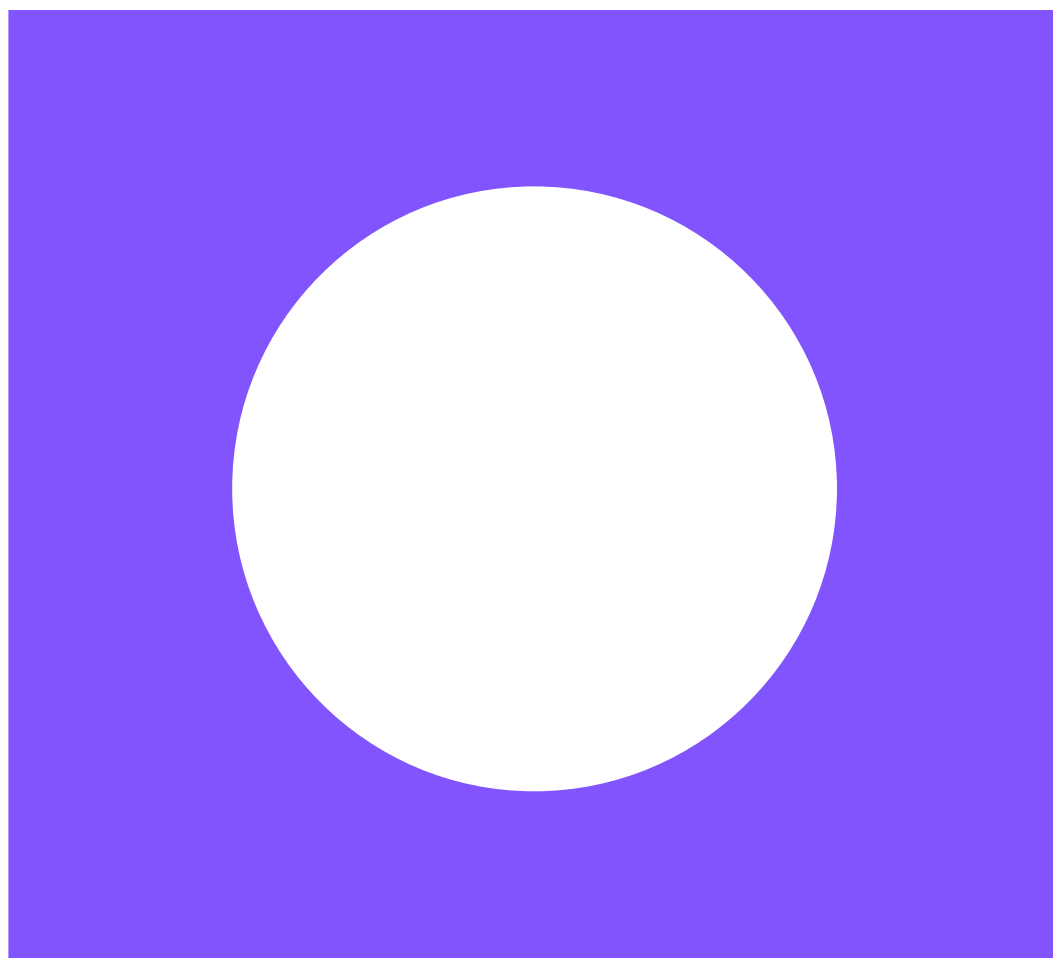




Teviot Estate Regeneration Phase 1

Equality Impact Assessment

September 2025

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Mott MacDonald
10 Fleet Place
London EC4M 7RB
United Kingdom

T +44 (0)20 7651 0300

F

mottmac.com

Teviot Estate Regeneration Phase 1

Equality Impact Assessment

September 2025

Issue and Revision Record

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B	February 24	EW	SM	JB	Final Report
C	April 2025	GH	EW	JB	Update to report to reflect new planning programme
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Contents

1	Executive summary	2
1.1	Overview of the commission	2
1.2	The Equality Impact Assessment	2
1.3	Approach to the EqIA	2
1.4	Findings of the EqIA	3
2	Introduction	5
2.1	Overview	5
2.2	The Equality Impact Assessment	5
2.2.1	Equality Impact Assessment and the Public Sector Equality Duty	5
2.2.4	Assessing equality effects	6
2.2.8	Protected characteristics	6
2.3	Overall approach to the EqIA	8
2.3.2	Tasks undertaken	8
2.4	Methodology for identifying and assessing equality effects	9
2.4.1	Identifying potential equality effects	9
2.4.4	Types of equality effects considered	10
3	Teviot Estate context and background	11
3.1	Overview of Teviot Estate	11
3.1.4	Local context and need	11
3.1.10	Strategic context	12
3.2	Scheme overview and background	14
3.2.3	2019 Offer and Ballot	14
3.2.8	Current Scheme proposals	15
3.2.12	Overview of proposals	15
3.2.17	Overview of Phase 1	16
3.3	Compulsory Purchase Order	17
3.3.7	Position on site	18
3.3.15	Approach to buybacks	20
4	Summary evidence review	21
4.1	Existing published evidence	21
4.2	Resident and stakeholder engagement	25
4.2.1	Resident Steering Group	25
4.2.6	Public consultation	25
4.2.12	Public consultation findings	26
4.2.14	Additional consultation findings	27
5	Area profile and proportionality	28

5.1	Overview of the socio-demographic profile of the Site	28
5.1.7	Additional socio- demographic data	30
5.2	Community facilities	32
5.3	Businesses	32
5.3.5	Additional socio-demographic information	34
6	Impact Assessment	35
6.2	Impact on existing residents during redevelopment	35
6.3	Impact on local community and community resources during redevelopment	40
6.4	Impact on the community following redevelopment	44
7	Conclusion and Action Plan	50
7.1	Conclusion	50
7.2	Action Plan	50
A.	Local Area Profile	53
A.1	Overview	53
A.2	Age	54
A.3	Disability	55
A.4	Gender reassignment	55
A.5	Marriage and civil partnership	56
A.6	Race and ethnicity	57
A.7	Pregnancy and maternity	58
A.8	Religion and belief	59
A.9	Sex	59
A.10	Sexual orientation	60
A.11	Socio-economic data	60
B.	Literature Review	62
B.1	Impact on existing residents during redevelopment	62
B.2	Impact on community and community resources during redevelopment	67
B.3	Impact on community following redevelopment process	75
C.	Engagement	81
C.1	Surveys	81

1 Executive summary

1.1 Overview of the commission

- 1.1.1 Mott MacDonald has been commissioned by Poplar Housing and Regeneration Community Association (HARCA) to undertake an Equality Impact Assessment (EqIA) of the redevelopment of Teviot Estate ('the scheme').
- 1.1.2 This EqIA considers the regeneration proposals for the whole of the Teviot Estate scheme and in particular the Compulsory Purchase Order plans in areas of Phase 1 of the scheme.
- 1.1.3 This report presents an update to the EqIA submitted in March 2024 to reflect changes to the phasing of the scheme.
- 1.1.4 The entire Teviot regeneration scheme intends to deliver new, social, affordable, and private homes, new commercial and retail space, new community facilities, a new Mosque, and an upgraded public realm. Phase 1 of the scheme will deliver 475 new homes (of which 45% of habitable rooms will be affordable), and upgrades to the public realm.

1.2 The Equality Impact Assessment

- 1.2.1 The EqIA focusses on the potential effects likely to be experienced by those living, visiting and working in the community in light of their 'protected characteristics', as defined under the Equality Act 2010. The protected characteristics are: age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex, and sexual orientation.
- 1.2.2 The EqIA identifies any disproportionate effects (both beneficial and adverse) on those with protected characteristics that may arise from the Compulsory Purchase Order and the redevelopment of the Scheme. The EqIA sets out any embedded actions that Poplar HARCA and Teviot Estate Development LLB have put in place throughout design and development of the scheme to mitigate any risk.

1.3 Approach to the EqIA

- 1.3.1 The EqIA considers the impacts of the redevelopment process – particularly the impact on existing residents and users of community resources in the local area. The assessment also explores the impact of the delivery of the scheme on the current and future community.
- 1.3.2 Assessment of equality effects has been undertaken in light of the characterisation of potential effects – including sensitivity of the affected parties to the scheme, the

distribution of those groups in the Site, the nature of the effect, and mitigation measures in place to address the effect.

1.3.3 The EqlA has identified several potential equality impacts that could arise from the scheme.

1.3.4 These have been split into three broad categories:

- Potential impacts on existing residents during redevelopment
- Potential impacts on users of community resources during redevelopment
- Potential impacts on the community following redevelopment

1.4 Findings of the EqlA

1.4.1 The research and analysis process for this EqlA has identified several opportunities and risks which could arise due to the delivery of the scheme. Some of the people living, working and accessing services in local area are likely to experience these effects differentially or disproportionately as a result of their protected characteristics.

1.4.2 Opportunities for positive equality effects have been identified which are associated with the following scheme elements:

- The delivery of new spaces for use by the local community and community resources
- The delivery of new and improved housing
- The delivery of a new, upgraded and more accessible public space

1.4.3 Some adverse effects are likely to arise as a result of the construction of the Scheme for existing residents and the local community, however, Poplar HARCA has embedded a series of measures within the design and delivery of the project to help mitigate and manage these impacts. These are outlined within Chapter 6: Impact Assessment.

1.4.4 There is the potential for some adverse effects in the use of Compulsory Purchase Order powers, but their use will be dependent upon HARCA's ability to negotiate voluntary settlements with affected parties.

1.4.5 In order to further mitigate any remaining equality risk within the scheme, the EqlA recommends a series of actions which HARCA should consider (see Section 7.2). Key recommendations include but are not limited to:

- All tenants in Phase 1 with a right to return should have the chance to be relocated, if they so wish, as close to the Estate as possible in order to maintain social ties and are able to easily access community resources. Ideally, this would be within a 15-minute walk.
- Housing need assessments for secure and non-secure tenants eligible for rehousing onsite should be regularly updated to ensure that the new home offer meets the need of each household.
- Continue to produce user-friendly information for the scheme for affected parties, providing information on the steps required throughout the CPO process. The guide should consider timescales and details of the scheme and compensation.
- Ensure that improvements to public space (including the pedestrian environment and play spaces on the Site) appropriately consider best practice in accessible and

inclusive (including gender- inclusive) design, benefitting women and girls and older and disabled people, including those with mobility and sensory impairments.

- Continue to work with groups which are less likely to take part in traditional consultations to develop plans for the site.

1.4.6 It is also recommended that the EqIA is updated at further decision and design points.

2 Introduction

2.1 Overview

- 2.1.1 Mott MacDonald has been commissioned by Poplar Housing and Regeneration Community Association (HARCA) to undertake an Equality Impact Assessment (EqIA) for the whole of the redevelopment of Teviot Estate ('the scheme'), including London Borough of Tower Hamlets use of Compulsory Purchase Powers to acquire land necessary for Phase 1 of the scheme.
- 2.1.2 This report provides the context of the scheme, the requirements of the Equality Act 2010 ('the Equality Act'), and the potential impacts of the Scheme on people with characteristics protected under the Equality Act.
- 2.1.3 Protected characteristics include the following (as defined by the Equality Act):¹ age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex, and sexual orientation.
- 2.1.4 The report outlines the findings of the assessment and provides recommendations for mitigation and further enhancement where appropriate.

2.2 The Equality Impact Assessment

2.2.1 Equality Impact Assessment and the Public Sector Equality Duty

- 2.2.2 The EqIA has been undertaken in support of the Council's obligations under UK equality legislation, and in particular the Equality Act. The Act sets out a Public Sector Equality Duty (PSED), at section 149, and is set out in the Figure below.

Figure 2.1: Article 149 of the Equality Act 2010: The Public Sector Equality Duty

- (1) A public authority must, in the exercise of its functions, have due regard to the need to
 - (a) eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
 - (b) advance equality of opportunity between persons who share a relevant protected characteristics and persons who do not share it.
 - (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
- (2) A person who is not a public authority but who exercises public functions must, in the exercise of those functions, have due regard to the matters mentioned in subsection (1).
- (3) Having due regard to the need to advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it involves having due regard, in particular, to the need to –

¹ Government Equalities Office/Home Office (2010): 'Equality Act 2010' Available at: www.legislation.gov.uk

- (a) remove or minimise disadvantages suffered by persons who share a relevant protected characteristic that are connected to that characteristic;
- (b) take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of persons who do not share it;
- (c) encourage persons who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.

Source: The Equality Act, 2010

2.2.3 The PSED is intended to support good decision-making. It encourages public bodies such as the Council to understand how different people will be affected by their activities. This helps to ensure policies and services are appropriate and accessible to all and meet different people's needs. The Council must demonstrate that it has shown due regard to the aims of the PSED throughout the decision-making process for making the CPO. The process used to do this must take account of the protected characteristics which are identified below in section 2.2.34.

2.2.4 Assessing equality effects

2.2.5 While the PSED does not specify a particular process for considering the likely effects of policies, programmes, and projects on different sections of society for public authorities to follow, this process is usually undertaken through some form of equality analysis. This can include EqIA.

2.2.6 By understanding the effect of their activities on different people, and how inclusive delivery can support and open up opportunities, public bodies can be more efficient and effective. The PSED therefore helps public bodies to deliver the Government's overall objectives for public services.

2.2.7 The PSED specifies that public bodies should minimise disadvantages experienced by people due to their protected characteristics, take steps to meet the different needs of people from protected groups, and encourage participation from these groups where participation is disproportionately low. Undertaking equality analysis such as an EqIA helps to demonstrate how a public body is complying with the PSED by:

- providing a written record of the equality considerations which have been taken into account;
- ensuring that decision-making includes consideration of the action that would help to avoid or mitigate any negative impacts on particular protected groups; and
- supporting evidence-based and more transparent decision-making.

2.2.8 Protected characteristics

2.2.9 An EqIA provides a systematic assessment of the likely or actual effects of policies or proposals on social groups with the following protected characteristics (as defined by the Equality Act):

Table 2.1: Protected characteristics definition

Protected characteristic	Equality and Human Rights Commission (EHRC) definition
Age	A person belonging to a particular age (for example 32-year olds) or range of ages (for example 18 to 30-year olds).

Protected characteristic	Equality and Human Rights Commission (EHRC) definition
Disability	A person has a disability if she or he has a physical or mental impairment which has a substantial and long-term adverse effect on that person's ability to carry out normal day-to-day activities.
Gender reassignment	The process of transitioning from one gender to another.
Marriage and civil partnership	Marriage is a union between a man and a woman or between a same-sex couple. Couples can also have their relationships legally recognised as 'civil partnerships'. Civil partners must not be treated less favourably than married couples (except where permitted by the Equality Act).
Pregnancy and maternity	Pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth and is linked to maternity leave in the employment context. In the non-work context, protection against maternity discrimination is for 26 weeks after giving birth, and this includes treating a woman unfavourably because she is breastfeeding.
Race	Refers to the protected characteristic of race. It refers to a group of people defined by their race, colour, and nationality (including citizenship) ethnic or national origins.
Religion and belief	Religion has the meaning usually given to it but belief includes religious and philosophical beliefs including lack of belief (such as Atheism). Generally, a belief should affect someone's life choices or the way they live for it to be included in the definition.
Sex	A man or woman
Sexual orientation	Whether a person's sexual attraction is towards their own sex, the opposite sex or to both sexes.

Source: Equality Act, 2010 and Equality and Human Rights Commission, 2019

2.2.10 For the purposes of this EqIA, groups with protected characteristics have been identified based on the desk-based evidence review to improve the assessment.

- Within 'age', all age ranges are considered, but specific sub-categories include children (aged under 16 years), younger people (aged 16-24 years), and older people (aged 65 or over).
- Within 'race', all races and ethnicities are considered, but the sub-category of Ethnic Minority is identified to refer to non-White British communities.
- Within 'religion and belief', all religious and belief groups are considered, but the term 'Minority faith groups' refers to religious groups who are not Christian (Buddhist, Hindu, Jewish, Muslim, Sikh, and 'other').
- Within 'sexual orientation' and 'gender reassignment', all sexual orientations and gender statuses are considered.
- Within 'sex', the sub-categories of men and women are used.
- Within 'pregnancy and maternity', pregnant women are reported as a sub-category where the effect only relates to pregnancy.

2.2.11 In addition to the protected characteristic groups set out above, it has been considered appropriate to include people from deprived communities to the assessment as there are areas of deprivation within the local area.

2.2.12 The analysis determines the likely or actual effects of the scheme on protected characteristic groups by:

- Assessing whether one or more of these groups could experience disproportionate effects (over and above the effects likely to be experienced by the rest of the population) as a result of the scheme.

