked how this behaviour affected the respondents the most common response provided (44%) was that the behaviour was upsetting, stressful and had a negative mental health impact. The second more common response mentioned by 33% of respondents that said the behaviour had a detrimental effect on the quality of their life, was that it was intimidating and frightening for service users and staff. of these respondents 64% identified as a client or visitor to the service and stated it was upsetting, stressful and had a negative mental health impact this behaviour taking place.

Evidence of unreasonableness of the behaviour is demonstrated in the survey responses and the detrimental effects are detailed in the survey responses and the evidence from staff and clients.

It is proposed that this article is included in the order.

9.8 Requirements

The consultation responses in respect of the requirements included in the PSPO consultation are detailed below. Requirements are not blanket bans but support a formal request from an authorised officer. Currently there is no

opportunity for officers to challenge this behaviour. The inclusion of requirements will give additional powers to both council and police officers to be able to formally request actions to address the behaviour.

Requests from authorised officers

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Don't know	Response Total
Request to leave the PSPO area and not return within 24 hours	68%	18%	2%	3%	8%	1%	1989
Request to provide their name, address and date of birth	65%	18%	5%	0	10%	2%	1983
						answered	
						skipped	

86% of those who answered strongly agreed or agreed that a person should be asked by an authorised officer to leave the PSPO area and not return within a 24 hour period. This is slightly lower at 83% when the question asked an authorised officer for an individual to provide their name, address and date of birth.

When respondents were asked if they had any further comments about the requirements the main responses 32% felt the penalties were not strong enough to deter the behaviour and 28% of respondents felt the request to leave the designated area for 24 hours was not long enough and would not deter protesters.

It is proposed that these articles are included in the proposed order.

Direct quotes taken from the consultation survey responses provide examples regarding how people or people they know have experienced a detrimental effect by the behaviours outside the clinic:

"I used the clinic 6 years ago. As I entered they were standing across the road and had pictures and shouted at me. They're entitled to their opinions but they should not be allowed to stand there in judgement of law abiding people. It was a difficult day for me and I had spent weeks in emotional turmoil deciding whether to end the pregnancy. The care I received from the clinic was

excellent. The only negative part of the day was being subjected to their intimidation. The memory of how they were that day will always be with me. I crying writing this. I feel as strongly for the staff providing a valuable service as I do the clients of the clinic. They should not be subjected to this abhorrent behaviour for simply providing medical care. I'm appalled that 6 years later people are still suffering because of these people. Please put a stop to this."

"When I have visited the clinic, I have been approached and handed leaflets. The leaflets have been covered so you cannot see what they say until you've already accept them. On other occasions when I have been approached, even if it has only been a 'hello', due to the signs etc that the protesters have up, it made me feel uncomfortable / like they had ulterior motives for wanting to engage me in conversation."

"Staff members should be allowed to do their jobs in peace. I am only there to protect vulnerable clients, but object to being abused when acting legally."

"As a couple we experienced first-hand how it feels to be on the receiving end of the aggressive attacks verbally by the small group of pro lifers that gather frequently outside the facility."

"It was exceptionally intimidating, I ended up going to a different clinic because I could not tolerate that level of hate."

"It had a detrimental effect on my mental health and grieving process as I felt like a monster for simply doing what was best for me at the time."

9.9 Identical responses

The consultation received 1,098 responses via email answering most of the questionnaire. In almost all cases, the responses were the same and are believed to have been generated via a website called www.behereforme.org which contains a link to the Council's consultation on the proposed order. On looking on the website the answers to each of the consultation questions has been completed already (both in relation to the questions where there are multiple choices and the free text boxes). These emails did not explain why they had been completed in this way (instead of completing the online survey on the Council's own website).

As these emails were all almost identical, we have considered their contents collectively and have detailed some recommendations below.

From these responses 96% identified themselves as a Pro-life supporters, we know other local authority areas that have carried out PSPO consultations on similar clinics have also reported receiving similar responses outside of their online consultation. 100% of the respondents disagreed with any making of a PSPO, 100% of these responses confirmed that none of the behaviours being sought in the PSPO were a problem. The responses all agreed it would limit freedom of speech and a right to protest and would also prevent women from

seeking support. 100% of these responses also lived outside the proposed PSPO area.

Appendix 6 is a map plotting the postcode of the responders and the distance to the clinic and PSPO area, most are national but some international responses. The Council has taken all of these emails into account in assessing the responses to the consultation and notes that all of the responders are people who live outside of the proposed restricted area. In the circumstances, the Council has chosen to place most weight on the responses of those people who are more likely to be able to comment on whether the activities taking place outside the clinic have a detrimental effect by reason of having actually witnessed or participated in them.

9.10 Designated zones and the scope of the Restricted Area

The proposed PSPO on which the Council consulted included a Restricted Area which extended to Wilbraham Road and Moseley Road with the potential for a “designated zone” within that area. There were four possible locations for the zone and the intention was to provide an allocated area to allow individuals to protest/hold vigils, but to restrict these behaviours to ensure that this would not continue to cause a detriment to those accessing the clinic, those living in or visiting the local area.

When asked whether they agreed or disagreed with a designated zone, 63% (1226 respondents) disagreed and 37% agreed (731). The majority of respondents Pro-Life respondents disagreed with a zone as did the majority of Pro-choice respondents.

The respondents were asked to choose from four options as to which zone was their preferred choice and which was their least preferred choice. Although the question asked respondents to choose only one of each, respondents did choose more than one, (resulting in the figures below adding up to more than 100%).

As shown in the results, the most preferred is Zone 1, with 35% of respondents choosing this, with Zone 2 receiving the lowest response. However, 61% of respondents have also suggested an alternative zone which mainly indicated that respondents wanted a location that was outside of the immediate area and as far away from the clinic as possible.

Fewer responses were completed in terms of the behaviours that were proposed for the designated areas (818), but the rules were supported by between 67% and 88% of the respondents that answered the questions.

In considering all the responses with regard to the designated zone - there is no clear support for a zone to be implemented, nor for any specific location for a designated zone, from either the respondents in the survey and also the email responses.

In proposing the PSPO the Council recognises the need to respect Human Rights, in particular, the right to respect for a private and family life (Article 8), freedom of thought belief and religion (Article 9) freedom of expression (Article 10) and freedom of assembly and association (Article 11). Further information is detailed in section 10.0.

The scope of the PSPO should be both justified and proportionate, not just in terms of the prohibitions/requirements themselves but also in terms of its geographical scope. Action is 'proportionate' when it is appropriate and no more than necessary to address the problem concerned. It is proposed that the size of the restricted area is reduced to the area identified in Appendix 7. This is a significant reduction in the extent of the Restricted Area to the immediate locality of Wynnstay Grove and the junction with Wilmslow Road, the area focusses on the problematic area outside the clinic and its locale. This is believed to be a more proportionate way of addressing the behaviour experienced at the clinic whilst allowing Pro-life or Pro-choice protests or vigils to take place anywhere outside of the Restricted Area without the need to prescribe a location for such activities. It is therefore proposed that no designated zone will be prescribed within the significantly reduced Restricted Area.

The reduction of the area has taken into consideration the local geography including potential displacement to a sensitive site, such as a nursery on Wilmslow Road and also the location of bus stops on Wilmslow Road that may be used by staff, service users and visitors to the clinic.

The scope of the Restricted Area has been drawn in a way which ensures that those visiting the clinic by car, bus or on foot can arrive and leave without being confronted by the protest activity. Careful consideration has been given to keeping the scope as small as possible to allow unobstructed passage to the clinic whilst also allowing the Pro-life/Pro-choice groups who choose to continue their activities to do so in close proximity to the clinic but in a location which allows clinic visitors to pass without being identified and/or obstructed.

The description and boundary have been devised using easily identifiable landmarks/door numbers to ensure that residents, visitors, Pro-life/Pro-choice groups and anyone else potentially affected by the terms of the order can easily understand the scope of the Restricted Area. Clear boundaries will also assist officers tasked with enforcement of the order to promote compliance.

In revising the Restricted Area we have taken into account:

- The feedback from the consultation responses which demonstrate a lack of clear support for a designated zone.
- The need to have a Restricted Area which is proportionate in scope
- The risk of displacement to other sites in the local area.
- Human Rights, which is explored in more detail below.

10.0 Human Rights considerations

The Equality Act 2010 and the European Convention on Human Rights ('ECHR')

- 10.1 The Council is a public authority and the Human Rights Act 1998 requires it to act compatibility with the European Convention on Human Rights.
- 10.2 In addition to this general position s.72(1) of the 2014 Act requires the Council to have *particular* regard to the rights protected by Article 10 (Freedom of Assembly) and Article 11 (Freedom of Expression) when deciding whether to make a PSPO.
- 10.3 The proposed order gives rise to some difficult issues arising under the Equality Act 2010 and the ECHR. These are difficult issues because the proposed order requires the Council to have regard to the *competing* rights of the various represented groups and the rights of the service users/clinic staff. A consideration of these rights requires the Council to undertake a delicate exercise of achieving the appropriate balance between the respective rights. They are also difficult because an ECHR right can only be interfered with where the interference is in accordance with the law, necessary and in furtherance of a permitted objective. These issues are considered more fully below and much of the analysis is taken from the report approved by the High Court and the Court of Appeal in the Dulgheriu case.

The ECHR

- 10.4 The Council must take account of Articles 8, 9, 10, 11 and 14 of ECHR. These are a combination of 'absolute rights' (meaning they cannot be interfered with by the state under any circumstances) and 'qualified rights' (meaning they may only be interfered with under specific circumstances). In considering interference with qualified rights, the Council are required to consider that any interference is:
1. In accordance with the law
and
 2. Necessary in a democratic society in the interests of:
 - National Security *or*
 - Territorial integrity or public safety *or*
 - The prevention of disorder or crime *or*
 - The protection of health or morals *or*
 - The protection of the reputation or rights of others
- 10.5 It is broadly under the protection of rights of others that the interferences presented by the proposed PSPO fall. The following paragraphs outline the key Articles engaged by the decisions. Members will find a summary of how any interference is said to be permissible:

Article 8: Right to Private and Family Life

- 10.6 Article 8 of the European Convention of Human Rights protects a person's right to *respect* for their private and family life, their home and their correspondence. Article 8 is a qualified right, which means it can be interfered with in certain situations, for example, to protect the rights of others.
- 10.7 The proposed PSPO does not interfere with any person's right to private and family life. However, the activities outside the clinic are an interference with Article 8 rights that the Council is entitled to take steps to protect. In the Court of Appeal's judgment in Dulgheriu and Orthova v Ealing LBC, the CoA observed that the decision of a woman whether or not to have an abortion was an intensely personal and sensitive matter which undoubtedly fell within "private life" as referenced in Article 8 of the ECHR. Article 8 protects a person's personal autonomy and there is a reasonable expectation of privacy in that visitors to the clinic are entitled to expect that their visit would receive no more publicity that was inevitable in accessing and leaving the clinic across a public space and highway. The proposed PSPO seeks to protect the private and family life of those persons accessing services at the clinic.

Article 9: Right to Freedom of Thought

- 10.8 Article 9 of the European Convention of Human Rights protects a person's right to hold both religious and non-religious beliefs and protects a person's right to choose or change their religion or beliefs. The PSPO is not seeking to interfere with this right and it does not seek to prohibit any activities that affect a person's right to hold religious or non-religious views.
- 10.9 Article 9 additionally protects a person's right to manifest their beliefs in worship, teaching, practice or observance. For example the right to talk and preach about their religion or beliefs and to take part in practices associated with those beliefs. The right to manifest one's religion or beliefs is a qualified right, which means it can be interfered with in certain situations, for example, to protect the rights of others.
- 10.10 The Council is aware that some of the represented groups believe that their activities are part of their right to manifest their religion or beliefs. These are important rights and the Council should be reluctant to interfere with those rights. Where the Council does interfere it must ensure that any interference is in accordance with the law (this is addressed later in this report), is necessary (also addressed more fully later in this report) to ensure the protection of the rights of others. The proposed PSPO would interfere with these Article 9 rights. This is a delicate balancing exercise in which any interference with the right must be in accordance with the law and necessary to protect the rights of others. Both of these considerations are addressed more fully later in this section.

Article 10 Right to Freedom of Expression and Information

- 10.11 Article 10 of the European Convention of Human Rights protects the right of everyone to freedom of expression. This includes freedom to hold opinions and to receive and impart information and ideas without interference by public authority. Article 10 is a qualified right, which means it can be interfered with in certain situations, for example, to protect the rights of others.
- 10.12 Again, this is an important fundamental right in any democracy. It includes the entitlement to express views that others might disagree with, find distasteful or even abhorrent. Article 10 provides a protection to express those views and is an important part of a free and democratic society.
- 10.13 It is important to consider that individuals from Pro-life groups have stated they attend the Clinic to impart information to women accessing services and the proposed PSPO will interfere with their Article 10 rights. It should also be noted that the PSPO will interfere with the Article 10 rights of Pro-choice represented groups. In deciding whether to implement a PSPO, therefore, the Council will have to balance the rights of pregnant women to access lawful health services free from fear of intimidation, harassment or distress and with an appropriate level of dignity and privacy against the Article 10 rights of Pro-Life and Pro-Choice represented groups to impart information and ideas relating to the termination of pregnancy and in addition the Article 10 right to *receive* such information. This is a delicate balancing exercise in which any interference with the right must be in accordance with the law and necessary to protect the rights of others. Both of these considerations are addressed more fully later in this section.

Article 11 Right to Freedom of Assembly

- 10.14 Article 11 of the European Convention of Human Rights protects everyone's right to freedom of peaceful assembly and to freedom of association with others. Article 11 is again a qualified right, meaning it can be interfered with in certain situations, for example, to protect the rights of others.
- 10.15 The right to freedom of assembly includes peaceful protests and demonstrations of the kind seen outside the clinic. The PSPO will interfere with the Article 11 rights of Pro-life and Pro-choice groups in the locality of the Clinic. The Council therefore needs to balance the rights of pregnant women to access lawful health services free from fear of intimidation, harassment or distress against the Article 11 rights of Pro-life and Pro-choice groups. This is a delicate balancing exercise in which any interference with the right must be in accordance with the law and necessary to protect the rights of others. Both of these considerations are addressed more fully later in this section.

Article 14 Right to Freedom from Discrimination

- 10.16 Article 14 of the European Convention on Human Rights provides '*The enjoyment of the rights and freedoms set forth in this European Convention on Human Rights shall be secured without discrimination on any ground such as*

sex, race, colour, language, religion, political or other opinion, national or social origin, association with a national minority, property, birth or other status. It is therefore not a free-standing Article but rather one which relates to the engagement of other Articles.

- 10.17 Article 14 needs to be considered by the Council, given the proposed PSPO targets behaviours largely contained within a group who identify with a specific religion and belief (namely Christianity).

Is the interference ‘in accordance with the law’?

- 10.18 If the conditions for making a PSPO are met, and that the restrictions or prohibitions it imposes are reasonable to impose in order to prevent or reduce the identified detrimental effect from occurring, occurring or recurring, then the PSPO will have been made in accordance with the statutory provisions. As a result any interference with the relevant ECHR right will be in accordance with the law.

Is the interference ‘necessary in a democratic society’?

- 10.19 Regard must be had to the content of the relevant rights as summarised above. All of the rights highlighted, but Articles 10 and 11 in particular, are important rights in a free a democratic society. This has been highlighted by a number of the responses to the consultation.
- 10.20 If the Council wishes to interfere with these rights the interference must be ‘necessary’ in order to achieve a stated aim, here the aim that the Council is seeking to achieve is the protection of the rights and freedoms of others. Those rights and freedoms include the freedom to access health care services without impediment. Consideration needs to be given to whether this objective is sufficiently important to justify limiting a fundamental right.
- 10.21 ‘Necessary’ means that the interference must be connected to achieving the stated objective and must not interfere any more than is required in order to achieve it. The PSPO must strike a fair balance between the competing rights of the represented groups and those affected by their activities.
- 10.22 The ECHR rights have been firmly in mind when the proposed order was being formulated. In addition, these considerations have been kept under review throughout the process.
- 10.23 The principle difficulties identified by the evidence is the presence of the represented groups at the entry point to the clinic and their desire to engage with the service users and staff. The evidence base suggests that the location of the groups, independently of what they do whilst they are there, is a problem because the service users are sometimes impeded from entering the clinic, they feel as though they are being watched or ‘judged’, they are approached and spoken to about the procedure they are considering or have undergone, women have reported feeling upset, nervous, frightened and intimidated by being presented with models of fetuses, envelopes with

messages stating “ask to see the scan” and groups of people holding posters and signs with images including foetuses on them. Several women were distressed to the point that they were unable to continue with their treatment and had to return at a later date impacting upon their right to access healthcare as they had intended. Women report being distressed after receiving information such as having an abortion will leave them more susceptible to having cancer. They report feeling unfairly judged by the way in which the people involved in the protests or ‘vigils’ congregate outside the Marie Stopes clinic and express their views. The represented groups say that their presence (of itself) should not be problematic, nor should the handing out of leaflets or attempting to speak to the service users/staff. They deny filming, shouting at or following clinic service users or their partners, relatives and friends; they deny calling clinic users ‘murderers’ or telling clinic users that they will be ‘haunted’. Members are reminded of the evidence base (summarised at Sections 3 and 4 of this report and Appendix 4), which suggests that there is a detrimental effect on the quality of life of those in the locality. Members are advised that the prohibitions are directed at reducing the identified detrimental effect.

10.24 Members are also asked to note the options analysis: officers have had regard to a broad range of powers to deal with the activities that are having a detrimental effect on the quality of life of those in the locality. Careful consideration has been given to whether there are alternative means of achieving a reduction or elimination of the detrimental effect on the quality of life of those in the locality. Each option has its own advantages and disadvantages, which will not be repeated here.

10.25 The main issue for the Council is whether the making of the proposed order is a proportionate means of achieving a reduction / elimination of the detrimental effect on the quality of life of those in the locality. Enforcement options which attach to an individual are not thought to be appropriate here as the people present outside the clinic differ from day to day. The best fit is thought to be a solution which attaches to the space as opposed to an individual. The Court of Appeal in the Dulgheriu case gave detailed consideration of the human rights assessment applicable to this type of situation. The underlying factual position is similar, although not identical and the Council considers that the CoA’s analysis can be applied to the present situation. The revised PSPO is tailored to the activities complained of, it adopt the least restrictive means possible to protect the right of the service users and is necessary, justified and proportionate.

11.0 Equality

11.1 The public sector equality duty.

The equality duty was created under the Equality Act 2010. In summary, those subject to the equality duty must, in the exercise of their functions, have due regard to the need to:

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act.
- Advance equality of opportunity between people who share a protected characteristic and those who do not.
- Foster good relations between people who share a protected characteristic and those who do not.

The Act explains that having due regard for advancing equality involves:

- Removing or minimising disadvantages suffered by people due to their protected characteristics.
- Taking steps to meet the needs of people from protected groups where these are different from the needs of other people.
- Encouraging people from protected groups to participate in public life or in other activities where their participation is disproportionately low.

The equality duty covers the nine protected characteristics: age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation. Public authorities also need to have due regard to the need to eliminate unlawful discrimination against someone because of their marriage or civil partnership status. This means that the first aim of the duty applies to this characteristic but that the other aims (advancing equality and fostering good relations) do not apply.

- 11.2 An Equality Impact Assessment (EIA) has been completed considering each of the protected characteristics and behaviours included in the PSPO This is included as Appendix 8. Particular regard has also been given to the articles in the Human Rights Act detailing freedom of expression and freedom of assembly and freedom of thought belief or religion when deciding whether to proceed with the proposal to make a PSPO.

12.0 The Proposed PSPO

The resulting proposed Public Spaces Protection Order prohibitions and restrictions are detailed below. The order is based on a PSPO adopted by the London Borough of Ealing. The Ealing PSPO has been approved both by the High Court and the Court of Appeal. However, in proposing the PSPO, the Council is not simply adopting what another area has done, to the contrary, careful consideration has been given the nature of the problems at Wynnstay Grove, the evidence base, the outcomes of the consultation and whether a PSPO is necessary, justified and proportionate in all of the circumstances pertaining to this clinic:

The proposed PSPO reads:

No person shall in a public place in the Restricted Area:

1. protest, namely engage in any act of approval / disapproval or attempted act of approval / disapproval, with respect to issues related

- to abortion services by any means. This includes but is not limited to graphic, verbal or written means, prayer or counselling.
2. interfere, or attempt to interfere, whether verbally or physically, with a staff member or service user of the Centre.
 3. intimidate or harass, or attempt to intimidate or harass, a staff member or service user of the Centre.
 4. record or photograph a staff member or service user of the Centre without the explicit consent of that person.
 5. display any text or images relating directly or indirectly to the termination of pregnancy.
 6. distribute any text or images relating directly or indirectly to the termination of pregnancy.
 7. play amplified music, voice or audio recordings with respect to the approval or disapproval of abortion services.

These requirements will apply to the whole of the Restricted Area.

1. A person in a public place in the Restricted Area who an Authorised Person or Constable reasonably suspects of breaching any of the prohibitions or requirements in this Order shall, upon request of that Authorised Person, provide their name, address and date of birth to that Authorised Person.

A requirement under this Article is not valid if the Authorised Person is asked by the person subject to the requirement to show evidence of their authorisation and they fail to do so.

2. A person in a public place in the Restricted Area who an Authorised Person or Constable reasonably suspects of breaching any of the prohibitions or requirements in this Order shall, upon valid request of an Authorised Person or Constable, leave the Restricted Area within a reasonable time as specified in writing by that Authorised Person and not return within 24 hours.

A requirement under this Article is not valid if the Authorised Person is asked by the person subject to the requirement to show evidence of their authorisation and they fail to do so.

The Restricted Area is all public places, as defined by section 74(1) of the Act, on the whole of Wynnstay Grove and the whole of Wilmslow Road from its junction with Willow Bank (from the southern boundary of 336 Wilmslow Road - "McDonalds" - and the southern boundary of 361 Wilmslow Road) to its junction with Sherwood Street (from the southern boundary of 304 Wilmslow Road - the 'Orange Grove' apartments) and Ladybarn Road (the southern boundary of 331 Wilmslow Road) as more particularly outlined in red on the map at Appendix 7.

13.0 Enforcement

- 13.1 If the PSPO is introduced it will provide additional powers for both authorised Council and Police Officers to use when appropriate. The approach to enforcement remains as outlined in the Council's Corporate Enforcement Policy and the Anti-Social Behaviour Policy and Procedure. To become authorised to enforce the PSPO officers will undertake the appropriate training and formal authorisation. Officers will continue to work proactively with anyone or any groups who may be impacted by the PSPO.
- 13.2 Upon commencement of the PSPO, for the first three weeks, officers will spend time in the area speaking to businesses, groups with an interest and members of the public and people who may be affected by the terms of the Order to raise awareness of the prohibitions, requirements and consequences of breach. During this period the PSPO will not be enforced.
- 13.3 Members of the public will be asked to report breaches of the PSPO using the existing channels to provide details of the incident and the location. This information will be used to inform regular multi-agency operations when Council and Police Officers will target resources in the location and apply the appropriate use of powers.
- 13.4 Officers will record breach actions; the number of verbal warnings, Fixed Penalty Notices and prosecutions.
- 13.5 A Council and GMP partnership protocol will confirm the approach to the PSPO enforcement including any actions identified through the Equality Impact Assessment.

14.0 Next Steps

- 14.1 Before a final decision is made any feedback or recommendations from the committee will be considered.
- 14.2 The decision to introduce a PSPO is a key decision in the constitution delegated to the Strategic Director Neighbourhoods (in consultation with the Deputy Leader when considering objections and representations in respect of proposed PSPOs affecting highways). If the Order is made there follows a period of six weeks in which an appeal can be made to the High Court by an interested person to challenge the decision.
- 14.3 If the Order is introduced, it will be important to closely monitor any activity and review the impact of the PSPO. This will be important to establish any issues with enforcement, identify any areas of displacement, and to understand whether the PSPO is achieving the desired outcomes of the Order.

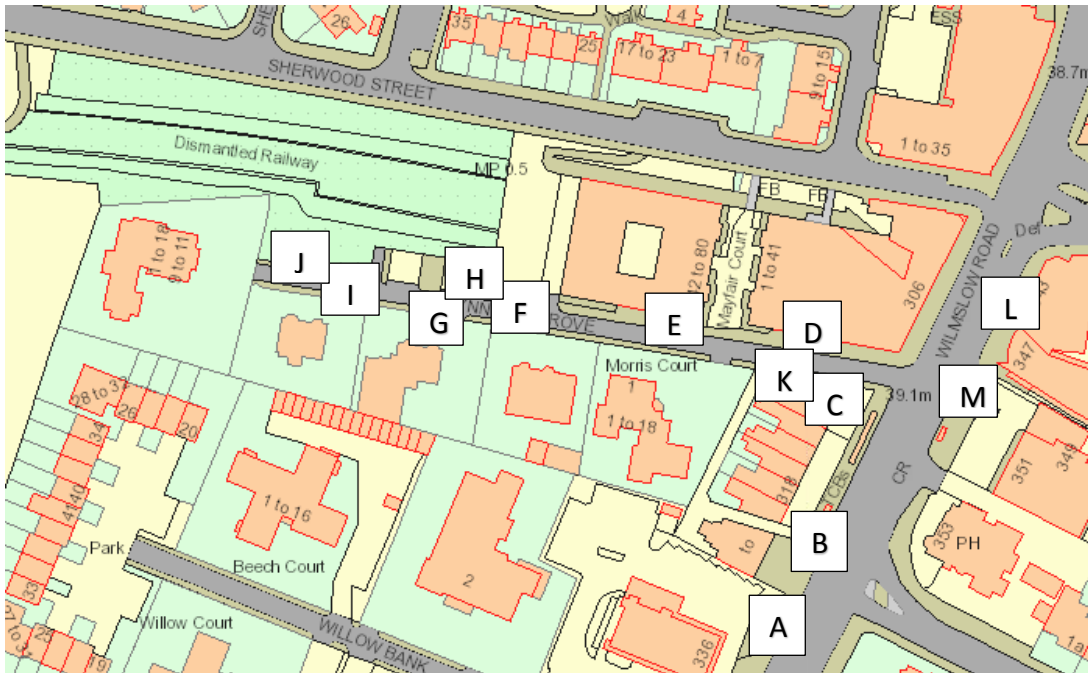
List of appendices:

1. Map and photographs
2. Proposed PSPO area on which the Council has consulted
3. Proposed PSPO prohibitions and requirements on which the Council has consulted
4. Consultation responses
5. Analysis of the consultation responses by Enventure
6. Similar email responses, map of postcode locations
7. The revised PSPO Restricted Area
8. Equality Impact Assessment

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Photographs of Wynnstay Grove and the surrounding areas

Letters show approximate locations that photographs were taken from.



A. Wilmslow Road, from 336 to 310. Businesses, flats and bus stops



B. Bus stops on Wilmslow Road, next to the entrance to Wynnstay Grove



C. Entrance to Wynnstay Grove



D. View along Wynnstay Grove (from Wilmslow Road). Licensed Premises on both sides of the road.



E. Residential properties part way down building road.



F. Marie Stopes Clinic UK (white building on the left). Entrance to the staff / visitor car park is just in between where the grey and white vehicles are parked.



G. Front view of Marie Stopes Clinic UK (photograph taken from the internet). Staff / visitor car park is on the left. Blue door is the main entrance.



H. Car parking area opposite Marie Stopes Clinic UK. Parking for 3 or 4 vehicles in each section. Paved area in between is where vigils often take place.



I. Car parking area opposite Marie Stopes Clinic UK as seen from the other side. Area behind the parking area is overgrown wasteland.



J. End of Wynnstay Road. No through road. Road leads to car park of private residential apartments.



K. Top of Wynnstay Grove, looking towards Wilmslow Road



L. View of the end of Wynnstay Grove, including business and residential properties nearby.



M. Top of Wynnstay Grove as seen from Wilmslow Road

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Wynnstay Grove PSPO Area



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Proposed PSPO in for Consultation

No person shall in a public place in the Restricted Area other than in the Designated Zone:

1. protest, namely engage in any act of approval / disapproval or attempted act of approval / disapproval, with respect to issues related to abortion services by any means. This includes but is not limited to graphic, verbal or written means, prayer or counselling.
2. interfere, or attempt to interfere, whether verbally or physically, with a staff member or service user of the Centre.
3. intimidate or harass, or attempt to intimidate or harass, a staff member or service user of the Centre.
4. record or photograph a staff member or service user of the Centre without the explicit consent of that person.
5. display any text or images relating directly or indirectly to the termination of pregnancy.
6. distribute any text or images relating directly or indirectly to the termination of pregnancy.
7. play amplified music, voice or audio recordings with respect to the approval or disapproval of abortion services.

What we're proposing in the Designated Zone within the Restricted Area

1. No person shall in a public place in the Restricted Area enter the Designated Zone if the effect of them entering the Designated Zone would result in four or more persons being present in that zone at any time.
2. No person shall in a public place in the Restricted Area in the Designated Zone display any individual poster, text or image, singularly or collectively greater than one sheet of A3 paper may be displayed within the Designated Zone.
3. A person shall not in a public place in the Restricted Area in the Designated Zone shout any message or words relating to the approval / disapproval of issues related to abortion services.
4. A person shall not in a public place in the Restricted Area in the Designated Zone play or use amplified music, voice or audio recordings with respect to the approval or disapproval of abortion services.

These requirements will apply to the whole of the Restricted Area, including the Designated Zone

1. A person in a public place in the Restricted Area who an Authorised Person or Constable reasonably suspects of breaching any of the prohibitions or requirements in this Order shall, upon valid request of an Authorised Person or Constable, leave the Restricted Area within a reasonable time as specified in writing by that Authorised Person and not return within 24 hours.

A requirement under this Article is not valid if the Authorised Person or Constable is asked by the person subject to the requirement to show evidence of their authorisation and they fail to do so.








2. A person in a public place in the Restricted Area who an Authorised Person or Constable reasonably suspects of breaching any of the prohibitions or requirements in this Order shall, upon request of that Authorised Person, provide their name, address and date of birth to that Authorised Person.

A requirement under this Article is not valid if the Authorised Person is asked by the person subject to the requirement to show evidence of their authorisation and they fail to do so.

Public Space Protection Order Consultation

1. Page 1

2. Page 2

1. Which of these best describes you: (tick all that apply)							Response Percent	Response Total
1	I live in the proposed Public Space Protection Order (PSPO) area (see map of the area)						4.51%	90
2	I live outside the proposed PSPO area						66.20%	1320
3	I am, or was, a client or visitor to Marie Stopes on Wynnstay Grove, Fallowfield.						14.64%	292
4	I am, or was, a staff member of Marie Stopes on Wynnstay Grove, Fallowfield.						0.60%	12
5	I am a supporter of pro-life activities						10.13%	202
6	I am a supporter of pro-choice activities						65.75%	1311
7	I own or work in a local business or organisation in the proposed PSPO area (please specify name):						1.15%	23
Analysis							answered	1994
	Mean:	6.36	Std. Deviation:	3.99	Satisfaction Rate:	78.91	skipped	27
	Variance:	15.88	Std. Error:	0.09				

3. Page 3





2. What is your postcode?							Response Percent	Response Total
1	Open-Ended Question						100.00%	1998
							answered	1998
							skipped	23

4. Page 4

3. What is your work postcode?							Response Percent	Response Total
1	Open-Ended Question						100.00%	24

3. What is your work postcode?			Response Percent	Response Total
			answered	24
			skipped	1997



5. Page 5






4. Do you agree or disagree with the boundaries of the proposed PSPO area? (see map of the area)						Response Percent	Response Total
1	Agree					72.77%	1467
2	Neither agree or disagree					1.88%	38
3	Disagree					24.55%	495
4	Don't know					0.79%	16
Analysis		Mean:	1.53	Std. Deviation:	0.89	Satisfaction Rate:	17.79
		Variance:	0.79	Std. Error:	0.02		
					answered	2016	
					skipped	5	

6. Page 6





5. Why do you disagree with the boundaries of the proposed PSPO area?			Response Percent	Response Total
1	Open-Ended Question		100.00%	476
			answered	476
			skipped	1545




7. Your view: Behaviours

6. Which behaviours do you want to give your view on? (tick all that apply)			Response Percent	Response Total
1	Protesting, namely engaging in any act of approval / disapproval or attempted act of approval / disapproval, with respect to issues related to abortion services by any means. This includes but is not limited to graphic, verbal or written means, prayer or counselling		89.69%	1749
2	Interfering, or attempting to interfere, whether verbally or physically, with a staff member or service user of the Centre		89.79%	1751




6. Which behaviours do you want to give your view on? (tick all that apply)							Response Percent	Response Total
	(service user includes any patient or visitor to the centre)							
3	Intimidating or harassing, or attempting to intimidate or harass, a staff member or service user of the Centre						90.87%	1772
4	No person shall in a public place in the Restricted Area other than in the Designated Zone record or photograph a staff member or service user of the Centre without the explicit consent of that person						82.51%	1609
5	Displaying any text or images relating directly or indirectly to the termination of pregnancy						85.08%	1659
6	Distributing any text or images relating directly or indirectly to the termination of pregnancy						85.08%	1659
7	Playing amplified music, voice or audio recordings with respect to the approval or disapproval of abortion services						82.15%	1602
Analysis	Mean:	23.83	Std. Deviation:	49.18	Satisfaction Rate:	296.28	answered	1950
	Variance:	2418.66	Std. Error:	1.11			skipped	71

8. Protesting behaviour



7. How problematic do you think this behaviour is in the proposed PSPO area?							Response Percent	Response Total
1	A major problem						83.08%	1449
2	A minor problem						2.64%	46
3	Not a problem						8.72%	152
4	Don't know						5.56%	97
Analysis	Mean:	1.37	Std. Deviation:	0.86	Satisfaction Rate:	12.25	answered	1744
	Variance:	0.74	Std. Error:	0.02			skipped	277

8. How often have you personally experienced problems with this behaviour?							Response Percent	Response Total
1	Once						23.94%	416
2	Never						52.13%	906
3	Daily						0.81%	14



8. How often have you personally experienced problems with this behaviour?

						Response Percent	Response Total	
4	Weekly					5.47%	95	
5	Anually					3.97%	69	
6	Other (please specify):					13.69%	238	
Analysis	Mean:	2.54	Std. Deviation:	1.65	Satisfaction Rate:	30.9	answered	1738
	Variance:	2.72	Std. Error:	0.04			skipped	283

9. Do you agree or disagree that this behaviour should be included in the PSPO?

						Response Percent	Response Total	
1	Agree					81.73%	1409	
2	Disagree					18.27%	315	
Analysis	Mean:	1.18	Std. Deviation:	0.39	Satisfaction Rate:	18.27	answered	1724
	Variance:	0.15	Std. Error:	0.01			skipped	297

10. Has this behaviour had a detrimental effect on your quality of life?


						Response Percent	Response Total	
1	Yes					35.94%	616	
2	No					64.06%	1098	
Analysis	Mean:	1.64	Std. Deviation:	0.48	Satisfaction Rate:	64.06	answered	1714
	Variance:	0.23	Std. Error:	0.01			skipped	307

11. If yes, please tell us how you or others were affected:




						Response Percent	Response Total
1	Open-Ended Question					100.00%	598
						answered	598
						skipped	1423

9. Interfering behaviour









12. How problematic do you think this behaviour is in the proposed PSPO area?

						Response Percent	Response Total
1	A major problem					85.10%	1479



12. How problematic do you think this behaviour is in the proposed PSPO area?

						Response Percent	Response Total	
2	A minor problem					2.82%	49	
3	Not a problem					4.49%	78	
4	Don't know					7.59%	132	
Analysis	Mean:	1.35	Std. Deviation:	0.88	Satisfaction Rate:	11.53	answered	1738
	Variance:	0.77	Std. Error:	0.02			skipped	283



13. How often have you personally experienced problems with this behaviour?

						Response Percent	Response Total	
1	Once					16.46%	283	
2	More than once					7.56%	130	
3	More than 5 times					3.26%	56	
4	Never					60.03%	1032	
5	Daily					0.76%	13	
6	Weekly					2.09%	36	
7	Anually					2.50%	43	
8	Other (please specify):					7.33%	126	
Analysis	Mean:	3.74	Std. Deviation:	1.8	Satisfaction Rate:	39.14	answered	1719
	Variance:	3.24	Std. Error:	0.04			skipped	302

14. Do you agree or disagree that this behaviour should be included in the PSPO?

						Response Percent	Response Total	
1	Agree					87.64%	1503	
2	Disagree					12.36%	212	
Analysis	Mean:	1.12	Std. Deviation:	0.33	Satisfaction Rate:	12.36	answered	1715
	Variance:	0.11	Std. Error:	0.01			skipped	306

15. Has this behaviour had a detrimental effect on your quality of life?

						Response Percent	Response Total
1	Yes					29.82%	510
2	No					70.18%	1200
						answered	1710

15. Has this behaviour had a detrimental effect on your quality of life?

						Response Percent	Response Total
Analysis	Mean:	1.7	Std. Deviation:	0.46	Satisfaction Rate:	70.18	skipped
	Variance:	0.21	Std. Error:	0.01			
							311

16. If yes, please tell us how you or others were affected:

		Response Percent	Response Total
1	Open-Ended Question	100.00%	441
		answered	441
		skipped	1580

10. Intimidating behaviour

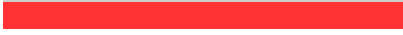

17. How problematic do you think this behaviour is in the proposed PSPO area?

				Response Percent	Response Total		
1	A major problem			86.36%	1507		
2	A minor problem			2.64%	46		
3	Not a problem			4.30%	75		
4	Don't know			6.70%	117		
Analysis	Mean:	1.31	Std. Deviation:	0.84	Satisfaction Rate:	10.45	answered
	Variance:	0.7	Std. Error:	0.02			skipped
							1745
							276



18. How often have you personally experienced problems with this behaviour?

				Response Percent	Response Total		
1	Once			19.20%	330		
2	More than once			7.16%	123		
3	More than 5 times			3.49%	60		
4	Never			59.69%	1026		
5	Daily			0.47%	8		
6	Weekly			2.04%	35		
7	Anually			1.86%	32		
8	Other (please specify):			6.11%	105		
Analysis	Mean:	3.59	Std. Deviation:	1.76	Satisfaction Rate:	37.02	answered
	Variance:	3.11	Std. Error:	0.04			skipped
							1719
							302

19. Do you agree or disagree that this behaviour should be included in the PSPO?

						Response Percent	Response Total	
1	Agree						88.93%	1534
2	Disagree						11.07%	191
Analysis	Mean:	1.11	Std. Deviation:	0.31	Satisfaction Rate:	11.07	answered	1725
	Variance:	0.1	Std. Error:	0.01			skipped	296

20. Has this behaviour had a detrimental effect on your quality of life?





						Response Percent	Response Total	
1	Yes						32.05%	548
2	No						67.95%	1162
Analysis	Mean:	1.68	Std. Deviation:	0.47	Satisfaction Rate:	67.95	answered	1710
	Variance:	0.22	Std. Error:	0.01			skipped	311

21. If yes, please tell us how you or others were affected:









						Response Percent	Response Total	
1	Open-Ended Question						100.00%	439
						answered	439	
						skipped	1582	

11. Recording or photographing behaviour



22. How problematic do you think this behaviour is in the proposed PSPO area?

						Response Percent	Response Total	
1	A major problem						76.68%	1220
2	A minor problem						6.22%	99
3	Not a problem						4.84%	77
4	Don't know						12.26%	195
Analysis	Mean:	1.53	Std. Deviation:	1.04	Satisfaction Rate:	17.56	answered	1591
	Variance:	1.08	Std. Error:	0.03			skipped	430



23. How often have you personally experienced problems with this behaviour?

		Response Percent	Response Total			
1	Once		11.46% 179			
2	More than once		4.74% 74			
3	More than 5 times		1.92% 30			
4	Never		72.79% 1137			
5	Daily		0.26% 4			
6	Weekly		1.60% 25			
7	Anually		1.41% 22			
8	Other (please specify):		5.83% 91			
Analysis	Mean:	3.85	Std. Deviation: 1.53	Satisfaction Rate: 40.74	answered	1562
	Variance:	2.34	Std. Error: 0.04		skipped	459

24. Do you agree or disagree that this behaviour should be included in the PSPO?

		Response Percent	Response Total			
1	Agree		88.60% 1391			
2	Disagree		11.40% 179			
Analysis	Mean:	1.11	Std. Deviation: 0.32	Satisfaction Rate: 11.4	answered	1570
	Variance:	0.1	Std. Error: 0.01		skipped	451

25. Has this behaviour had a detrimental effect on your quality of life?





		Response Percent	Response Total			
1	Yes		24.30% 374			
2	No		75.70% 1165			
Analysis	Mean:	1.76	Std. Deviation: 0.43	Satisfaction Rate: 75.7	answered	1539
	Variance:	0.18	Std. Error: 0.01		skipped	482

26. If yes, please tell us how you or others were affected:









		Response Percent	Response Total
1	Open-Ended Question	100.00%	342
		answered	342
		skipped	1679

12. Displaying text or image behaviour



27. How problematic do you think this behaviour is in the proposed PSPO area?

		Response Percent	Response Total			
1	A major problem		82.44% 1352			
2	A minor problem		4.63% 76			
3	Not a problem		7.07% 116			
4	Don't know		5.85% 96			
Analysis	Mean:	1.36	Std. Deviation: 0.85	Satisfaction Rate: 12.11	answered	1640
	Variance:	0.72	Std. Error: 0.02		skipped	381



28. How often have you personally experienced problems with this behaviour?

		Response Percent	Response Total			
1	Once		18.31% 296			
2	More than once		7.98% 129			
3	More than 5 times		6.49% 105			
4	Never		55.97% 905			
5	Daily		0.87% 14			
6	Weekly		2.35% 38			
7	Anually		1.61% 26			
8	Other (please specify):		6.43% 104			
Analysis	Mean:	3.59	Std. Deviation: 1.77	Satisfaction Rate: 36.96	answered	1617
	Variance:	3.14	Std. Error: 0.04		skipped	404

29. Do you agree or disagree that this behaviour should be included in the PSPO?

		Response Percent	Response Total			
1	Agree		86.80% 1407			
2	Disagree		13.20% 214			
Analysis	Mean:	1.13	Std. Deviation: 0.34	Satisfaction Rate: 13.2	answered	1621
	Variance:	0.11	Std. Error: 0.01		skipped	400

30. Has this behaviour had a detrimental effect on your quality of life?

		Response Percent	Response Total
1	Yes		33.94% 542
2	No		66.06% 1055

30. Has this behaviour had a detrimental effect on your quality of life?





						Response Percent	Response Total	
Analysis	Mean:	1.66	Std. Deviation:	0.47	Satisfaction Rate:	66.06	answered	1597
	Variance:	0.22	Std. Error:	0.01			skipped	424

31. If yes, please tell us how you or others were affected:









		Response Percent	Response Total
1	Open-Ended Question	100.00%	427
		answered	427
		skipped	1594



13. Distributing text or image behaviour



32. How problematic do you think this behaviour is in the proposed PSPO area?

				Response Percent	Response Total			
1	A major problem			80.90%	1326			
2	A minor problem			4.82%	79			
3	Not a problem			6.77%	111			
4	Don't know			7.50%	123			
Analysis	Mean:	1.41	Std. Deviation:	0.91	Satisfaction Rate:	13.63	answered	1639
	Variance:	0.83	Std. Error:	0.02			skipped	382

33. How often have you personally experienced problems with this behaviour?





				Response Percent	Response Total			
1	Once			17.88%	289			
2	More than once			9.47%	153			
3	More than 5 times			5.51%	89			
4	Never			57.30%	926			
5	Daily			0.68%	11			
6	Weekly			2.35%	38			
7	Anually			1.55%	25			
8	Other (please specify):			5.26%	85			
Analysis	Mean:	3.53	Std. Deviation:	1.7	Satisfaction Rate:	36.14	answered	1616
	Variance:	2.9	Std. Error:	0.04			skipped	405

34. Do you agree or disagree that this behaviour should be included in the PSPO?							Response Percent	Response Total
1	Agree						86.18%	1397
2	Disagree						13.82%	224
Analysis	Mean:	1.14	Std. Deviation:	0.35	Satisfaction Rate:	13.82	answered	1621
	Variance:	0.12	Std. Error:	0.01			skipped	400

35. Has this behaviour had a detrimental effect on your quality of life?							Response Percent	Response Total
1	Yes						31.16%	497
2	No						68.84%	1098
Analysis	Mean:	1.69	Std. Deviation:	0.46	Satisfaction Rate:	68.84	answered	1595
	Variance:	0.21	Std. Error:	0.01			skipped	426

36. If yes, please tell us how you or others were affected:							Response Percent	Response Total
1	Open-Ended Question						100.00%	367
							answered	367
							skipped	1654

14. Amplified music, voice or audio recording behaviour

37. How problematic do you think this behaviour is in the proposed PSPO area?							Response Percent	Response Total
1	A major problem						70.85%	1118
2	A minor problem						10.33%	163
3	Not a problem						4.25%	67
4	Don't know						14.58%	230
Analysis	Mean:	1.63	Std. Deviation:	1.09	Satisfaction Rate:	20.85	answered	1578
	Variance:	1.19	Std. Error:	0.03			skipped	443

38. How often have you personally experienced problems with this behaviour?

		Response Percent	Response Total					
1	Once	14.82%	230					
2	More than once	6.51%	101					
3	More than 5 times	3.54%	55					
4	Never	67.85%	1053					
5	Daily	0.26%	4					
6	Weekly	1.68%	26					
7	Anually	1.16%	18					
8	Other (please specify):	4.19%	65					
Analysis	Mean:	3.63	Std. Deviation:	1.53	Satisfaction Rate:	37.55	answered	1552
	Variance:	2.34	Std. Error:	0.04			skipped	469

39. Do you agree or disagree that this behaviour should be included in the PSPO?

		Response Percent	Response Total					
1	Agree	89.74%	1400					
2	Disagree	10.26%	160					
Analysis	Mean:	1.1	Std. Deviation:	0.3	Satisfaction Rate:	10.26	answered	1560
	Variance:	0.09	Std. Error:	0.01			skipped	461

40. Has this behaviour had a detrimental effect on your quality of life?

		Response Percent	Response Total					
1	Yes	25.15%	385					
2	No	74.85%	1146					
Analysis	Mean:	1.75	Std. Deviation:	0.43	Satisfaction Rate:	74.85	answered	1531
	Variance:	0.19	Std. Error:	0.01			skipped	490

41. If yes, please tell us how you or others were affected:

		Response Percent	Response Total
1	Open-Ended Question	100.00%	301
		answered	301
		skipped	1720

42. If you have any further comments on any of the behaviours please state here:







		Response Percent	Response Total
1	Open-Ended Question	100.00%	812
		answered	812
		skipped	1209

16. Your views: Requests from authorised officers

43. Do you agree or disagree with this proposal?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Don't know	Response Total	
	67.5% (1346)	18.4% (367)	1.7% (34)	3.3% (65)	7.8% (155)	1.4% (27)	1994	
							answered	1994
							skipped	27

Matrix Charts

43.1.		Response Percent	Response Total					
1	Strongly agree		67.5% 1346					
2	Agree		18.4% 367					
3	Neither agree nor disagree		1.7% 34					
4	Disagree		3.3% 65					
5	Strongly disagree		7.8% 155					
6	Don't know		1.4% 27					
Analysis	Mean:	1.69	Std. Deviation:	1.28	Satisfaction Rate:	13.89	answered	1994
	Variance:	1.65	Std. Error:	0.03				






44. Do you agree or disagree with this proposal?

	Strongly agree	Agree	Neither agree nor disagree	Strongly disagree	Don't know	Response Total	
	64.6% (1284)	17.7% (352)	5.3% (105)	10.5% (208)	2.0% (39)	1988	
						answered	1988

44. Do you agree or disagree with this proposal?

	Strongly agree	Agree	Neither agree nor disagree	Strongly disagree	Don't know	Response Total
					skipped	33

Matrix Charts



44.1.						Response Percent	Response Total
1	Strongly agree					64.6%	1284
2	Agree					17.7%	352
3	Neither agree nor disagree					5.3%	105
4	Strongly disagree					10.5%	208
5	Don't know					2.0%	39
Analysis	Mean:	1.68	Std. Deviation:	1.09	Satisfaction Rate:	16.88	answered
	Variance:	1.19	Std. Error:	0.02			

45. If you have any further comments on either of these proposals please state here:

			Response Percent	Response Total
1	Open-Ended Question		100.00%	411
			answered	411
			skipped	1610

17. Your views: Designated Zone



46. Do you agree or disagree with having a designated zone?



						Response Percent	Response Total
1	Agree					37.35%	731
2	Disagree					62.65%	1226
Analysis	Mean:	1.63	Std. Deviation:	0.48	Satisfaction Rate:	62.65	answered
	Variance:	0.23	Std. Error:	0.01			
			skipped	64			


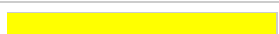
47. We have highlighted 3 zones within the PSPO area (please see map here) Which zone is your preferred choice and which zone is your least preferred? (please choose only one of each)

	Preferred	Least preferred	Response Total
Zone 1 - on the pavement outside Manchester South Delivery Post Office, Wilmslow Road	43.3% (544)	56.7% (713)	1257
Zone 2 - on the pavement on Wilmslow Road near the car park, which is on the opposite side of the road to the entrance to Carill Drive	27.5% (254)	72.5% (671)	925
Zone 3 - on the pavement on the corner of Ladybarn Road and Standish Road, opposite the entrance to Sainsbury's car park	33.6% (374)	66.4% (738)	1112
Zone 4 - other (please state location below)	60.9% (477)	39.1% (306)	783
			answered
			1542
			skipped
			479

Matrix Charts

47.1. Zone 1 - on the pavement outside Manchester South Delivery Post Office, Wilmslow Road						Response Percent	Response Total
1	Preferred					43.3%	544
2	Least preferred					56.7%	713
Analysis	Mean:	1.57	Std. Deviation:	0.5	Satisfaction Rate:	56.72	answered
	Variance:	0.25	Std. Error:	0.01			

47.2. Zone 2 - on the pavement on Wilmslow Road near the car park, which is on the opposite side of the road to the entrance to Carill Drive						Response Percent	Response Total
1	Preferred					27.5%	254
2	Least preferred					72.5%	671
Analysis	Mean:	1.73	Std. Deviation:	0.45	Satisfaction Rate:	72.54	answered
	Variance:	0.2	Std. Error:	0.01			

47.3. Zone 3 - on the pavement on the corner of Ladybarn Road and Standish Road, opposite the entrance to Sainsbury's car park						Response Percent	Response Total
1	Preferred					33.6%	374
2	Least preferred					66.4%	738
Analysis	Mean:	1.66	Std. Deviation:	0.47	Satisfaction Rate:	66.37	answered
	Variance:	0.22	Std. Error:	0.01			

47.4. Zone 4 - other (please state location below)						Response Percent	Response Total
1	Preferred					60.9%	477

47.4. Zone 4 - other (please state location below)						Response Percent	Response Total
2	Least preferred					39.1%	306
Analysis	Mean:	1.39	Std. Deviation:	0.49	Satisfaction Rate:	39.08	answered
	Variance:	0.24	Std. Error:	0.02			

48. Please explain why you have chosen your preferred zone:

		Response Percent	Response Total
1	Open-Ended Question	100.00%	970
		answered	970
		skipped	1051

49. Please explain why you have chosen your least preferred zone:

		Response Percent	Response Total
1	Open-Ended Question	100.00%	826
		answered	826
		skipped	1195

18. Page 18




50. We are proposing the following rules for the designated zone. Do you agree or disagree with these rules?




	Agree	Disagree	Don't know	Response Total
No more than four persons may be present in the Designated Zone at any one time	66.4% (1285)	22.5% (436)	11.1% (214)	1935
No individual poster, text or image, singularly or collectively greater than one sheet of A3 paper may be displayed within the Designated Zone	73.5% (1419)	21.3% (411)	5.2% (101)	1931
A person within the Designated Zone must not shout any message or words relating to the approval / disapproval of issues related to abortion services	86.9% (1679)	10.3% (198)	2.8% (54)	1931
A person within the Designated Zone must not play or use amplified music, voice or audio recordings with respect to the approval or disapproval of abortion services	87.7% (1692)	9.5% (184)	2.7% (53)	1929
A person who an Authorised Person or Constable reasonably suspects of breaching any of the prohibitions or requirements in the designated zone shall, upon valid request of an Authorised Person or Constable, leave the PSPO area within a reasonable time as specified in writing by that Authorised Person or Constable and not return within 24 hours. A requirement under this Article is not valid if the	82.6% (1586)	12.7% (244)	4.6% (89)	1919




50. We are proposing the following rules for the designated zone. Do you agree or disagree with these rules?

	Agree	Disagree	Don't know	Response Total
Authorised Person or Constable is asked by the person subject to the requirement to show evidence of their authorisation and they fail to do so				
A person who an Authorised Person or Constable reasonably suspects of breaching any of the prohibitions or requirements in the designated zone shall, upon request of that Authorised Person or Constable, provide their name, address and date of birth to that Authorised Person or Constable. A requirement under this Article is not valid if the Authorised Person or Constable is asked by the person subject to the requirement to show evidence of their authorisation and they fail to do so	80.5% (1542)	14.1% (271)	5.4% (103)	1916
			answered	1946
			skipped	75




Matrix Charts




50.1. No more than four persons may be present in the Designated Zone at any one time						Response Percent	Response Total
1	Agree					66.4%	1285
2	Disagree					22.5%	436
3	Don't know					11.1%	214
Analysis	Mean:	1.45	Std. Deviation:	0.68	Satisfaction Rate:	22.33	answered 1935
	Variance:	0.47	Std. Error:	0.02			




50.2. No individual poster, text or image, singularly or collectively greater than one sheet of A3 paper may be displayed within the Designated Zone						Response Percent	Response Total
1	Agree					73.5%	1419
2	Disagree					21.3%	411
3	Don't know					5.2%	101
Analysis	Mean:	1.32	Std. Deviation:	0.57	Satisfaction Rate:	15.87	answered 1931
	Variance:	0.32	Std. Error:	0.01			

50.3. A person within the Designated Zone must not shout any message or words relating to the approval / disapproval of issues related to abortion services						Response Percent	Response Total	
1	Agree					86.9%	1679	
2	Disagree					10.3%	198	
3	Don't know					2.8%	54	
		Mean:	1.16	Std. Deviation:	0.44	Satisfaction Rate:	7.92	answered 1931

50.3. A person within the Designated Zone must not shout any message or words relating to the approval / disapproval of issues related to abortion services					Response Percent	Response Total
Analysis	Variance:	0.19	Std. Error:	0.01		

50.4. A person within the Designated Zone must not play or use amplified music, voice or audio recordings with respect to the approval or disapproval of abortion services					Response Percent	Response Total
1	Agree				87.7%	1692
2	Disagree				9.5%	184
3	Don't know				2.7%	53
Analysis	Mean:	1.15	Std. Deviation:	0.43	Satisfaction Rate:	7.52
	Variance:	0.18	Std. Error:	0.01	answered	1929

50.5. A person who an Authorised Person or Constable reasonably suspects of breaching any of the prohibitions or requirements in the designated zone shall, upon valid request of an Authorised Person or Constable, leave the PSPO area within a reasonable time as specified in writing by that Authorised Person or Constable and not return within 24 hours. A requirement under this Article is not valid if the Authorised Person or Constable is asked by the person subject to the requirement to show evidence of their authorisation and they fail to do so					Response Percent	Response Total
1	Agree				82.6%	1586
2	Disagree				12.7%	244
3	Don't know				4.6%	89
Analysis	Mean:	1.22	Std. Deviation:	0.51	Satisfaction Rate:	11
	Variance:	0.26	Std. Error:	0.01	answered	1919





50.6. A person who an Authorised Person or Constable reasonably suspects of breaching any of the prohibitions or requirements in the designated zone shall, upon request of that Authorised Person or Constable, provide their name, address and date of birth to that Authorised Person or Constable. A requirement under this Article is not valid if the Authorised Person or Constable is asked by the person subject to the requirement to show evidence of their authorisation and they fail to do so					Response Percent	Response Total
1	Agree				80.5%	1542
2	Disagree				14.1%	271
3	Don't know				5.4%	103
Analysis	Mean:	1.25	Std. Deviation:	0.54	Satisfaction Rate:	12.45
	Variance:	0.29	Std. Error:	0.01	answered	1916




51. Is there any additional information you'd like to give on the proposal of having a designated zone			Response Percent	Response Total
1	Open-Ended Question		100.00%	493
			answered	493
			skipped	1528








19. Page 19

52. Please provide any further comments regarding the proposals including any suggestions you may have about an alternative approach:			Response Percent	Response Total
1	Open-Ended Question		100.00%	392
			answered	392
			skipped	1629


















20. Equality Monitoring Form


53. What is your gender?						Response Percent	Response Total	
1	Female					70.73%	1394	
2	Male					22.37%	441	
3	Prefer not to say					5.48%	108	
4	Other (please specify):					1.42%	28	
Analysis	Mean:	1.38	Std. Deviation:	0.66	Satisfaction Rate:	12.53	answered	1971
	Variance:	0.43	Std. Error:	0.01			skipped	50




54. Do you identify with the gender you were assigned at birth? (e.g. male or female)						Response Percent	Response Total	
1	Yes					93.24%	1821	
2	No					1.43%	28	
3	Prefer not to say					5.33%	104	
Analysis	Mean:	1.12	Std. Deviation:	0.46	Satisfaction Rate:	6.04	answered	1953
	Variance:	0.21	Std. Error:	0.01			skipped	68

55. What is your age?						Response Percent	Response Total	
1	Under 16					0.00%	0	
2	16 - 25 years					19.44%	384	
3	26 - 39 years					41.22%	814	
4	40 - 49 years					17.22%	340	
5	50 - 64 years					13.37%	264	
6	65 - 74 years					3.90%	77	
7	75+ years					0.76%	15	
8	Prefer not to say					4.10%	81	
Analysis	Mean:	3.6	Std. Deviation:	1.43	Satisfaction Rate:	37.11	answered	1975
	Variance:	2.04	Std. Error:	0.03			skipped	46







21. Page 21

56. I describe my ethnic origin as:						Response Percent	Response Total
1	British/English/Northern Irish/Scottish/Welsh					79.12%	1561
2	Irish					3.40%	67
3	Gypsy or Irish Traveller					0.05%	1
4	Other White					5.07%	100
5	White and Black Caribbean					0.66%	13
6	White and Black African					0.71%	14
7	White and Asian					1.62%	32
8	Other Mixed					1.57%	31
9	Indian					0.66%	13
10	Pakistani					0.30%	6
11	Bangladeshi					0.10%	2
12	Chinese					0.10%	2
13	Kashmiri					0.00%	0
14	Other Asian					0.25%	5
15	Caribbean					0.61%	12
16	African					0.20%	4
17	Somali					0.05%	1
18	Other Black					0.00%	0
19	Prefer not to say					4.56%	90



56. I describe my ethnic origin as:							Response Percent	Response Total
20	Any Other Ethnic Group (please specify)						0.96%	19
Analysis	Mean:	4.1	Std. Deviation:	5.74	Satisfaction Rate:	11.94	answered	1973
	Variance:	32.95	Std. Error:	0.13			skipped	48

57. Do you consider yourself to be a disabled person?							Response Percent	Response Total
1	Yes						8.87%	172
2	No						85.20%	1652
3	Prefer not to say						5.93%	115
Analysis	Mean:	1.97	Std. Deviation:	0.38	Satisfaction Rate:	48.53	answered	1939
	Variance:	0.15	Std. Error:	0.01			skipped	82









22. Page 22

58. What is your condition / impairment type?							Response Percent	Response Total
1	Neurodiverse conditions (e.g. learning disability, autism spectrum conditions, Asperger's, dyslexia)						7.60%	13
2	Mental health conditions (e.g. stress, depression, anxiety, bipolar, schizophrenia)						28.07%	48
3	Sensory conditions (e.g. profound hearing loss, visual impairment)						3.51%	6
4	Chronic health conditions (i.e. chronic pain, fatigue, MS, diabetes, lupus, ME)						36.26%	62
5	Prefer not to say						9.36%	16
6	Other (please specify):						15.20%	26
Analysis	Mean:	3.57	Std. Deviation:	1.54	Satisfaction Rate:	51.46	answered	171
	Variance:	2.36	Std. Error:	0.12			skipped	1850

23. Page 23

59. Do you identify with any religion or belief?							Response Percent	Response Total
1	Yes						26.42%	515
2	No						73.58%	1434
Analysis	Mean:	1.74	Std. Deviation:	0.44	Satisfaction Rate:	73.58	answered	1949
	Variance:	0.19	Std. Error:	0.01			skipped	72

24. Page 24

60. What is your religion or belief?							Response Percent	Response Total
1	Christian (including Church of England, Catholic, Protestant and all other Christian denominations)						76.41%	392
2	Buddhist						2.73%	14
3	Hindu						1.36%	7
4	Sikh						0.39%	2
5	Jewish						2.53%	13
6	Muslim						1.95%	10
7	Any other religion (please specify):						4.87%	25
8	Prefer not to say						9.75%	50
Analysis	Mean:	2.24	Std. Deviation:	2.45	Satisfaction Rate:	17.71	answered	513
	Variance:	6	Std. Error:	0.11			skipped	1508



Public Space Protection Order Consultation

Final Report



**MANCHESTER
CITY COUNCIL**

December 2019

Thornhill Brigg Mill, Thornhill Beck Lane, Brighouse, West Yorkshire, HD6 4AH

T: 01484 404797 W: www.enventure.co.uk

Report prepared by:

Mark Robinson
mark@enventure.co.uk

Katie Osborne
katie@enventure.co.uk

Enventure Research**Head Office:**

Thornhill Brigg Mill, Thornhill Beck Lane, Brighouse, West Yorkshire, HD6 4AH
T: 01484 404797

London Office:

Smithfield Business Centre, 5 St John's Lane, London, EC1M 4BH
T: 0207 549 1616

W: www.enventure.co.uk E: info@enventure.co.uk

Reg no: 4693096
VAT no: 816927894



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1. Introduction

1.1 Background

Manchester City Council has recently carried out a consultation with the public on a Public Space Protection Order (PSPO) to address issues that have been reported relating to behaviours by individuals and members of groups on Wynnstay Grove in Fallowfield, Manchester where Marie Stopes UK provides NHS and private abortion care. Manchester City Council commissioned Enventure Research to undertake the coding of all open-ended responses followed by analysis and reporting of the findings.