- Assessing whether one or more of these groups could experience differential effects (whether effects are likely to be experienced differently to other members of the general population) as a result of the scheme.
- Identifying opportunities to promote equality more effectively.
- Developing ways in which any disproportionate negative impacts could be removed or mitigated to prevent any unlawful discrimination and minimise inequality of outcomes.

2.3 Overall approach to the EqlA

2.3.1 The approach to this EqlA employs the following five principal steps:

1	2	3	4	5
Understanding the project	Evidence, distribution, and proportionality	Engagement and analysis	Impact assessment.	Recommendations
Analysis of the scheme and the activities associated with it, alongside emerging plans and activities intended to manage effects.	Review of available demographic data and published evidence to establish scope and nature of effects.	Engagement with stakeholders to gather their views.	Understanding the extent and scale of any impacts arising, taking any mitigation and enhancement measures into account.	Drawing conclusion and identifying opportunities and further actions to manage and mitigate impacts.

2.3.2 Tasks undertaken

2.3.3 Within the steps above, the following tasks have been undertaken to deliver the assessment:

2.3.3.1 Understanding the project

2.3.4 **Inception meeting and site visit:** In order to fully understand the scheme and its proposals an inception meeting with the client was held alongside a site walkover in February 2023.

2.3.5 **Review of scheme documents:** A review of documents associated with the scheme has been undertaken, including relevant consultation and masterplanning material available on HARCA's engagement platform, Commonplace. This includes the Landlord Offer, Decanting FAQs, the Stakeholder Consultation Report and the Retail Offer.

2.3.6 As part of the April 2025 update to the report in order to better reflect the new phasing strategy the June 2024 planning documents, new phasing strategy, and updates to leaseholder buy outs were reviewed.

2.3.6.1 Evidence, distribution, and proportionality

2.3.7 **Desk-based evidence and literature review:** In order to better understand the potential impacts arising from the scheme, and to help to identify possible mitigations and

opportunities associated with the scheme, relevant published literature from government, academic and third sector sources were reviewed. This allowed for the characterisation of potential risks and impacts typically associated with housing and community regeneration and relocation, to understand whether they apply in this instance.

- 2.3.8 **Demographic analysis of the site and surrounding area:** Using publicly available data, a Local Impact Area (LIA) of 500m from the Red Line Boundary (RLB) has been used to guide the collection of local population data, informing the population proportion maps found in Appendix A.

2.3.8.1 Engagement and analysis

- 2.3.9 **Stakeholder consultation:** The Council implemented a programme of consultation and engagement with residents to inform the scheme process and design. Feedback was reviewed through an equality lens and incorporated into this Impact Assessment where relevant. As part of the April 2025 update to the report in order to better reflect the new phasing strategy, the latest Teviot News residents' newsletters and feedback from Residents Steering Group meetings were reviewed and included where relevant.
- 2.3.10 **Sociodemographic survey:** Engagement was undertaken in June - July 2023 to improve the understanding of demographics of residents on the Site. The site demographic survey was driven by the need to give residents on the site an opportunity to engage and provide demographic information. The survey is intended to develop a profile of those on the site, by capturing protected characteristic information from residents. The survey activity was carried out on site, with face-to-face engagement attempted with each property which is understood to be occupied.

2.3.10.1 Impact assessment

- 2.3.11 **Assessment of potential impacts:** Potential impacts were identified and assessed using the research undertaken in the stages above. Assessment of impacts was undertaken in the light of sensitivity of the affected parties to redevelopment or relocation, and distribution of people with protected characteristics amongst those on the site. Any potential impacts were identified in the context of any mitigation measures implemented or proposed by Poplar HARCA.

2.3.11.1 Action planning

- 2.3.12 **Making recommendations:** Based on the impacts identified, a series of conclusions and further recommendations were developed to help manage the scheme development and the impacts identified in the local area.

2.4 Methodology for identifying and assessing equality effects

2.4.1 Identifying potential equality effects

- 2.4.2 The assessment of effects across the EqIA process is predominantly qualitative and outlines the nature of the impact on:
- residents living within the Site;
 - community facilities within and around the Site, their operators and their service users;

- non-resident owners of residential property within and around the Site; and
- the local community.

2.4.3 The assessment considers, where possible and applicable:

- whether the scheme will have a beneficial or adverse effect on the lives of those who live or work in the area;
- the relationship of the effect to the scheme (e.g. direct relationship such as loss of property or indirect relationship such as loss of access to services);
- the duration, frequency and permanence of the impacts;
- the severity of the impact and the amount of change relative to the baseline; and
- the capacity of the affected groups to absorb the impacts (their resilience), including their access to alternative facilities, resources or services.

2.4.4 Types of equality effects considered

2.4.5 Potential effects arising from the scheme will be assessed as either differential or disproportionate.

- **Differential effects** occur where people with protected characteristics are likely to be affected in a different way to other members of the general population. This may be because groups have specific needs or are more susceptible to the effect due to their protected characteristics. Differential effects are not dependent on the number of people affected.
- **Disproportionate effects** occur where there is likely to be a comparatively greater effect on people from a particular protected characteristic group than on other members of the general population. Disproportionate effects may occur if the affected community comprises of a higher-than-average proportion of people with a particular protected characteristic, or because people from a particular protected characteristic group are the primary users of an affected resource.

3 Teviot Estate context and background

3.1 Overview of Teviot Estate

- 3.1.1 The Teviot Estate is a housing estate in the Poplar area within the London Borough of Tower Hamlets. The estate was built by Poplar Borough Council in 1955 and borders the Limehouse Cut canal to the North, the A12 to the East, and Langdon Park to the South. The Estate consists of a total of 535 homes, spread across a number of low- and mid-rise buildings.
- 3.1.2 Most of the Teviot Estate was transferred to Poplar HARCA housing association in 1998, with the remainder of the estate transferring in 2007.²
- 3.1.3 The local area is mixed use in character, with residential and retail areas located in close proximity to the Estate.
- 3.1.4 **Local context and need**
- 3.1.5 The London Borough of Tower Hamlets is located over much of the traditional East End, bordering the City of London to the west, and Newham and Hackney to the north. Over the last 30 years, the population of the borough has doubled and between 2006 and 2016 it had the fastest population growth of any local authority in England and Wales, particularly amongst working age people, with the youngest median age of any area in England and Wales. The area is the most densely populated area in the UK, and 34% of all housing stock is either Council owned or owned by a registered social landlord.
- 3.1.6 The Council view regeneration as a key pillar in managing the borough's population growth and creating tangible benefits and lasting improvements for local people. A series of eight regeneration outcomes have been developed to align the work with existing policy priorities, including reducing inequalities and enhancing wellbeing; affordable housing; and making communities safer and more cohesive.
- 3.1.7 The Council recognise that need for new affordable housing is acute in the borough, with more than 19,000 on the waiting list for housing. However, the council can only grant 1800 new tenancies a year at present due to a lack of available stock.
- 3.1.8 The Council aims to boost the supply of new council homes across the Borough and will require private developers to ensure that between 35% and 50% of their development is available for affordable housing.
- 3.1.9 The Council is also working with housing association partners to deliver more affordable housing for residents to meet growing demand. Poplar HARCA own and manage 9,000 homes within Tower Hamlets and are leading on a £2.5 billion place

² Hidden London (unknown). 'Langdon Park'. Available at: <https://hidden-london.com/gazetteer/langdon-park/>

shaping programme in the Poplar area, including new homes, education, and healthcare

3.1.10 Strategic context

3.1.10.1 National Planning Policy Framework

3.1.11 At national level, the scheme will contribute to the fulfilment of several policies within the National Planning Policy Framework (NPPF)³, including;

- **Promoting healthy and safe communities:** Promoting social interaction, including opportunities for people to meet who might not otherwise come into contact, and enabling healthy lifestyles through the provision of safe and accessible green infrastructure, sports facilities, local shops, access to healthier food, allotments and layouts that encourage walking and cycling.
- **Achieving well-designed places:** Creating high-quality places to improve the way communities live and work. This includes setting out a clear design vision and expectations for development projects, which should add value to the overall quality of the local area through appropriate landscaping and place-making.
- **Delivering a sufficient supply of homes:** To support the Government's objective of significantly boosting the supply of homes, it is important that a sufficient amount and variety of land can come forward where it is needed, that the needs of groups with specific housing requirements are addressed and that land with permission is developed without unnecessary delay.

3.1.11.1 London Plan

3.1.12 At regional level, the scheme will contribute directly to several objectives and policies of the London Plan⁴ such as:

- Building strong and inclusive communities
 - Provide access to good quality community spaces, services, amenities and infrastructure that accommodate, encourage and strengthen communities, increasing active participation and social integration, and addressing social isolation.
 - Ensure that new buildings and the spaces they create are designed to reinforce or enhance the identity, legibility, permeability, and inclusivity of neighbourhoods, and are resilient and adaptable to changing community requirements.
 - Support and promote the creation of a London where all Londoners, including children and young people, older people, disabled people, and people with young children, as well as people with other protected characteristics, can move around with ease and enjoy the opportunities the city provides, creating a welcoming environment that everyone can use confidently, independently, and with choice and dignity, avoiding separation or segregation.
 - Support and promote the creation of an inclusive London where all Londoners, regardless of their age, disability, gender, gender identity, marital status, religion, race, sexual orientation, social class, or whether they are pregnant or have

³ Ministry of Housing, Communities and Local Government (2021): 'National Planning Policy Framework'

⁴ Mayor of London (2021): 'The London Plan: The Spatial Development Strategy for Greater London' Available at: [the_london_plan_2021.pdf](#)

children, can share in its prosperity, culture and community, minimising the barriers, challenges and inequalities they face.

- Creating a healthy city
 - ensure that the wider determinants of health are addressed in an integrated and co-ordinated way, taking a systematic approach to improving the mental and physical health of all Londoners and reducing health inequalities
 - promote more active and healthy lives for all Londoners and enable them to make healthy choices
 - plan for improved access to and quality of green spaces, the provision of new green infrastructure, and spaces for play, recreation and sports
- Delivering the homes Londoners need
 - create a housing market that works better for all Londoners
 - support the delivery of the strategic target of 50 per cent of all new homes being genuinely affordable
 - create mixed and inclusive communities, with good quality homes that meet high standards of design and provide for identified needs, including for specialist housing

3.1.12.1 Impact on Councils strategic priorities

3.1.13 The scheme will directly contribute to several of the Council's local strategic priorities, a summary of which is found in the table below:

Table 3.1: London Borough of Tower Hamlets strategies

London Borough of Tower Hamlets Strategy	Key objectives relevant to the scheme
Tower Hamlets Local Plan 2031 ⁵	Meeting housing needs Creative attractive and distinctive places Supporting community facilities Enhancing open spaces and water spaces
Tower Hamlets Strategic Plan 2022-2026 ⁶	Providing homes for the future by working with developers and housing associations to deliver a minimum of 1000 social homes for rent each year
A Tower Hamlets for All Partnership Plan 2023- 2028 ⁷	Everyone in Tower Hamlets should feel safe and live in good quality homes and healthy inviting neighbourhoods.
Tower Hamlets Housing Strategy 2016- 2021 ⁸	More affordable housing, economic growth, and regeneration Meeting peoples housing needs Effective partnership working with residents and stakeholders

⁵ London Borough of Tower Hamlets (2020). 'Tower Hamlets Local Plan 2031'. Available at: https://www.towerhamlets.gov.uk/Documents/Planning-and-building-control/Strategic-Planning/Local-Plan/TH_Local_Plan_2031_accessibility_checked.pdf

⁶ London Borough of Tower Hamlets (2022). 'Strategic Plan 2022- 2026'. Available at: [Strategic Plan 2022-26](#)

⁷ London Borough of Tower Hamlets (2022). 'A Tower Hamlets for All Partnership Plan 2023- 2028'. Available at: [A Tower Hamlets For All: Our New Partnership Plan 2023-2028](#)

⁸ London Borough of Tower Hamlets (2016). 'Housing Strategy- Building new homes and communities in Tower Hamlets'. Available at: https://www.towerhamlets.gov.uk/Documents/Planning-and-building-control/Strategic-Planning/Local-Plan/TH_Local_Plan_2031_accessibility_checked.pdf
https://www.towerhamlets.gov.uk/Documents/Housing/THHF/TH_Housing_Strategy_document_v5.pdf

London Borough of Tower Hamlets Strategy	Key objectives relevant to the scheme
Parks and Open Spaces 2017- 2027 ⁹	Contributing to sustainable development Attracting and guiding investment in parks and open spaces to the best effect for Tower Hamlets Addressing competing demands on parks and open spaces
High Density Living Supplementary Planning Guidance ¹⁰	Children and young people Sense of community Everyday life Buildings as a system Healthy neighbourhoods

3.2 Scheme overview and background

- 3.2.1 As discussed in section 3.1.1, Tower Hamlets has a large and growing need for more social and affordable housing. The regeneration of Teviot Estate is intended to contribute towards meeting this need.
- 3.2.2 Conversations about the regeneration of the Teviot Estate have been ongoing with residents since 2017, when a listening event was held to understand the queries, questions and concerns residents may have if regeneration was to take place. More detailed conversations and outreach with the residents took place from 2017 until 2019 when an offer to residents was made and a ballot of support undertaken.
- 3.2.3 2019 Offer and Ballot**
- 3.2.4 In 2019, an offer was developed and put to residents in a ballot. The residents voted on the following question: 'Are you in favour of the proposal for the regeneration of the Teviot Estate?'
- 3.2.5 The offer was an outline of what a regenerated Teviot could include, including the following:
- up to 1,800 new homes, consisting of a mixture of flats, maisonettes and houses;
 - commitment to deliver at least the planning regulations guidelines of at least the same number of currently present social rent homes plus an additional 35%;
 - commitment to limit residents' moves to one where possible;
 - commitment to keep the community together;
 - reimbursement of moving costs and door to door moving support for older and vulnerable residents;
 - Residents Steering Group representing residents at every decision and central to shaping the future Teviot;
 - new and upgraded green and public space; and

⁹ London Borough of Tower Hamlets (2017). 'Parks and Open Spaces: An Open Space Strategy for the London Borough of Tower Hamlets 2017- 2027'. Available at: https://www.towerhamlets.gov.uk/lgn/leisure_and_culture/parks_and_open_spaces/open_space_strategy.aspx

¹⁰ London Borough of Tower Hamlets (2020). 'High Density Living Supplementary Planning Document'. Available at: <https://www.towerhamlets.gov.uk/Documents/Planning-and-building-control/Supplementary-guidance/SPD/High-Density-Living-SPD-Adoped.pdf>

- new community infrastructure including new retail and hospitality space, well designed and purpose built faith facilities, and redesigned road and pedestrian areas.

3.2.6 The ballot was run independently by Electoral Reform Services Ltd between 10 April until 3 May 2019. Eligible residents, who included all social tenants, resident leaseholders and freeholders who had occupied their property for at least one year prior to the publication of the Landlord Offer, as well as any resident on the Estate who had been on the housing register for at least one year prior to the publication of the Landlord Offer, were able to vote via post using a pre- paid envelope, online, or by delivering to one of three ballot boxes on the Estate.

3.2.7 In total, 81% of eligible residents of the Teviot Estate took part in the ballot. Residents voted in favour of the regeneration proposals, with 86% of those who returned a ballot voting 'yes'.

3.2.8 Current Scheme proposals

3.2.9 Since the ballot, engagement has been undertaken with residents, along with further studies for the new estate.

3.2.10 A proposed Masterplan was developed over 2021 and 2022 and presented to local residents through two consultation exercises. The Masterplan was submitted for planning permission in June 2024.

3.2.11 The project is scheduled to start onsite in 2026, with the first homes expected to be completed by 2028. The entire project is forecast to be completed by 2042.