1.2 Project Aims

Manchester City Council wants to understand whether people agree with the PSPO boundary and why. This includes understanding:

- How respondents have been impacted by the behaviours identified in the PSPO
- Any other comments that respondents have about the behaviours identified
- Whether people support the requests from authorised officers and also what comments people have about the requests to authorised officers
- Which other designated zones respondents would like the Council to consider
- What are the preferred designated zones and why
- To what extent respondents agree with the proposal and why they agree or disagree
- Responses of those that live or work in the proposed area, work at the clinic or are a client or visitor to the clinic

1.3 Methodology

A questionnaire was designed by Manchester City Council. For reference, a copy of the questionnaire can be found in **Appendix A**.

The consultation was open from 20 September 2019 and closed on 15 November 2019 and received the following responses:

- 2,172 online responses (2,015 directly completed online questionnaires, plus 152 public written responses, received via email in the format of the questionnaire)
- Five responses from organisations
- 1,098 email responses which were identical in nature. These were received during the consultation and had the same responses. Consequently, these have been commented on separately.

2. Interpretation of the findings

This report contains tables and charts. In some instances, the responses may not add up to 100%. There are several reasons why this might happen:

- The question may have allowed each respondent to give more than one answer
- Only the most common responses may be shown in the table or chart
- Individual percentages are rounded to the nearest whole number so the total may come to 99% or 101%
- A response of between 0% and 0.4% will be shown as 0%

Subgroup analysis has been undertaken to explore the results provided by different groups, such as those that live in the proposed PSPO area, those that live outside the proposed PSPO area, those that were or are a client or visitor to Marie Stopes, those that were or are a staff member of Marie Stopes, supporter of pro-life activities, supporter of pro-choice activities and those that own or work in a local business in the proposed PSPO area.

Throughout this report, those who took part in the surveys are referred to as 'respondents'.

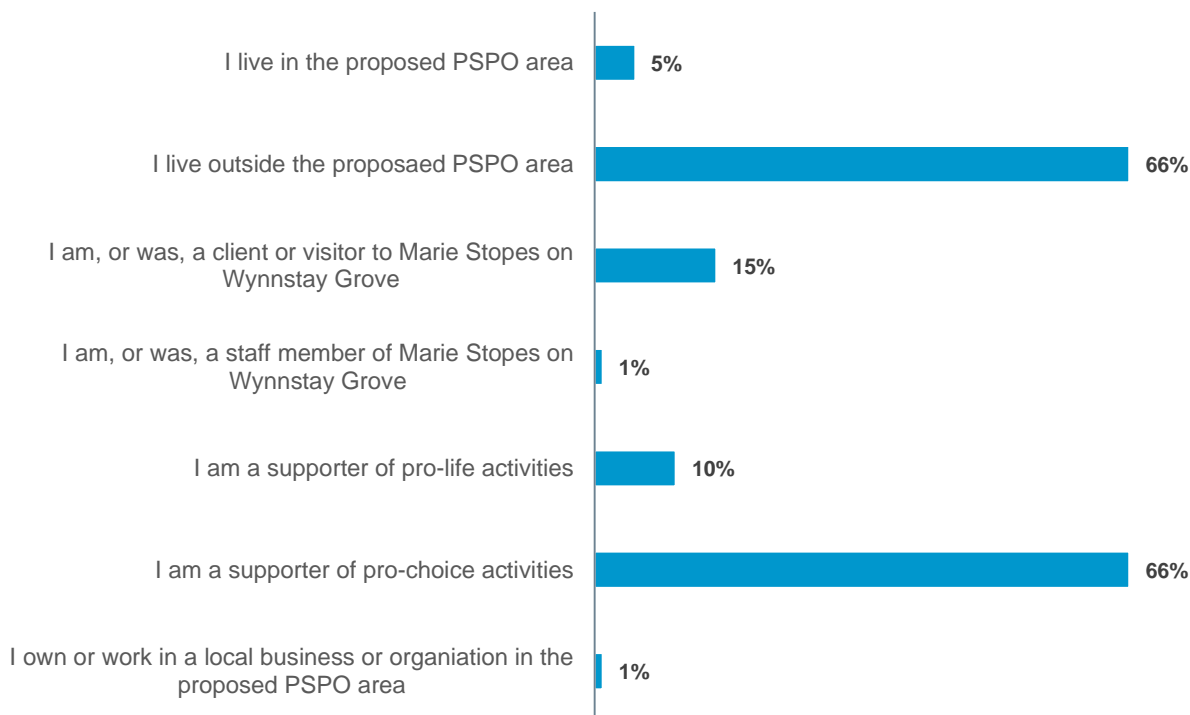
3. Online Survey Research Findings

3.1 Respondent type

Respondents were provided with a range of statements and asked to choose a description that best described them. As shown in the figure below, the majority were living outside the proposed PSPO area (66%) and were supporters of pro-choice activities (66%). One in twenty (5%) respondents said they lived in the proposed PSPO area. One in ten (10%) said they were a supporter of pro-life activities. A total of 15% said they were a client or visitor to Marie Stopes.

Figure 1 – (Q1) Which of these statements best describes you?

Base: 1,986 Respondents could tick all that applied

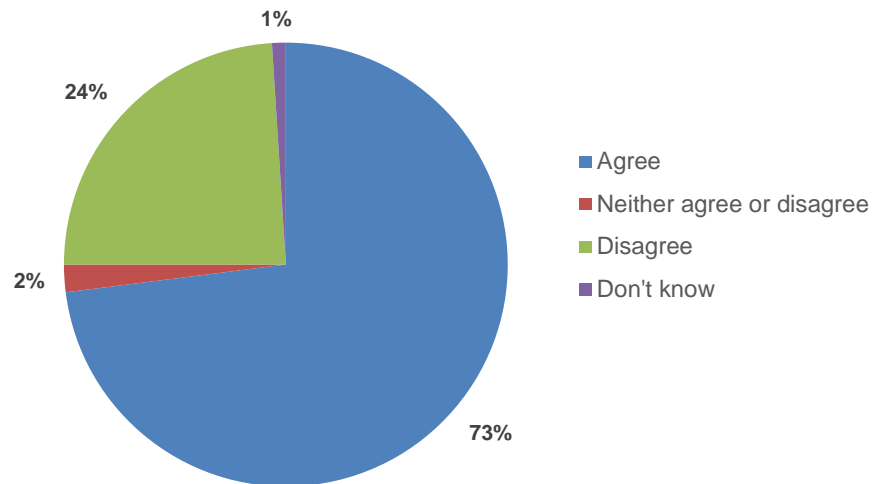


Response	Respondents	Percentage of respondents
I live in the proposed PSPO area	90	5%
I live outside the proposed PSPO area	1,317	66%
I am, or was, a client or visitor to Marie Stopes	291	15%
I am, or was, a staff member of Marie Stopes	12	1%
I am a supporter of pro-choice activities	1,311	66%
I own or work in a local business or organisation in the proposed PSPO area	14	1%

3.2 Proposed PSPO boundaries

When asked if they agreed or disagreed with the boundaries of the proposed PSPO area, almost three-quarters (73%) of respondents said they agreed. This compared to a quarter (24%) who said they disagreed. These figures are shown below.

Figure 2 – (Q4) Do you agree or disagree with the boundaries of the proposed PSPO area?
Base: 2,011



Sub-group analysis shows that:

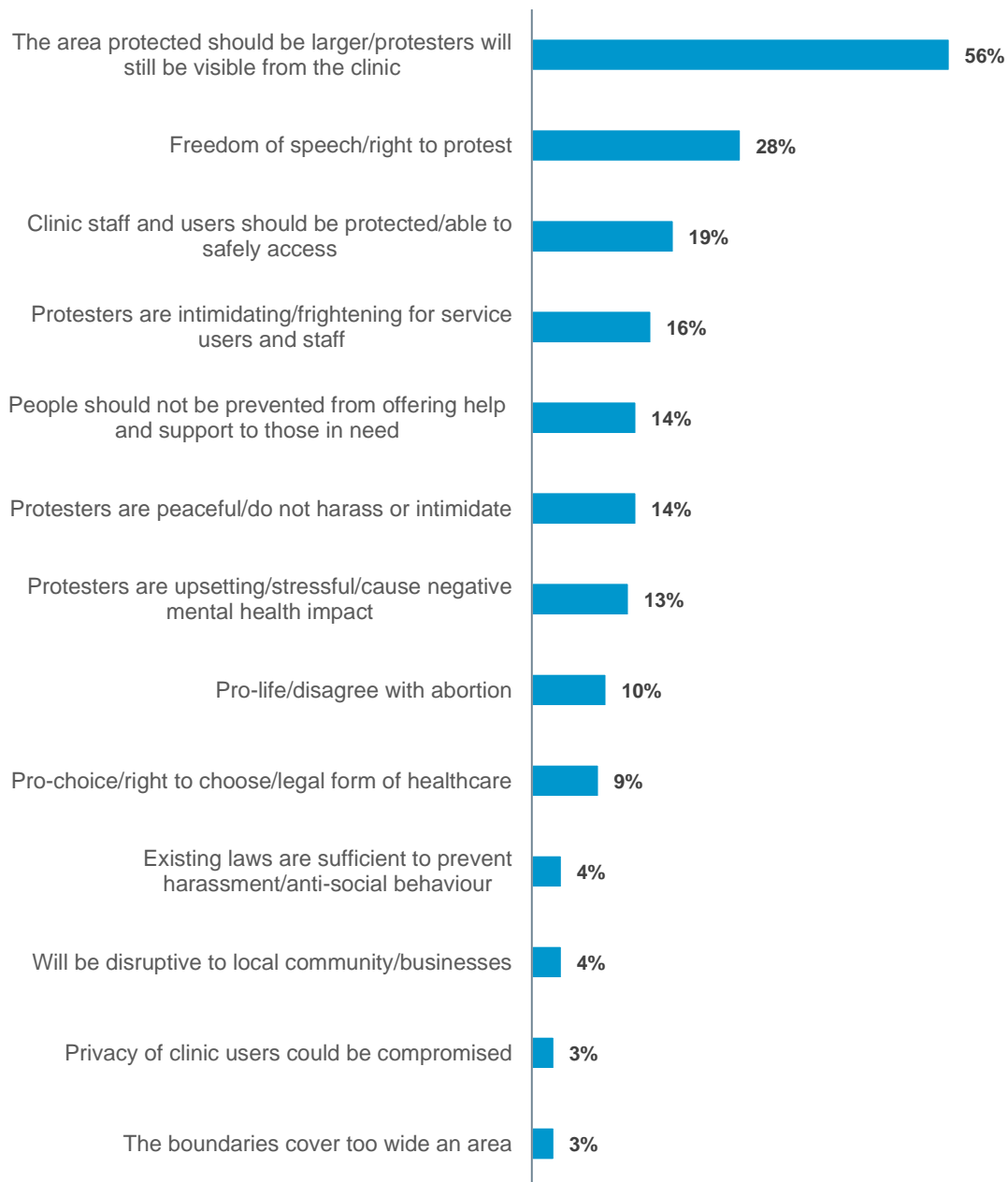
- Supporters of pro-choice activities were more likely to agree with the boundary than supporters of pro-life activities (79% compared to 17%)

Participants that disagreed with the boundaries of the proposed PSPO area were asked to explain why. As shown in the following figure, the most common response, given by 56% of respondents, was that the area protected should be larger/protesters will still be visible from the clinic. This was mentioned mainly by supporters of pro-choice activities (92% compared to 4% of supporters of pro-life activities).

The second most common response as to why they disagreed, was because of freedom of speech/right to protest. Supporters of pro-life activities were more likely to say this than supporters of pro-choice activities (62% compared to 3%).

One in five (19%) respondents said that clinic staff and users should be protected/able to safely access the building, with a further 16% saying protestors are intimidating and it is frightening for service users and staff.

**Figure 3 – (Q5) Why do you disagree with the boundaries of the proposed PSPO area?
Base: Respondents that disagreed with the boundary proposal (470)**



Sub-group analysis shows that:

- Supporters of pro-choice activities and respondents that were a client or visitor to Marie Stopes were more likely to say the area protected should be larger than any other type of respondent (92% and 87% respectively, compared to 57% overall)
- Supporters of pro-life activities were more likely to say freedom of speech and the right to protest than any other type of respondent (62% compared to 37% overall)

3.3 Your view: Behaviours

Respondents were asked which behaviours they wanted to give their views on. The figure below details the responses. Respondents were asked the same five questions for each of the responses in the table below. The following section of the report details respondents' responses.

Figure 4 – (Q7) Which behaviours do you want to give your view on?

Base: All respondents (2,172)

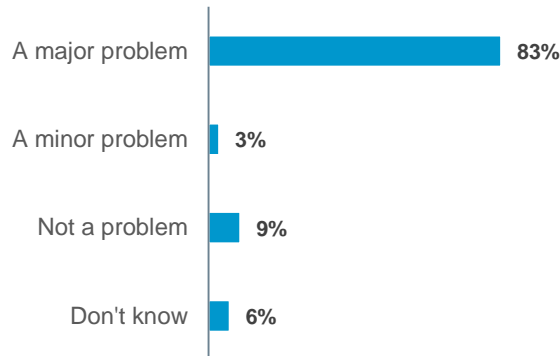
Response	Respondents	Percentage of respondents
Protesting namely engaging in any act of approval/disapproval or attempted act of approval/disapproval, with respect to issues related to abortion services by any means. This includes but is not limited to graphic, verbal or written means, prayer or counselling	1,746	87%
Interfering, or attempting to interfere, whether verbally or physically, with a staff member or service user of the Centre (service user includes any patient or visitor to the centre)	1,750	87%
Intimidating or harassing, or attempting to intimidate or harass, a staff member or service user of the Centre	1,771	88%
No person shall in a public place in the Restricted Area other than in the Designated Zone record or photograph a staff member or service user of the Centre without explicit consent of that person	1,608	80%
Displaying any text or images relating directly or indirectly to the termination of pregnancy	1,659	82%
Distributing any text or images relating directly or indirectly to the termination of pregnancy	1,658	82%
Playing amplified music, voice or audio recordings with respect to the approval or disapproval of abortion services	1,602	80%

3.4 Protesting behaviour

Respondents were asked how problematic protesting behaviour is in the proposed PSPO. As shown in the figure below, just over four in five (83%) respondents said they thought it was a major problem, with a further 3% saying it was a minor problem. One in eleven (9%) respondents said it was not a problem.

Figure 5 – (Q7) How problematic do you think this behaviour is in the proposed PSPO area?

Base: 1,741



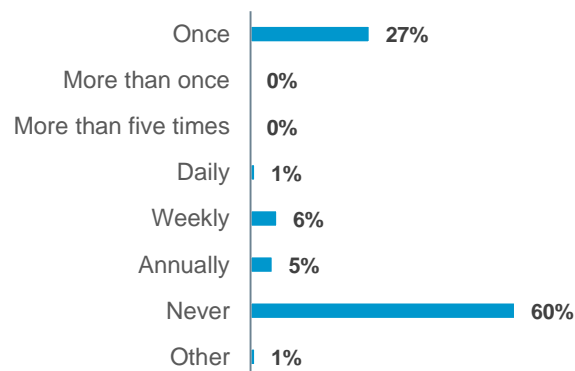
Sub-group analysis shows that:

- Respondents that were a client or visitor to Marie Stopes and supporters of pro-choice activities were more likely to say the behaviour was a major problem than supporters of pro-life activities (95% and 92% respectively, compared to 22%)
- Respondents living in the proposed PSPO are more likely to say the behaviour was not a problem than those living outside the area (19% compared to 7%)

When asked if they had personally experience problems with this behaviour, just over a quarter (27%) of respondents said they had experienced it once, with 1% saying they experienced it daily. A total of 6% said they experienced it weekly and 5% said annually. Three in five (60%), however, said that they never experienced this behaviour. These findings are shown in the figure below.

Figure 6 – (Q8) How often have you personally experienced problems with this behaviour?

Base: 1,515



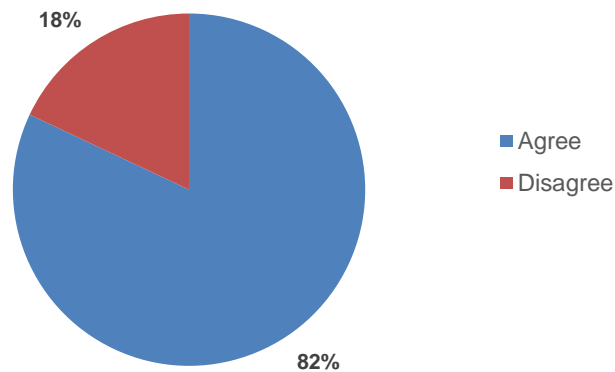
Sub-group analysis shows that:

- Respondents that were a client or visitor to Marie Stopes and supporters of pro-choice activities were more likely to say the behaviour was a major problem than supporters of pro-life activities (95% and 92% respectively, compared to 22%)
- Respondents living in the proposed PSPO are more likely to say the behaviour was not a problem than those living outside the area (19% compared to 7%)

When asked if they agreed or disagreed that this behaviour should be included in the PSPO, just over four in five (82%) said they agree, with 18% saying they disagree.

Figure 7 – (Q9) Do you agree or disagree that this behaviour should be included in the PSPO?

Base: 1,721



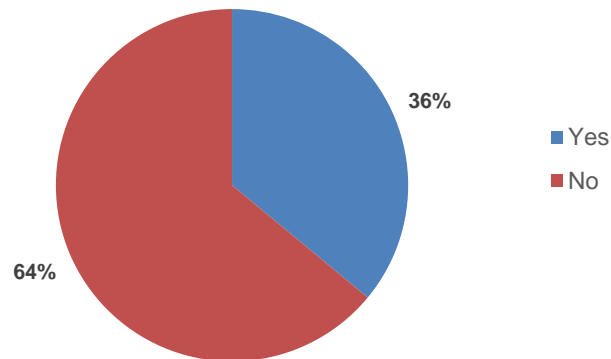
Sub-group analysis shows that:

- Supporters of pro-life activities were more likely to say they disagreed than any other respondent type (74% compared to 18% overall)

Just over a third (36%) of respondents said this behaviour had a detrimental effect on their quality of life, with the remaining 64% saying it did not.

Figure 8 – (Q10) Has this behaviour had a detrimental effect on your quality of life?

Base: 1,721

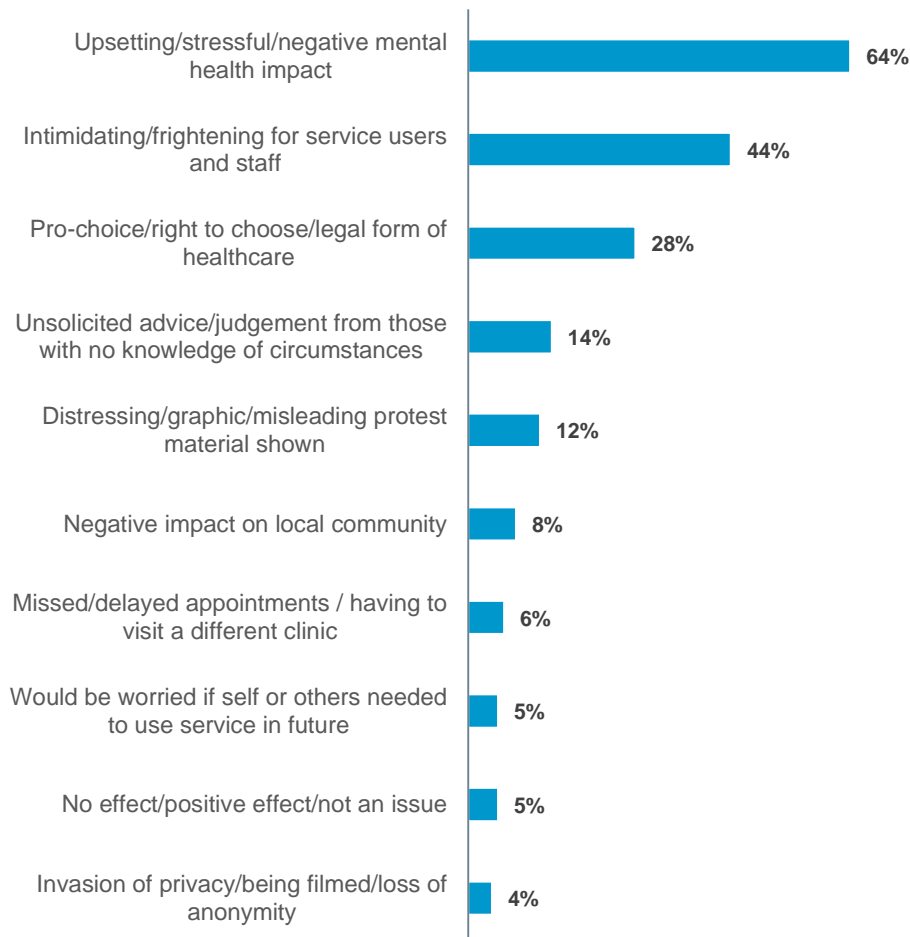


Sub-group analysis shows that:

- 69% of respondents that said they were a client or visitor to Marie Stopes and 57% of respondents that said they are a staff member of Marie Stopes said the behaviour had a detrimental effect on their quality of life (compared to 36% overall)

Respondents that said it had a detrimental effect on their quality of life were asked to explain how they or others were affected. As shown in the figure below, 64% of these respondents said it was upsetting, stressful and had a negative health impact and 44% said they found it intimidating and frightening for service users and staff. Almost three in ten (28%) said people had a right to choose and the services were a legal form of healthcare. All other responses are shown in the figure below.

Figure 9 – (Q11) If yes, please tell us how you or other were affected?
Base: 597



Sub-group analysis shows that:

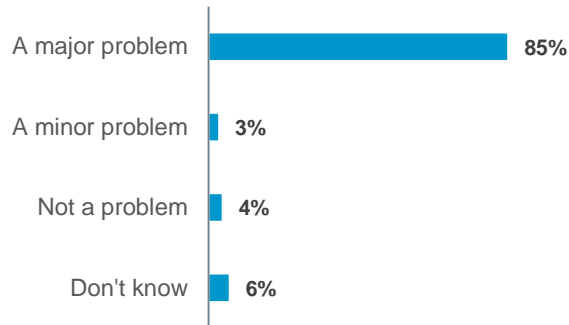
- 78% of respondents that are, or were, a client of visitor to Marie Stopes said the behaviour had been upsetting, stressful and had a negative mental health impact

3.5 Interfering behaviour

Respondents were asked how interfering behaviour (verbally or physical) is in the proposed PSPO. As shown in the figure below, over four in five (85%) said it was a major problem.

Figure 10 – (Q12) How problematic do you think this behaviour is in the proposed PSPO area?

Base: 1,737



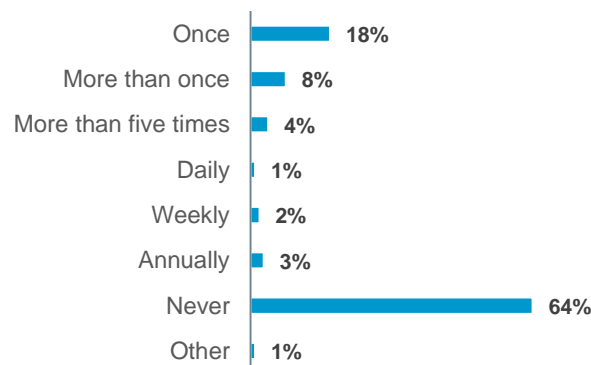
Sub-group analysis shows that:

- 90% of supporters of pro-choice activities and 90% of clients or visitors to Marie Stopes said it was a major problem compared to 36% of supporters of pro-life activities
- Respondents living outside the proposed PSPO area were more likely to say it was a major problem compared to those living in the proposed PSPO (87% compared to 70%)

Almost one in five (18%) said they had personally experienced problems once, with 8% saying more than once and 4% saying more than five times. These findings are shown in the figure below.

Figure 11 – (Q13) How often have you personally experienced problems with this behaviour?

Base: 1,607



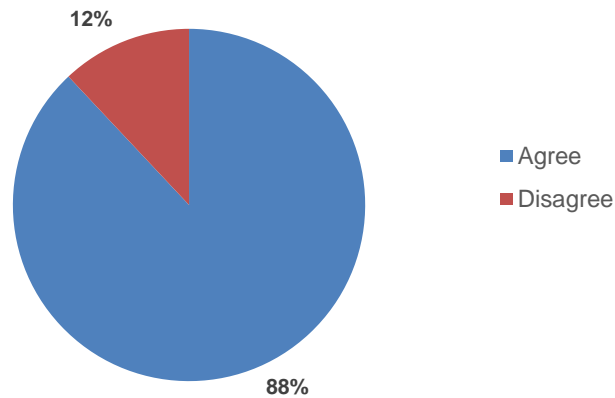
Sub-group analysis shows that:

- 44% of respondents that were a client or visitor said they had experienced problems once and 34% said never

As shown in the figure below, almost nine in ten (88%) respondents said they agree that this type of behaviour should be included in the PSPO.

Figure 12 – (Q14) Do you agree or disagree that this behaviour should be included in the PSPO?