3.2.12 Overview of proposals

3.2.13 The table below provides a summary of the entire Teviot Estate masterplan proposal.

Table 3.2: Summary of Teviot Estate proposals

Component	Summary
Decanting and demolition	Demolition of all homes presently on the Estate over four phases between 2026 and 2036 Demolition of current Mosque building Decanting of Phase 1 residents into accommodation elsewhere in Tower Hamlets
Homes	Over 1,900 new homes in a mix of building types and homes Every resident will have a Right to Return to the estate All residents after Phase 1 will be able to move directly into their new home 35% of the new homes will be affordable across the scheme. Phase 1 will have 45% of homes as affordable. Of the 45% affordable homes in Phase 1, 90% will be available at social rent. Range of financial options for leaseholders, including shared ownership schemes All new homes will be the same size or larger than the current homes High quality and energy efficient
Retail offering	1180 square metres of new commercial and retail space 'Makerspace' street to support local entrepreneurs and employment
Community facilities	New purpose-built Mosque delivered in Phase 3 New Community Centre with event space New nursery New civic square New community pub or restaurant
Public realm offering	Improvements to Langdon Park Play spaces for children

Component	Summary
	New places to meet
	Safe pedestrian and cycle routes
	New street trees and planting
	New Teviot Park delivered in phase 4

Source: Poplar HARCA

3.2.14 The scheme is split into four separate phases from 2026 to 2039. This is planned as below:

Table 3.3: Phasing Plan

Phase	Indicative start date	Homes affected
Phase 1	2026 start	Chadbourn Street St Leonards Road Ullin Street (1-41) Spey Street (Odd Numbers 3- 107) Zetland Street (1- 63)
Phase 2	2030 start	Zetland Street (67- 107) Spey Street (Even Numbers 14- 106) Brion Place Dewberry Street
Phase 3	2034 start	Teviot Street (Even Numbers 90- 162, 168-286 and Odd Numbers 157a- 169a, 173-178)
Phase 4	2038 start	Teviot St (Even Numbers 288- 506)

Source: Poplar HARCA

3.2.15 At the beginning of the decant process, 115 Phase 1 tenants, sub tenants and PRS tenants were eligible to be rehoused.

3.2.16 As of October 2025, 108 of the tenants have been rehoused.

3.2.17 Overview of Phase 1

3.2.18 This EqIA will focus on both the general regeneration proposals for the whole of the Teviot Estate, and a detailed analysis for the first Compulsory Purchase area. Updates to the phasing strategy have been made in early 2025 and as such the first Compulsory Purchase area is now expected to cover Phase 1 of the scheme.

3.2.18.1 Homes

3.2.19 As set out in Table 3.3, Phase 1 will cover homes on Teviot Estate southeast of Zetland Street. Phase 1 will deliver at least 475 homes, ranging from lower rise buildings near Langdon Park and St Michaels Court and higher rise towards the A12. 45% of Phase 1 by habitable room will be affordable, with over 90% of these on social

rent tenure. 49% of these social rent homes will be family size (three or more bedrooms).

- 3.2.20 Within Phase 1, affordable housing has been prioritised in order to deliver appropriate levels of affordable housing in order to support decanting requirements.
- 3.2.21 Each home will be the same size or larger than the current homes on the Estate, and there will be some choice of layout for residents such as open plan or separate kitchens, and deck or internal access.
- 3.2.22 All residents will have access to a private balcony, or patio for those on the ground floor.
- 3.2.23 The homes will have better access to daylight, sunlight, and privacy with as many dual aspect homes as possible.
- 3.2.24 The buildings will provide 24-hour natural surveillance, a video door entry system and a concierge.

3.2.24.1 Public realm and open spaces

- 3.2.25 Phase 1 will include the prioritisation of green and open space, with substantial improvements being made to Langdon Park as well as a new informal play area. Improved connections to the park will also be created.
- 3.2.26 Extensive new landscaping will be included in all phases with the addition of green corridors to boost biodiversity.
- 3.2.27 A new public square, Teviot Square, will be created to allow space for socialisation and relaxation, as well as space for community activities
- 3.2.28 The public realm will be designed with safety of local residents in mind, with proposed improvements to lighting and CCTV, and the integration of Secure by Design principles.

3.3 Compulsory Purchase Order

- 3.3.1 Section 226 (1) (a) of the Town and Country Planning Act 1990 authorises a local authority to exercise its compulsory purchase powers. This is the case if acquiring the land in question will facilitate the carrying out of development, redevelopment, or

improvement on, or in relation to, the land being acquired, and it is not certain that they will be able to acquire it by agreement.¹¹

- 3.3.2 As Poplar HARCA is not a local authority, it does not have Compulsory Purchase Order powers. Instead, it will ask London Borough of Tower Hamlets to use their powers to support the regeneration scheme.
- 3.3.3 A local authority must not exercise the power under section 226(1)(a) of the 1990 Act unless they think that the development, redevelopment, or improvement is likely to contribute to the achievement of any one or more of the following objectives:
- the promotion or improvement of the economic well-being of their area.
 - the promotion or improvement of the social well-being of their area.
 - the promotion or improvement of the environmental well-being of their area.¹²
- 3.3.4 Part of the function of this EqIA report is to provide evidence related to the Council's equality duties in relation to the use of its CPO powers, and to provide a consideration of potential equality impacts, both negative and positive, associated with the scheme.
- 3.3.5 From October 2022, Poplar HARCA has been in the process of undertaking negotiations for voluntary acquisitions of interests; however, it may be necessary to pursue the CPO to ensure the delivery of the scheme. This process will continue in parallel with acquisition negotiations to ensure that the Council is able to acquire all necessary interests within a reasonable timescale.
- 3.3.6 Due to the size and scale of the project, it will not be possible to have a single CPO. The development of the final Masterplan will help determine the planning of the CPO's required to support the regeneration programme. Areas in Phase 1 will be included in the first CPO of the scheme.
- 3.3.7 Position on site**
- 3.3.8 HARCA is undergoing discussions with all of its tenants and leaseholders to acquire vacant possession of the 535 properties on the Site.
- 3.3.9 Phase 1 includes 156 properties, including 113 tenants and 43 leaseholders. At planning submission, 17 leaseholders had completed their agreements, 8 had agreed terms and the final 20 are in discussions with HARCA.
- 3.3.10 An exercise was undertaken to identify and establish the number of people that would need to be relocated to secure vacant possession to enable the scheme to progress. This included identifying the number of non-tenant rehousing commitments made by the Landlord Offer. Non-tenant rehousing commitments arise where a family member or other adult occupier(s) in a property to be demolished was eligible to vote in the ballot and a commitment was given to provide a rehousing option. These are set out in the Decant Strategy, submitted as part of the 2024 Masterplan Planning Application.

¹¹ Ministry of Housing, Communities & Local Government (2019) Guidance on Compulsory purchase process and the Crichel Down Rules

¹² Legislation UK (1990): 'Town and Country Planning Act 1990'

Table 3.4: Overall tenancy summary and non-tenant rehousing commitments

Phases	Total properties	Tenants	Non- tenant Rehousing commitments ¹³	Leaseholders
Phase 1	156	113	31	43
Phase 2	164	99	42	65
Phase 3	105	77	30	28
Phase 4	110	70	38	40
Total	535	359	141	176

Source: Poplar HARCA

3.3.11 The table below shows the number of acquired and outstanding properties by tenancy type and phase at planning submission in 2024.

Table 3.5: Acquired residential property position summary as of planning submission

Redevelop ment Phase	No. of properties	Leasehold outstanding	Leaseholder bought	Leasehold – terms accepted	Tenants outstanding	Tenants accepted	Void	Temp Accom
Phase 1	45	24	14	7	24	68	2	95
Phase 2	65	43	22	0	72	23	2	43
Phase 3	28	19	8	1	50	14	1	32
Phase 4	40	33	6	1	51	17	1	24
Total	178	119	50	9	197	122	6	194

Source: Poplar HARCA

3.3.12 The Teviot Estate Decant Strategy identifies that 60% of leaseholders on the site are non-resident, with a total of 71 resident leaseholders.

3.3.13 Conversations have been held to ascertain the position of Phase 1 resident leaseholder with regards to their Right to Return. Of the 30 eligible, only two have expressed an interest in buying into the new scheme.

Table 3.6: Status of leasehold buybacks in September 2025

Redevelopme nt Phase	Outstandi ng	High Risk	In discussion	Terms agreed	Exchanged	Completed
Phase 1	0	2	14	8	1	20
Phase 2	32	0	11	0	0	22
Phase 3	13	0	6	1	0	8
Phase 4	25	1	6	0	0	8
Total	70	3	37	9	1	58

Source: Poplar HARCA

3.3.14 The table above outlines the status of the headline buyout agreements for residential properties at all phases of acquisition as part of the CPO process. In Phase 1, 20

¹³ Non-tenant rehousing commitments arise where a family member or other adult occupier(s) in a property to be demolished was eligible to vote in the ballot and a commitment was given to provide a rehousing option

residents are in discussion with Poplar HARCA regarding terms, 8 have agreed to the terms and 17 agreements have been completed. The buyback team continue to be in active dialogue with all remaining Phase 1 leaseholders.

3.3.15 Approach to buybacks

- 3.3.16 The Decant Strategy outlines Poplar HARCA's approach to leaseholder negotiations.
- 3.3.17 Valuation surveyors have been appointed and have approached all non-resident leaseholders in Phases 1 and 2 to discuss their interest in selling early and negotiations are underway.
- 3.3.18 For Phase 1 resident leaseholders, in-house consultants are leading contact and discussions with residents to progress negotiations and understand the needs of the residents. Engagement has included home visits, advertising, and leaseholder drop-in sessions and has allowed Poplar HARCA to identify more vulnerable leaseholders who may need additional support to move.
- 3.3.19 A record of all discussion with leaseholders has been maintained.

4 Summary evidence review

4.1 Existing published evidence

- 4.1.1 Table 4.1 below summarises the existing evidence of potential risks and opportunities, as well as the associated protected characteristic groups who may be disproportionately or differentially affected, prior to consideration of any mitigation measures in place. The table does not summarise actual equality effects but rather the potential risks and opportunities that arise from demolition of vacant buildings and housing development schemes. Risks are defined as potential adverse effects resulting from the Scheme, and opportunities are defined as potential benefits.
- 4.1.2 A full literature review is provided in Appendix B.
- 4.1.3 A full assessment of potential equality effects, based on the risks and opportunities identified below, is provided in Chapter 6. Protected characteristic groups include those defined in Chapter 2, including people from deprived communities.

Table 4.1: Summary evidence review

Risks and opportunities	Protected groups affected
Impacts on existing residents	
Health effects associated with relocation Redevelopment processes can involve temporary or permanent resettlement of residents and demolition of housing and community resources. Home relocation and consequential loss of social cohesion and access to community resources can lead to increased stress and anxiety due to the need to adapt to new routines, facilities and surroundings. For example, children may need to change school and older people are more likely to suffer from loneliness and isolation in older people which can turn to negative health outcomes such as poor mental health and obesity. Health impacts of relocation can be compounded when the relocation is involuntary. This stress has been attributed to the anticipation of disruption, extra costs for residents and undermining of community stability and support networks	Children Older people Disabled people Pregnancy and maternity Minority faith groups People from ethnic minority groups
Relocation and loss of social cohesion Redevelopment can lead to temporary or permanent resettlement of residents and demolition of housing and community resources. This could increase these resident's distances from families, friends, or places of social connection, such as community centres or schools. This can impact on all parts of the community, but can have a disproportionately negative effect on children, older people, disabled people, people who are pregnant, people from ethnic minority backgrounds and people from minority faith groups. Children can be particularly affected when their relocation is accompanied by a change of school.	Children Older people Disabled people Pregnant people Ethnic minority groups Minority faith groups
Costs associated with relocation Where redevelopment schemes require residents to relocate, it can lead to increased financial outgoings due to costs associated with moving, particularly for single parent families (the vast majority of whom are led by women) and ethnic minority households. Relocation costs can include removal services, the need to adapt a new home or buy new furniture. Access to the required finance to assist with relocation may be most limited for those at risk of financial exclusion, who experience difficulty accessing appropriate and mainstream financial services, such as bank accounts and loans.	Young people Older people Disabled people People from ethnic minority backgrounds Women
Access to finance	Young people

Risks and opportunities

Protected groups affected

The need for residents to relocate can have particularly adverse effects on groups who are less likely to have access to the finance required in order to secure new homes, or afford the higher costs associated with redeveloped housing. Access to the required finance to obtain new housing or meet the higher payments on redeveloped homes may be most limited for those most at risk of financial exclusion. Financial exclusion arises when an individual faces difficulty when trying to access appropriate and mainstream financial services. In the UK, certain groups are particularly vulnerable to financial exclusion, including young people not in employment, lone parents, ethnic minority groups and older people, as it has been found that social exclusion can lead to financial vulnerability. These groups may experience more difficulty in accessing appropriate and mainstream financial services, such as bank accounts and loans, or may have less long term savings. Older people often lack the same financial means and income flexibility that afford people from younger age groups and those in full time employment the widest range of home ownership options.	Lone parents Ethnic minority groups Older people
Access to affordable housing The need for residents to relocate can cause difficulty in accessing affordable housing. This is also exacerbated by the increasing unaffordability of homeownership for many people in England and Wales over the past decade. Only 51% of households in London own their homes. Rates of homeownership have fallen significantly for young people over the last 20 years due to the increasing unaffordability of housing in the country. Women are disproportionately represented among lone parent households. Around 90% of single parents are women and have the highest poverty rate amongst working-age adults, with 43% living in poverty (rising to 51% in London). This makes the risk of financial exclusion higher as women who are single parents are more likely to spend a higher portion of their income on housing costs. Disabled people may be impacted by the availability of affordable homes when moving to new areas, as they are more likely to live in poverty	Young people Women Disabled people
Access to appropriate and accessible housing Where redevelopment schemes require the resettlement of many residents, issues can arise regarding sourcing suitable housing that meets the needs of diverse groups. This includes housing that meets the needs of people requiring adaptable and accessible accommodation, such as people with mobility impairments. Accessible housing would include at least the basic four accessibility features (level access to the entrance, a flush threshold, sufficiently wide doorways and circulation space and a toilet at entrance level). It also includes housing suitable for multigenerational families and families with children. A lack of suitable housing can lead to families living in overcrowded conditions which can negatively impact the health of older people and children, putting them at increased risk of developing respiratory conditions. Overcrowding can also contribute to infections, psychological problems, Sudden Infant Death Syndrome (SIDS), and stress among children. Homes without access to outdoor space can negatively impact the emotional wellbeing of residents, particularly children. Black people are four times less likely than white people to have access to a garden, or other form of outdoor space at home.	Children Older people Disabled people People from ethnic minority groups Pregnancy and maternity
Potential impacts on local community and community resources	
Loss of social infrastructure and access to community resources <i>Resource relocation and social cohesion</i> Redevelopment can involve temporary or permanent relocation of community resources. This can lead to a loss of access to these resources and knock-on impacts on social cohesion. In particular, it can increase residents' distances from facilities or places of social connection located on or in close proximity to their neighbourhood. <i>Permanent loss of community resources and social cohesion</i> Redevelopment can involve the demolition and permanent loss of community resources. This can lead to a loss of access to community resources for people living in the local area and knock-on impacts on social cohesion. The loss or relocation of community resources can disproportionately impact ethnic minority people, minority faith groups, disabled people, older people and children. Loss of social cohesion and access to community resources can lead to loneliness and isolation in older people which can turn to negative health outcomes such as poor mental	Children Older people Disabled people Pregnancy and maternity Minority faith groups People from ethnic minority groups

Risks and opportunities	Protected groups affected
health. Disabled people and pregnant people may also experience negative health impacts, including increased stress and anxiety due to the loss of social cohesion and access to community resources.	
Health effects associated with construction works The demolition works may change noise and vibration levels in the local area. Some groups are typically more sensitive to these changes in stimuli, including children, older people and disabled people with mental health issues and learning disabilities. Construction works are likely to change air quality levels and particulate concentrations in the local area. Poor air quality is the largest risk to public health in the UK, and certain people are more sensitive to changes in air quality, such as children, older people, disabled people, pregnant people and people who live in deprived areas. Older people, and people with dementia are likely to be more sensitive to light pollution and rapid visual changes around them. Furthermore, research has shown that almost 90% of children with autism spectrum conditions develop atypical sensory experience, which can involve hypersensitivity to visual stimuli. This results in more detail-focused perception in people with autism. Consequently, any minor visual change can have detrimental impact on quality of life and socio-psychological wellbeing.	Children Older people Disabled people Pregnant people Deprived people People with dementia Children with autism
Safety and security Construction works will involve demolition, and the area could become subject to disrepair, increasing the risk of vandalism and anti-social behaviour. This has the potential to affect groups with higher vulnerability and safety concerns due to harassment, victimisation, and hate crime, including women, older people, LGBTQ+ people, ethnic minority groups and disabled people. It has been suggested that fear of crime can contribute to social isolation, particularly for vulnerable groups such as women, older people, children and ethnic minority groups.	Women Older people LGBTQ+ people Younger people Children People from ethnic minority groups Disabled people
Accessibility and mobility in the local area Evidence indicates that during construction the accessibility and mobility of the local area can be affected. In particular, construction can cause difficulties in relation to increased traffic in the local area, reduced parking (construction vehicles and subcontractors in parking), construction activities blocking access to homes, shops, bus stops and pavements and safe routes, as well as effects on wayfinding. This may also limit the ability of children to move around safely alone, limiting outdoor play opportunities. For example, a reduction in parking bays, particularly Blue Badge spaces or spaces in close proximity to the Site, can particularly adversely affect parents with young children, older people and disabled people who rely on such parking facilities in order to access a range of services and facilities, including, potentially, their home. This can lead to knock-on effects, exacerbating issues such as loneliness and social isolation.	Children and people using buggies or pushchairs Older people Disabled people
Information and communication Complex material and information on the regeneration may present a challenge to those who have different information and communication needs. This includes but is not limited to people with cognitive or learning disabilities, people with low literacy levels, older people, people with visual or hearing impairments, and people who use English as a second language. Some groups, such as children and young people, older people, disabled people, and people from ethnic minority backgrounds, are more likely to face barriers to engagement. Consultation should 'go the extra mile' to speak with these groups, including holding events in a variety of different venues and times.	Children Young people Older people Disabled people People from ethnic minority groups
Impact on community after redevelopment	
Improved housing provision Redevelopment can lead to improvements in housing provision within the regeneration area, thereby improving its appropriateness, accessibility, and affordability, as well as its quality and efficiency in energy consumption. Warm and well insulated homes can help prevent the health and wellbeing impacts of living in a cold home. Children living in cold homes are more than twice as likely to suffer from a variety of respiratory problems than children living in warm homes. Cold housing can negatively affect children's educational attainment, emotional wellbeing and resilience. Effects of cold housing are also evident among older people in terms of higher mortality risk, physical health and mental health.	Children Older people Disabled people People from ethnic minority groups