Base: 1,714



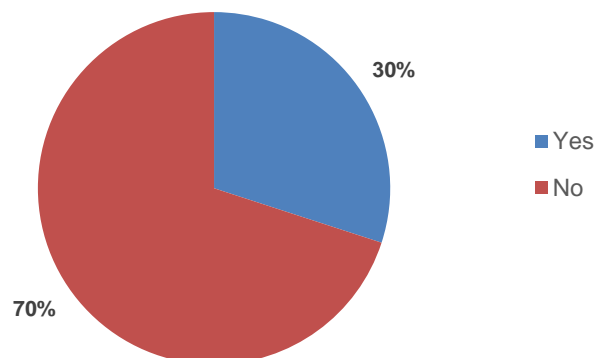
Sub-group analysis shows that:

- Respondents living outside the proposed PSPO were more likely to agree than those living inside the proposed PSPO (90% compared to 70%)
- Respondents that were or are a client or visitor to Marie Stopes are more likely to agree than supports of pro-life activities (95% compared to 38%)

Three in ten (30%) said this behaviour had a detrimental effect on their quality of life.

Figure 13 – (Q15) Has this behaviour had a detrimental effect on your quality of life?

Base: 1,709

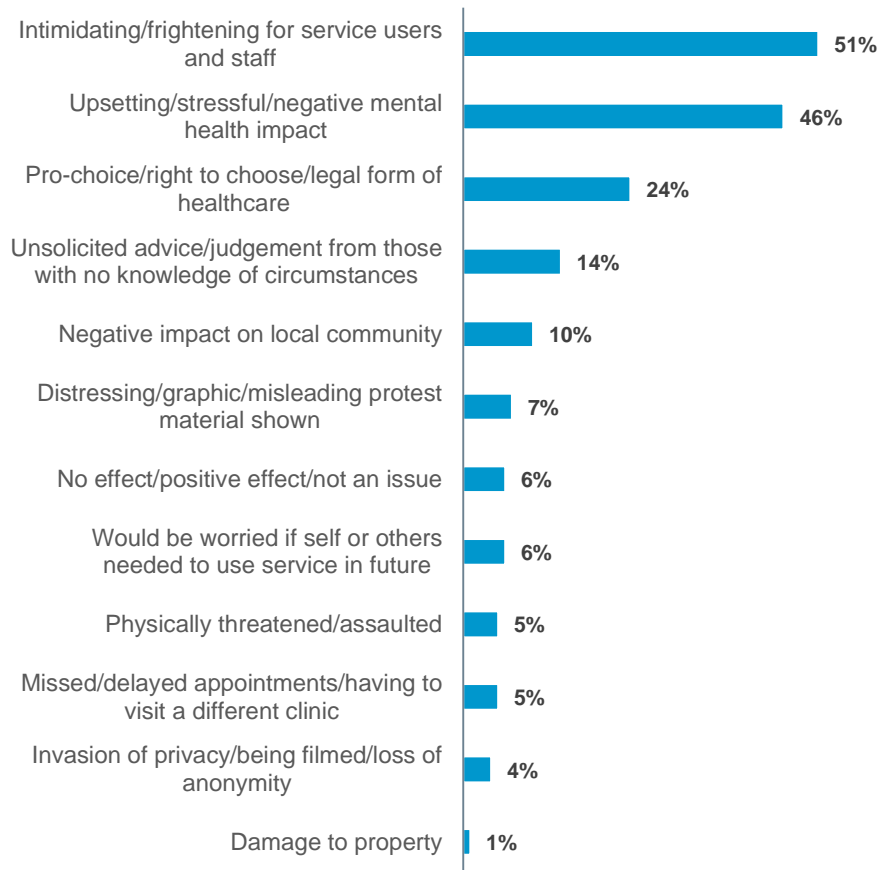


Sub-group analysis shows that:

- 52% of respondents that are a client or visitor said this behaviour had a detrimental effect on their quality of life

Respondents that said it had a detrimental effect on their quality of life were asked to explain how they or others were affected. As shown in the figure below, the most common response, provided by 51% of respondents that said it had a detrimental effect on their quality of life, was that it was intimidating and frightening for service users and staff. The second most common response, provided by 46% of respondents, was that it was upsetting, stressful and had a negative mental health impact. A quarter (24%) said it was a right to choose (pro-choice) and a legal form of healthcare.

Figure 14 – (Q16) If yes, please tell us how you or other were affected?
Base: 437



Sub-group analysis shows that:

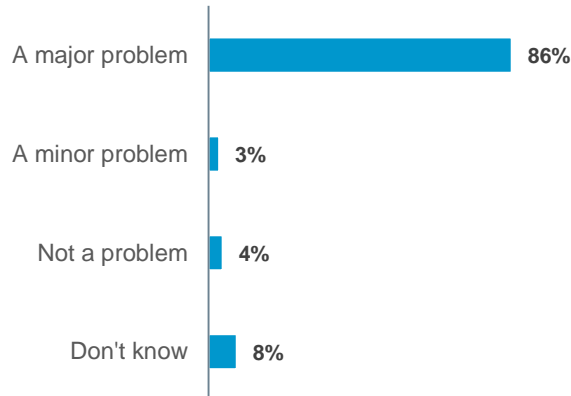
- 60% of respondents that were clients or visitors to Marie Stopes said it was upsetting, stressful and had a negative mental health impact

3.6 Intimidating or harassing behaviour

Respondents were asked how problematic they thought intimidating or harassing behaviour was in the proposed PSPO area. Almost nine in ten (86%) thought it was a major problem with a further 3% saying it was a minor problem. A total of 4% said it was not a problem.

Figure 15 – (Q17) How problematic do you think this behaviour is in the proposed PSPO area?

Base: 1,745



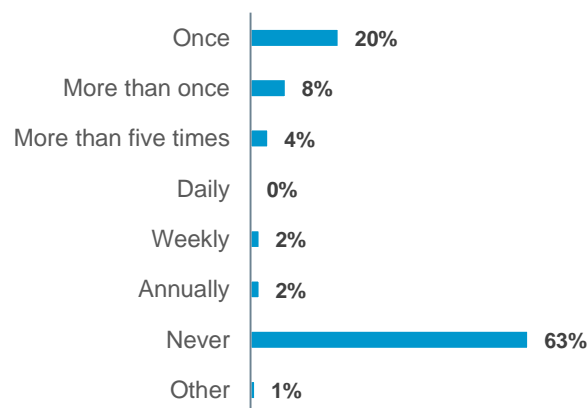
Sub-group analysis shows that:

- 91% of supporters of pro-choice said it was a major problem, compared to 38% of supporters of pro-life activities
- 91% of respondents that are a client or visitor said it was a major problem
- Those living outside the proposed PSPO were more likely to say it was a major problem compared to those living inside the area (88% compared to 73%)

One in five (20%) respondents said they had personally experienced problems once, with 8% saying more than once and a further 4% saying more than five times. Just over three in five (63%) respondents said they had never experienced this behaviour. These findings are shown in the following figure.

Figure 16 – (Q18) How often have you personally experienced problems with this behaviour?

Base: 1,633



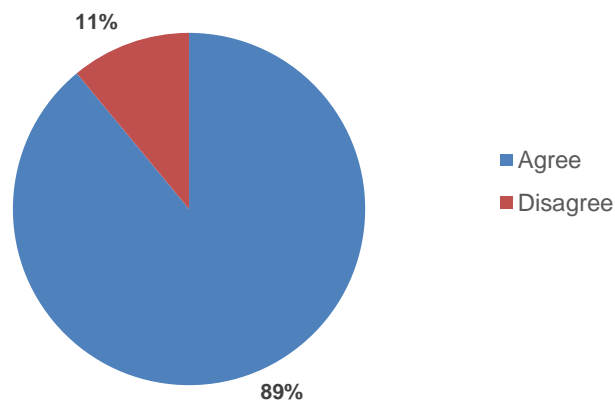
Sub-group analysis shows that:

- Respondents that are a client or visitor to Marie Stopes are more likely to say that they had experienced this behaviour once (48% compared to 20% overall)
- Those living outside the proposed area were more likely to say once than those living inside the area (18% compared to 8%)

Nine in ten (89%) of respondents agree that this behaviour should be included in the PSPO.

Figure 17 – (Q19) Do you agree or disagree that this behaviour should be included in the PSPO?

Base: 1,725



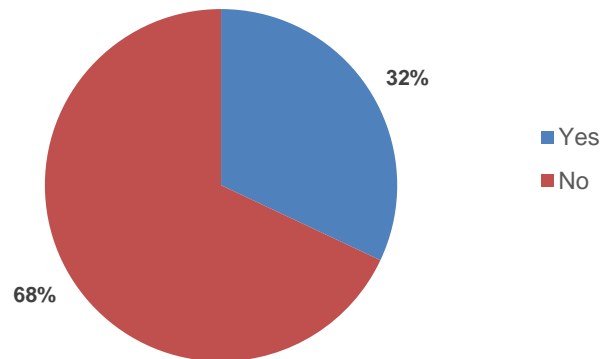
Sub-group analysis shows that:

- 92% of supporters of pro-choice agree compared to 42% of supporters of pro-life
- 97% of respondents that are a client or visitor agree
- Those living outside the proposed PSPO were more likely to agree compared to those living inside the area (91% compared to 74%)

32 % of respondents said this behaviour had a detrimental effect on the quality of their life and 68% said it did not.

Figure 18 – (Q20) Has this behaviour had a detrimental effect on your quality of life?

Base: 1,710

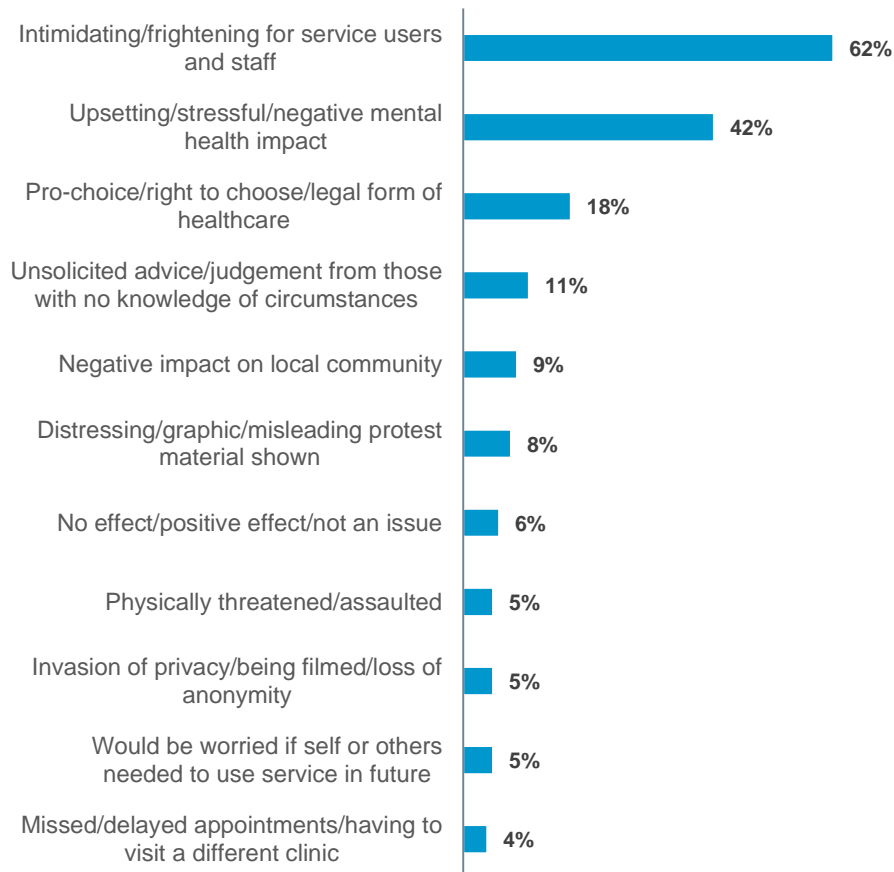


Sub-group analysis shows that:

- 58% of respondents that are a client or visitor said this behaviour had a detrimental effect on their quality of life
- 37% of respondents living in the proposed PSPO area said this behaviour had a detrimental effect on their quality of life

Respondents that said it had a detrimental effect on their quality of life were asked to explain how they or others were affected. As shown in the figure below, the most common response, provided by 62% of respondents was that the behaviour was intimidating and frightening for service users and staff. The second more common response mentioned by 42% of respondents that said the behaviour had a detrimental effect on the quality of their life, was that it was upsetting, stressful and had a negative mental health impact.

Figure 19 – (Q21) If yes, please tell us how you or other were affected?
Base: 433



Sub-group analysis shows that:

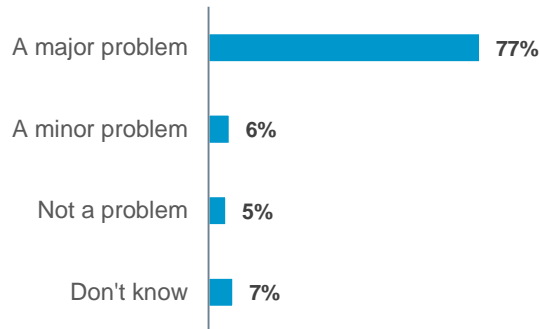
- 61% of respondents that were clients or visitors to Marie Stopes said it was intimidating and frightening for service users and staff
- 56% of respondents that were clients or visitors to Marie Stopes said it was upsetting, stressful and had a negative mental health impact

3.7 Recording or photographing behaviour

Respondents were asked how problematic they thought recording or photographing behaviour was in the proposed PSPO area. As shown in the figure below, just over three-quarters (77%) said it was a major problem, with 6% saying it was a minor problem. A total of 5% said it was not a problem.

Figure 20 – (Q22) How problematic do you think this behaviour is in the proposed PSPO area?

Base: 1,591



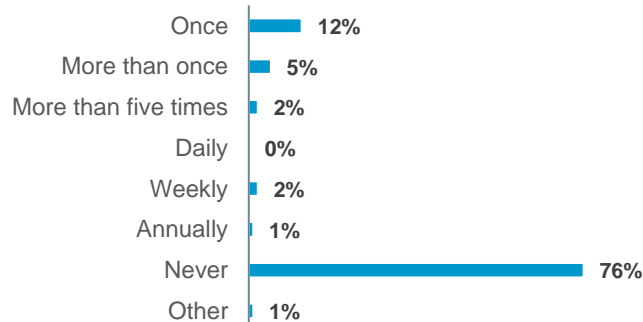
Sub-group analysis shows that:

- 80% of supporters of pro-choice said it was a major problem, compared to 36% of supporters of pro-life activities
- 74% of respondents that are a client or visitor said it was a major problem
- Those living outside the proposed PSPO were more likely to say it was a major problem compared to those living inside the area (78% compared to 64%)

One in eight (12%) respondents said they had personally experienced problems once, with 5% saying more than once and a further 2% saying more than five times. Three-quarters (76%) of respondents said they had never experienced this behaviour. These findings are shown in the following figure.

Figure 21 – (Q23) How often have you personally experienced problems with this behaviour?

Base: 1,489



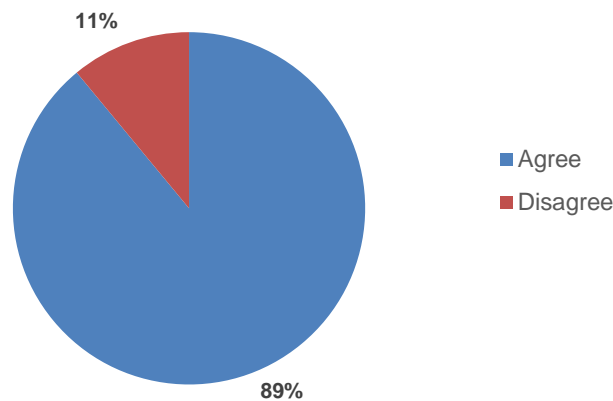
Sub-group analysis shows that:

- Respondents that are a client or visitor to Marie Stopes are more likely to say that they had experienced this behaviour once (29% compared to 12% overall)

As shown in the figure below, nine in ten (89%) of respondents agree that this behaviour should be included in the PSPO. A total of 11% said they disagree.

Figure 22 – (Q24) Do you agree or disagree that this behaviour should be included in the PSPO?

Base: 1,570



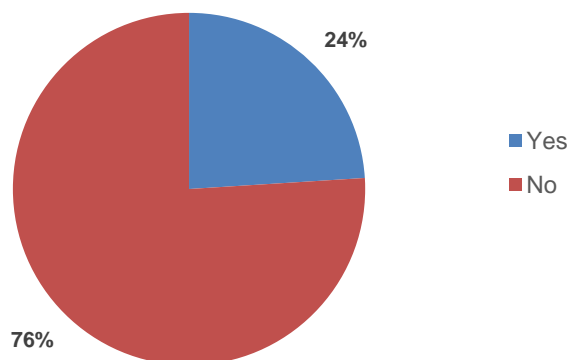
Sub-group analysis shows that:

- 92% of supporters of pro-choice agree compared to 42% of supporters of pro-life
- 97% of respondents that are a client or visitor agree
- Those living outside the proposed PSPO were more likely to agree compared to those living inside the area (91% compared to 74%)

24% of respondents said this behaviour had a detrimental effect on the quality of their life and 76% said it did not.

Figure 23 – (Q25) Has this behaviour had a detrimental effect on your quality of life?

Base: 1,539

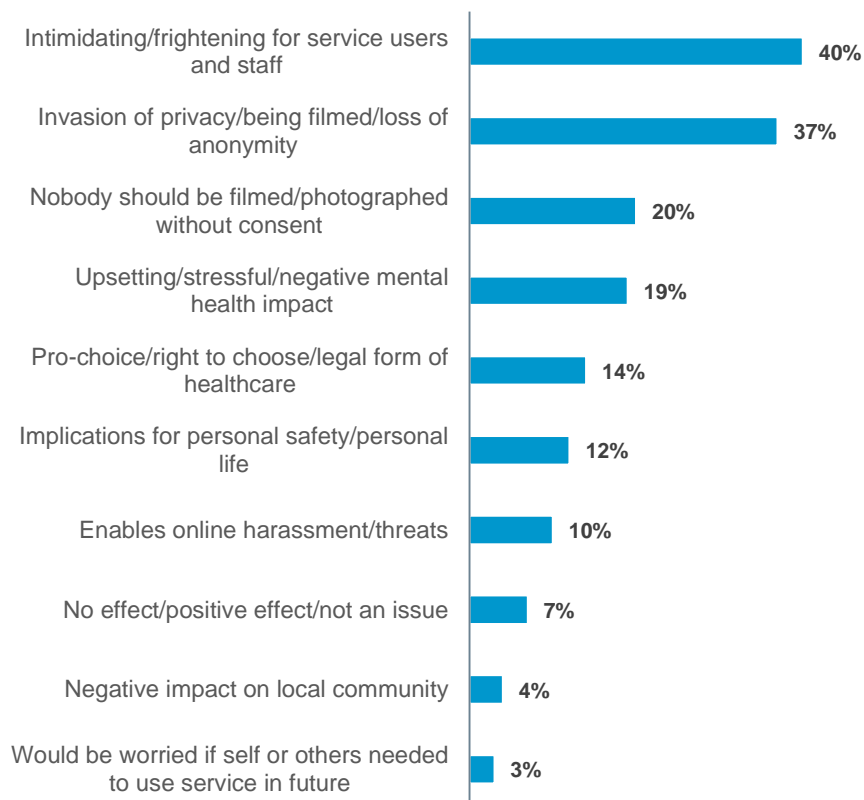


Sub-group analysis shows that:

- 36% of respondents that are a client or visitor said this behaviour had a detrimental effect on their quality of life

Respondents that said it had a detrimental effect on their quality of life were asked to explain how they or others were affected. As shown in the figure below, the most common response, provided by 40% was that the behaviour was intimidating and frightening for service users and staff. The second more common response mentioned by 37% of respondents that said the behaviour had a detrimental effect on the quality of their life, was that it was an invasion of privacy and being filmed led to a loss of anonymity.

Figure 24 – (Q26) If yes, please tell us how you or other were affected?
Base: 338



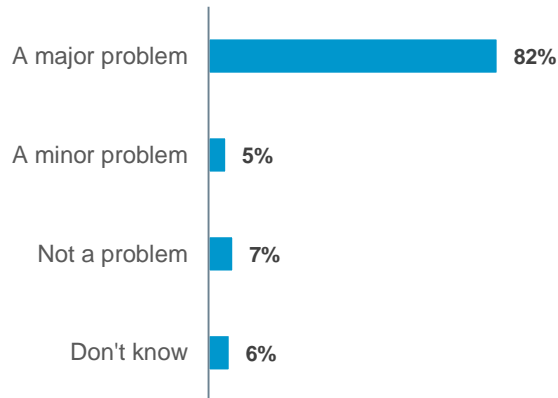
Sub-group analysis shows that there were no significant differences.

3.8 Displaying text or image behaviour

Respondents were asked how problematic they thought displaying text or images relating directly or indirectly to the termination of pregnancy was in the proposed PSPO area. As shown in the figure below, just over four in five (82%) said it was a major problem, with 5% saying it was a minor problem. A total of 7% said it was not a problem.

Figure 25 – (Q27) How problematic do you think this behaviour is in the proposed PSPO area?

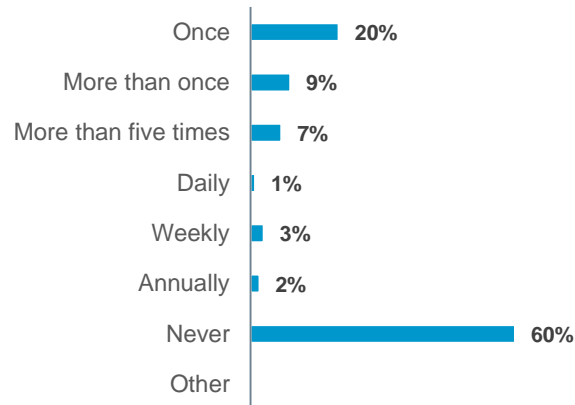
Base: 1,640



Sub-group analysis shows that:

- 89% of supporters of pro-choice said it was a major problem, compared to 38% of supporters of pro-life activities
- 93% of respondents that are a client or visitor said it was a major problem
- Those living outside the proposed PSPO were more likely to say it was a major problem compared to those living inside the area (84% compared to 68%)

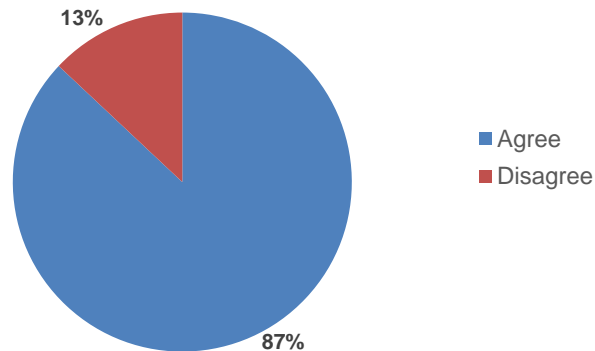
One in five (20%) respondents said they had personally experienced problems once, with 9% saying more than once and a further 7% saying more than five times. Three in five (60%) of respondents said they had never experienced this behaviour. These findings are shown in the following figure.

Figure 26 – (Q28) How often have you personally experienced problems with this behaviour?**Base: 1,514**

Sub-group analysis shows that:

- Respondents that are a client or visitor to Marie Stopes are more likely to say that they had experienced this behaviour once (51% compared to 20% overall)

As shown in the figure below, almost nine in ten (87%) of respondents agree that this behaviour should be included in the PSPO. A total of 13% said they disagree.

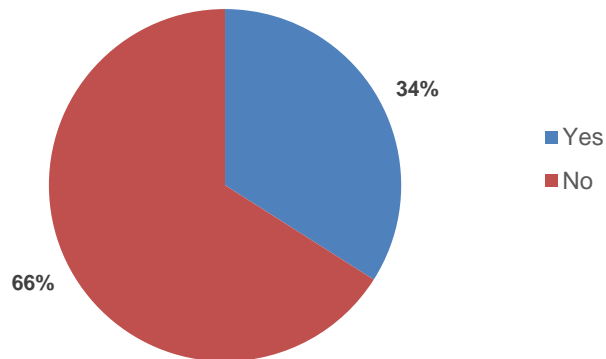
Figure 27 – (Q29) Do you agree or disagree that this behaviour should be included in the PSPO?**Base: 1,621**

Sub-group analysis shows that:

- 92% of supporters of pro-choice agree compared to 32% of supporters of pro-life
- 96% of respondents that are a client or visitor agree
- Those living outside the proposed PSPO were more likely to agree compared to those living inside the area (89% compared to 66%)

34% of respondents said this behaviour had a detrimental effect on the quality of their life and 66% said it did not.

Figure 28 – (Q30) Has this behaviour had a detrimental effect on your quality of life?
Base: 1,597

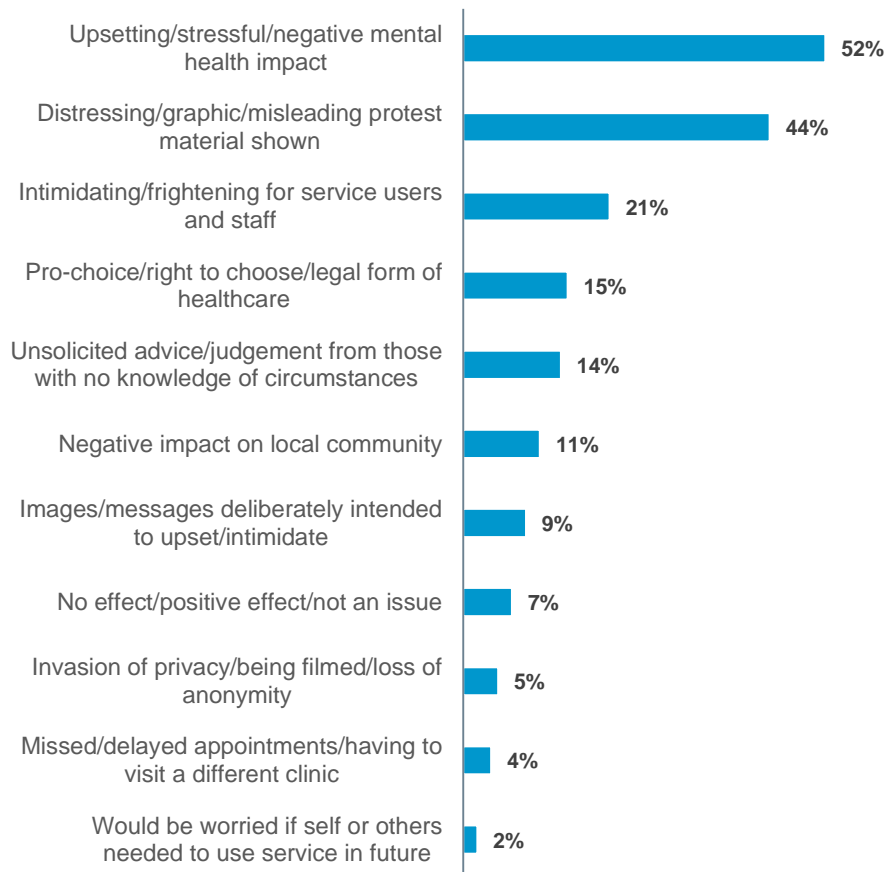


Sub-group analysis shows that:

- 61% of respondents that are a client or visitor said this behaviour had a detrimental effect on their quality of life

Respondents that said it had a detrimental effect on their quality of life were asked to explain how they or others were affected. As shown in the figure below, the most common response, provided by 52% was that the behaviour was upsetting, stressful and had a negative mental health impact. The second more common response mentioned by 44% of respondents that said the behaviour had a detrimental effect on the quality of their life, was that it was distressing, graphic and misleading protest material was being shown.

Figure 29 – (Q31) If yes, please tell us how you or other were affected?
Base: 425



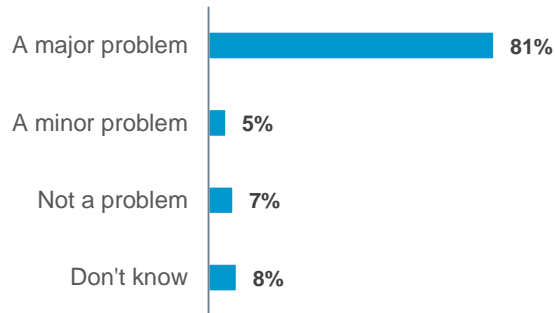
Sub-group analysis shows that there were no significant differences.

3.9 Distributing text or image behaviour

Respondents were asked how problematic they thought distributing text or images relating directly or indirectly to the termination of pregnancy was in the proposed PSPO area. As shown in the figure below, just over four in five (81%) said it was a major problem, with 5% saying it was a minor problem. A total of 7% said it was not a problem. A total of 7% said it was not a problem. A total of 7% said it was not a problem. A total of 7% said it was not a problem.

Figure 30 – (Q32) How problematic do you think this behaviour is in the proposed PSPO area?

Base: 1,638



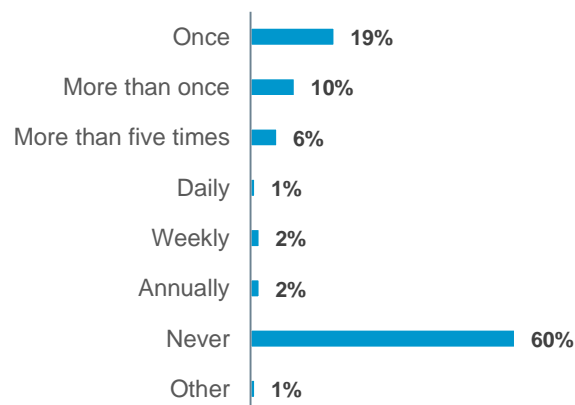
Sub-group analysis shows that:

- 87% of supporters of pro-choice said it was a major problem, compared to 27% of supporters of pro-life activities
- 91% of respondents that are a client or visitor said it was a major problem
- Those living outside the proposed PSPO were more likely to say it was a major problem compared to those living inside the area (82% compared to 66%)

One in five (19%) respondents said they had personally experienced problems once, with 10% saying more than once and a further 6% saying more than five times. Three in five (60%) of respondents said they had never experienced this behaviour. These findings are shown in the following figure.

Figure 31 – (Q33) How often have you personally experienced problems with this behaviour?

Base: 1,547



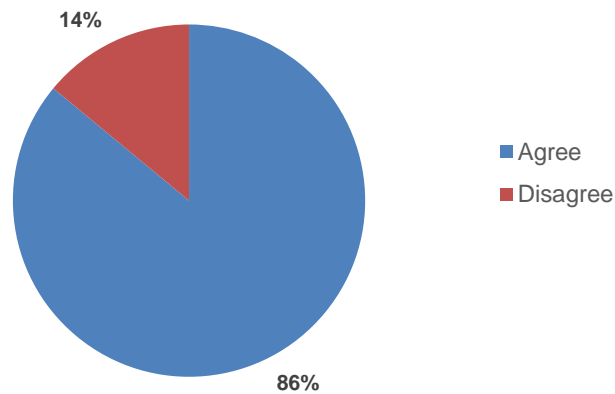
Sub-group analysis shows that:

- Respondents that are a client or visitor to Marie Stopes are more likely to saying they had experienced this behaviour once (45% compared to 19% overall)
- Those living outside the proposed area were more likely to say once than those living inside the area (18% compared to 8%)

As shown in the figure below, almost nine in ten (86%) of respondents agree that this behaviour should be included in the PSPO. A total of 14% said they disagree.

Figure 32 – (Q34) Do you agree or disagree that this behaviour should be included in the PSPO?

Base: 1,621



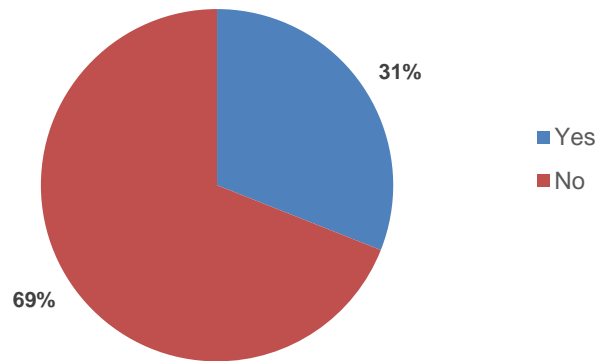
Sub-group analysis shows that:

- 92% of supporters of pro-choice agree compared to 31% of supporters of pro-life
- 96% of respondents that are a client or visitor agree
- Those living outside the proposed PSPO were more likely to agree compared to those living inside the area (88% compared to 66%)

31% respondents said this behaviour had a detrimental effect on the quality of their life and 69% said it did not.

Figure 33 – (Q35) Has this behaviour had a detrimental effect on your quality of life?

Base: 1,594

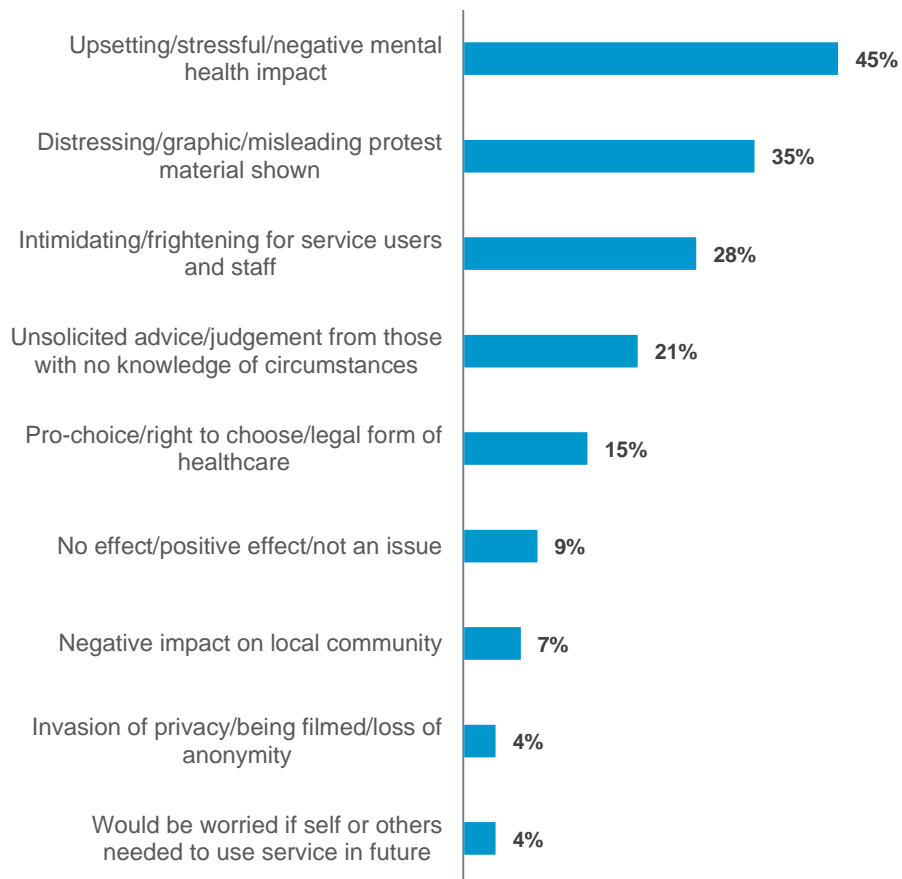


Sub-group analysis shows that:

- 54% of respondents that are a client or visitor said this behaviour had a detrimental effect on their quality of life

Respondents that said it had a detrimental effect on their quality of life were asked to explain how they or others were affected. As shown in the figure below, the most common response, provided by 45% was that the behaviour was upsetting, stressful and had a negative mental health impact. The second more common response mentioned by 35% of respondents that said the behaviour had a detrimental effect on the quality of their life, was that it was distressing, graphic and misleading protest material was being shown.

**Figure 34 – (Q36) If yes, please tell us how you or other were affected?
Base: 363**



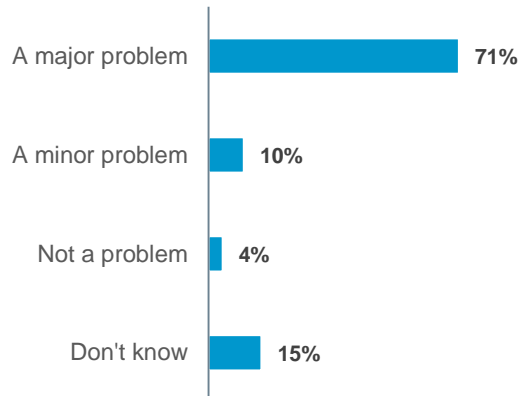
Sub-group analysis shows that there were no significant differences.

3.10 Amplified music, voice or audio recording behaviour

Respondents were asked how problematic they thought playing amplified music, voice or audio recordings with respect to the approval or disapproval of abortion services was in the proposed PSPO area. As shown in the figure below, seven in ten (71%) said it was a major problem, with 10% saying it was a minor problem. A total of 4% said it was not a problem.

Figure 35 – (Q37) How problematic do you think this behaviour is in the proposed PSPO area?

Base: 1,578



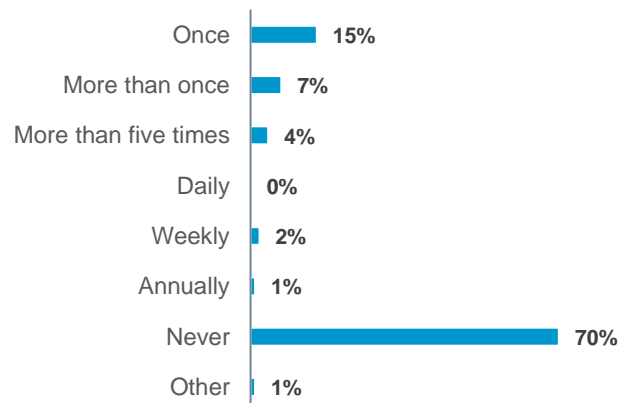
Sub-group analysis shows that:

- 74% of supporters of pro-choice said it was a major problem, compared to 35% of supporters of pro-life activities
- 70% of respondents that are a client or visitor said it was a major problem

One in seven (15%) respondents said they had personally experienced problems once, with 7% saying more than once and a further 4% saying more than five times. Seven in ten (70%) of respondents said they had never experienced this behaviour. These findings are shown in the following figure.

Figure 36 – (Q38) How often have you personally experienced problems with this behaviour?

Base: 1,504



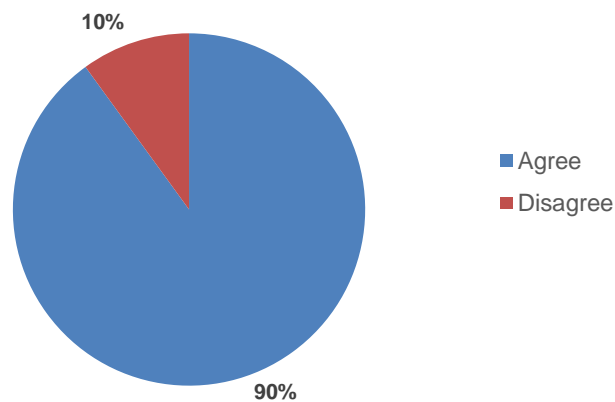
Sub-group analysis shows that:

- Respondents that are a client or visitor to Marie Stopes are more likely to say they had experienced this behaviour once (32% compared to 15% overall)

As shown in the figure below, nine in ten (90%) of respondents agree that this behaviour should be included in the PSPO. A total of 10% said they disagree.

Figure 37 – (Q39) Do you agree or disagree that this behaviour should be included in the PSPO?

Base: 1,560

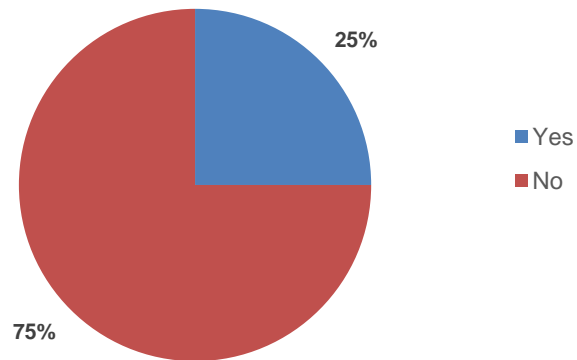


Sub-group analysis shows that:

- 93% of supporters of pro-choice agree compared to 32% of supporters of pro-life
- 97% of respondents that are a client or visitor agree
- Those living outside the proposed PSPO were more likely to agree compared to those living inside the area (92% compared to 68%)

25% of respondents said this behaviour had a detrimental effect on the quality of their life and 75% said it did not.

Figure 38 – (Q40) Has this behaviour had a detrimental effect on your quality of life?
Base: 1,531

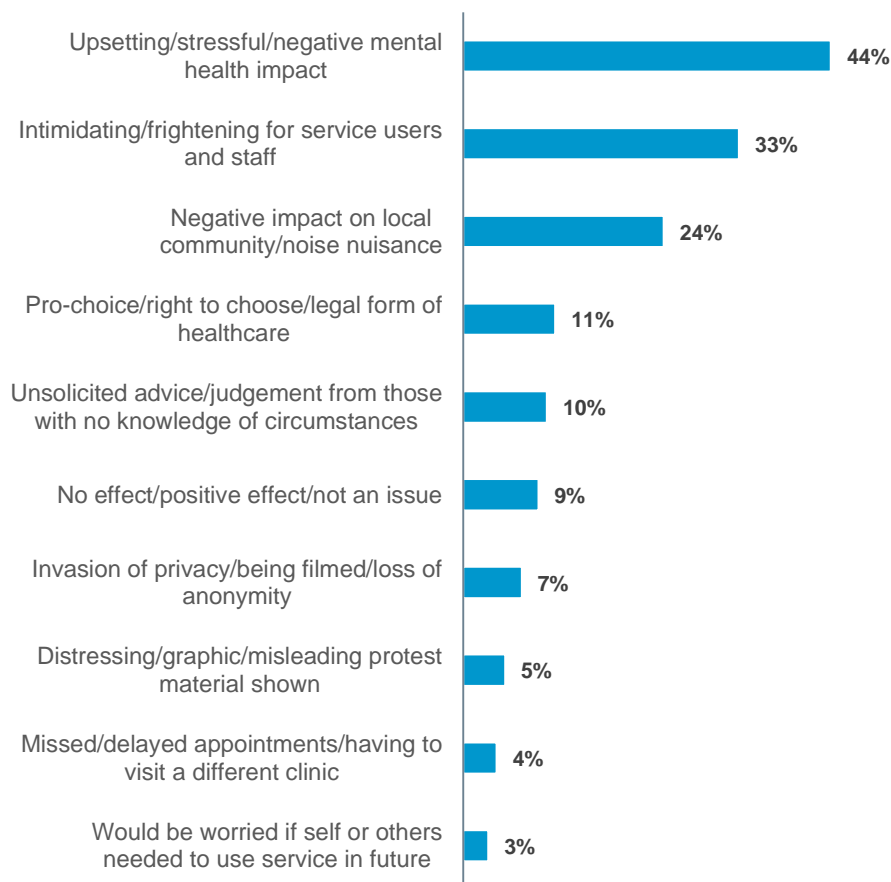


Sub-group analysis shows that:

- 36% of respondents that are a client or visitor said this behaviour had a detrimental effect on their quality of life

Respondents that said it had a detrimental effect on their quality of life were asked to explain how they or others were affected. As shown in the figure below, the most common response, provided by 44% was that the behaviour was upsetting, stressful and had a negative mental health impact. The second more common response mentioned by 33% of respondents that said the behaviour had a detrimental effect on the quality of their life, was that it was intimidating and frightening for service users and staff.

Figure 39 – (Q41) If yes, please tell us how you or other were affected?
Base: 299



Sub-group analysis shows that:

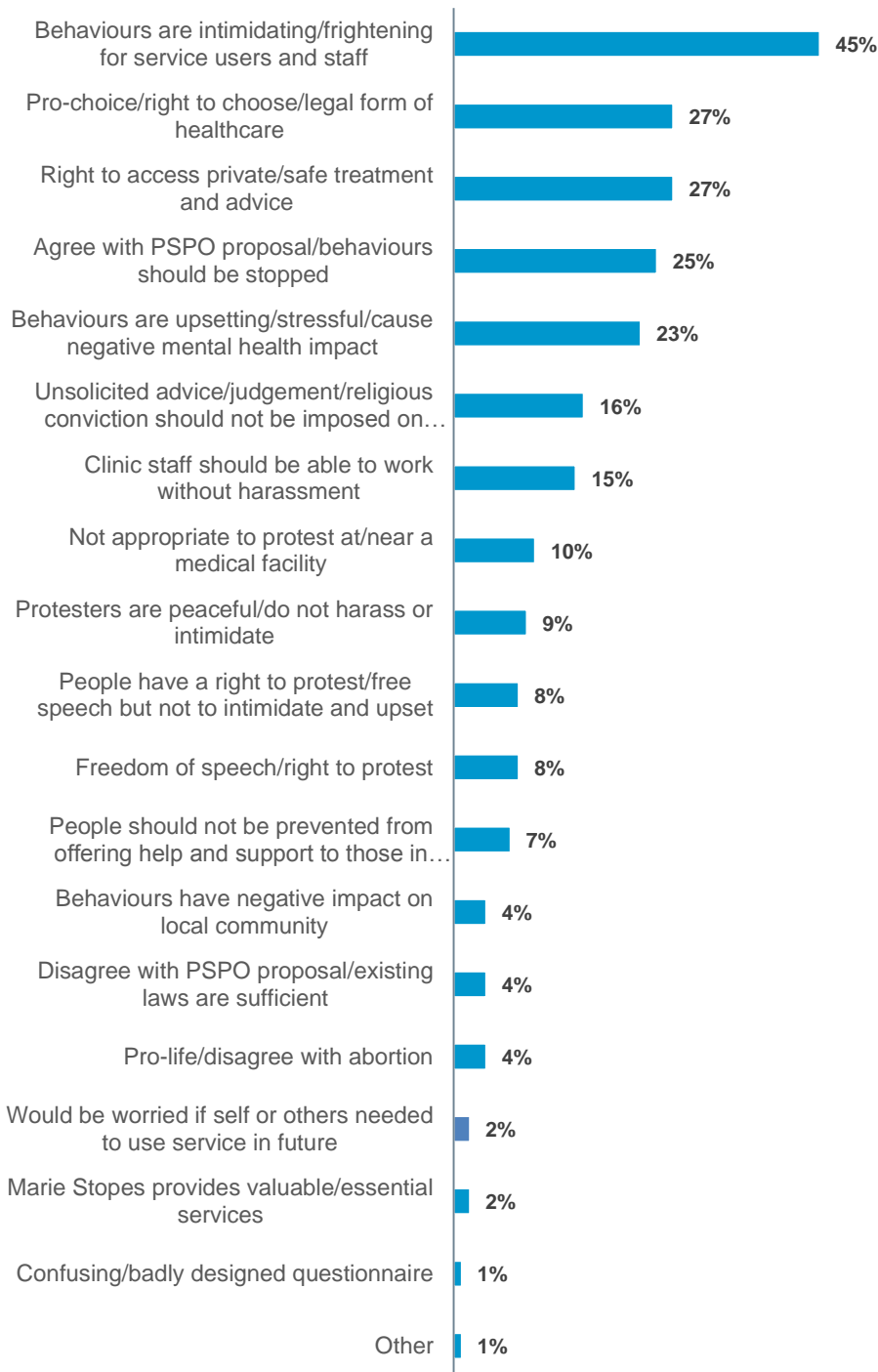
- 64% of respondents that were clients or visitors to Marie Stopes said it was upsetting, stressful and had a negative mental health impact

3.11 Any further comments about behaviours

Respondents were asked if they had any further comments about any of the behaviours asked about in the consultation. As shown in the figure below, over two in five (45%) respondents said the behaviours are intimidating, frightening for service users and staff. A further 27% said that there was a right to choose as it was a legal form of healthcare, and people have a right to access private and safe treatment and advice. A quarter (25%) of these respondents agreed with the PSPO and that the behaviours should be stopped.

Figure 40 – (Q42) If you have any further comments on any of the behaviours please state here?

Base: 804



3.12 Requests from authorised officers

Respondents were asked if they agreed or disagreed with two proposals regarding requests from authorised offices, namely requests to leave the PSPO area and not return within 24 hours and to provide their name, address and date of birth to the authorised officers.

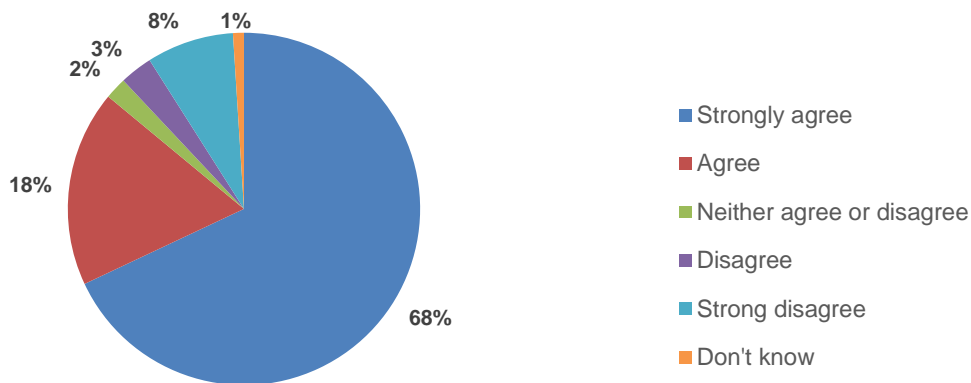
As shown in the figure below, 86% of respondents said they agreed (68% strongly agree, 18% agree) with the proposal that an authorised officer can request anyone that they suspect of breaching any of the prohibitions or requirements must leave the PSPO area and not return within 24 hours. A total of 11% said they disagreed (8% strongly disagree, 3% disagree).

Slightly fewer respondents (83%) said they agree with the second proposal of requesting to provide their name, address and date of birth. One in ten (10%) said they strongly disagreed.

Request to leave the PSPO area and not return within 24 hours

Figure 41 – (Q43) Do you agree or disagree with this proposal?

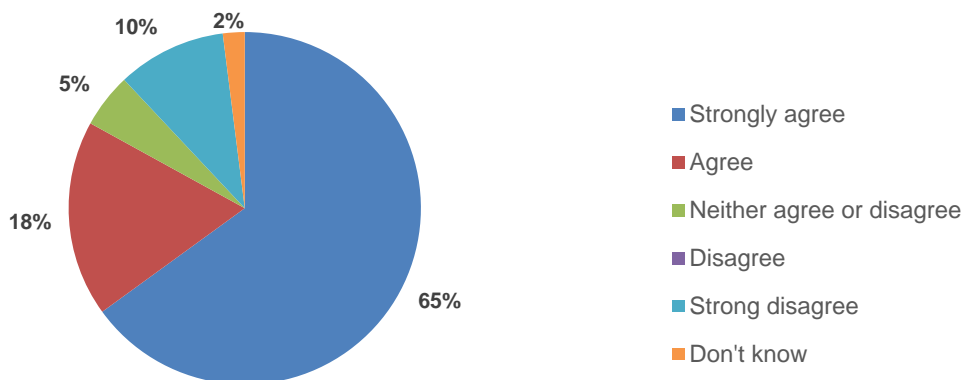
Base: 1,989



Request to provide their name, address and date of birth

Figure 42 – (Q44) Do you agree or disagree with this proposal?

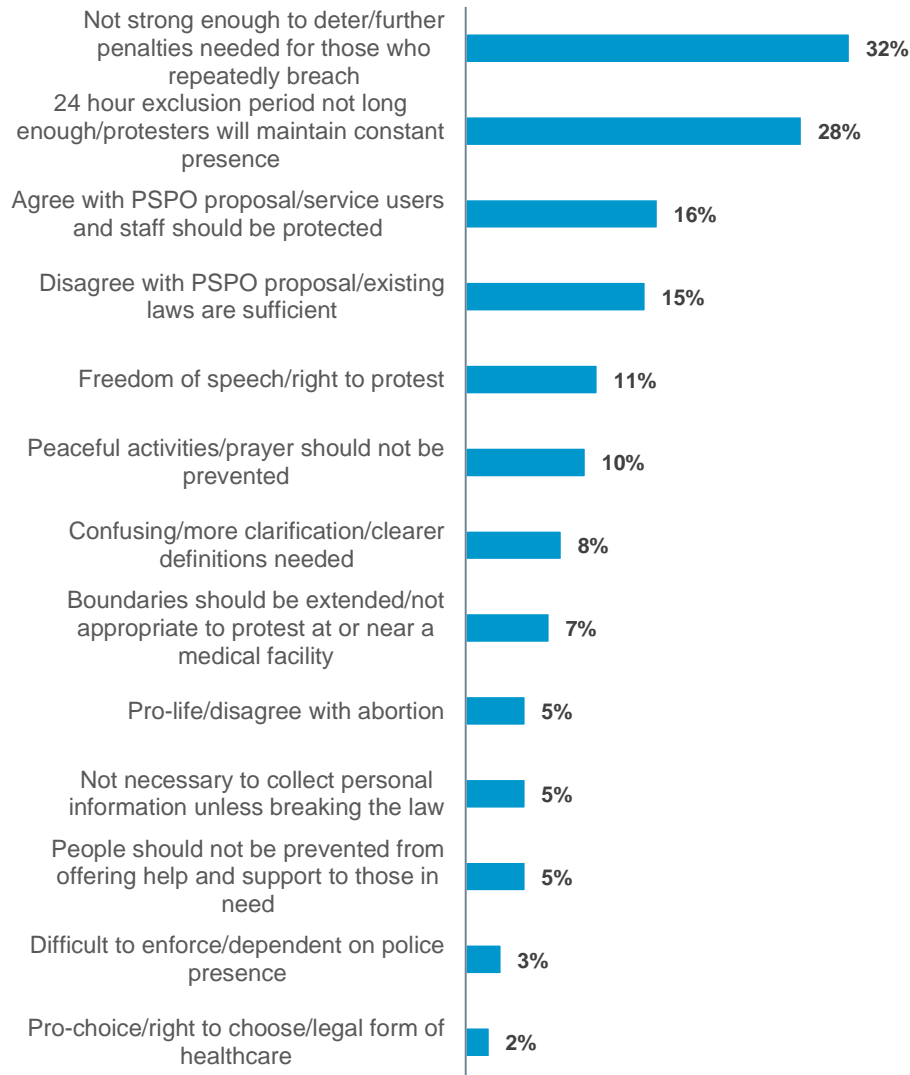
Base: 1,983



Respondents were asked if they had any further comments about either of these proposals. As shown in the figure below, of those respondents that answered this question, one in three (32%) said the proposals were not strong enough to deter people and that further penalties were needed for those who repeatedly breached the orders. Almost three in ten (28%) respondents said the 24 hours exclusion period was not long enough and that they believed protesters would maintain a constant presence.

Figure 43 – (Q45) If you have any further comments on either of these proposals please state here?

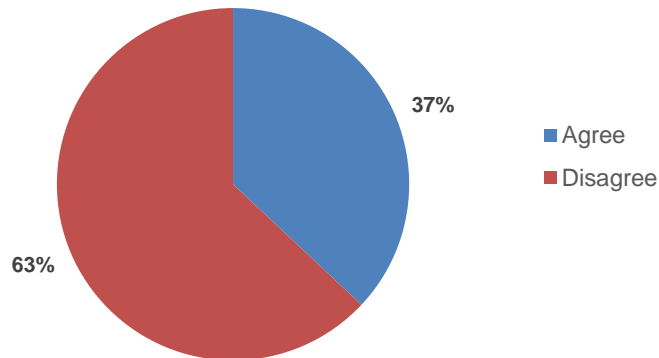
Base: 403



3.13 Your views: Providing a Designated Zone

Respondents were asked if they agreed or disagreed with having a designated zone within the PSPO area with fewer restrictions. Almost two in five (37%) respondents agreed with this proposal, with the remaining 63% disagreeing.

Figure 44 – (Q46) Do you agree or disagree with having a designated zone?
Base: 1,953



Sub-group analysis shows that:

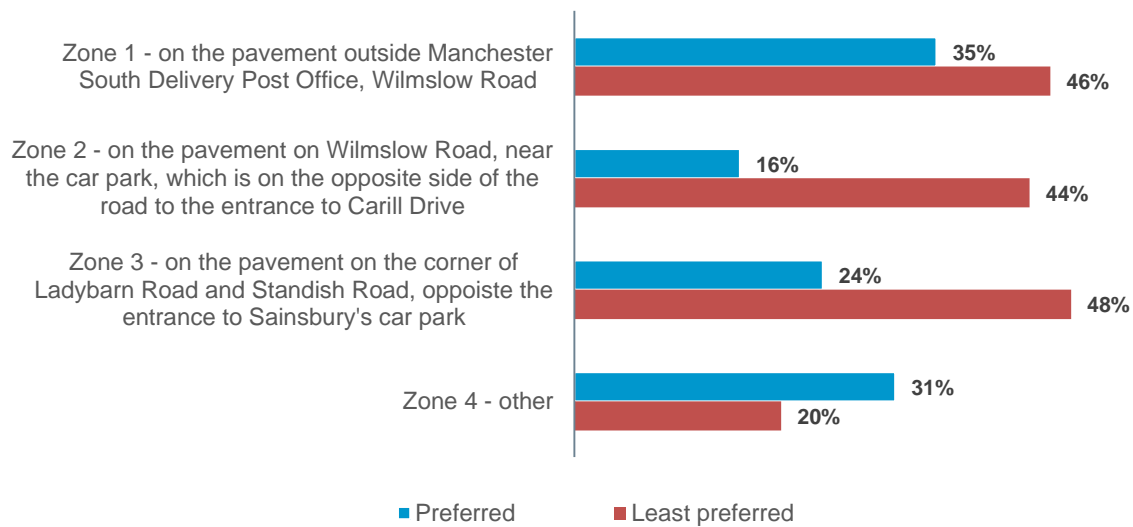
- 79% of supporters of pro-life activities disagreed compared to 63% overall

Respondents were subsequently asked to choose from four options as to which zone was their preferred choice and which was their least preferred choice. Although the question asked respondents to choose only one on each, respondents did choose more than one, resulting in the figures below adding up to more than 100%).

As shown in the figure below, the most preferred is Zone 1, with 35% of respondents choosing this, with Zone 2 receiving the lowest response.

Figure 45 – (Q47) We have highlighted three zones within the PSPO area. Which zone is your preferred choice and which zone is your least preferred?

Base: 506



Respondents could propose a different zone and the figure below shows the responses. One in three (34%) respondents suggested that the designated zone should be outside the PSPO boundaries and beyond Fallowfield and a further 24% said there should not be a zone as protesters should not be allowed near the clinic. Furthermore, 18% said it should be as far away as possible from the clinic. However, 10% said there should not be a zone at all and people should be allowed to protest wherever they want. These findings are shown in the figure below. The figures on the following pages provide a breakdown of responses for each zone.