Risks and opportunities	Protected groups affected
The importance of appropriate, accessible, and affordable housing for particular protected characteristic groups, including children, disabled people, and people from an ethnic minority background, has been outlined above. The regeneration of the area will improve the housing provision in the local areas increasing capacity and quality.	
Provision of community facilities and improved social cohesion Community facilities provide important places of social connection and promote wellbeing for many groups, such as children, older people, disabled people, people from an ethnic minority background and pregnant people. For example, community hubs can provide an accessible centre point for local activities, services and facilities. They allow for a cross section of the community to be brought together in a safe place, allowing for better social cohesion and helping to address social isolation. There is an increasing body of research literature that outlines how faith groups can have a positive impact on both the health of their members and wider communities. A number of faith-based communities are also reporting they would like to expand their facilities due to increasing congregations, which can sometimes generate unmet religious needs amongst their members. Further research explored how Mosques play a vital role within communities in encouraging community engagement and outreaching with other faith communities.	Children Young people Older people Disabled people Pregnant people People from ethnic minority groups Women
Tackling crime and disorder Levels of crime have in part been attributed to the urban environment. It has been argued that the opportunity for some forms of crime can be reduced through well-thought-out approaches to planning and design of neighbourhoods and towns. Reducing potential for crime can affect those more likely to fear crime or be a victim or witness of crime.¹⁴	Children Young people Older people Disabled people People from ethnic minority groups Men Women LGBTQ+ people
Improved public realm The Scheme is anticipated to improve the public realm. The ability to access and use the public realm is vitally important to ensuring people feel that they are active members of their society. This includes basic activities, such as meeting up with people in a shared space outside close to home.¹⁵ The inclusion of community gardens and other public green spaces through redevelopment can also benefit older people, children, and disabled people. Research has found that in urban areas ethnic minority groups tend to have less access to local green space, and the space they can access is often of poor quality. The provision of green space is therefore likely to benefit this group.	Children Older people Disabled people People from ethnic minority groups
Improved access, mobility and navigation Redevelopment processes open up opportunities to create spaces and places that can be accessed and effectively used by all, using principles of inclusive design. There are a number of protected characteristic groups who can experience difficulties with access, mobility and navigation who could benefit from improvements in this area.	Children Older people Disabled people

¹⁴ See for example, Monahan and Gemmell (2015) 'Reducing Crime Hotspots in City Centres'. Available at: <http://www.bre.co.uk/filelibrary/Briefing%20papers/102417-Crime-Hotspots-Briefing-Paper-v4.pdf>

¹⁵ House of Commons Women and Equalities Committee (2017): 'Building for Equality: Disability and the Built Environment'.

4.2 Resident and stakeholder engagement

4.2.1 Resident Steering Group

- 4.2.2 The Residents Steering Group (RSG) have been a key stakeholder in the Teviot Estate redevelopment scheme since the Teviot Listening Campaign was carried out in 2017 to discuss a potential redevelopment with local residents.
- 4.2.3 Following the campaign, the RSG was established to represent the residents of the Estate as the scheme progressed. The RSG now consists of over 80 members and is well integrated into the project. Residents were engaged in the decision to appoint Hill and BPTW as partners through the delivery of the scheme.
- 4.2.4 The RSG has been engaged through dozens of sessions, co-design workshops and site visits.
- 4.2.5 The most recent meeting was held in October 2024 to discuss the planning submission and outline future RSG meetings. These will include sessions on Placemaking and Design and Housing and Decant. A further session will be held to discuss the Planning Decision in Summer 2025.

4.2.6 Public consultation

- 4.2.7 Two public consultation processes were undertaken between 2020 and 2022 in order to present the ideas and masterplan for the scheme.

4.2.7.1 Stage 1

- 4.2.8 The Stage 1 public consultation was held in 2020. A total of 5,500 newsletters were distributed to local addresses ahead of an online consultation. Two exhibitions were also held, and a door- knocking campaign was undertaken to publicise these.
- 4.2.9 As well as the online consultation, residents were also able to return paper feedback forms. A total of 255 feedback forms were completed in person, across door knocking sessions, online, and via the freepost form.
- 4.2.10 71% of respondents to the Stage 1 consultation supported the ideas for the Teviot Masterplan.

4.2.10.1 Stage 2

- 4.2.11 The Stage 2 consultation followed a similar format to Stage 1.
- 5,500 consultation booklets were printed and distributed to local addresses by Poplar HARCA
 - The online consultation was held on Commonplace between 30 August and 10 October 2022
 - Three in person events were held during September 2022
 - 743 feedback forms were completed in person, across door knocking sessions, online, and via the freepost form.

4.2.12 Public consultation findings

4.2.13 The table below sets out the findings and feedback from the public consultation periods within the themes identified above.

Table 4.2: Public consultation findings

Theme	Feedback
Impacts on existing residents during redevelopment	
Health effects associated with relocation	No feedback has been received on this topic
Costs associated with relocation and securing alternative housing	Feedback from public consultation highlighted the following: Queries about support during bidding and relocation process
Access to appropriate and accessible housing	Feedback from public consultation highlighted the following: Queries about securing new accommodation for adult children Queries about number of homes which will be offered to each resident There is a lack of housing on the estate Homes currently are in need of external and internal repairs and are damp
Potential impacts on local community and community resources during redevelopment	
Loss of social infrastructure and access to community resources	No feedback has been received on this topic
Health effects associated with general environmental changes	Feedback from public consultation highlighted the following: Concern about impacts on construction for remaining residents
Health effects associated with changes to the landscape and visual environment	No feedback has been received on this topic
Safety and security	Feedback from public consultation highlighted the following: The area is currently poorly lit and unsafe Highlighting of need for increased police presence and CCTV Queries about what is being done to secure empty buildings from squatters People don't use the shops as they are scared of children hanging around them
Accessibility and mobility in the local area	Feedback from public consultation highlighted the following: Need more parking spaces Roads are easily blocked with knock on effect for emergency vehicles
Information and communication	No feedback has been received on this topic
Impact on community after redevelopment	
Improved housing provision	Feedback from public consultation highlighted the following: High rises should be kept to a minimum Questioning of how affordable the homes will be Support for providing homes to those living locally Questioning whether there should be even more affordable housing and more social housing
Improved public realm	Feedback from public consultation highlighted the following: Strong demand for more green space Strong demand for children's play space Green and public space should be maintained to a high standard Need for separate park/ space for dogs Feedback from other engagement stages include: Connecting Langdon Park with the rest of Teviot
Provision of community facilities and improved social cohesion	Feedback from public consultation highlighted the following: Need for activities, spaces and services for young people

Theme	Feedback
	Demand for new grocery store Demand for community centres and other meeting places for building a stronger community Demand for better variety of shops, including clothing stores and restaurants
New religious facilities	Feedback from public consultation highlighted the following: Strong demand for bigger mosque Request for mosque to have separate women's only space
Tackling crime and disorder	Feedback from public consultation highlighted the following: Residents were supportive of measures to tackle anti-social behaviour Agreement that good design is required to reduce crime Concerns over the potential for anti-social behaviour in new community and open spaces
Improved access, mobility and navigation	Feedback from public consultation highlighted the following: Demand for more parking Queries about retaining parking permits

4.2.14 Additional consultation findings

4.2.15 In Spring 2023, a survey was undertaken by JTL Research and Mott MacDonald to better understand the demographics of the residents affected by the Phase 1 and 2 CPO area (See section 4.1.1 for additional information).

4.2.16 This survey also asked residents for their opinions on how the scheme would impact their household. The findings were as follows:

- 66% of respondents said it would have a positive impact on the health and wellbeing needs of their household.
- 30% said it would have a positive impact on the childcare and school provision of young people in their household.
- 29% of people said it would have a positive impact on the employment and skills need of people in their household, with 60% saying it would have no impact.
- 28% of people said it would have a positive impact on the care and support required by members of their household, with 68% saying it would have no impact.

5 Area profile and proportionality

5.1 Overview of the socio-demographic profile of the Site

- 5.1.1 The extent of the Scheme is defined by a Red Line Boundary (RLB) for the Site area, set out in Chapter 2. A 500m buffer around the RLB constitutes the Local Impact Area (LIA) for this EqIA to capture nearby receptors that may be affected by the Scheme.
- 5.1.2 The area profile summary in Table 5.1 provides a high-level summary of the socio-demographic profile of the RLB and LIA in comparison with the borough of Tower Hamlets, the Greater London region, and England. It also includes a summary of the findings of a socio-demographic baseline conducted through desk-based research using the Office of National Statistics data.
- 5.1.3 The summary includes analysis of protected characteristic groups under the Equality Act 2010 and the current socio-economic context of the area. In comparing these regions, where the Site or LIA deviates by more than 3% the difference is considered to be considerable and is reported as such.
- 5.1.4 The data used in the baseline is the most current publicly available data from the Office of National Statistics.
- 5.1.5 Where there are higher proportions of certain groups within the LIA, this is written in **bold text**.
- 5.1.6 A more detailed breakdown of the baseline can be found in Appendix A.

Table 5.1: Socio-demographic profile summary

Protected Characteristic	Comparison with Tower Hamlets, Greater London and England
Age	• The proportion of children within the LIA (24%) is considerably higher than the borough of Tower Hamlets (19%), regional (19%) and national (19%) proportions. This indicates the local impact area has a comparably young population. • The proportion of young people within the LIA (15%) is in line with the borough of Tower Hamlets (15%), but higher than regional (11%) national proportions (11%). • The proportion of working age people within the LIA (70%) is considerably lower than Tower Hamlets (76%), broadly in line with regional proportions (69%), and considerably higher than national proportions (63%). • The proportion of older people within the LIA (5%) is broadly in line with Tower Hamlets (6%), however considerably lower than the regional (12%) and national proportion (18%).
Disability	• The proportion of the population who are disabled in the LIA (14%) is broadly in line with Tower Hamlets (13%), regional proportions (13%), but lower than national proportions (17%). • The proportion of the population with no LTHD in the LIA (82%) is broadly in line with Tower Hamlets (83%) and regional proportions (82%) but considerably higher than national proportions (76%).

Protected Characteristic	Comparison with Tower Hamlets, Greater London and England
Gender reassignment 16	The proportion of the population who identify their gender as the same as their sex registered at birth within Tower Hamlets (91%) is broadly in line with the regional proportion (91%), but lower than the national proportion (94%).
Marriage and civil partnership	The proportion of the population who are single in the LIA (54%) is lower than Tower Hamlets (58%), however considerably higher than the regional (46%) and national (38%) proportions. - The proportion of the population who are married in the LIA (35%) is higher than Tower Hamlets (32%), however considerably lower than the regional (40%) and national proportions (44%). - The proportion of the population who are divorced in the LIA (5%) is in line with Tower Hamlets (5%) and London (7%), however is lower than England as a whole (9%). - The proportion of the population who are widowed or a surviving partner in the LIA (3%) is broadly in line with Tower Hamlets (3%) and London (4%) but lower than England as a whole (6%). - The proportion of the population who are in a civil partnership or separated in the LIA is broadly in line with Tower Hamlets, London and England as a whole.
Race and ethnicity	- The proportion of the population who are White British in the LIA (18%) is considerably lower than Tower Hamlets (23%), London (37%) and England as a whole (74%). The proportion of the population whose ethnicity is 'Other White' in the LIA (11%) is lower than Tower Hamlets (15%) and London (15%) but considerably higher than England as a whole (6%). - The proportion of the population in mixed or multiple ethnic groups in the LIA is broadly in line with Tower Hamlets, London and England. - The proportion of the population who are Indian in the LIA (2%) is broadly in line with Tower Hamlets (3%) and national proportions (3%) but considerably lower than regional proportions (8%). The proportion of the population who are Bangladeshi in the LIA (42%) is considerably higher than Tower Hamlets (35%), regional (4%) and national (1%) proportions. - The proportion of the population whose ethnicity is 'Other Asian' in the LIA (2%) is broadly in line with Tower Hamlets (2%) and national proportions (2%), but lower than regional proportions (5%). The proportion of the population who are African in the LIA (8%) is lower than broadly in Tower Hamlets (5%) and in line with London (8%), however is considerably higher than the national proportion of 3%. Overall, the proportion of the population in the LIA who are from an ethnic minority background (82%) is considerably higher than Tower Hamlets (77%), London (63%) and England as a whole (27%). This therefore indicates that the population within the local impact area is ethnically diverse.
Pregnancy and maternity	- The GFR in Tower Hamlets (40.9) is lower than the regional (50.4) and national levels (51.9). This means that the number of live births per 1000 women aged 16-44 years in the Tower Hamlets population is considerably lower than regional and national figures, further suggesting lower rates of pregnancy in this area. - TFR in Tower Hamlets (1.1) is broadly in line with the regional and national levels.
Religion and belief	- The proportion of the population who are Christian in the LIA (23%) is broadly in line with Tower Hamlets (22%) but considerably lower than regional (41%) and national (46%) proportions. The proportion of the population who are Muslim in the LIA (50%) is considerably higher than Tower Hamlets (40%), regional (15%) and national (7%) proportions. - The proportion of the population who have no religion within the LIA (18%) is considerably lower than Tower Hamlets (27%), regional (27%) and national (37%) proportions.

Protected Characteristic	Comparison with Tower Hamlets, Greater London and England
	The proportion of the population who have religious affiliation with a minority religion within the LIA (53%), is considerably higher than Tower Hamlets (44%), regional (25%) and national (11%) proportions.
Sex	- The proportion of the population who are male within the LIA (49%) is broadly in line with Tower Hamlets (50%), London (49%) and England as a whole (49%). - The proportion of the population who are female within the LIA (51%) is broadly in line with Tower Hamlets (50%), London (52%) and England as a whole (51%).
Sexual orientation	- The proportion of the population who are straight/heterosexual within Tower Hamlets (83%) is lower than the regional (86%) proportion and considerably lower than the national (89%) proportion. - The proportion of the population who identify as gay/lesbian, bisexual, or any other sexual orientation within Tower Hamlets is broadly in line with the regional and national proportions.
Socio-economic deprivation	- The proportion of the population within the most deprived quintile within the LIA (57%) is considerably higher than Tower Hamlets (30%), regional (17%) and national (20%) proportions. This therefore indicates there are high levels of deprivation within the local impact area. - The proportion of the population within the second deprivation quintile within the LIA (43%) is lower than Tower Hamlets (47%), however considerably higher than regional (33%) and national (20%) proportions. - The proportion of the population within the third deprivation quintile within the LIA (0%) is considerably lower than Tower Hamlets (14%), regional (23%) and national (20%) proportions. - The proportion of the population in the fourth deprivation quintile within the LIA (0%) is considerably lower than Tower Hamlets (8%), regional (16%) and national (20%) proportions. - The proportion of the population in the least most deprived quintile within the LIA (0%) is broadly in line with Tower Hamlets (2%), however considerably lower than regional (11%) and national (19%) proportions. - Data indicates that as 0% of the LIA reside in the third deprivation quintile, fourth deprivation quintile or least deprived quintile, the whole local impact area population resides in the top two most deprived quintiles. This demonstrates high levels of deprivation.