Figure 46 – (Q47a) If you've chosen Zone 4, please describe location
Base: 506

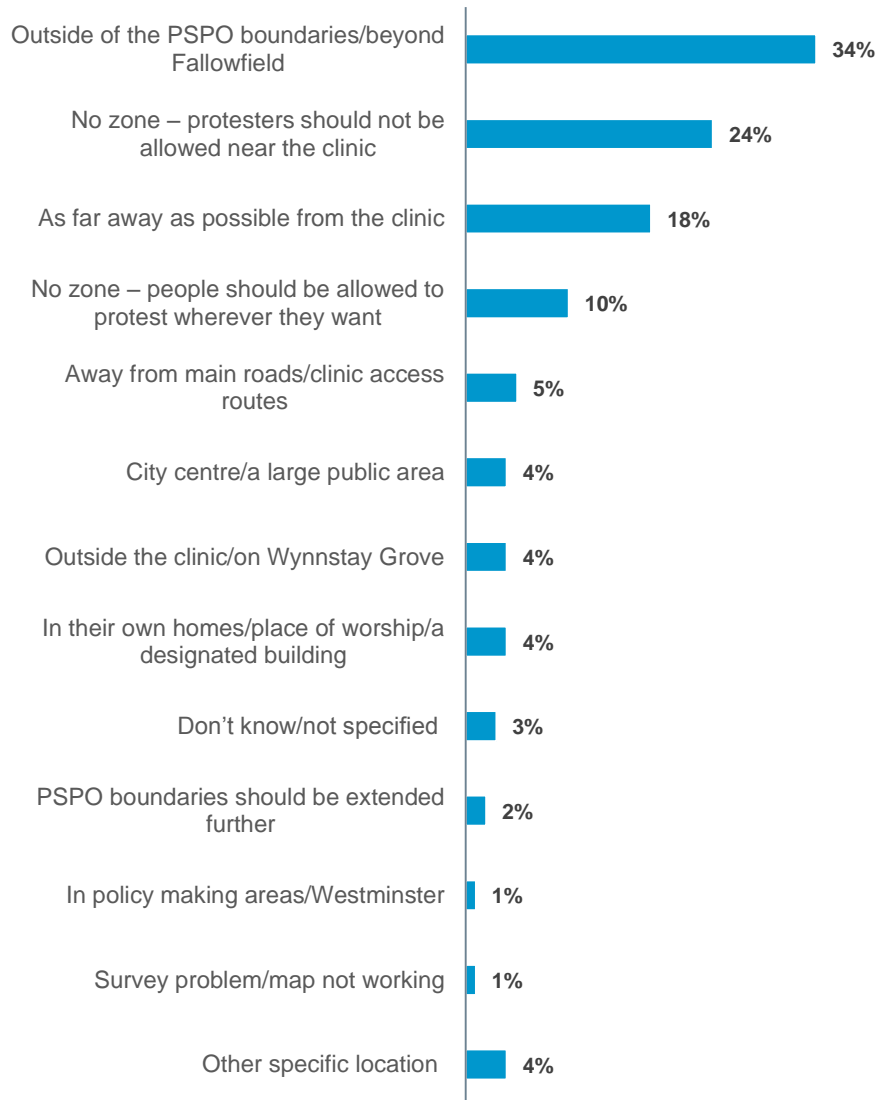


Figure 47 – (Q48) Please explain why you have chosen your preferred zone
Base: All – 955, Zone 1 – 287, Zone 2 – 105, Zone 3 - 174

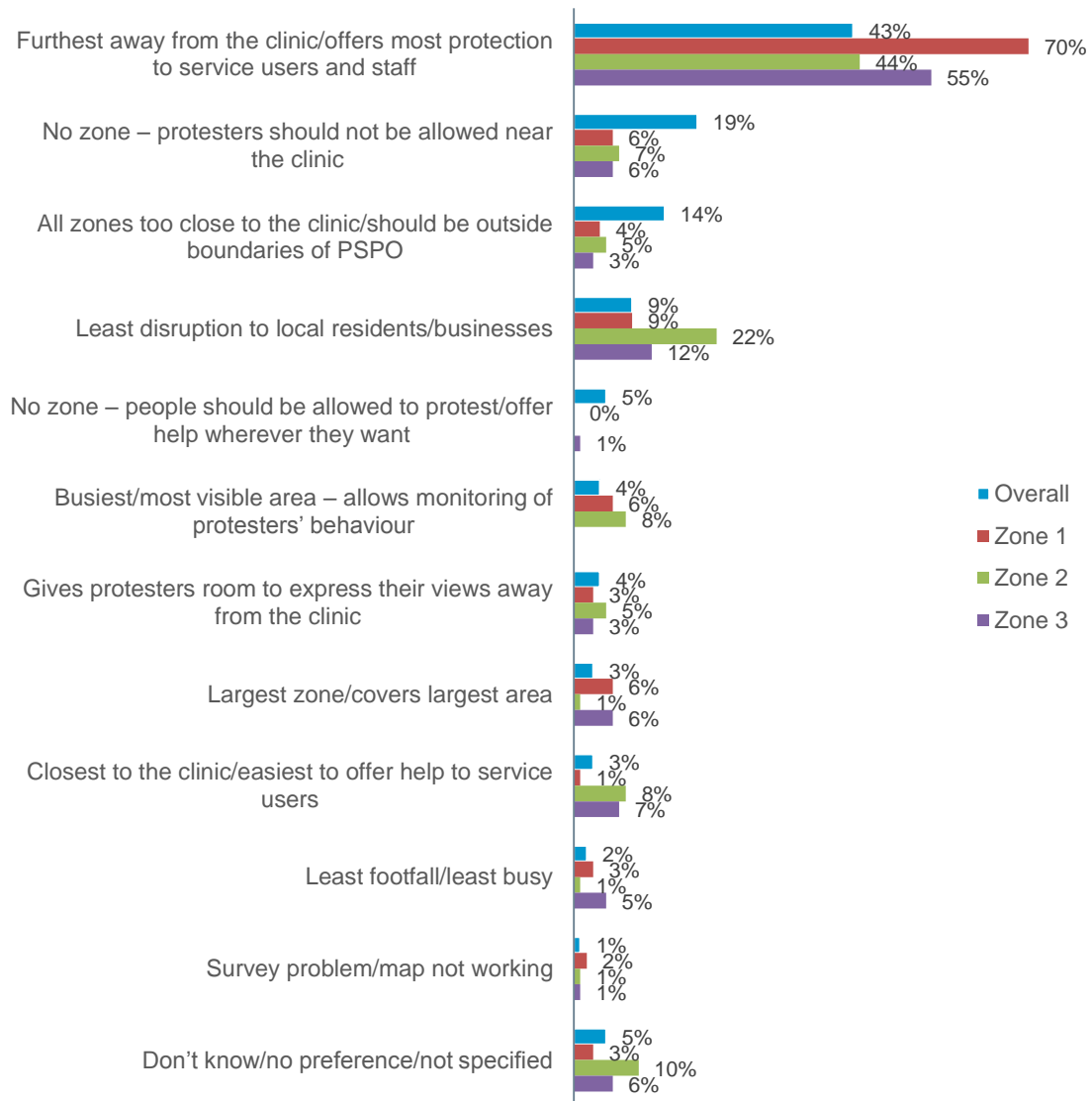
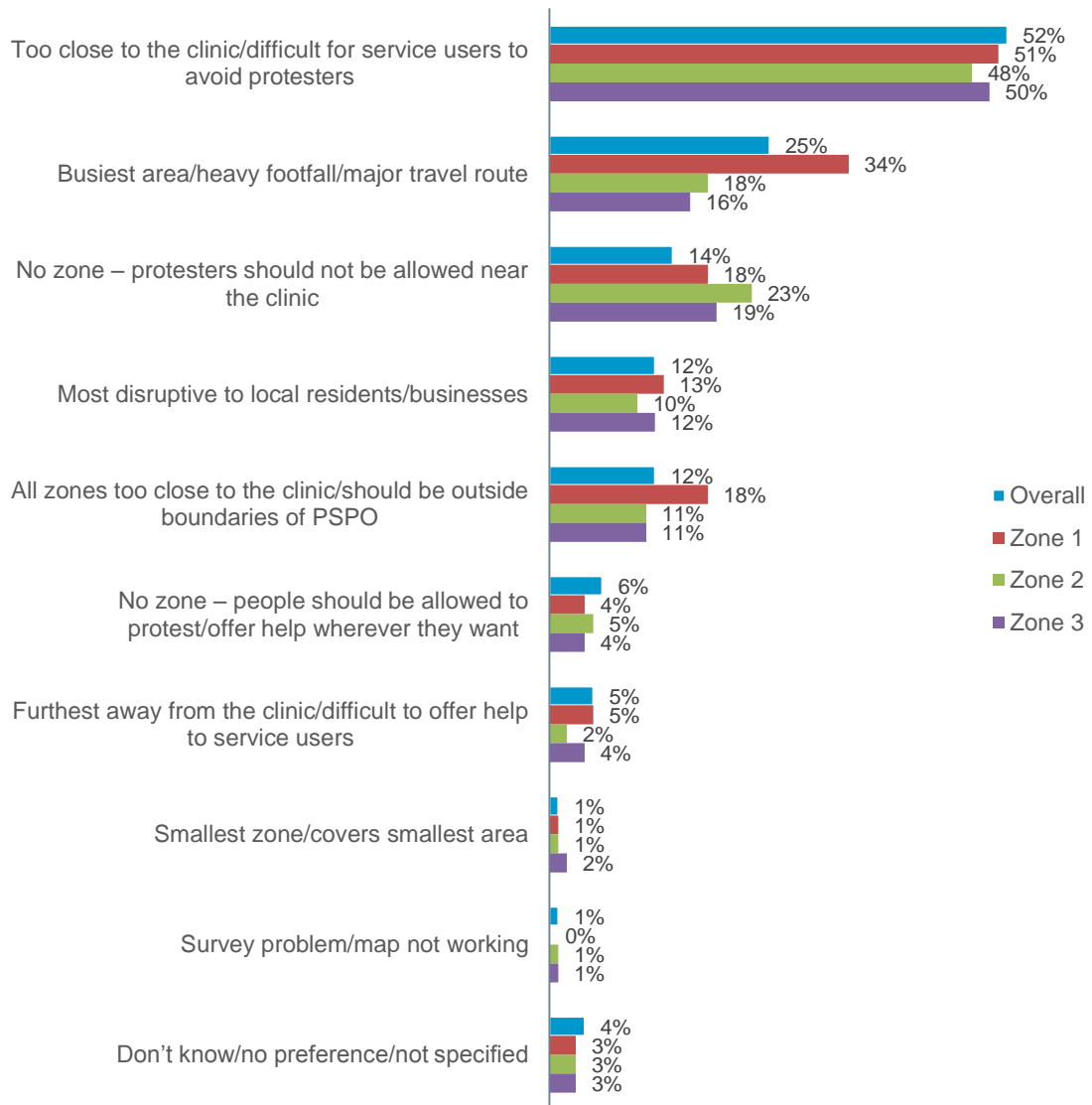
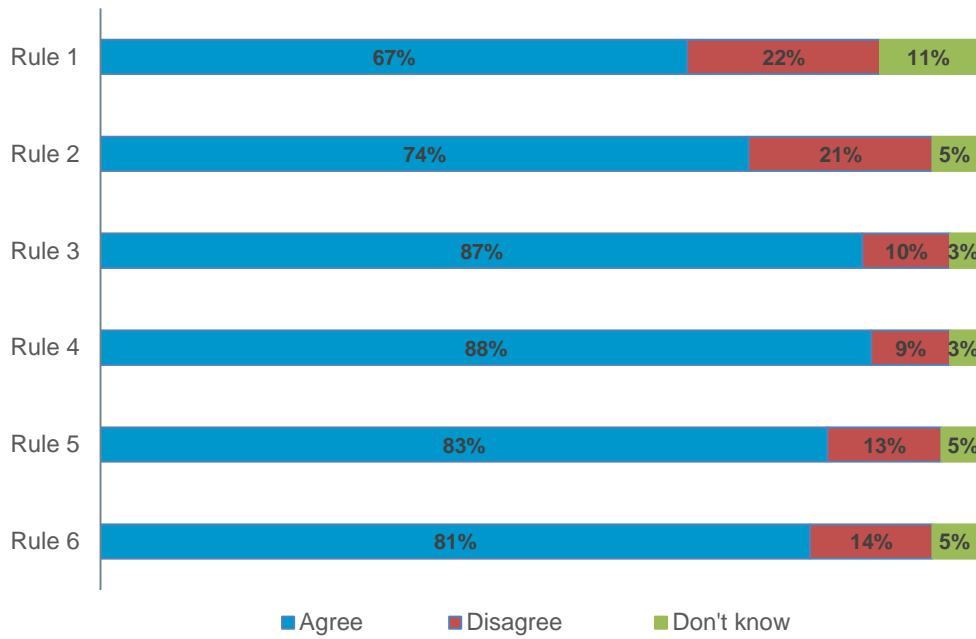


Figure 48 – (Q49) Please explain why you have chosen your least preferred zone
Base: All – 818, Zone 1 – 440, Zone 2 – 358, Zone 3 - 417



Respondents were provided with six different rules for the designated zone and were asked if they agreed or disagreed with each one. As shown in the figure below, the majority of respondents agreed with each rule. Rule 1, however, had the most respondents disagreeing with it (22%), with 67% agreeing with it. Rule 4 had the most respondents agreeing with it (88%), with 9% saying they disagreed.

Figure 49 – (Q49) Please explain why you have chosen your least preferred zone
Base: 818



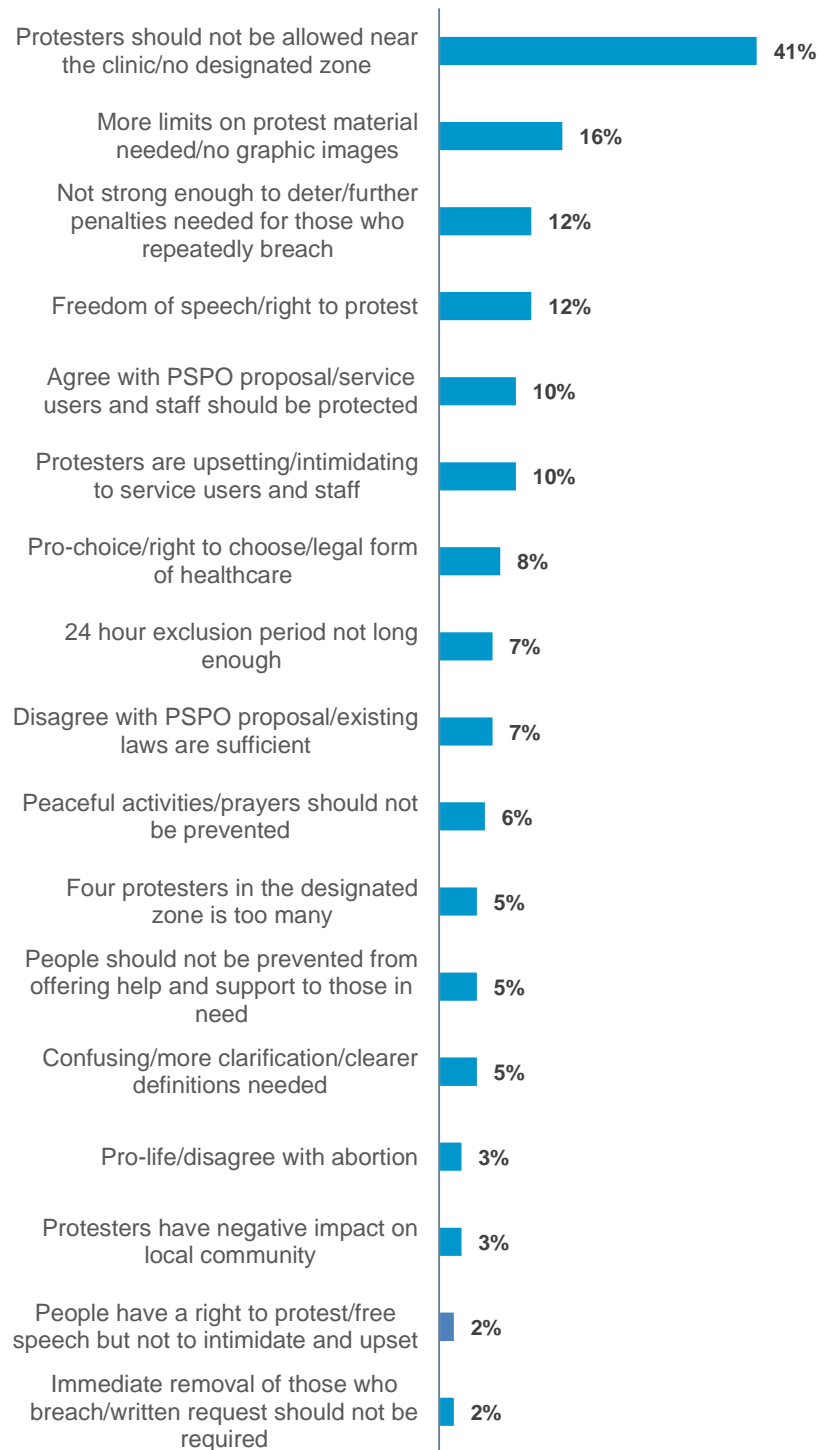
Description of each rule

1. No more than four persons may be present in the Designated Zone at any one time
2. No individual poster, text or image, singularly or collectively greater than one sheet of A3 paper may be displayed within the Designated Zone
3. A person within the Designated Zone must not shout any message or words relating to the approval / disapproval of issues related to abortion services
4. A person within the Designated Zone must not play or use amplified music, voice or audio recordings with respect the approval or disapproval of abortion services
5. A person who an Authorise Person or Constable reasonably suspects of breaching any of the prohibitions or requirements in the designated zone shall, upon valid request of an Authorised Person or Constable, leave the PFSO area within a reasonable time as specified in writing by that Authorised Person or Constable and not return within 24 hours. A requirement under this Article is not valid if the Authorised Person or Constable is asked by the person subject to the requirement to show evidence of their authorisation and they fail to do so
6. A person who an Authorised Person or Constable reasonably suspects of breaching any of the prohibitions or requirements in the designated zone shall, upon request of that Authorised Person or Constable, provide their name, address and date of birth to that Authorised Person or Constable. A requirement under this Article is not valid if the Authorised Person of Constable is asked by the person subject to the requirement to show evidence of their authorisation and they fail to do so

Respondents were asked if they had any additional information they would like to give on the proposal of having a designated zone. As shown in the figure below, 41% of respondents providing a response to this question said that protesters should not be allowed near the clinic and that there should not be a designated zone. The second most common responses, provided by 16% of respondents, was that there should be more limits on protest material and that there should not be graphic images. Other responses are shown in the figure below.

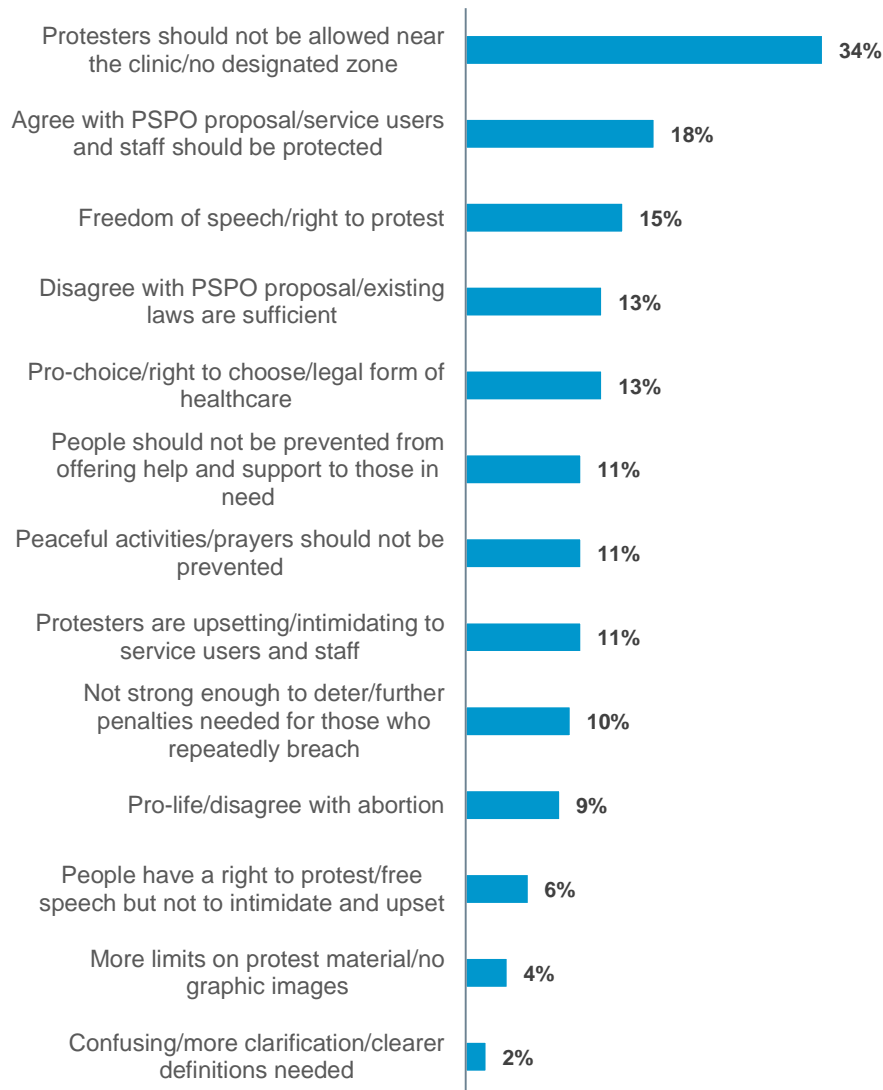
Figure 50 – (Q51) Is there any additional information you'd like to give on the proposal of having a designated zone

Base: 488



Respondents were finally asked if they had any further comments regarding the proposals including any suggestions they may have for an alternative approach. Of the respondents that provided a response, 34% said the protesters should not be allowed near the clinic and that there should not be a designated zone. A further 18% agreed with the PSPO proposal and that service users and staff should be protected. A total of 15% said that there should be freedom of speech and the right to protest. Other responses are shown in the figure below.

Figure 51 – (Q52) Please provide any further comments regarding the proposals including any suggestions you may have about an alternative approach
Base: 383



4. Organisation Responses

Five organisations provided written responses which varied in the level of detail. Responses were reviewed and a coding frame was developed in order to group and analyse the responses/key themes.

Figure 52 – Organisation responses

Base: 5

Response	Number of responses
People have freedom of speech / right to protest	4
Protesters are an invasion of privacy / reference to breach of Article 8 ECHR (rights to privacy and family life)	4
Agree with the PSPO / behaviours should be stopped	3
People have a right to free speech but not to intimidate and upset	3
Clinic staff should be able to work without harassment	3
Protesters are stressful/upsetting/negative mental health impact	3
Disagree with PSPO / existing laws are sufficient	2
Abortion is against some religions / religious beliefs/actions should not be prohibited	2
The PSPO is unlawful	2
Not appropriate to protest at/near facility	2
Pro-life counsellors offer practical help and support to those in need/enable choices to be made	1
Agree with the suggested boundaries	1

Both the British Pregnancy Advisory Service (BPAS) and Marie Stopes UK included anonymous testimonies/incident reports they had received specifically about the clinic on Wynnstay Grove from clinic staff, clients, those accompanying clients, local residents and passers-by within their written submissions to the consultation. Below is a summary.

BPAS included 29 individual reports from:

- Nine members of staff from the Wynnstay Grove clinic
- Ten clients and four from those accompanying clients
- Six local residents or passers-by

These reports date between 1995 and 2018.

Within its written submission, BPAS provided quantitative breakdowns of the activities or behaviours experienced in each incident as well as the feelings of those submitting the reports. The most common activities and behaviours reported in these forms included talking/shouting (12 reports), leaflets (10) and posters (9). Other behaviours included praying (7), filming clients (5), staring/watching (4), singing (2) and playing music (2). Key themes highlighted by BPAS were that *protesters approach and engage with clients, including shouting at them, and seeking to change their mind about seeking abortion services...protesters display placards and posters relating to abortion, and also make use of visual aids such as plastic foetus dolls...protesters make distressing and untrue claims, specifically to try and dissuade women from obtaining abortion care...other issues, including filming women, playing loud music and following women.*

When submitting forms to report an incident, BPAS also asks individuals how the incident made them feel. Emotions suggested within the reports included angry (11 reports), upset (7), intimidated (4), scared (4) and harassed (3). Based on their experience of BPAS-run clinics, their submission suggests that *the feelings clients report when presenting, having just experienced*

protests, tend to be more focused on fear and distress – and then when they revisit these experiences, anger becomes more predominant.

Marie Stopes UK (MSUK) included 50 individual reports from:

- 22 members of staff from the Wynnstay Grove clinic
- Five incidents that had been escalated to the MSUK Quality Assurance and Governance team
- 12 in-clinic incident forms, including five from members of staff at the clinic and seven from members of the Sister Supporter group (pro-choice protesters)
- Four clients and five from those accompanying clients
- Two local residents or passers-by

These reports date between 2018 and 2019.

The most common activities reported on included protesters talking or shouting, handing out leaflets (some reports suggested these contained misinformation), protesters following or approaching clients, protesters obstructing clients and staff from entering the clinic or getting into their cars, praying and displaying graphic images or using props such as plastic foetus', knitted boots and bibs. There were also reports of protesters staring or watching clients and staff, filming clients and damage to staff cars, including nails or screws in tyres. Reports often mentioned the feelings of being upset, distressed, intimidated and angry.

5. Identical Responses

The consultation received 1,051 responses via email answering most of the questionnaire. In almost all case, the responses were the same. Consequently, as these responses were not received in the correct survey format and are virtually the same, the findings have been included below in a series of tables.

5.1 Respondent type (Base 1,051)

Response	Respondents	Percentage of respondents
I live in the proposed PSPO area	-	-
I live outside the proposed PSPO area	33	3%
I am, or was, a client or visitor to Marie Stopes	1,057	96%
I am, or was, a staff member of Marie Stopes	-	-
I am a supporter of pro-choice activities	8	1%
I own or work in a local business or organisation in the proposed PSPO area	1	-

5.2 Do you agree or disagree with the boundaries of the proposed PSPO area? (Base 1,051)

Response	Percentage of respondents
Agree	0%
Disagree	100%

5.3 Protesting behaviour (Base 1,051)

Response	Response
How problematic do you think this behaviour is in the proposed PSPO area?	Not a problem - 100%
How often have you personally experienced problems with this behaviour?	Never – 100%
Do you agree or disagree that this behaviour should be included in the PSPO?	Disagree
Has this behaviour had a detrimental effect on your quality of life?	No

5.4 Interfering behaviour (Base 1,051)

Response	Response
How problematic do you think this behaviour is in the proposed PSPO area?	Not a problem - 100%
How often have you personally experienced problems with this behaviour?	Never – 100%
Do you agree or disagree that this behaviour should be included in the PSPO?	Disagree
Has this behaviour had a detrimental effect on your quality of life?	No

5.5 Intimidating or harassing behaviour (Base 1,051)

Response	Response
How problematic do you think this behaviour is in the proposed PSPO area?	Not a problem - 100%
How often have you personally experienced problems with this behaviour?	Never – 100%
Do you agree or disagree that this behaviour should be included in the PSPO?	Disagree
Has this behaviour had a detrimental effect on your quality of life?	No

5.6 Recording or photographing behaviour (Base 1,051)

Response	Response
How problematic do you think this behaviour is in the proposed PSPO area?	Not a problem - 100%
How often have you personally experienced problems with this behaviour?	Never – 100%
Do you agree or disagree that this behaviour should be included in the PSPO?	Disagree
Has this behaviour had a detrimental effect on your quality of life?	No

5.7 Displaying text or image photographing (Base 1,051)

Response	Response
How problematic do you think this behaviour is in the proposed PSPO area?	Not a problem - 100%
How often have you personally experienced problems with this behaviour?	Never – 100%
Do you agree or disagree that this behaviour should be included in the PSPO?	Disagree
Has this behaviour had a detrimental effect on your quality of life?	No

5.8 Distributing text or image photographing (Base 1,051)

Response	Response
How problematic do you think this behaviour is in the proposed PSPO area?	Not a problem - 100%
How often have you personally experienced problems with this behaviour?	Never – 100%
Do you agree or disagree that this behaviour should be included in the PSPO?	Disagree
Has this behaviour had a detrimental effect on your quality of life?	No

5.9 Amplified music, voice or audio recording behaviour (Base 1,051)

Response	Response
How problematic do you think this behaviour is in the proposed PSPO area?	Not a problem - 100%
How often have you personally experienced problems with this behaviour?	Never – 100%
Do you agree or disagree that this behaviour should be included in the PSPO?	Disagree
Has this behaviour had a detrimental effect on your quality of life?	No

5.10 Do you agree or disagree with the proposal regarding requests from officers? (Base 1,051)

Response	Response
Rule 1	Strongly disagree – 99.5% Strongly agree – 0.5%
Rule 2	Strongly disagree – 100%

5.11 View on designated zone (Base 1,051)

Response	Response
Agree or disagree with having a designated zone	Disagree - 100%

6. Key Findings

This section provides the key findings of the consultation.

Most respondents agreed with the boundaries of the proposed PSPO

Almost three-quarters (73%) of respondents said they agreed with the boundaries of the proposed PSPO area, with supporters of pro-choice activities more likely to agree than supporters of pro-life activities. Almost three in five of those that disagreed with the proposed boundaries said the area should be larger.

Interfering, protesting and intimidating or harassing behaviour were reported to be the most problematic out of all behaviours

Respondents scored these types of behaviour as the highest in terms of being a major problem with supporters of pro-choice activities and clients or visitors to Marie Stopes citing these in particular. Between 35% and 39% of respondents had experienced one of these behaviours at some point, with 16% experiencing intimidating or harassing behaviour on more than once occasion.

Two in five respondents had experienced text or images being displayed that related to the termination of pregnancy

40% of those responding to this question had experienced this behaviour, with 7% experiencing it on more than five occasions. Those most likely to have experienced it are client or visitors to Marie Stopes. Just over four in five (82%) respondents said this behaviour was a major problem.

Most respondents believed that all the behaviours should be included in the PSPO

Agreement was high for all behaviours to be included in the PSPO, but was the highest when considering intimidating or harassing behaviour, recording or photographing and the use of amplified music, voice or audio recording.

A quarter to a third of respondents said the different types of behaviour had a detrimental effect on the quality of their life

Protesting behaviour was seen by the most respondents (36%) as having a detrimental effect on the quality of life.

There are common detrimental effects on quality of life

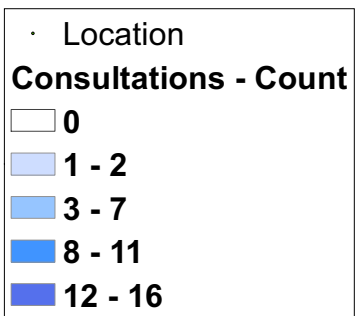
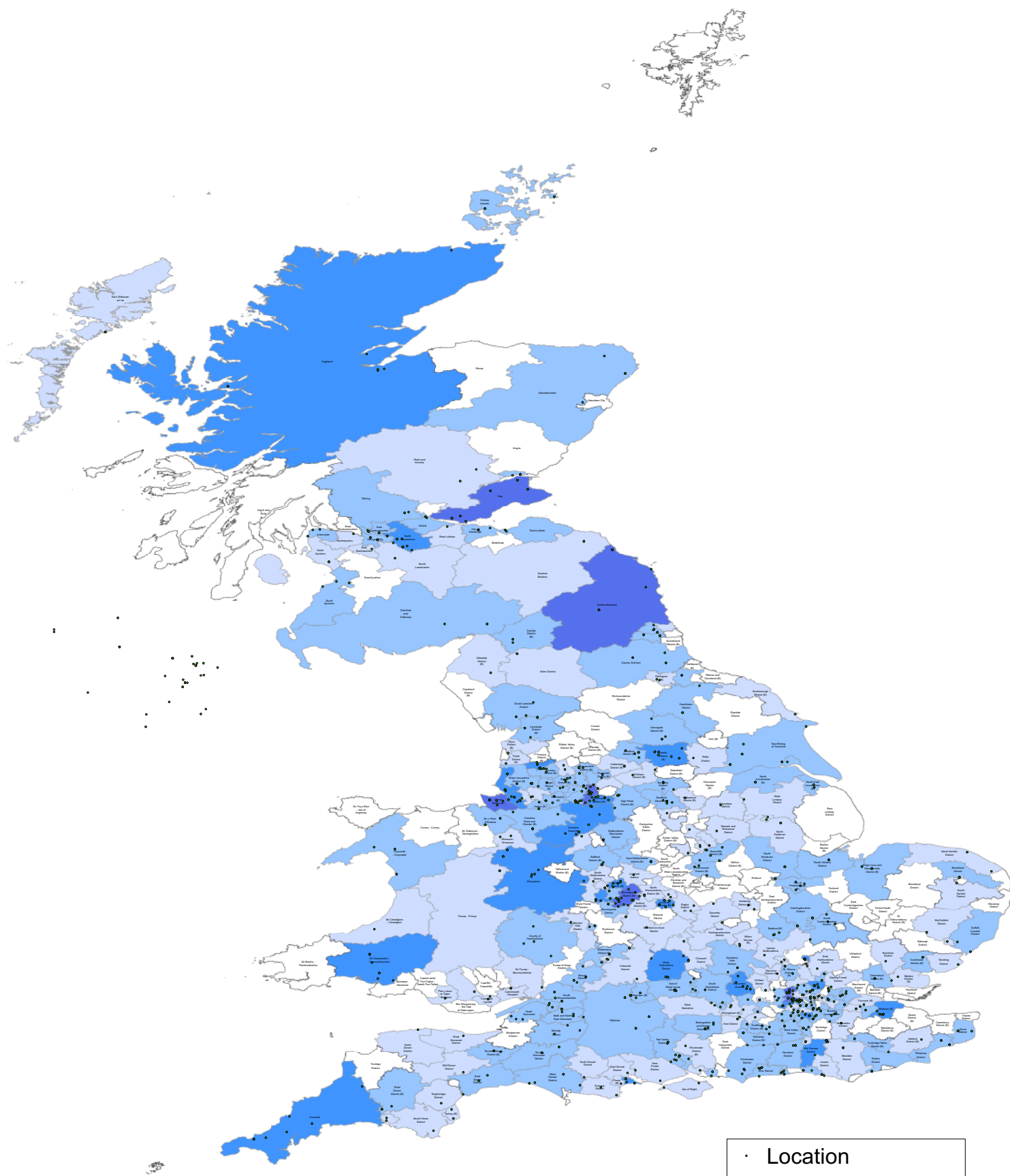
Respondents provided a variety of ways that their lives were affected in a negative way because of the different behaviours experienced. The most common affects included being upset, stressful and having a negative mental health impact and that the behaviour was intimidating, frightening for service users and staff.

Most respondents agreed with the proposals regarding requests from authorise officers

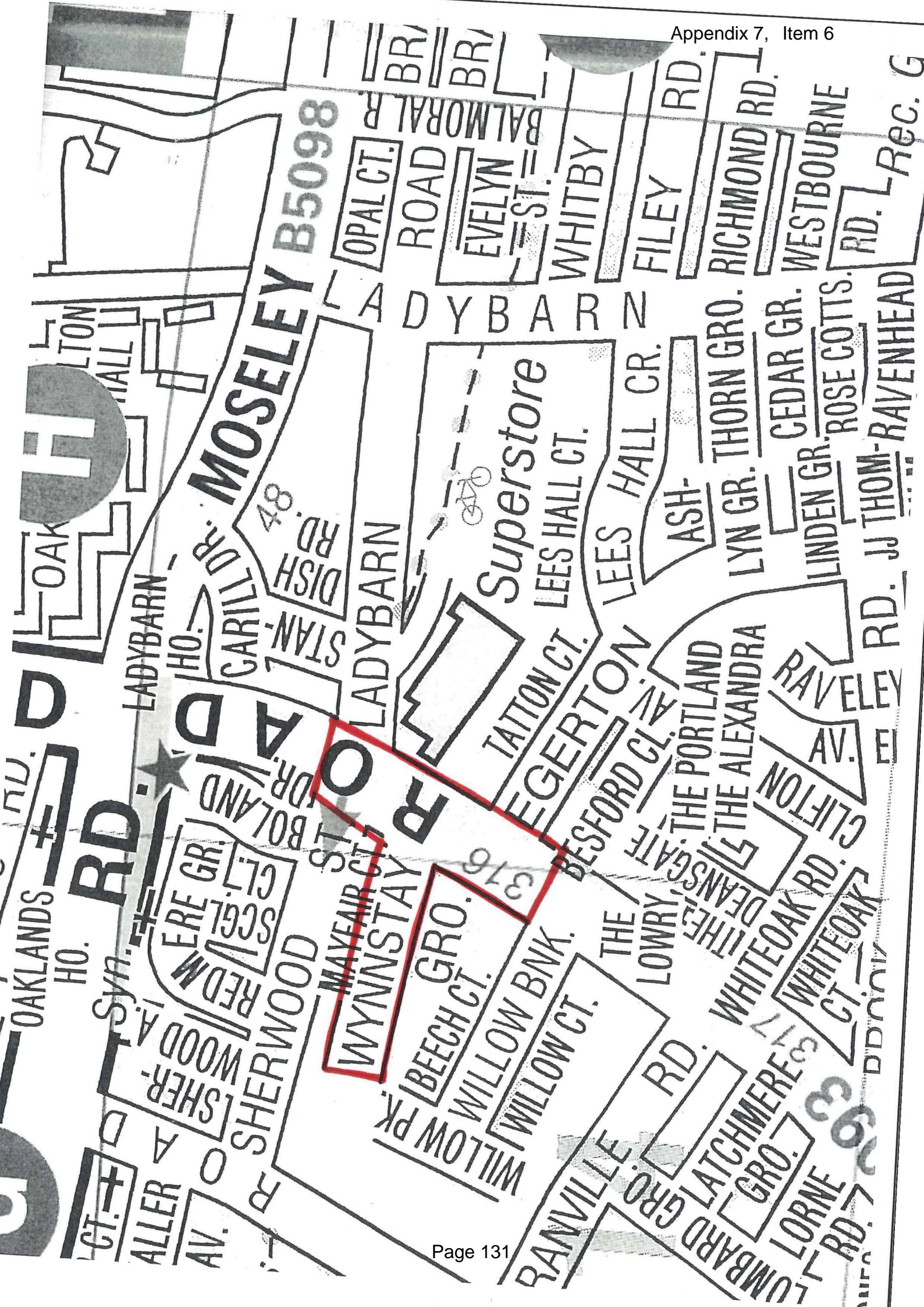
Almost nine in ten respondents agreed that authorised officers can request a protestor to leave the PSPO area and not return within 24 hours. Just over four in five respondents agreed that an authorised officer can request details such as name, address and date of birth from a protestor.

Most respondents disagreed with providing a designated zone

Almost two in five respondents said they agreed with providing a designated zone, with the largest proportion (35%) preferring Zone 1. However, many of those preferring a totally different option, did not want a zone at all, or suggested that it should be outside the PSPO boundary.



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MOSELEY B5098

MAYFAIR CT.
WYNNSTAY RD.

BEECH CT.
WILLOW CT.

Superstore
LEES HALL CT.

EGERTON
BESFORD CLIFF

THE PORTLAND
THE ALEXANDRA

WHITEOAK RD.
WHITEOAK CT.

JJ THOM-RAVENHEAD

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EQUALITY IMPACT ASSESSMENT
Wynnstay Grove Public Space Protection Order (PSPO)

1. Directorate	The Neighbourhoods Service	2. Section	Community Safety Team	3. Name of the function being assessed	Introduction and enforcement of a Public Spaces Protection Order - Wynnstay Grove
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4. Is this a new or existing function?	New function	5. Officer responsible for the assessment	Sara Duckett	6. Lead manager responsible for the assessment	Samantha Stabler
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7. Date assessment commenced	April 2020	8. Date of completion	August 2020	9. Date passed to Equality Team	April 2020
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Summary of Relevance Assessment

1. Has a Stage 1 Equality Analysis: Relevance Assessment document been completed?

Yes ✓

No

2. Please indicate which **protected characteristics** the relevance assessment identified as relevant to the function that is being assessed (tick below):

Age Disability Race Gender (inc. Gender Reassignment, Pregnancy and Maternity)

Sexual Orientation Religion or Belief (or lack of religion or belief) Marriage or Civil Partnership

3. Please indicate which **aims of the equality duty** the relevance assessment identified as relevant to the function being assessed (tick below):

Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act

Advance equality of opportunity between those who share a protected characteristic and those who do not

Foster good relations between people who share a protected characteristic and those who do not

Equality Impact Assessment

1. About your function

<p>Briefly describe the key delivery objectives of the function being assessed</p>	<p>Background</p> <ul style="list-style-type: none"> • The Antisocial Behaviour, Crime and Policing Act 2014 allows Councils to introduce Public Spaces Protection Orders (PSPO) to place controls on behaviour which is having a detrimental effect, of a persistent or continuing nature, on those in the locality (referred to in this report as “detrimental effect”). An order can be made based upon the Council being satisfied that the test for making a PSPO is met and following statutory consultation with the police, the Police and Crime Commissioner and other relevant bodies including community representatives. • The Council undertook a statutory consultation eight week consultation
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	<p>from 20 September 2019 to 15 November 2019. A draft PSPO was provided and consultees were asked for their views. The PSPO defined an area around Wynnstay Grove where the Marie Stopes UK clinic is situated. In addition, the draft PSPO contained proposals for a designated area where protests could continue to take place with certain limitations. A total of 2,172 responses to the consultation were received, which included 2,015 responses completed the survey questionnaires, 152 written submissions, 5 written submissions from organisations with an interest. The Council also received 1098 identical emails objecting to the creation of a PSPO.</p> <ul style="list-style-type: none"> • Having completed the analysis of all of the consultation responses the Council proposes to introduce and appropriately enforce a PSPO. The terms of the PSPO have been carefully assessed to ensure that each of the prohibitions and requirements meet the relevant legal threshold. • The behaviours that will be prohibited through the PSPO (if introduced) are; <ul style="list-style-type: none"> protest, namely engage in any act of approval / disapproval or attempted act of approval / disapproval, with respect to issues related to abortion services by any means. This includes but is not limited to graphic, verbal or written means, prayer or counselling. interfere, or attempt to interfere, whether verbally or physically, with a staff member or service user of the Centre. intimidate or harass, or attempt to intimidate or harass, a staff member or service user of the Centre. record or photograph a staff member or service user of the Centre without the explicit consent of that person. display any text or images relating directly or indirectly to the termination of pregnancy. distribute any text or images relating directly or indirectly to the termination of pregnancy. play amplified music, voice or audio recordings with respect to the approval or disapproval of abortion services. <p>The PSPO (if introduced) requirements are:</p>
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	<p>A person in a public place in the Restricted Area who an Authorised Person or Constable reasonably suspects of breaching any of the prohibitions or requirements in this Order shall, upon request of that Authorised Person, provide their name, address and date of birth to that Authorised Person.</p> <p>A requirement under this Article is not valid if the Authorised Person is asked by the person subject to the requirement to show evidence of their authorisation and they fail to do so.</p> <p>A person in a public place in the Restricted Area who an Authorised Person or Constable reasonably suspects of breaching any of the prohibitions or requirements in this Order shall, upon valid request of an Authorised Person or Constable, leave the Restricted Area within a reasonable time as specified in writing by that Authorised Person and not return within 24 hours.</p> <p>A requirement under this Article is not valid if the Authorised Person or Constable is asked by the person subject to the requirement to show evidence of their authorisation and they fail to do so.</p> <p>Key Delivery Objectives</p> <ul style="list-style-type: none"> • To introduce the PSPO as an additional tool to enable council and police officers to manage specific types of anti-social behaviour which is having a detrimental effect in the Wynnstay Grove area. • To raise awareness of the terms of the PSPO with all relevant groups, partners, organisations and residents who may be impacted by an order through engagement and signage prior to commencing formal enforcement. The PSPO would apply to those involved in pro-life and pro-choice activities. • Prevention of behaviour which is having a detrimental effect in the Wynnstay Grove area. • For council and police officers to continue the partnership approach to tackling behaviour which is having a detrimental effect in the Wynnstay Grove area and in accordance with the Council's Corporate Enforcement and Anti-Social Behaviour Policies.
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	<ul style="list-style-type: none"> • To protect people from behaviour which is having a detrimental effect so they feel safe living in the area, working at or visiting the Wynnstay Grove clinic. • To apply the PSPO prohibitions and requirements to all persons (save for those 17 years and under). • Meet the aims of our Equality Duties.
<p>What are the desired outcomes from this function?</p>	<ul style="list-style-type: none"> • Public awareness of the Wynnstay Grove PSPO. • A reduction in complaints of behaviour having a detrimental impact from those who live in the area, work at or visit the Wynnstay Grove area • Increased public confidence in the ability of the council and police to tackle behaviour which has a detrimental effect in the Wynnstay Grove area. • Consistency in enforcement decisions. • Compliance with the Council's Corporate Enforcement and Anti-Social Behaviour policies. • Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited in the Act. • Advance equality of opportunity between those who share a protected characteristic and those who do not. • Foster good relations between people who share a protected characteristic and those who do not.

2. About your customer

Do you currently monitor the function by the following protected characteristics?	Protected Characteristics	Y/N	If no, please explain why this is the case and / or note how you will prioritise gathering this equality data
	Race	N	This is a new function. We do not believe race is a consideration in this function.
	Gender (inc. gender reassignment, pregnancy and maternity)	N	This is a new function. The feasibility of capturing equality data will be considered 3 months after PSPO enforcement commences.
	Disability	N	This is a new function. We do not believe disability is a consideration in this function.
	Sexuality	N	This is a new function. We do not believe sexuality is a consideration in this function.
	Age	N	This is a new function. We do not believe age is a consideration in this function.
	Religion or belief (or lack of religion or belief)	N	This is a new function. The feasibility of capturing equality data will be considered 3 months after PSPO enforcement commences.
	Marriage or civil partnership	N	This is a new function. We do not believe marriage or civil partnership is a consideration in this function.
4. What information has been analysed to inform the content of this EIA?	<ul style="list-style-type: none"> • Greater Manchester Police data • Manchester City Council data • Wynnstay Grove PSPO Consultation responses • Engagement with organisations, information provided by such organisations during the course of the investigation and organisational consultation responses. 		

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3. Delivery of a customer focused function

Does your analysis indicate a disproportionate impact relating to race ?	Y	N	
		X	

<p>Please describe the nature of any disproportionate impact/s</p>	<p>The proposed PSPO will not directly or indirectly discriminate, or otherwise have a disproportionate impact on grounds of race. The Council will seek to minimise any impact through officer training and awareness. Prior to authorisation all officers will be trained to enforce the order fairly and proportionately. To promote compliance and reduce any disadvantage created by language barriers officers will have training and access to translation services.</p>
<p>Please indicate what actions will be taken to address these</p>	<p>The ONS reports the following statistics on the population of the City of Manchester from the 2011 Census. According to this data Manchester's population breakdown is as follows, the city is made up of 50% males and 50% are females. The typical age of a person in Manchester is 33. Manchester comprises people from varied ethnic groups. Among Manchester population by race, white people make up the biggest proportion 66.7%, from which 59.3% are White British, 2.4% of White are Irish, 0.1% are Gypsy and 4.9% are other White. Residents who identity as Asian make the second biggest proportion at 17.1% of the Manchester populace. Out of which, 8.5% of them are Pakistanis, 2.3% belongs to India, 2.7% of the populace belongs to China, 1.3% are Bangladeshis and 2.7% are other Asians. Black people make up 8.6% of the total population of Manchester, from which 5.1% are Africans, 1.6% of the population are Other Black, 1.9% are Arabs and 1.2% of the populace of Manchester belongs to other varied races.</p> <p>According to the latest statistics from the Department of Health and Social Care Abortion Statistics 2018 (In England and Wales), the ethnicity was recorded on 97% of the service user forms received for 2018. These are broken down as 78% reported as White, 8% as Asian or Asian British, 8% as Black or Black British, 4% as Mixed and 2% as Chinese or other ethnic</p>

group.

Within Marie Stopes UK’s consultation response there is information regarding the ethnicity of the clients who have accessed services at the clinic:

Of the over 2,800 visits to the Manchester Centre during January, February, and March 2019, clients identified as being part of the following ethnic groups (Figure 2).

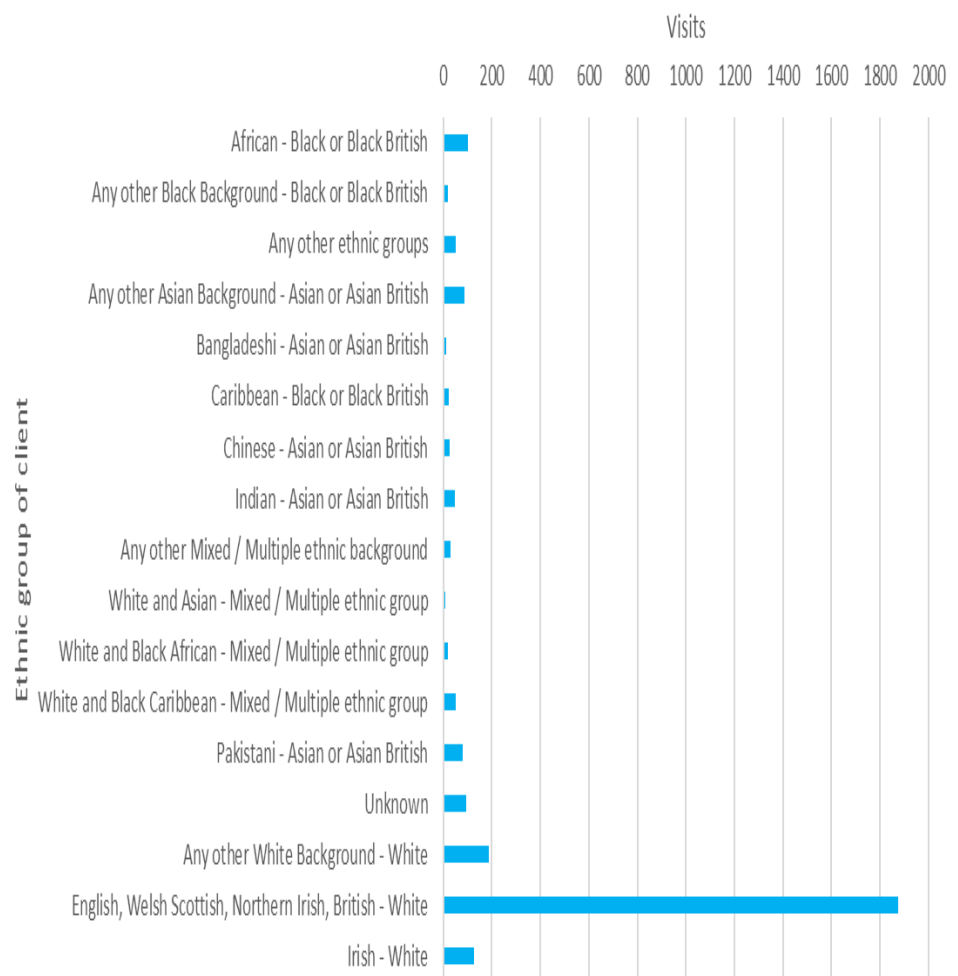


Figure 2. Client ethnicity across 2,889 visits to Marie Stopes Manchester Centre between 1/1/19 – 31/3/19

From the figures above it looks likely that white clients are over-represented in accessing the clinic’s services in comparison to the breakdown of the

	<p>COM ethnicity population. It is noted that many of Marie Stopes' clients travel from Northern Ireland, and the Republic of Ireland, where the countries' respective restrictions on abortion mean that some people travel to England to be able to access services.</p> <p>There is no specific ethnic monitoring data available for the people who attend protests / vigils outside the clinic. In the case of individuals attending to represent Pro-choice views, the impact of the PSPO is thought to be neutral as their motivation for attending is likely to be reduced. The impact on those representing Pro-life views is considered negative overall, given the restrictions it will place on their activities. However this impact is not specific to race.</p> <p>Each behaviour / requirement has been considered in relation to any discrimination or disproportionate impact;</p> <ul style="list-style-type: none"> - Protesting, namely engaging in any act of approval / disapproval or attempted act of approval / disapproval, with respect to issues related to abortion services by any means. This includes but is not limited to graphic, verbal or written means, prayer or counselling - This prohibition does not create a disproportionate impact on race. - Interfering, or attempting to interfere, whether verbally or physically, with a staff member or service user of the Centre - This prohibition does not create a disproportionate impact on race. - Intimidating or harassing, or attempting to intimidate or harass, a staff member or service user of the Centre - This prohibition does not create a disproportionate impact on race. - Recording or photographing a staff member or service user of the Centre- This prohibition does not create a disproportionate impact on race. - Displaying any text or images relating directly or indirectly to the termination of pregnancy, distributing any text or images relating directly or indirectly to the termination of pregnancy; or playing amplified music, voice or audio recordings with respect to the approval or disapproval of abortion services - This prohibition does not create a disproportionate impact on race. - Any person in a public place in the Restricted Area who an
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	<p>Authorised Person or Constable reasonably suspects of breaching any of the prohibitions or requirements in this Order shall, upon request of that Authorised Person, provide their name, address and date of birth to that Authorised Person. This requirement does not create a disproportionate impact on race.</p> <p>- A person in a public place in the Restricted Area who an Authorised Person or Constable reasonably suspects of breaching any of the prohibitions or requirements in this Order shall, upon valid request of an Authorised Person or Constable, leave the Restricted Area within a reasonable time as specified in writing by that Authorised Person and not return within 24 hours. This requirement does not create a disproportionate impact on race.</p>
<p>Which action plans have these actions been transferred to?</p>	<p>Service Plans: Awareness raising regarding the PSPO, development of partnership PSPO enforcement guidance and staff training.</p>

<p>Does your analysis indicate a disproportionate impact relating to disability?</p>	<p>Y</p>	<p>N</p>
<p>Please describe the nature of any disproportionate impact/s</p>	<p>The proposed PSPO will not directly or indirectly discriminate, or otherwise have a disproportionate impact on grounds of disability. The Council will seek to minimise any impact through officer training and awareness. Prior to authorisation all officers will be trained to enforce the order fairly and proportionately. The approach to enforcement will allow officers to consider individual circumstances to determine when help and support is the most appropriate option as an alternative to enforcement.</p> <p>Research completed by Public Health and the NHS highlights that</p>	<p>X</p>

<p>Please indicate what actions will be taken to address these</p>	<p>inequalities in sexual health mean certain groups have poorer sexual health outcomes. For example, one identified group with poorer sexual health outcomes is people with learning disabilities. It is possible, that people with learning disabilities maybe disproportionality among those accessing the clinic for services, and if so they will be positively affected by the PSPO in that they would be able to access the clinic without having to pass the vigils / protestors and access services more easily and thus there being less detrimental impact on their lives.</p> <p>Each behaviour / requirement has been considered in relation to any discrimination or disproportionate impact;</p> <ul style="list-style-type: none"> - Protesting, namely engaging in any act of approval / disapproval or attempted act of approval / disapproval, with respect to issues related to abortion services by any means. This includes but is not limited to graphic, verbal or written means, prayer or counselling - This prohibition does not create a disproportionate impact on disability. - Interfering, or attempting to interfere, whether verbally or physically, with a staff member or service user of the Centre - This prohibition does not create a disproportionate impact on disability. - Intimidating or harassing, or attempting to intimidate or harass, a staff member or service user of the Centre - This prohibition does not create a disproportionate impact on disability. - Recording or photographing a staff member or service user of the Centre - This prohibition does not create a disproportionate impact on disability. - Displaying any text or images relating directly or indirectly to the termination of pregnancy - This prohibition does not create a disproportionate impact on disability. - Distributing any text or images relating directly or indirectly to the termination of pregnancy - This prohibition does not create a disproportionate impact on disability. - Playing amplified music, voice or audio recordings with respect to the approval or disapproval of abortion services - This prohibition does not create a disproportionate impact on disability. - Any person in a public place in the Restricted Area who an Authorised Person or Constable reasonably suspects of breaching
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	<p>any of the prohibitions or requirements in this Order shall, upon request of that Authorised Person, provide their name, address and date of birth to that Authorised Person. This requirement does not create a disproportionate impact on disability.</p> <p>- A person in a public place in the Restricted Area who an Authorised Person or Constable reasonably suspects of breaching any of the prohibitions or requirements in this Order shall, upon valid request of an Authorised Person or Constable, leave the Restricted Area within a reasonable time as specified in writing by that Authorised Person and not return within 24 hours. This requirement does not create a disproportionate impact on disability. Officers will receive training and be guided to apply their discretion in the amount of time given in the circumstance a person identifies as disabled and is asked to leave the area.</p>	
<p>Which action plans have these actions been transferred to?</p>	<p>Service Plans: Awareness raising regarding the PSPO, development of partnership PSPO enforcement guidance and staff training.</p>	
<p>Does your analysis indicate a disproportionate impact relating to Gender (including gender reassignment or pregnancy and maternity)?</p>	<p>Y</p>	<p>N</p>
	<p>X</p>	