Source: ONS Census data

5.1.7 Additional socio- demographic data

5.1.8 A demographic survey of residents within the Site was undertaken by Mott MacDonald and JTL Research Ltd on behalf of the Council in Spring 2023.

5.1.9 The objective of the demographic survey was to build better understanding of the demographics of residents that may be affected by Phase 1 of the scheme and the ways in which they might be affected. Questions were also asked in order to gauge respondents' awareness of the redevelopment process and how it might affect them,

and to gain a better understanding of the potential needs in the area, in order to provide the appropriate support.

- 5.1.10 The questions were optional, with options also given to select a 'Prefer not to say/ Don't know'. The findings below show results for residents who did choose to answer the question.
- 5.1.11 The fieldwork surveys were carried out with up to five visits made to each property understood to be occupied in areas covering addresses in Phases 1 and 2 of the scheme. The survey included:
- A notification letter distributed to properties to make participants aware of the upcoming survey, including details for translation support
 - A letter distributed to properties with a unique link to the survey, so they could complete the survey in their own time
 - In-person visits during day and evening hours, with the option to complete this in another language
 - A summary of the findings is outlined in the table below. A more detailed outline of the results can be found in Appendix C.

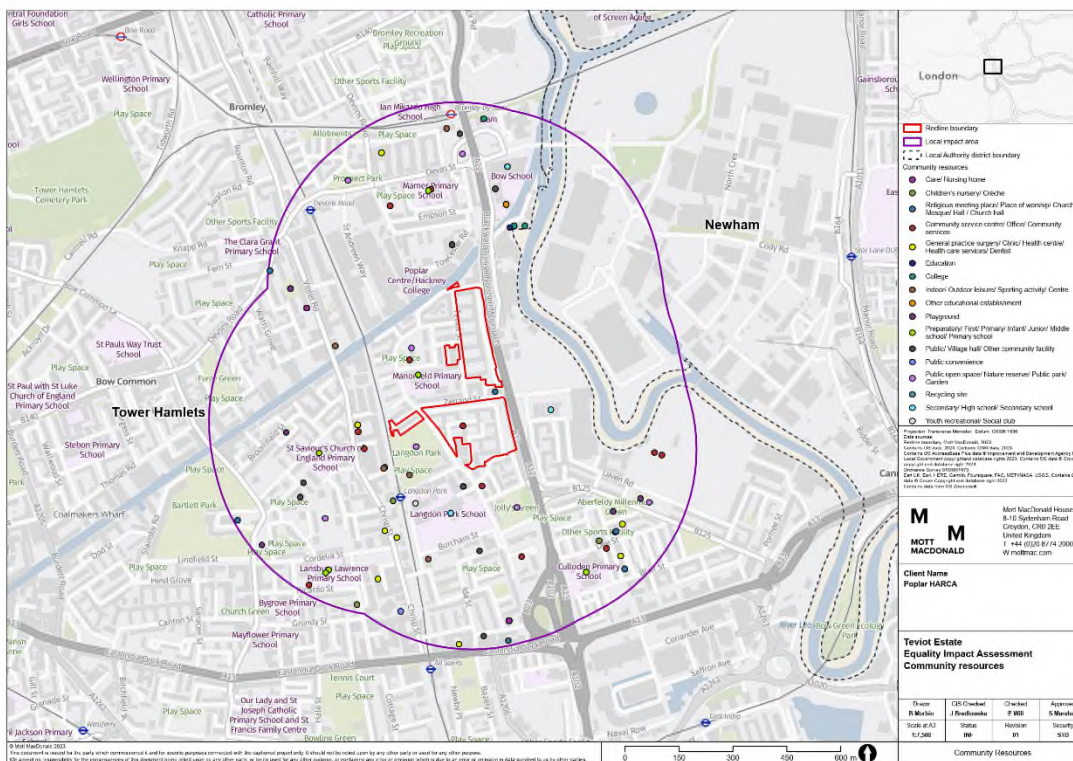
Table 5.2: Additional residential findings

Characteristic	Findings
Tenancy type	The survey found that the majority (79%) of respondents rented their home from Poplar HARCA, while 10% of respondents were private tenants.
Household type	The most common household was a couple with children living at home, suggesting that most households are families. Indeed, only 23% of homes who responded to the survey were occupied by 2 or less people.
Age	The majority (72%) of the Estate residents were of working age, with 23% of residents being children. The proportions of working age people and children is broadly in line with the populations of these groups within the LIA.
Disability	82% of residents included in the survey findings have no long term health condition of disability, with 18% being limited in some way. There is a higher proportion of Estate residents with some form of disability than in the LIA.
Race	There is a high proportion of residents with a Bangladeshi background, with 67% of respondents identifying in this way. This is considerably higher than the Bangladeshi population within the LIA (42%). Overall, 88% of respondents identified as being from an ethnic minority group. This is considerably higher than the population within the LIA (83%).
Religion	65% of respondents identify as Muslim. This is considerably higher than the population of Muslims found in the LIA (49%).
Gender reassignment	95% of respondents identify with the gender they were assigned at birth. This is higher than the population within Tower Hamlets (91%).
Marriage and civil partnership	29% of respondents are married, and 1% of respondents are in a civil partnership. This is lower than the proportion of the population of the LIA who are married (34%) or in a civil partnership.
Household income	47% of household respondents have a household income of £20k or less
Language	Only 41% of people speak English as their preferred language, compared with 54% who speak Bengali.

5.2 Community facilities

- 5.2.1 There are a number of community facilities and resources located both within, and in close proximity to, Teviot Estate which are likely to be accessed by protected characteristic groups, or if they were to be lost, would potentially adversely affect protected characteristic groups. Within the Estate boundary (but outside of the development area boundary) there is a community centre, which is available for use by all residents of the current Estate.
- 5.2.2 The redevelopment of the Estate may also impact users of other community facilities within the Local Impact Area. These include three primary schools, whose pupils may be impacted by construction noise, pollution, and traffic.
- 5.2.3 A high-level overview of the location of community facilities located close to Teviot Estate can be found below:

Map 5.1: Community facilities close to the scheme



Source: OS AddressBase 2023

5.3 Businesses

- 5.3.1 There are a number of commercial units located on Teviot and Spey Street. These businesses include a hairdresser and a food store.
- 5.3.2 These businesses will be affected by future phases of the redevelopment of the Estate, which could have equality impacts on owners and employees. During Phase 1

there is unlikely to be any equality impacts felt by Phase 1 residents as the businesses do not cater to any specific equality groups.

5.3.3 The table below lists the businesses currently operating on the Estate.

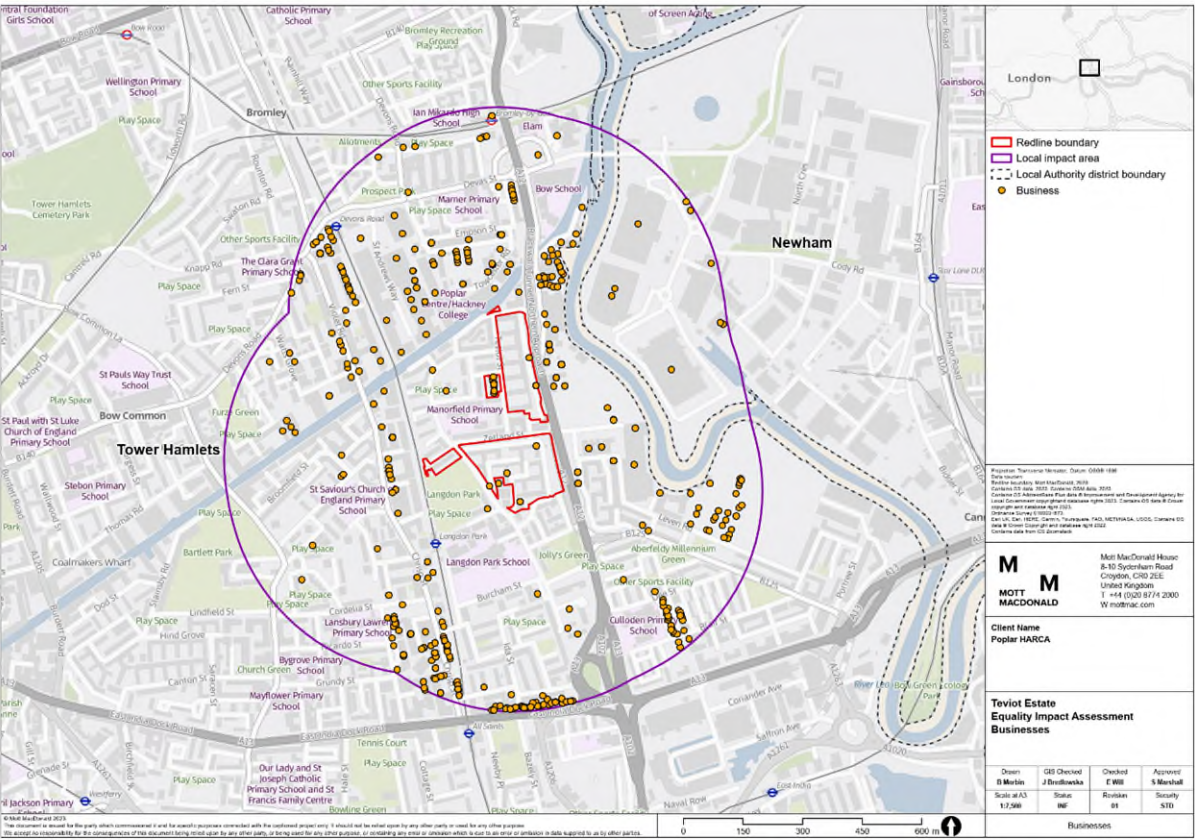
Table 5.3: Businesses on the Estate

Business	Category	Address	Description
Spicey'Z	Takeaway/ Fast Food	183 Teviot Street	Fast Food Restaurant
Teviot Food and Wine	Shop/ Showroom	173 Teviot Street	Convenience Store
Annisey Unisex Hairdressers	Shop/ Showroom	179 Teviot Street	Hairdressers
SD Retail London	Shop/ Showroom	2 Spey Street	Convenience Store
Langdon Park Cash and Carry	Shop/ Showroom	4-6 Spey Street	Convenience Store
Spey Street Newsagents	Shop/ Showroom	8- 10 Spey Street	Newsagents
K&T Heating Services Ltd	Shop/ Showroom	12 Spey Street	Workshop

Source: OS AddressBase

5.3.4 A high-level overview of the location of businesses within the LIA can be found below:

Map 5.2: Businesses within the LIA



Source: Addressbase 2023

5.3.5 Additional socio-demographic information

5.3.6 A survey of businesses was also undertaken alongside the survey of residents outlined in section 5.1.1.

5.3.7 The aim of the survey was to gain further information on the demographic makeup of the business owners and their employees. Three businesses participated in the survey

5.3.8 The findings are presented in the table below:

Table 5.4: Additional information on businesses

Characteristic	Findings
Age	100% of owners and employees are of working age (between 16 and 64)
Sex	84% of the owners and 88% of employees are male
Disability	0% of the owners and employees reported having any disability or long term health condition
Race	84% of owners and 66% of employees identify as Indian; whilst 16% of owners and 33% of employees identify as Bangladeshi. This is considerably higher than the ethnic minority population in the LIA.
Religion	84% of owners identify as Hindu, with 16% identifying as Muslim. This is a considerably lower proportion of Muslims than the population on the Estate and wider LIA
Gender reassignment	100% of owners identify with the gender they were assigned at birth
Sexual orientation	100% of owners identify as heterosexual.
Language	The most common first language is Gujarati, spoken by 33% of owners and 33% of employees
Location	Most of the employees live in Tower Hamlets or an adjacent borough
Working patterns	Most (66%) of the businesses employ over 75% of their staff on a full time basis

6 Impact Assessment

- 6.1.1 The following sections describe the potential impacts of the scheme on protected characteristic groups, with a focus on impacts on residents on the Site, and wider impacts on local residents and community resources during construction and operation. These impacts have been identified through a review of documentation relating to the scheme, published literature, stakeholder engagement and council policy. Potential disproportionate effects on particular groups based on the demographic analysis of the Site are also identified.
- 6.1.2 The Impact Assessment makes further recommendations as to impacts can be mitigated or enhanced. These are collated in section 6.2: Action Plan and assigned a timescale and owner.

6.2 Impact on existing residents during redevelopment

- 6.2.1 The following table describes the potential impacts of the scheme on protected characteristic groups, with a focus on the existing Phase 1 residents.
- 6.2.2 These impacts have been identified through a review of published literature and through engagement with residents. Existing measures in place and further recommendations to mitigate or enhance impacts are set out, along with the overall equality impact on groups with protected characteristics.

Table 6.1: Impact on existing residents during redevelopment

Potential equality risks	Existing Poplar HARCA mitigations or enhancements	Recommendations	Overall Impact
Relocation and loss of social cohesion The redevelopment will lead to the temporary relocation of residents living in Phase 1 properties. This could increase these residents' distances from families, friends, or places of	- For all Phases excluding Phase 1, residents with a Right to Return to the redeveloped Estate and will be able to make one move directly into their new home - Neighbours who want to stay living close to each other can be moved together	This risk requires further management, for which Poplar HARCA should consider the following recommendations: All tenants in Phase 1 with a right to return should have the opportunity, if they wish, to be temporarily relocated as close to the Estate as possible in order to maintain social ties and easily	There may be adverse equality impacts on groups with protected characteristics as a result of relocation and the loss of social cohesion. There may be a disproportionate impact on ethnic minority groups and children as these groups are disproportionately represented in the LIA.

Potential equality risks	Existing Poplar HARCA mitigations or enhancements	Recommendations	Overall Impact
social connection, such as community centres or schools. This can impact on all parts of the community, but can have a disproportionately negative effect on children, older people, disabled people, people who are pregnant, people from ethnic minority backgrounds and people from minority faith groups. Children can be particularly affected when their relocation is accompanied by a change of school. Children are disproportionately represented within the population of the LIA (24%).	- Private tenants who were resident when the ballot took place will be eligible to register on the housing register and will be given enhanced priority for rehousing off the estate - Private tenants who moved in after the ballot will be signposted to alternate rehousing sources and Poplar HARCA will work with their current landlord to provide alternative accommodation	access community resources. Ideally, this would be within a 15-minute walk.	There may be a differential adverse impact on older people, disabled people, pregnant people, and people from minority faith groups. Overall, if the proposed mitigations are implemented there is likely to be limited adverse impacts on groups with protected characteristics, both for the overall Phase 1 plan, and if the CPO is used.
Health effects associated with relocation The redevelopment of the Teviot Estate will involve the relocation of residents and the demolition of housing. In the area covering Phase 1 of the redevelopment this includes residents of Chadbourne Street, St Leonards Road, 3-107 Spey Steet, 1-63 Zetland Street, and 1-41 Ullin Street. Phase 1 residents will not be able to move directly into a new home and will have to temporarily relocate to alternative accommodation off Site. Home relocation can lead to a loss of access to community resources and a consequential loss of social cohesion. This can lead to increased stress and anxiety due to the need to adapt to new routines, facilities and surroundings. Health impacts of relocation can be compounded when the relocation is	- Phase 1 tenants will receive support to move to new homes off the estate, as well as support to return. - Tenants will be asked for their choice for which new home they would like to move into, as long as it is like for like. - Neighbours who want to stay living close to each other can be moved together - All residents will receive help to move - Private tenants who were resident when the ballot took place will be eligible to register on the housing register and will be given enhanced priority for rehousing off the estate - Private tenants who moved in after the ballot will be signposted to alternate rehousing sources and Poplar HARCA will work with their current landlord to provide alternative accommodation	This risk requires further management, for which Poplar HARCA should consider the following recommendations: All tenants in Phase 1 with a right to return should have the opportunity, if they wish, to be temporarily relocated as close to the Estate as possible in order to maintain social ties and easily access community resources. Ideally, this would be within a 15-minute walk.	There may be adverse impacts on groups with protected characteristics due to the impacts on health caused by relocation. The population of the Estate has a disproportionately large population of ethnic minority groups, and children. There is therefore the potential for disproportionate adverse equality effects on these groups. Disabled people and older people may also be differentially affected by the Scheme. Overall, if the proposed recommendations are implemented, there is likely to be a limited residual adverse effect on people with protected characteristics as a result of the health effects associated with relocation, both for the whole Scheme, and in the event of the CPO being used.