<p>Please describe the nature of any disproportionate impact/s</p> <p>Please indicate what actions will be taken to address these</p>	<p>There is no data available to confirm the gender of those who attend the clinic to protest or hold ‘vigils.’ The evidence suggests that males and females participate in both the Pro-life and Pro-choice protests and although the PSPO places restrictions on their activities, there is no evidence to suggest that these groups will be disproportionately affected by reason of their sex.</p> <p>The overwhelming majority of service users to the clinic are pregnant women and almost all of the staff and contractors working at the clinic are women. In 12 months (from 31/10/18 – 31/10/19) Marie Stopes UK has had over 5,800 clients visit the Manchester Centre for abortion consultation, counselling, abortion treatment, and post-abortion contraception appointments. The impact of a PSPO on this group will be Positive given that women as a group are disproportionately adversely affected by the behaviours the PSPO seeks to address. The PSPO will safeguard and facilitate and allow women to access the clinic without fear of harassment or having to pass a group of protestors or a vigil. The council has to consider the rights of pregnant women to access health care and advice, free from harassment, intimidation, distress and being able to access services with dignity and privacy and it is clear the activities taking place outside the clinic among the groups is having a detrimental impact on the services users lives.</p> <p>The Council have engaged with both groups over the last 18 months and offered a number of alternatives such as mediation. During discussions, the pro-life groups have advised one of the key reasons they gather outside the clinic is so they can offer support, help and counselling to the women accessing the clinic and offer them alternatives to a termination. The Council has considered this representation, but as part of our investigation we have also worked closely with the clinic who have advised that alternatives to a termination are always discussed and considered as part of the counselling and advice services users access with trained staff at the point of accessing services. As far as the Council is aware, the people engaged in Pro-life or Pro-choice protests are not trained to offer counselling. The clinic is obliged to offer non-directive counselling, from trained counsellors, as part of the Required Standard Operating Procedures (RSOPs) which govern it.</p>
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	<p>There are a range of regulated professional and voluntary services available that exist to support and help pregnant women who are experiencing crisis (such as domestic abuse, exploitation, sexual assault or financial hardship). The council will always seek to support women who are affected by these issues. However, the evidence overwhelmingly that the council has obtained during the investigation and consultation, is that the women accessing the clinic do not want to be approached when accessing the clinic or leaving the clinic, some women have reported this to be particularly distressing.</p> <p>The council hopes that the prohibitions in the PSPO will deter and ensure the behaviour from the groups is negated.</p> <p>This order will affect the protected characteristic for Gender due to pregnancy but will support and help the vast majority of women accessing the services and ensure they can access services free from harassment, intimidation and with privacy.</p> <p>Each behaviour / requirement has been considered in relation to any discrimination or disproportionate impact;</p> <ul style="list-style-type: none"> - Protesting, namely engaging in any act of approval / disapproval or attempted act of approval / disapproval, with respect to issues related to abortion services by any means. This includes but is not limited to graphic, verbal or written means, prayer or counselling – The impact of this prohibition will be positive, as women accessing the services will not have to witness or be intimidated or harassed by protestors outside the clinic which is distressing and impacts on women accessing the services the clinic offers. - Interfering, or attempting to interfere, whether verbally or physically, with a staff member or service user of the Centre – The impact of this prohibition on women accessing the services of the clinic will be positive, as women will be allowed to freely enter and leave the clinic and not be in fear of intimidation or harassment from protestors, with their privacy respected. - Intimidating or harassing, or attempting to intimidate or harass, a staff member or service user of the Centre - The impact of this prohibition on women accessing the services of the clinic will be positive, as women will be allowed to freely enter and leave the clinic
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	<p>and not be in fear of intimidation or harassment from protestors, with their privacy respected.</p> <ul style="list-style-type: none"> - Recording or photographing a staff member or service user of the Centre - The impact of this prohibition on women accessing the services of the clinic will be positive, as women will be allowed to freely enter and leave the clinic and not be in fear of intimidation or harassment from protestors, with their privacy respected. - Displaying any text or images relating directly or indirectly to the termination of pregnancy; or Distributing any text or images relating directly or indirectly to the termination of pregnancy; or Playing amplified music, voice or audio recordings with respect to the approval or disapproval of abortion services - The impact of this prohibition on women accessing the services of the clinic will be positive, as women will be allowed to freely enter and leave the clinic and not be in fear of intimidation or harassment from protestors, with their privacy respected. - Any person in a public place in the Restricted Area who an Authorised Person or Constable reasonably suspects of breaching any of the prohibitions or requirements in this Order shall, upon request of that Authorised Person, provide their name, address and date of birth to that Authorised Person. The terms of the PSPO apply to all genders. Gender is not a factor when considering any enforcement decisions and therefore this requirement means there will be no disproportionate impact on Gender. - A person in a public place in the Restricted Area who an Authorised Person or Constable reasonably suspects of breaching any of the prohibitions or requirements in this Order shall, upon valid request of an Authorised Person or Constable, leave the Restricted Area within a reasonable time as specified in writing by that Authorised Person and not return within 24 hours. The terms of the PSPO apply to all genders. Gender is not a factor when considering any enforcement decisions and therefore this requirement means there will be no disproportionate impact on Gender.
Which action plans have	Service Plans: Awareness raising regarding the PSPO, development of partnership PSPO enforcement guidance and staff training

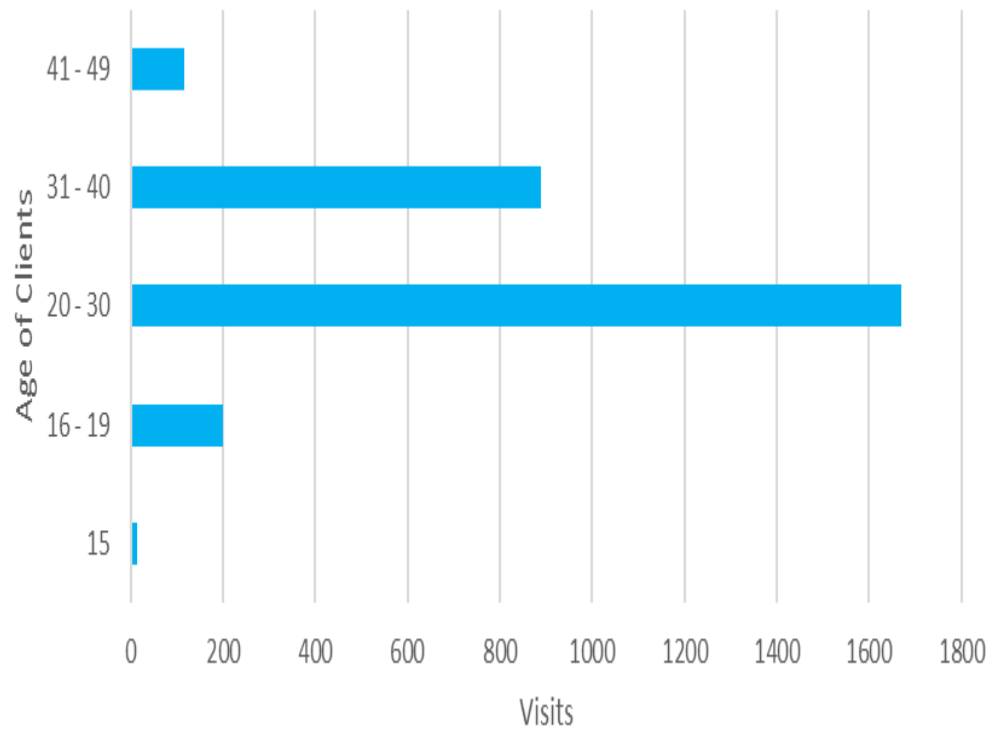


Figure 1. Client age range across 2,889 visits to Marie Stopes Manchester Centre between 1/1/19 – 31/3/19

The PSPO is likely to have a positive impact on women of reproductive age who attend the clinic because the Order would restrict behaviours that have been reported as upsetting and distressing.

We do not hold any data in relation to the age of the individuals from the Pro-life and Pro-choice groups who attend outside the clinic in order to protest and/or hold vigils, or those living in the immediate locality, or staff members. The Council understands that these groups are made up of a diverse range of ages.

The Council believes the behaviours involved in the protests or 'vigils' cause or are likely to cause a detrimental impact to people, including women of reproductive age, regardless of their age and therefore there is no disproportionate negative impact of introducing and enforcing a PSPO. The Pro-life and Pro-choice groups/individuals are free to continue their protests and/or vigils anywhere outside of the relatively small restricted area and as a result the impact on them by reason of age is likely to be neutral.

Save for children, age is not a factor that will influence any enforcement decisions. The Council's approach is not to take PSPO enforcement action

	<p>against children aged 10 – 17 years. If a child was engaged in any of the behaviours described an alternative supportive and if appropriate safeguarding response would be followed. There will be no disproportionate impact because the investigation has never found children involved in any of the behaviours detailed in the PSPO.</p> <p>Although the order will not have a discriminatory or disproportionate impact by reason of Age any possible impact will be minimised through officer training and awareness. Prior to authorisation all officers will be trained to enforce the order fairly and proportionately.</p> <p>Each behaviour / requirement has been considered in relation to any discrimination or disproportionate impact;</p> <ul style="list-style-type: none"> - Protesting, namely engaging in any act of approval / disapproval or attempted act of approval / disapproval, with respect to issues related to abortion services by any means. This includes but is not limited to graphic, verbal or written means, prayer or counselling – There is no disproportionate impact on age. - Interfering, or attempting to interfere, whether verbally or physically, with a staff member or service user of the Centre – There is no disproportionate impact of age. - Intimidating or harassing, or attempting to intimidate or harass, a staff member or service user of the Centre – There is no disproportionate impact on age. - Recording or photographing a staff member or service user of the Centre – There is no disproportionate impact on age. - Displaying any text or images relating directly or indirectly to the termination of pregnancy – There is no disproportionate impact on age. - Distributing any text or images relating directly or indirectly to the termination of pregnancy – There is no disproportionate impact on age. - Playing amplified music, voice or audio recordings with respect to the approval or disapproval of abortion services – There is no disproportionate impact on age. - Any person in a public place in the Restricted Area who an Authorised Person or Constable reasonably suspects of breaching any of the prohibitions or requirements in this Order shall, upon
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	<p>request of that Authorised Person, provide their name, address and date of birth to that Authorised Person – There is no disproportionate impact on age.</p> <ul style="list-style-type: none"> - A person in a public place in the Restricted Area who an Authorised Person or Constable reasonably suspects of breaching any of the prohibitions or requirements in this Order shall, upon valid request of an Authorised Person or Constable, leave the Restricted Area within a reasonable time as specified in writing by that Authorised Person and not return within 24 hours. There is no disproportionate impact on age.
<p>Which action plans have these actions been transferred to?</p>	<p>Service Plans: Awareness raising regarding the PSPO, development of partnership PSPO enforcement guidance and staff training.</p>

<p>Does your analysis indicate a disproportionate impact relating to sexual orientation?</p>	Y	N	
		X	
<p>Please describe the nature of any disproportionate impact/s</p> <p>Please indicate what actions will be taken to</p>	<p>There is no evidence to suggest that lesbian, gay or bi-sexual people are disproportionately represented within any group that will be affected by the PSPO. Although an order will not impact on Sexual Orientation – we will ensure any possible impact is minimised and Authorised officers are given training to enforce any order fairly and proportionately.</p> <p>Each behaviour / requirement has been considered in relation to any discrimination or disproportionate impact;</p> <ul style="list-style-type: none"> - Protesting, namely engaging in any act of approval / disapproval or attempted act of approval / disapproval, with respect to issues related 		

address these	<p>to abortion services by any means. This includes but is not limited to graphic, verbal or written means, prayer or counselling – this prohibition does not create a disproportionate impact on sexual orientation.</p> <ul style="list-style-type: none"> - Interfering, or attempting to interfere, whether verbally or physically, with a staff member or service user of the Centre - this prohibition does not create a disproportionate impact on sexual orientation. - Intimidating or harassing, or attempting to intimidate or harass, a staff member or service user of the Centre - this prohibition does not create a disproportionate impact on sexual orientation. - Recording or photographing a staff member or service user of the Centre - this prohibition does not create a disproportionate impact on sexual orientation. - Displaying any text or images relating directly or indirectly to the termination of pregnancy – this prohibition does not create a disproportionate impact on sexual orientation. - Distributing any text or images relating directly or indirectly to the termination of pregnancy – this prohibition does not create a disproportionate impact on sexual orientation. - Playing amplified music, voice or audio recordings with respect to the approval or disapproval of abortion services - this prohibition does not create a disproportionate impact on sexual orientation. - Any person in a public place in the Restricted Area who an Authorised Person or Constable reasonably suspects of breaching any of the prohibitions or requirements in this Order shall, upon request of that Authorised Person, provide their name, address and date of birth to that Authorised Person – this requirement does not create a disproportionate impact on sexual orientation. - A person in a public place in the Restricted Area who an Authorised Person or Constable reasonably suspects of breaching any of the prohibitions or requirements in this Order shall, upon valid request of an Authorised Person or Constable, leave the Restricted Area within a reasonable time as specified in writing by that Authorised Person and not return within 24 hours – this requirement does not create a
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	disproportionate impact on sexual orientation.
Which action plans have these actions been transferred to?	Service Plans: Awareness raising regarding the PSPO, development of partnership PSPO enforcement guidance and staff training.

Does your analysis indicate a disproportionate impact relating to religion and belief (including lack of religion or belief)?	Y	N	
	X		
<p>Please describe the nature of any disproportionate impact/s</p> <p>Please indicate what actions will be taken to address these</p>	<p>The analysis indicates a potential disproportionate impact on Religion and Belief.</p> <p>From the 2011 census City of Manchester residents identity as follows according to their religion or belief:</p> <ul style="list-style-type: none"> - 48.7% Christians - 24.7% Muslim - 1.1% Hindu - 0.8% Buddha - 0.5% Judaism - 0.5% Sikh - 0.5% Atheism <p>We do not hold any specific data relating to the religion or belief of residents, visitors to the PSPO area, staff members of the clinic or clinic users. We have some limited information regarding the represented groups.</p>		

	<p>In relation to the service users, some national monitoring by the BPAS in relation to religion and belief shows that in the five year period between 2013 – 2017 services users accessing abortion health care services identified as:</p> <ul style="list-style-type: none"> - 59% who identify as no religion - 21% Christian - 10% prefer not to say - 4.5% Muslim - 2% Hindu - 1% Sikh <p>This data highlights that a large proportion of women accessing the clinic identified as 'No religion' this is in contrast to the Manchester figures which does not record this. While the number of those who are identified as Christian is around half the amount of Manchester's residents, it is accepted that most people accessing the clinic are reluctant to disclose personal information. However, the information from the BPAS is useful when considering the type of activities outside the clinic, some which use Christian imagery and language in efforts to influence people leaving or arriving at the clinic. The figures suggest that most people accessing the clinic may not share the same faith or religious beliefs as those protesting or holding vigils.</p> <p>When considering the views of Pro-choice groups, Sister Supporter, one of the key prochoice groups, states on their website '<i>We are not anti-religion, nor are we pro-abortion. We are, however, opposed to anyone, with any agenda, placing themselves outside health facilities in order to discourage or deter access. This includes religious groups conducting prayer vigils in the immediate vicinity.</i>' For these reasons we would consider the effect of a PSPO on this group as neutral in relation to Religious and beliefs as a PSPO will lessen the groups need to attend the clinic.</p> <p>Those who are part of the Pro-life groups and attend to engage in vigils and protests, we once again hold little information or data on, however it is understood from our engagement and research with those representing the Pro-life groups that most individuals identify as Christian and specifically Roman Catholic. 'The <i>Good Counsel Network</i>' state on their website "<i>They are Pro-life, faithful to catholic teaching. Striving to protect women and</i></p>
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	<p><i>children from abortion.</i> ‘The 40 Days for Life’ organisation are a Christian Pro-life organisation of affiliated groups which organises campaigns and groups to protest or have vigils outside or near abortion clinics.</p> <p>The 40 Days for Life Code of Good Practice states that conduct at vigils should appeal to all Christian denominations and involves catholic prayers.</p> <p>It is therefore, possible to conclude that the majority of people who visit the area to engage in Pro-life protests and vigils identify as Christian. The proposed PSPO would place restrictions on behaviours in the locality of the Wynnstay Grove clinic that are likely to disadvantage and indirectly discriminate against these groups and individuals.</p> <p>The PSPO does not interfere with the ability of these groups/individuals to hold a religious belief. However, the primary prohibition on “protest” includes “any act of approval or disapproval, or attempted act of approval or disapproval, with respect to issues related to abortion services by any means”. The draft makes express reference to “prayer” as being included when it occurs as a form of protest as defined in the PSPO. As a result the proposed PSPO does not create a blanket ban on “prayer”, the primary restriction is on abortion related “protest” which is further defined in the order and this restriction is not connected to any religious belief.</p> <p>The council is required to balance the competing rights of those individuals who visit an area to express their religious views and beliefs against the rights of people who have experienced or likely to experience a detrimental effect associated with the behaviours involved in such an expression. Human Rights considerations are detailed separately within the Committee report.</p> <p>A PSPO will have a positive impact on those accessing the clinic for healthcare services, staff members and others within the locality. An order will restrict behaviours which have caused or are likely to cause a detrimental effect inside the restricted area which is relatively small in scope. There are no restrictions on these groups/individuals outside the restricted area.</p> <p>Any indirect discrimination is justified by reason of the need to balance the competing rights. The proposed PSPO is limited in both its terms and its geographical scope and is a proportionate and necessary response to the</p>
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	<p>detrimental effect being caused.</p> <p>The Council undertakes to complete a review of the PSPO 6 months after any enforcement commences to include the disproportionate impact on religion and belief.</p> <p>As set out above, all of the prohibitions and requirements of the PSPO may indirectly discriminate on grounds of religion and belief. It is likely that these prohibitions and requirements are most relevant to the Pro-life Christian groups. It is anticipated that if the PSPO is introduced the Pro-choice groups, particularly Sister Supporter, would consider there was a lesser need to have presence in the area. When balanced against the need to protect those accessing lawful healthcare, any indirect discrimination is both necessary and justified.</p>
<p>Which action plans have these actions been transferred to?</p>	<p>Service Plans: Awareness raising regarding the PSPO, development of partnership PSPO enforcement guidance and staff training.</p>

Does your analysis indicate a disproportionate impact relating to marriage or civil partnership ?	Y	N	
<p>Please describe the nature of any disproportionate impact/s</p> <p>Please indicate what actions will be taken to address these</p>	<ul style="list-style-type: none"> - The proposed PSPO will not directly or indirectly discriminate, or otherwise have a disproportionate impact on grounds related to marriage or civil partnership. Although an order will not have a discriminatory or disproportionate effect on this group, any possible impact will be minimised through officer training and awareness. Prior to authorisation all officers will be trained to enforce the order fairly and proportionately. <p>Each behaviour / requirement has been considered in relation to any discrimination or disproportionate impact;</p> <ul style="list-style-type: none"> - Protesting, namely engaging in any act of approval / disapproval or 		

	<p>attempted act of approval / disapproval, with respect to issues related to abortion services by any means. This includes but is not limited to graphic, verbal or written means, prayer or counselling – this prohibition does not create a disproportionate impact on marriage or civil partnership.</p> <ul style="list-style-type: none"> - Interfering, or attempting to interfere, whether verbally or physically, with a staff member or service user of the Centre - – this prohibition does not create a disproportionate impact on marriage or civil partnership. - Intimidating or harassing, or attempting to intimidate or harass, a staff member or service user of the Centre - – this prohibition does not create a disproportionate impact on marriage or civil partnership. - Recording or photographing a staff member or service user of the Centre - – this prohibition does not create a disproportionate impact on marriage or civil partnership. - Displaying any text or images relating directly or indirectly to the termination of pregnancy – – this prohibition does not create a disproportionate impact on marriage or civil partnership. - Distributing any text or images relating directly or indirectly to the termination of pregnancy – this prohibition does not create a disproportionate impact on marriage or civil partnership. - Playing amplified music, voice or audio recordings with respect to the approval or disapproval of abortion services -- this prohibition does not create a disproportionate impact on marriage or civil partnership. - Any person in a public place in the Restricted Area who an Authorised Person or Constable reasonably suspects of breaching any of the prohibitions or requirements in this Order shall, upon request of that Authorised Person, provide their name, address and date of birth to that Authorised Person. This requirement does not create a disproportionate impact on marriage or civil partnership. - A person in a public place in the Restricted Area who an Authorised Person or Constable reasonably suspects of breaching any of the prohibitions or requirements in this Order shall, upon valid request of an Authorised Person or Constable, leave the Restricted Area within a reasonable time as specified in writing by that Authorised Person and not return within 24 hours. This requirement does not create a
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	disproportionate impact on marriage or civil partnership.
Which action plans have these actions been transferred to?	Service Plans: Awareness raising regarding the PSPO, development of partnership PSPO enforcement guidance and staff training.

4. EIA Action Plan

Service / Directorate lead: Samantha Stabler, Community Safety Lead

Strategic Director: Fiona Worrall, Strategic Director - Neighbourhoods

Actions identified from EIA	Target completion date	Responsible Officer	Is this action identified in your Directorate Business Plan and / or Equality Action Plan? (Yes / No / n/a)	Comments
Development of officer training plan	October	Samantha Stabler	N/A	This EIA is part of the Equality Action Plan. This action is part of the service plan.
Development of officer enforcement guidance	October	Samantha Stabler	N/A	This EIA is part of the Equality Action Plan. This action is part of the service plan.
Officer training	November	Samantha Stabler	N/A	This EIA is part of the Equality Action Plan. This action is part of the service plan. Linked to relevant guidance, policies

Actions identified from EIA	Target completion date	Responsible Officer	Is this action identified in your Directorate Business Plan and / or Equality Action Plan? (Yes / No / n/a)	Comments
				procedures and this EIA.
Review the feasibility of capturing equality data	3 months from the date enforcement commences	Samantha Stabler	N/A	This EIA is part of the Equality Action Plan. This action is part of the service plan.

5. Director level sign off

Name: Fiona Worrall, Strategic Director - Neighbourhoods	Date:
Directorate: Neighbourhoods Directorate	Signature:

NB: Sign-off must be in the form of an actual signature; not an emailed authorisation.

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**Manchester City Council
Report for Information**

Report to: Communities and Equalities Scrutiny Committee – 3 September 2020

Subject: Overview Report

Report of: Governance and Scrutiny Support Unit

Summary

This report provides the following information:

- Recommendations Monitor
- Key Decisions
- Items for Information
- Work Programme

Recommendation

The Committee is invited to discuss the information provided and agree any changes to the work programme that are necessary.

Contact Officer:

Name: Rachel McKeon
Position: Scrutiny Support Officer
Telephone: 0161 234 4997
Email: rachel.mckeon@manchester.gov.uk

Background documents (available for public inspection):

None

1. Monitoring Previous Recommendations

This section of the report lists recommendations made by the Committee and responses to them indicating whether the recommendation will be implemented and, if it will be, how this will be done.

Date	Item	Recommendation	Action	Contact Officer
7 December 2017	CESC/17/48 Volunteering – Timebanks	To ask Equality Lead Members to consider what role they could play in enabling timebanking to reach different communities, including consideration of specific timebanks around protected characteristics.	A response to this recommendation has been requested and will be reported back to the Committee via the Overview Report.	Keiran Barnes, Equality Team Leader
11 October 2018	CESC/18/39 Widening Access and Participation, Leisure, Libraries, Galleries and Culture – Update	To request that data on which wards the users of individual leisure facilities lived in be circulated to Members.	A response to this recommendation has been requested and will be circulated to Members.	Lee Preston, Sport and Leisure Lead
6 December 2018	CESC/18/54 Update on Revenue Financial Strategy and Business Plan Process 2019/20	To ask the Chief Operating Officer (Neighbourhoods) to confirm the implications of the change of management for staff employed at the Powerleague in Whalley Range.	A response to this recommendation has been requested and will be reported back to the Committee via the Overview Report.	Fiona Worrall, Strategic Director (Neighbourhoods)
25 June 2020	CESC/20/24 COVID-19 - Update	To request that a copy of the letter sent to the Secretary of State raising issues about the recovery of the culture sector in Manchester be circulated to Members of the Committee and that any response also be circulated.	A response to this recommendation was emailed to Members on 20 July 2020.	Neil MacInnes, Head of Libraries, Galleries and Culture

2. Key Decisions

The Council is required to publish details of key decisions that will be taken at least 28 days before the decision is due to be taken. Details of key decisions that are due to be taken are published on a monthly basis in the Register of Key Decisions.

A key decision, as defined in the Council's Constitution is an executive decision, which is likely:

- To result in the Council incurring expenditure which is, or the making of savings which are, significant having regard to the Council's budget for the service or function to which the decision relates, or
- To be significant in terms of its effects on communities living or working in an area comprising two or more wards in the area of the city.

The Council Constitution defines 'significant' as being expenditure or savings (including the loss of income or capital receipts) in excess of £500k, providing that is not more than 10% of the gross operating expenditure for any budget heading in the in the Council's Revenue Budget Book, and subject to other defined exceptions.

An extract of the most recent Register of Key Decisions, published on **20 August 2020** containing details of the decisions under the Committee's remit is included below. This is to keep members informed of what decisions are being taken and, where appropriate, include in the work programme of the Committee.

Register of Key Decisions:

Subject / Decision	Decision Maker	Decision Due Date	Consultation	Background documents	Officer Contact
National Taekwondo Centre 2018/10/19A Enter into a 39 year lease with Sport Taekwondo UK Ltd for areas within the building.	Chief Executive	Not before 1st Nov 2018		Briefing Note and Heads of Terms	Richard Cohen r.cohen@manchester.gov.uk
Leisure Services - External Ref: 2016/02/01C	City Treasurer (Deputy Chief	Not before		Business Case	Lee Preston l.preston2@manchester.gov.

The approval of capital expenditure on external Leisure Services land and buildings.	Executive)	1st Mar 2019			uk
The Factory - Budget Allocation of Inflation (2020/08/04B) Approval to spend the Budget allocation of inflation for The Factory.	City Treasurer (Deputy Chief Executive)	Not before 2nd Sep 2020		Report to The Executive 3 June 2020- Capital Budget Update Report	Jared Allen j.allen4@manchester.gov.uk
Financial approval of MCR Active Contract 2020/21(2020/02/04A) To seek financial approval of 2nd year of MCR Active Contract for period 1st April 2020 to 31st March 2021.	Executive	11 Mar 2020		Executive report	Yvonne O'Malley, Lord Mayor Charity y.omalley@manchester.gov.uk
Wynnstay Grove Public Space Protection Order (2019/01/08A) To grant a Public Space Protection Order to address anti-social behaviour outside the Marie Stopes Abortion Clinic on Wynnstay Grove.	Strategic Director (Neighbourhoods)	Not before 1st Apr 2020		Consultation responses and covering report	Sam Stabler s.stabler@manchester.gov.uk
Public Space Protection Orders - Alleygating and Alcohol (2020/06/12A) Decision to extend existing public space protection orders for alleygating (formerly Gating Orders) and	Strategic Director (Neighbourhoods)	Not before 1st Sep 2020		Consultation responses and covering report	Sam Stabler s.stabler@manchester.gov.uk

whether or not to introduce new public space protection orders for alcohol (formerly Designated Public Place Orders)					
<p>Enforcement against spitting using littering legislation (2020/08/04A)</p> <p>To deal with incidents of spitting using littering legislation, under section 87/88 Environmental Protection Act 1990. Enforcement is to consist of the issuing of Fixed Penalty Notices and/or prosecution where appropriate.</p>	Strategic Director (Neighbourhoods)	Not before 2nd Sep 2020		Report and Recommendation	Sam Kinsey s.kinsey@manchester.gov.uk
<p>Extra Care - Russell Road LGBT Project 2019/03/01H</p> <p>The approval of capital expenditure on the City's Extra Care Programme to develop new build extra care units which will be in the ownership of MCC.</p>	City Treasurer (Deputy Chief Executive)	Not before 1st Mar 2019		Checkpoint 4 Business Case	Steve Sheen s.sheen@manchester.gov.uk

**Communities and Equalities Scrutiny Committee
Work Programme – September 2020**

Thursday 3 September 2020, 2.00 pm (Report deadline Friday 21 August 2020)				
Item	Purpose	Executive Member	Strategic Director/ Lead Officer	Comments
Peterloo Memorial	To receive an update report on the Peterloo Memorial in relation to accessibility for disabled people.	Councillor Rahman Councillor Akbar	Louise Wyman/ Pat Bartoli	Invite Deansgate ward councillors
Public Space Protection Orders around abortion-providing clinics	To receive an update in relation to Public Space Protection Orders around abortion-providing clinics.	Councillor N Murphy	Fiona Ledden/ Fiona Worrall/ Sam Stabler	See June 2019 minutes
Update on COVID-19	To receive an update of the city's response and recovery work focusing on areas within the Committee's remit.		Fiona Worrall	
Overview Report	The monthly report includes the recommendations monitor, relevant key decisions, the Committee's work programme and any items for information.	-	Rachel McKeon	

Thursday 8 October 2020, 2.00 pm (Report deadline Monday 28 September 2020)				
Item	Purpose	Executive Member	Strategic Director/ Lead Officer	Comments
Update on COVID-19	To receive an update of the city's response and recovery work focusing on areas within the Committee's remit.		Fiona Worrall	TBC

Voluntary Community and Social Enterprise (VCSE) Sector	To receive a report on the VCSE sector including: <ul style="list-style-type: none"> • How the support being provided by the infrastructure support services has changed in response to COVID-19 • Impact of COVID-19 on community groups • Equalities monitoring of funded groups 	Councillor Stogia	Fiona Worrall/ Michael Salmon	See July 2020 minutes
Equalities	To receive a report to include: <ul style="list-style-type: none"> • The Council's response to Black Lives Matter • How the Council has been using Equality Impact Assessments including how they will be used in the COVID-19 recovery work • How equality compliance is monitored within the organisations that receive Our Manchester funding 	Councillor Akbar	Fiona Ledden/ James Binks/ Keiran Barnes	See July 2020 minutes
Overview Report		-	Rachel McKeon	

Items To be Scheduled				
Item	Purpose	Executive Member	Strategic Director/ Lead Officer	Comments
Domestic Violence and Abuse	To receive a report on Domestic Violence and Abuse Support Services including: <ul style="list-style-type: none"> • information on the Sanctuary Scheme, including figures on how many sanctuary installations have been carried • information on how many Manchester families fleeing domestic violence are re-housed outside of the city 	Councillor Murphy	Fiona Worrall/ Sam Stabler/ Delia Edwards	See July 2020 minutes
Digital Inclusion	To receive a report on digital exclusion and work to address this. To include information on how this	Councillor Craig	Angela Harrington	TBC See July 2020

	varies across different parts of the city.	Councillor Rahman		minutes
Engagement	To receive a report on how the Council engages with residents.	Councillor Murphy	Alun Ireland	TBC See July 2020 minutes