Potential equality risks	Existing Poplar HARCA mitigations or enhancements	Recommendations	Overall Impact
involuntary. This stress has been attributed to the anticipation of disruption, extra costs for residents and undermining of community stability and support networks. This can disproportionately impact ethnic minority people, disabled people, older people and children. Private tenants do not have a right to return to the estate. The population of the Estate has a disproportionately large population of ethnic minority groups (82%), and children (24%).	- Residents will receive help to move, including the below financial compensation: - Resident leaseholders are entitled to a Disturbance Payment to cover any costs reasonably incurred in moving home or purchasing a property under the CPO compensation guidance. - Resident property owners are entitled to receive home loss compensation at 10% of the market value of the property under the CPO compensation guidance. - Poplar HARCA will reimburse residents for costs incurred obtaining professional CPO and valuation advice, up to a capped figure. - Poplar HARCA have given an undertaking to all affected residents to work with them on a one-to-one basis to establish their housing needs and provide a relocation solution that is tailored to those needs. - All resident leaseholders and council tenants have the right to return to a new property on the Estate - Excluding Phase 1 tenants, all eligible residents will be able to move directly into their new home on the Estate.		
Costs associated with relocation The redevelopment will lead to all residents of the Estate having to move, and Phase 1 residents will have to move twice.	- Phase 1 tenants who have to move twice will have their removal and moving costs paid for both times. - Resident freeholders, leaseholders, and tenants are entitled to a Disturbance Payment to cover any	This risk does not require further management	There are unlikely to be adverse impacts on groups with protected characteristics as a result of costs associated with relocation either under the Scheme proposals or in the event of the CPO being used.

Potential equality risks	Existing Poplar HARCA mitigations or enhancements	Recommendations	Overall Impact
This is likely to lead to an increase in financial outgoing for households due to the costs associated with moving. This will particularly impact groups who are more likely to be low income and therefore who are less likely to have disposable or spare income. Research suggests that these groups are likely to include young people, older people, disabled people, ethnic minority groups, and women. There is a disproportionately high ethnic minority population within the LIA of the Estate (82%).	costs reasonably incurred in moving home or purchasing a property under the CPO compensation guidance. Amongst others, the Disturbance Payment includes cost of removals, assistance with packing and unpacking, redirection of post, curtain replacement, flooring replacements, cooker installations and the second hand value of items that would not fit in their new home. ● Under the CPO compensation guidance, resident freeholders and leaseholders are entitled to receive home loss compensation at 10% of the market value of the property, subject to a maximum value of £78,000. Tenants are eligible for a flat fee of £7,800. ● Residents will receive £1,000 from Poplar HARCA in addition to the above to assist with the cost of the move.		
Access to finance The redevelopment will require residents to relocate. Residents who do not have a right to return to the new estate will have to find long term housing, and residents who do return to the Estate could face increased costs in their home. Access to the required finance to obtain new housing or meet the higher payments on redeveloped homes may be most limited for those most at risk of financial exclusion. Financial exclusion arises when an individual faces difficulty when trying to access appropriate and mainstream	● Resident homeowners will be able to buy a share in a new home on Teviot depending on what they can afford. The lease would include the same rights and obligations as their current lease. ● Social tenants who move to properties of the same size will pay the same rent as they would if they hadn't moved. ● All homeowners will have their properties independently valued, with Poplar HARCA reimbursing the costs of an independent surveyor, up to a reasonable amount.	This risk requires further management, for which Poplar HARCA should consider the following recommendations: ● Poplar HARCA should continue to communicate proactively with residents through a range of channels, including face-to-face engagement where possible, keeping up-to-date records of changing needs and circumstances—particularly those who are most affected by financial exclusion.	There is the potential for adverse equality impacts on groups with protected characteristics as a result of accessing finance. There may be disproportionate impacts on ethnic minority groups. There may also be differential effects on young people, single parents, and older people. Overall, if the proposed mitigations are implemented there is likely to be some residual adverse impacts as a result of accessing finance.

Potential equality risks	Existing Poplar HARCA mitigations or enhancements	Recommendations	Overall Impact
financial services. In the UK, certain groups are particularly vulnerable to financial exclusion, including young people not in employment, lone parents, ethnic minority groups and older people. There is a disproportionately high ethnic minority population within the LIA of the Estate (82%).	● Ground rents will never be more than £10 per year for existing leaseholders and tenants with a protected Right to Buy who buy their new home ● Under the CPO compensation guidance, resident freeholders and leaseholders are entitled to receive home loss compensation at 10% of the market value of the property, subject to a maximum value of £78,000. Tenants are eligible for a flat fee of £7,800.		
Access to affordable housing The redevelopment will result in the demolition and rebuild of all properties on the Estate. In Phase 1, this covers Chadbourne Street, St Leonards Road, 3-107 Spey Steet, 1-63 Zetland Street, and 1-41 Ullin Street. The need for residents to relocate can cause difficulty in accessing affordable housing. This is also exacerbated by the increasing unaffordability of homeownership for many people in England and Wales over the past decade. Young people, women, disabled people, and LGBTQ+ people are most likely to face financial issues when securing alternative housing.	● All resident leaseholders and council tenants have the right to return to a new property on the Estate ● In future phases, all eligible residents will be able to move directly into their new home on the Estate. ● Poplar HARCA have given an undertaking to all affected residents to work with them on a one-to-one basis to establish their housing needs and provide a relocation solution that is tailored to those needs.	This risk requires further management, for which Poplar HARCA should consider the following recommendations: ● Poplar HARCA and its advisors should provide support with market search processes and signposting to housing services to assist private renters with no Right to Return to help find an affordable and appropriate new home, particularly those that may be vulnerable. ● Private tenants should be given the opportunity to register interest for new private accommodation on the redeveloped Site.	There is the potential for adverse equality impacts on groups with protected characteristics as a result of access to affordable housing. There may be differential impacts on young people, women, disabled people and LGBTQ+ people. Overall, if the proposed mitigations are implemented there is likely to be some residual adverse impacts as a result of access to affordable housing.
Access to appropriate and accessible housing The scheme has the potential to impact upon access to appropriate and accessible housing for local residents. All estate residents will be required to relocate at one	● Adult children living at home since March 2019 will be eligible to be decanted into their own home on the Estate, if they were eligible to vote in the ballot. ● Homes which residents are decanted into will meet their needs in terms of	This risk does not require further management	There is potential for adverse equality effects on groups with protected characteristics linked to potentially unsuitable housing. As the local area has a disproportionately high population of children, there may be

Potential equality risks	Existing Poplar HARCA mitigations or enhancements	Recommendations	Overall Impact
point during the duration of the redevelopment, once their properties have been acquired by Poplar HARCA either voluntarily or via the Council's CPO. Residents of Phase 1 properties will have to temporarily move off- Site whilst the new Phase 1 properties are built. Where redevelopment schemes require the resettlement of many residents, issues can arise regarding sourcing suitable housing that meets the needs of diverse groups. This includes housing that meets the needs of people requiring adaptable and accessible accommodation, such as people with mobility impairments as well as housing suitable for multigenerational families and families with children. A lack of suitable housing can lead to families living in overcrowded conditions. Indeed, consultations have highlighted the need for adult children to have the right to be decanted into their own home, which has been taken forward.	affordability, accessibility and size. This will address existing overcrowding issues ● Poplar HARCA have given an undertaking to all affected residents to work with them on a one-to-one basis to establish their housing needs and provide a relocation solution that is tailored to those needs. ● In future phases residents with a Right to Return to the redeveloped Estate will be able to make one move directly into their new home.		disproportionate adverse equality impacts on families with children. Overall, if the proposed recommendations are implemented, there is likely to be only a very limited residual adverse effect on Phase 1 residents with protected characteristics linked with access to appropriate and accessible housing.

6.3 Impact on local community and community resources during redevelopment

- 6.3.1 The following table describes the potential impacts of the Scheme on protected characteristic groups, with a focus on wider residents and community resources during the redevelopment process of Phase 1. These impacts have been identified through a review of published literature and through engagement with residents. Existing measures in place and further recommendations to mitigate or enhance impacts are set out, along with the overall equality impact on groups with protected characteristics.

Table 6.2: Impact on local community and community resources during redevelopment

Potential equality risks	Existing Poplar HARCA mitigations or enhancements	Recommendations	Overall Impact
Health effects as a result of construction The scheme has the potential to result in health effects for local people arising from the construction process. The phasing plan means that local residents in Phases 2-4 will still be on site during demolition and construction of different phases and may therefore be impacted by this. The environmental effects of demolition, refurbishment and construction can impact upon air and noise pollution which can have physical health impacts on local people. Changes in the visual environment can cause stress and anxiety amongst certain groups, including those with learning difficulties and children. Those groups which are more likely to be impacted by physical health effects are children, young people, older people, disabled people, and pregnant people. The Estate has a disproportionately high population of children (24%).	• The contractor is obligated by law to develop a Construction Environmental Management Plan (CEMP) to mitigate the impacts of demolition and construction on local residents • The contractor will adhere to the mitigations set out in the Environmental Impact Assessment to mitigate noise, vibration, and air quality impacts. • Hill Group are a member of the Considerate Contractor groups and will apply these principles, including the considerate working hours	This risk requires further management and Poplar HARCA should consider the following recommendations: • The appointed contractor should implement the proposed mitigation measures as set out in the Environmental Impact Assessment. It should be ensured that information on these mitigations is made available to the public, in particular local residents. • The contractor should adhere to the mitigations set out in the Environmental Impact Assessment to mitigate noise, vibrations, and air quality. • The CEMP, should follow best practice mitigation for changes to the landscape and visual environment. • The CEMP should include best practice guidelines on visual hoardings to ensure the site is visually attractive and hidden from view. The hoardings used should be carefully chosen as to not invite graffiti and vandalism and should be regularly checked and replaced if necessary • The Council should engage with the community facilities on site prior to the commencement of demolition activities to discuss the needs of the users and staff. If required, space nearby should be provided for the facilities to continue its activities with less disruption.	There may be limited adverse impacts on groups with protected characteristics due to the impacts on health caused by changes to general environmental conditions. There may be disproportionate adverse impacts on children and this group is disproportionately represented in the local area. Young people, older people, disabled people, and pregnant people may be differentially impacted by health effects. Overall, however, if the proposed recommendations are implemented, there is likely to be no adverse effects on people with protected characteristics as a result of the health effects caused by changes to general environmental conditions.
Changes to feelings of safety and security	• Construction of scheme is phased to ensure the Estate is not completely	• This risk requires further management and Poplar	There may be limited adverse impacts on groups with protected characteristics due to changes in safety and security.

Potential equality risks	Existing Poplar HARCA mitigations or enhancements	Recommendations	Overall Impact
In the lead up to and during demolition and construction there is a risk of impacts on safety and security on the site, and subsequent impacts of feelings of safety and security for local residents. Footpath/pavement closures during construction could impact safety, particularly where distances for pedestrians are lengthened or if they are diverted through darker or more concealed routes. There may also be an intensification of fear and intimidation due to changes in pedestrian road layout and accessibility as a result of increased traffic during construction. Moreover, vacant buildings could attract unwanted activity including anti-social behaviour and crime. This may differentially impact groups with protected characteristics who are more likely to be vulnerable to attacks including women, young men, LGBTQ+ people and people from ethnic minority groups. Vacant properties can fall into disrepair. This can attract unwanted activity including anti-social behaviour and crime, which can differentially affect those living in the area who are likely to be a victim of crime or those who are more fearful of crime.	empty and minimise length of time buildings are unoccupied ● Poplar HARCA will also work with short life groups to utilise vacant accommodation pending demolition ● The use of guardianships or meanwhile use will be used for buildings which will be vacant prior to demolition	HARCA should consider the following recommendations: ● Safety and security provisions during demolition and construction should be undertaken in accordance with the RBG Code of Practice and Tower Hamlets Gender- Inclusive Design Guidance. ● Approaches to monitoring the security of the scheme during demolition should continue to be considered and additional security also considered where concerns are flagged. However, any enhanced security measures should only be implemented as a last resort, if deemed necessary, and in conjunction with residents, as it risks adding to a sense of vulnerability, isolation, and loss of sense of community for residents who will remain on the Estate throughout the process. ● The Council and contractor should create and publicise a process whereby local residents can raise concerns regarding anti social behaviour or vandalism whilst demolition and construction are ongoing	There is the potential for disproportionate adverse equality effects for ethnic minority groups due to changes in feelings of safety and security for this group. Women, young men and LGBTQ+ people may also be differentially impacted by changes to feelings of safety and security. If the proposed recommendations are implemented, there is likely to be no adverse effect on groups with protected characteristics as a result of changes in safety and security.
Accessibility and mobility in the area During demolition and construction there is a risk of adverse impacts on accessibility and mobility in the local area while construction and demolition is ongoing. As	● The contractor is obligated by law to develop a Construction Management Plan to mitigate the impacts of demolition and construction on local residents.	This risk requires further management and Poplar HARCA should consider the following recommendations: ● Good access and mobility should be maintained through the creation of a CEMP, which would set out	There are likely to be adverse impacts on groups with protected characteristics due to changes to the accessibility and mobility of the sites.

Potential equality risks	Existing Poplar HARCA mitigations or enhancements	Recommendations	Overall Impact
the phasing plan means residents will still be living on the wider Estate, there may be issues with diversions on St Leonards Road and Zetland Street, as well as parking on these roads, along with Spey Street, Ullin Street and Chadbourn Street. In particular, construction can cause difficulties in relation to increased traffic in the local area, reduced parking (construction vehicles and subcontractors in parking), construction activities blocking access to homes, shops, bus stops and pavements and safe routes, as well as effects on wayfinding. This can have particular negative effects on children, and people using buggies or pushchairs, older people, and disabled people. The population of the Estate has a disproportionately high population of children (24%).	Poplar HARCA has developed a phasing strategy working back from Langdon park to the A12 to ensure construction traffic is managed in a way that minimises disruption to local residents and the local road network	arrangements for any necessary diversions, and should provide well-signed routes that limit extra travelling distances. The CEMP should also ensure that access is maintained through measures such as such as limiting pavement obstructions and maintaining disabled parking. The CEMP should specifically consider the needs of protected characteristic groups who may have limited mobility. - Ensure that pedestrian and wheelchair accessibility is maintained throughout - Poplar HARCA should ensure the demolition, and subsequent construction, phase of the scheme are undertaken according to best practice measures for pedestrian environment management, to effectively mitigate any impacts.	As the population of the Estate has a disproportionately high population of children, there is the potential for adverse equality effects related to accessibility and mobility in the area for this group, and parents or carers who may be accompanying them or pushing them in buggies. Older people and disabled people are also likely to be differentially adversely affected by changes to accessibility and mobility in the area during construction. If the proposed recommendations are implemented, there is likely to be no adverse effect on groups with protected characteristics as a result of changes to the accessibility and mobility of the sites.
Delivery of information and communication throughout the scheme The scheme will require information about the works and CPO process to be communicated effectively to local affected people in order that they are fully aware of what is going on and are able to participate fully in the CPO process. If information about the scheme is not communicated effectively there is a risk that residents and local people do not fully understand what is going on and are unable to engage properly with the process.	- Engagement material and scheme-related information will be delivered in an inclusive way, considering the different needs of people with learning disabilities along with hearing and visual impairments. - Reasonable adjustment will be considered and implemented according to international good practice, and delivery of alternative text (e.g.braille) will be ensured. - Delivery of different forms of updates such as e-mails, printed material and audio announcements will ensure inclusion in accessing scheme information.	This risk requires further management and Poplar HARCA should consider the following recommendations: - Engage closely with residents prior to and during Phase 1 to ensure all residents are fully aware of what changes may happen and when - Continue to produce user-friendly information for all phases of the scheme for affected parties, providing information on the steps required throughout the CPO process. The guide should consider timescales and details of the scheme, and compensation.	The construction of the scheme is likely to result in limited adverse effects for groups with protected characteristics in terms of communication and the delivery of information to stakeholders. There are likely to be disproportionate adverse impacts for minority ethnic groups as a result of the delivery of information and communication, as this group is more likely to have English as a second language. There are also likely to be disproportionate adverse impacts for people from deprived backgrounds, as the area in which the Site falls has higher than average (when

Potential equality risks	Existing Poplar HARCA mitigations or enhancements	Recommendations	Overall Impact
Complex material and information on the scheme may present a challenge to those who have different information and communication needs. This includes, but is not limited to, people with cognitive or learning disabilities, people with low literacy levels, older people, people with visual or hearing impairments and people who use English as a second language .	Targeted focus groups speaking to groups with different protected characteristics	- Upon request, scheme information should be made available in different languages, large print, Braille, audio and in alternative languages to be delivered by post. Local representation of spoken languages should be considered in making alternatives available. - Ensure continued engagement and conversations with affected parties about the first CPO process and relocation alternatives. This engagement should include regular development updates and engagement meetings, all of which are recorded by the scheme's project team. Continue to address feedback and concerns around loss of income, employment and relocation.	compared regionally and nationally) levels of deprivation. There may also be differential adverse impacts on people with learning disabilities, older people, people with visual or hearing impairments, children and young people. Overall, if the best practice measures laid out in the recommendations are implemented, there are likely to be no adverse equality effects on groups with protected characteristics.

6.4 Impact on the community following redevelopment

- 6.4.1 The following table sets out the potential impacts of the Scheme on protected characteristic groups, with a focus on the local community following the whole redevelopment process of the Teviot Estate. The use of CPO powers, if required, to facilitate construction of Phase 1 of the scheme will ultimately facilitate the rest of the scheme to go ahead.
- 6.4.2 These impacts have been identified through a review of published literature and through engagement with residents. Existing measures in place and further recommendations to mitigate or enhance impacts are set out, along with the overall equality impact on groups with protected characteristics.

Table 6.3: Impact on the community following redevelopment

Potential equality risks	Existing Poplar HARCA mitigations or enhancements	Recommendations	Impact (in light of mitigation)
Improved housing provision The redevelopment of the Teviot Estate will provide over 1,800 good quality new homes in Tower Hamlets for local people. Phase 1 will include 475 homes, ranging from low rise to high rise buildings, with over 90% of these on social rent tenure. The redevelopment will improve the quality and quantity of housing provision. The quality of the proposed residential properties will be an improved provision compared to those properties currently on the Site. Redevelopment can also improve the accessibility and appropriateness of properties, as well as the quality and efficiency in energy consumption. This would have a positive impact on those groups more likely to be in fuel poverty, including ethnic minority groups, who are disproportionately represented in the LIA. Furthermore, evidence shows that fuel poverty is more common with ethnic minority households when compared to white households. Therefore, the provision of newer and more fuel-efficient housing may present a positive equality effect for ethnic minority groups. Feedback from public consultations has highlighted a need for improved homes, with better insulation to avoid damp.	- Over 1,800 new homes across the full scheme. At least 475 homes delivered during Phase 1. 35% of new homes will be affordable, with 90% of these on social rent tenures. The Planning Application proposes that social rent homes will be re-provided at the same social rents as is currently charged, subject to inflation 49% of social rent homes will be family size (three or more bedrooms) - Homes will be at least the same size as current homes. - Better access to daylight, sunlight, and privacy, with as many dual aspect homes as possible. - Buildings with 24 hour natural surveillance, video door entry system, and concierge. - Homes on estate designed with 'Secured by Design' principles in mind, which can reduce burglary and anti-social behaviour. - Some residents will have access to residents only courtyards. - Homes will be designed to be more energy efficient than the current stock. - Residents will have access to private gardens, balconies or patios. - Residents who need aids and adaptations will have these works done prior to them moving in.	Rental fees and service charges for proposed properties should be shared with the local community as far in advance of scheme operation as possible.	The delivery of new housing is likely to bring positive equality effects for local groups with protected characteristics. There is likely to be a disproportionately positive impact on ethnic minority groups as these groups are disproportionately represented within the LIA. Ethnic minority groups are likely to benefit from improved housing and they are more likely to live in fuel poverty. There are likely to be differential positive effects on children, older people, and disabled people as a result of the improved provision as these groups are also present on the Estate. If the proposed recommendations are implemented, there is likely to be positive effects on groups with protected characteristics.
Changes to employment opportunities	150 apprenticeships during construction	Poplar HARCA and its advisors should develop a range of suitable proposals	The changes to employment opportunities as a result of the scheme operation are

Potential equality risks	Existing Poplar HARCA mitigations or enhancements	Recommendations	Impact (in light of mitigation)
The construction and operational phases of the Teviot Estate scheme will have a beneficial impact on employment opportunities for local people, with an estimated 340 new jobs expected over the lifecycle of the project. Indeed, redevelopment can act as a means of promoting economic growth and supporting job creation. These opportunities may positively affect protected characteristic groups which are more likely to be impacted by unemployment, including people from ethnic minority groups, older, disabled, and younger people. Furthermore, the construction phase of the scheme will provide temporary employment opportunities for construction workers. These opportunities may disproportionately benefit men, who are more likely to be construction workers.	● 340 new jobs over construction and operation ● Phases 1 and 2 will deliver a new mini supermarket on the Estate, as well as 510 square metres of further commercial space. The phases will also deliver 1,180 square metres of workspace as part of the developments 'Maker Street' concept, which is intended to support local entrepreneurs..	that maximise the employment, apprenticeship and training opportunities created by the scheme for local residents both at the construction stage and after the scheme is complete. The Council and its advisors should add contract clauses that specify a certain proportion of the construction workforce is drawn from the local area and offer opportunities for work-based training, such as apprenticeships. ● Following the submission of the planning application, the responsible parties should develop a range of suitable proposals that maximise the employment, apprenticeship and training opportunities created by the scheme for local residents and from the wider Tower Hamlets borough. ● Employment planning for the scheme should look to focus on creating job opportunities for those protected characteristic groups who are more likely to be impacted by unemployment, including people from ethnic minority groups (who are disproportionately represented in the LIA population), older, disabled, and younger people.	anticipated to generate positive equality effects, particularly if the recommendations are implemented. There is likely to be a disproportionate positive impact on ethnic minority groups and the most deprived groups as both groups are disproportionately found living in the LIA. Both groups are more likely to be unemployed. There is likely to be a differential positive impact on young people, disabled people, and men, as these groups are also more likely to be unemployed.
Improved public realm during operation The scheme will deliver a much-improved public realm for residents and local people, with a new central 'Teviot Square' for socialising, and the transformation of Langdon Park.	● New central square, 'Teviot Square', with space for community activities and places to meet, as well as new play spaces for children of all ages during Phase 1.	● Poplar HARCA and its advisors should ensure that improvements to public space (including the pedestrian environment and play spaces on the Site) appropriately consider best practice in accessible and inclusive design (such as Design for the Mind; and Tower Hamlets Gender- Inclusive	There are likely to be disproportionate positive impacts on minority ethnic groups as a result of the improvements to the public realm, as this groups is disproportionately represented in the local area. There is likely to be a differential positive impact on older people, children, young

Potential equality risks	Existing Poplar HARCA mitigations or enhancements	Recommendations	Impact (in light of mitigation)
The ability to access and use the public realm is vitally important to ensuring people feel that they are active members of their society. This includes basic activities such as using local shops or meeting up with people in a shared outside space close to home. In addition, the opening up of green space has been shown to impact positively on both physical and mental health. Research indicates that disabled people and individuals from minority ethnic groups (who are disproportionately represented in the LIA population) are less likely to take part in public life than other groups. Therefore, upgrades to the public realm could help to ensure all its users, especially minority ethnic groups, disabled people and older people, feel safe and find the area more accessible, making them more likely to use the public realm. Feedback from public consultations highlighted the need for increased and improved green and open space, and it is likely that the new scheme will deliver this.	- Langdon Park will be transformed, with safer routes linking it with the wider Estate - Overall new park and green space for residents of the Estate - Plaza space outside new Mosque - Locations for new growing spaces for the community - The public realm will be designed as to promote natural surveillance, and busy spaces to ensure safety - Workshops and extensive community engagement held to consider inclusive design in the new community spaces, including discussions with Make Space for Girls and strategies to ensure a child friendly public realm - Workshops will be held with representatives of young Teviot residents, including girls, to develop detailed plans for the outdoor spaces on the new Estate - New spaces will include a range of small, accessible and playful spaces throughout the scheme to appeal to teenage girls	Design Guidance), benefitting vulnerable groups like women and girls; and older and disabled people, including those with mobility and sensory impairments. Where possible, different user groups should be included in co-design of spaces to reflect different needs and lived experiences of using public space.	people, and disabled people as more green space and accessible public realms can help influence these groups to participate more in public life. The improvements to the public realm during operation are likely to cause positive equality effects.
Provision of community facilities and improved social cohesion The regeneration of the Estate will provide new opportunities for community space and cohesion. Community resources provide important places of social connection and promote wellbeing for many groups. Groups that are more vulnerable to adverse health	- Space in Centre for a new nursery and café - Multifunctional and dividable spaces for public and community events, including garden to the rear of the Centre - New community pub or restaurant delivered as part of Phase 1 - New central square, 'Teviot Square', with space for community activities and	It is recommended that HARCA: - Seeks input from local community groups to understand how to maximise the benefit gained from the new facilities. - Engage with local residents to understand how the new community centre, pub and nursery could best	The creation of new community facilities as part of the scheme is anticipated to generate positive equality effects. Children and ethnic minority groups are likely to disproportionately benefit from this, as there is a high proportion of both groups on site. Older people will also differentially

Potential equality risks	Existing Poplar HARCA mitigations or enhancements	Recommendations	Impact (in light of mitigation)
and wellbeing effects associated with reduced social cohesion include children, ethnic minority groups and older people. Therefore, it would be anticipated that these groups would benefit from improvements to community resources and enhanced opportunities for social connection. Feedback from public consultations has highlighted a need for more community space where people can meet. Feedback also highlighted the need for an upgraded and larger Mosque. It is anticipated that the plans will deliver these	places to meet, as well as new play spaces for children of all ages during Phase 1.	serve them. This may include longer opening hours at the nursery, specific services being offered at the health clinic (such as walk ins), and the pub being run as a Community Pub, run by the local people.	benefit from improved provision of community facilities. If the proposed recommendations are implemented, there is likely to be a positive effect on groups with protected characteristics.
Improved access, mobility and navigation The use of CPO powers to facilitate redevelopment opens up opportunities to create spaces and places that can be accessed and effectively used by all using principles of inclusive design. It would be anticipated that the proposed enhancements would particularly benefit those groups who typically face greater mobility challenges, including older people, disabled people and pregnant women.	• Workshops and extensive community engagement held to consider inclusive design in the new community spaces, including discussions with Make Space for Girls and strategies to ensure a child friendly public realm • Workshops will be held with representatives of young Teviot residents, including girls, to develop detailed plans for the outdoor spaces on the new Estate • New spaces will include a range of small, accessible and playful spaces throughout the scheme to appeal to teenage girls • Current residents' estate parking permits will be guaranteed • New traffic calming measures throughout estate and on approach to Langdon Park	It is recommended that HARCA: • Continue to work with groups which are less likely to take part in traditional consultation and engagement approaches to develop plans for the site • Ensure sufficient benches are provided throughout the Estate to ensure people who are unable to walk for long distances are able to rest • Wayfinding should be clear and consistent	It is anticipated that the scheme will have a positive impact on pedestrian mobility and navigation across the Site. Older people, pregnant women, and disabled people are expected to differentially benefit from these improvements. If the proposed recommendations are implemented, there is likely to be a positive effect on groups with protected characteristics.

Potential equality risks	Existing Poplar HARCA mitigations or enhancements	Recommendations	Impact (in light of mitigation)
Tackling crime and disorder Improvements to the public realm and management of the Site during redevelopment may reduce crime and in turn have a positive effect for those more likely to fear crime or be a victim or witness of crime including women, young men, LGBTQ+ people and people from ethnic minority groups. Feedback from public consultation has highlighted a concern with anti- social behaviour on the Estate, and a desire for improved lighting and CCTV. This has been included in the masterplan.	● New estate built with Secured by Design principles in mind, with workshops held with the local Designing Out Crime Officer ● The estate will include active and well overlooked streets ● The estate will have better lighting and CCTV ● Well designed, managed, and secure public open spaces ● A more active evening and night time economy ● New shops at Langdon Park to overlook area and reduce anti social behaviour	The scheme will tackle crime and disorder through a range of design features in the new homes and spaces. No further enhancements are proposed.	There is likely to be a positive effect on groups with protected characteristics as a result of tackling crime and disorder. There is likely to be a disproportionate positive impact on ethnic minority groups, as this group is disproportionately represented within the LIA. Women, young men and LGBTQ+ people will also differentially benefit from these improvements.

7 Conclusion and Action Plan

7.1 Conclusion

- 7.1.1** The EqIA has identified a number of risks, opportunities and potential impacts that could arise for people with protected characteristics, as a result of the regeneration of Phase 1 and the potential use of Compulsory Purchase Order powers to deliver this. The EqIA also identifies opportunities, risks, and impacts which may arise as a result of the construction and future delivery of the whole Teviot Estate redevelopment scheme, as facilitated by Phase 1. The details of these impacts are set out in detail in Chapter 6 Impact Assessment.
- 7.1.2** The assessment identifies that the scheme has the potential to cause limited adverse equality effects for the private tenants who currently live on the Site. However, the number of residents likely to be affected is limited, due to the small proportion of private tenants living on the Estate.
- 7.1.3** The assessment identifies that the scheme, once delivered, has the potential to provide improved housing, an improved public realm, improved community spaces, and improved religious spaces for local people. There is therefore a compelling case in the public interest for the use of the CPO in order to facilitate demolition of residential, commercial properties and community facilities currently operating on the Site to allow for the redevelopment to improve outcomes for the local community.

7.2 Action Plan

- 7.2.1** The following action plan seeks to establish activities and responsibilities during the demolition period to continue to identify and address equality issues where they arise. It is the responsibility of Poplar HARCA to implement any recommendations and mitigations identified.

Table 7.1: Action Plan

Action	Potential impact	Owner	Timescale
Impact on existing residents during redevelopment			
All tenants in Phase 1 with a right to return should be given the opportunity to be relocated, if they so wish, as close to the Estate as possible in order to maintain social ties and are able to easily access community resources. Ideally, this would be within a 15 minute walk.	Health effects associated with relocation	Poplar HARCA	Ongoing
	Relocation and loss of social cohesion	London Borough of Tower Hamlets	
Private tenants should be given the opportunity to register interest for new private accommodation on the redeveloped Site.	Costs associated with relocation	Poplar HARCA	Ongoing
	Access to finance	London Borough of Tower Hamlets	

Action	Potential impact	Owner	Timescale
Housing need assessments for secure and non-secure tenants eligible for rehousing onsite should be regularly updated to ensure that the new home offer meets the need of each household.	Costs associated with relocation Access to affordable housing	Poplar HARCA London Borough of Tower Hamlets	Ongoing
Impact on local community and community resources during redevelopment			
Local residents should be made aware of the construction process, timeline and mitigation measures put in place for the scheme. Communication channels should remain open with the community throughout the construction process.	Loss of social cohesion and access to community resources	Poplar HARCA	Throughout construction
Poplar HARCA should ensure the construction phase of the scheme will be undertaken according to best practice measures for noise and air quality, to effectively mitigate any impacts.	Health effects as a result of construction works	Poplar HARCA	Throughout construction
The appointed contractor should implement the proposed mitigation measures prior to further phases of site clearance and construction. It should be ensured that this information is made available to the public, in particular local residents	Health effects as a result of construction works	Poplar HARCA	Throughout construction
The Construction Environmental Management Plan (CEMP), should follow best practice mitigation for changes to the landscape and visual environment, including best practice mitigation on visual hoardings	Health effects as a result of changes to the landscape and visual environment	Poplar HARCA	Throughout construction
Engage with the community facilities on site prior to the commencement of demolition activities to discuss the needs of the users and staff. If required, space nearby should be provided for the facilities to continue its activities with less disruption.	Health effects as a result of changes to general environmental conditions (changes in noise, vibrations, and air quality) Health effects as a result of changes to the landscape and visual environment	Poplar HARCA	Prior to demolition and construction
Good access and mobility should be maintained through the creation of a CEMP, which would set out arrangements for any necessary diversions, and should provide well- signed routes that limit extra travelling distances.	Accessibility and mobility in the area	Contractor	Prior to construction
Ensure that pedestrian and wheelchair accessibility is maintained throughout	Accessibility and mobility in the area	Contractor	Throughout construction
Continue to produce user-friendly information for the scheme for affected parties, providing information on the steps required throughout the CPO process. The guide should consider timescales and details of the scheme, and compensation.	Delivery of information and communication throughout the scheme	Poplar HARCA	Ongoing
Flow of information should be ongoing throughout negotiations, ensuring feedback is recorded and taken into consideration.	Delivery of information and communication throughout the scheme	Poplar HARCA	Ongoing

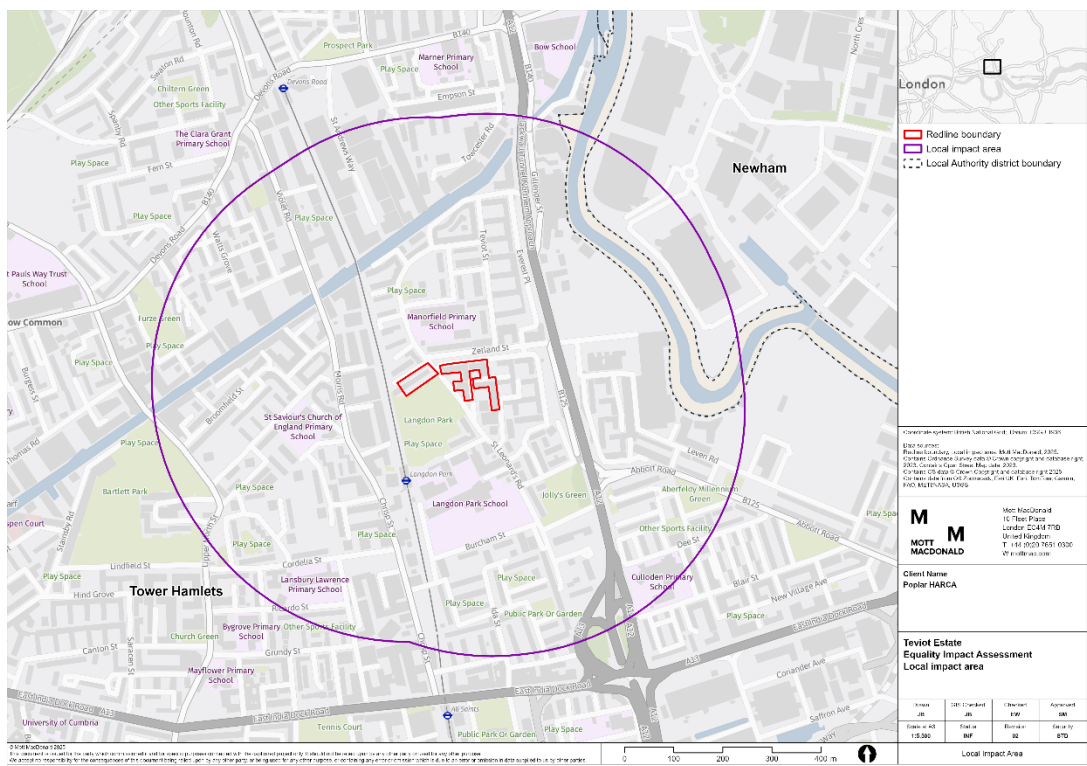
Action	Potential impact	Owner	Timescale
Ensure continued engagement and conversations with affected parties about the CPO process and relocation alternatives. This engagement should include regular development updates and engagement meetings, all of which are recorded by the scheme's project team	Delivery of information and communication throughout the scheme	Poplar HARCA	Ongoing
Impact on the community following redevelopment			
Rental fees and service charges for proposed properties should be shared with the local community as far in advance of scheme operation as possible.	Improved housing provision	Poplar HARCA	Ongoing
Develop a range of suitable proposals that maximise the employment, apprenticeship and training opportunities created by the scheme for local residents both at the construction stage and after the scheme is complete. The Council and its advisors should consider adding contract clauses that specify a certain proportion of the construction workforce is drawn from the local area and offer opportunities for work-based training, such as apprenticeships.	Changes to employment opportunities	Poplar HARCA	Ongoing
Following the submission of the planning application, the responsible parties should develop a range of suitable proposals that maximise the employment, apprenticeship and training opportunities created by the scheme for local residents and from the wider Tower Hamlets borough.	Changes to employment opportunities	Poplar HARCA	Ongoing
Ensure that improvements to public space (including the pedestrian environment and play spaces on the Site) appropriately consider best practice in accessible and inclusive design, benefitting older and disabled people, including those with mobility and sensory impairments.	Improved public realm during operation	Poplar HARCA	Ongoing
Seek input from local community groups to understand how to maximise the benefit gained from the new facilities	Provision of community facilities and improved social cohesion	Poplar HARCA	Ongoing
Continue to work with groups which are less likely to take part in traditional consultations to develop plans for the site	Improved access, mobility and navigation	Poplar HARCA	Ongoing
Ensure all outdoor spaces and accessible for people with a range of needs	Improved access, mobility and navigation	Poplar HARCA	Ongoing
Ensure provision for disabled parking is made, and that this is well signposted	Improved access, mobility and navigation	Poplar HARCA	Ongoing

A. Local Area Profile

A.1 Overview

The demographic profile of the area in which the scheme is located is outlined below. This shows the proportion of people with different protected characteristics living in the local impact area (LIA), the local borough of Tower Hamlet, Greater London and England as comparators. In comparing these regions, where the Estate deviates by more than 3%, the difference is reported as higher or lower; and where it deviates by 5% or more, the difference is reported as considerable.

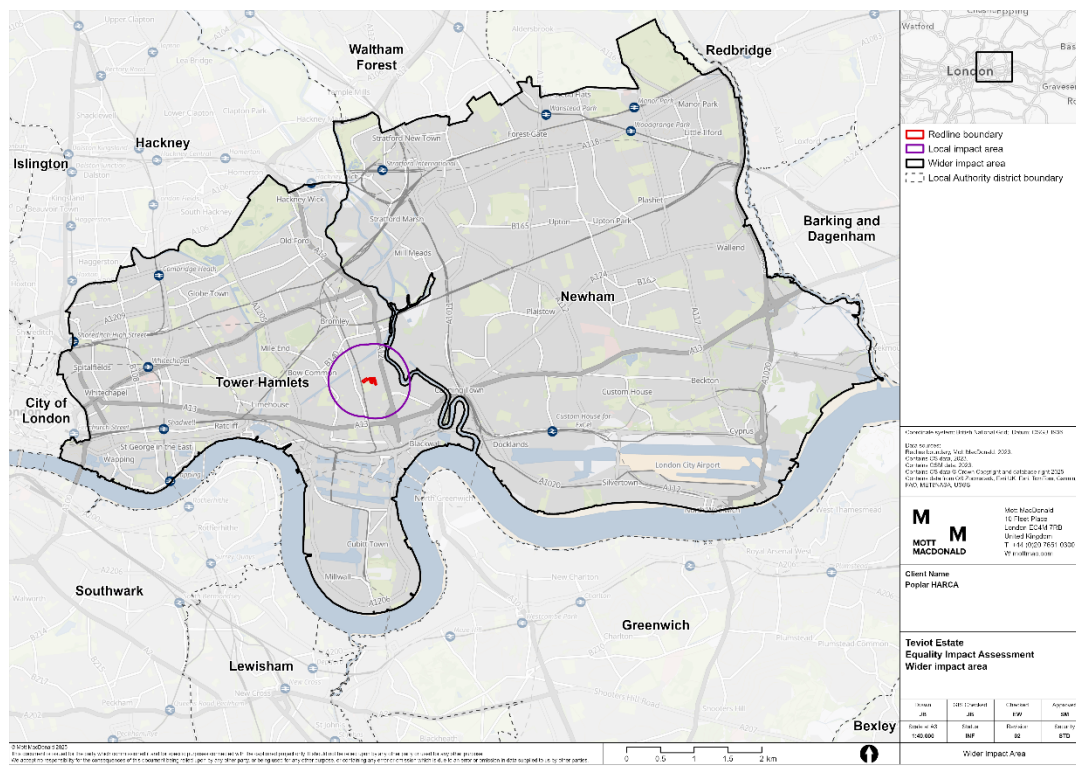
Map A. 1 Local Impact Area



Source: AddressBase, 2025

Map A.1 shows the Local Impact Area of Phase 1.

Map A. 2 Wider Impact Area



Source: AddressBase, 2025

Map A.2 shows the Wider Impact Area.

A.2 Age

Table A.1 below shows the population by age group including children, young people, working age people and older people.

Table A.1: Population by age group

Location	Children (<16 years)	Young people (16-24 years)	Working age (16-64 years)	Older people (65+ years)
Local impact area	24%	15%	70%	5%
Tower Hamlets	19%	15%	76%	6%
London	19%	11%	69%	12%
England	19%	11%	63%	18%

Source: ONS 2021

The table above outlines that:

- The proportion of children within the LIA (24%) is considerably higher than the borough of Tower Hamlets (19%), regional (19%) and national (19%) proportions. This indicates the local impact area has a comparably young population.
- The proportion of young people within the LIA (15%) is in line with the borough of Tower Hamlets (15%), but higher than regional (11%) national proportions (11%).

- The proportion of working age people within the LIA (70%) is considerably lower than Tower Hamlets (76%), broadly in line with regional proportions (69%), and considerably higher than national proportions (63%).
- The proportion of older people within the LIA (5%) is broadly in line with Tower Hamlets (6%), however considerably lower than the regional (12%) and national proportion (18%).

A.3 Disability

Table A.2 below shows the proportion of the population who are disabled, proportion of people whose day-to-day activities are limited a lot/little/not limited and the proportion of the population with no long term physical or mental health conditions.

Table A.2: Proportion of the population with a disability

Location	Disabled under the Equality Act	Day-to-day activities limited a lot	Day-to-day activities limited a little	Day-to-day activities are not limited	No LTHD (long term health disability)
Local impact area	14%	7%	8%	4%	82%
Tower Hamlets	13%	6%	7%	4%	83%
London	13%	6%	7%	5%	82%
England	17%	7%	10%	7%	76%

Source: 2021 Census, ONS- long term health problem or disability

The table above outlines that:

- The proportion of the population who are disabled in the LIA (14%) is broadly in line with Tower Hamlets (13%), regional proportions (13%), but lower than national proportions (17%).
- The proportion of the population whose day-to-day activities are limited a lot in the LIA (7%) is broadly in line with Tower Hamlets (6%), regional (6%) and national proportions (7%).
- The proportion of the population whose day-to-day activities are limited a little in the LIA (8%) is broadly in line with Tower Hamlets (7%), regional (7%) and national proportions (10%).
- The proportion of the population whose day-to-day activities are not limited in the LIA (4%) is broadly in line with Tower Hamlets (4%) and regional proportions (5%), but lower than national proportions (7%).
- The proportion of the population with no LTHD in the LIA (82%) is broadly in line with Tower Hamlets (83%) and regional proportions (82%) but considerably higher than national proportions (76%).

A.4 Gender reassignment

Table A.3 below shows the proportion of the population who do/do not identify with the same sex they were assigned at birth. Data at the local impact area level is not available, therefore the borough of Tower Hamlets will be compared with regional and national proportions.

Table A.3: Proportion of the population who do/do not identify with their sex registered at birth

Location	Gender identity the same as sex registered at birth	Gender identity different from sex registered at birth but no specific identity given	Trans woman	Trans man	All other gender identities	Not answered
Local impact area	Not available	Not available	Not available	Not available	Not available	Not available
Tower Hamlets	91%	1%	0.1%	0.1%	0.2%	8%
London	91%	1%	0.2%	0.2%	0.1%	8%
England	94%	0.2%	0.1%	0.1%	0.1%	6%

Source: 2021 Census, ONS – gender identity

The table above outlines that:

- The proportion of the population who identify their gender as the same as their sex registered at birth within Tower Hamlets (91%) is broadly in line with the regional proportion (91%), but lower than the national proportion (94%).

A.5 Marriage and civil partnership

Table A.4 below shows the proportion of the population who are married/in a civil partnership in the local impact area, Tower Hamlets, London and England as a whole.

Table A.4: Marital status of the population

Location	Single	Married	In a registered civil partnership	Separated	Divorced	Widowed or surviving partner
Local impact area	54%	35%	0.3%	3%	5%	3%
Tower Hamlets	58%	32%	0.4%	2%	5%	3%
London	46%	40%	0.3%	2%	7%	4%
England	38%	45%	0.2%	2%	9%	6%

Source: 2021 Census, ONS - marital and civil partnership status

The table above outlines that:

- The proportion of the population who are single in the LIA (54%) is lower than Tower Hamlets (58%), however considerably higher than the regional (46%) and national (38%) proportions.
- The proportion of the population who are married in the LIA (35%) is higher than Tower Hamlets (32%), however considerably lower than the regional (40%) and national proportions (44%).
- The proportion of the population who are divorced in the LIA (5%) is in line with Tower Hamlets (5%) and London (7%), however is lower than England as a whole (9%).
- The proportion of the population who are widowed or a surviving partner in the LIA (3%) is broadly in line with Tower Hamlets (3%) and London (4%) but lower than England as a whole (6%).
- The proportion of the population who are in a civil partnership or separated in the LIA is broadly in line with Tower Hamlets, London and England as a whole.
-

A.6 Race and ethnicity

Table A.5 below provides a breakdown of the population in the local impact area, Tower Hamlets, London and England by ethnicity.

Table A.5: Population by race and ethnicity

Race and ethnicity		Local impact area	Tower Hamlets	London	England
White	English/Welsh/ Scottish/Northern Irish/British	18%	23%	37%	74%
	Irish	1%	1%	2%	1%
	Gypsy or Irish Traveller	0%	0%	0.1%	0.1%
	Other White	11%	15%	15%	6%
Mixed/multiple ethnic groups	White and Black Caribbean	2%	1%	2%	1%
	White and Black African	1%	1%	1%	0%
	White and Asian	1%	1%	1%	1%
	Other Mixed	1%	2%	2%	1%
Asian/Asian British	Indian	2%	3%	8%	3%
	Pakistani	1%	1%	3%	3%
	Bangladeshi	42%	35%	4%	1%
	Chinese	2%	3%	2%	1%
	Other Asian	2%	2%	5%	2%
Black/African/Caribbean/Black British	African	8%	5%	8%	3%
	Caribbean	2%	2%	4%	1%
	Other Black	1%	1%	2%	1%
Other ethnic groups	Arab	1%	1%	2%	1%

Race and ethnicity	Local impact area	Tower Hamlets	London	England
Any other ethnic group	2%	3%	5%	2%
Ethnic minority background	82%	77%	63%	27%

Source: 2021 Census, ONS - ethnic group

The table above outlines that:

- The proportion of the population who are White British in the LIA (18%) is considerably lower than Tower Hamlets (23%), London (37%) and England as a whole (74%).
- The proportion of the population whose ethnicity is 'Other White' in the LIA (11%) is lower than Tower Hamlets (15%) and London (15%) but considerably higher than England as a whole (6%).
- The proportion of the population in mixed or multiple ethnic groups in the LIA is broadly in line with Tower Hamlets, London and England.
- The proportion of the population who are Indian in the LIA (2%) is broadly in line with Tower Hamlets (3%) and national proportions (3%) but considerably lower than regional proportions (8%).
- The proportion of the population who are Bangladeshi in the LIA (42%) is considerably higher than Tower Hamlets (35%), regional (4%) and national (1%) proportions.
- The proportion of the population whose ethnicity is 'Other Asian' in the LIA (2%) is broadly in line with Tower Hamlets (2%) and national proportions (2%), but lower than regional proportions (5%).
- The proportion of the population who are African in the LIA (8%) is broadly in line with Tower Hamlets (5%) and London (8%), however is considerably higher than the national proportion of 3%.
- Overall, the proportion of the population in the LIA who are from an ethnic minority background (82%) is considerably higher than Tower Hamlets (77%), London (63%) and England as a whole (27%). This therefore indicates that the population within the local impact area is ethnically diverse.

A.7 Pregnancy and maternity

Table A.6 below shows the GFR (General Fertility Rate) and TFR (Total Fertility Rate) for Tower Hamlets, London and England. Data at local impact area level is unavailable, therefore the borough of Tower Hamlets will be compared with regional and national proportions.

Table A.6: Fertility rate of the population

	General fertility rate (GFR)*	Total fertility rate (TFR)**
Local impact area	Not available	Not available
Tower Hamlets	40.9	1.1
London	50.4	1.4
England	51.9	1.5

Source: ONS, 2022 Live birth rates in England and Wales: birth rates down to local authority level.

*number of live births per 1,000 female population aged 15 to 44, calculated using mid-year population estimates

**average number of live children that a group of women would bear if they experienced the age-specific fertility rates of the calendar year in question throughout their childbearing lifespan

The table above outlines that:

- The GFR in Tower Hamlets (40.9) is lower than the regional (50.4) and national levels (51.9). This means that the number of live births per 1000 women aged 16-44 years in the Tower Hamlets population is considerably lower than regional and national figures, further suggesting lower rates of pregnancy in this area.
- TFR in Tower Hamlets (1.1) is broadly in line with the regional and national levels.

A.8 Religion and belief

Table A.8 below provides the religious profile for the local impact area, Tower Hamlets, London and England as a whole.

Table A.8: Population by religion and belief

Location	Local impact area	Tower Hamlets	London	England
Christian	23%	22%	41%	46%
Buddhist	1%	1%	1%	1%
Hindu	1%	2%	5%	2%
Jewish	0.2%	0.4%	2%	1%
Muslim	50%	40%	15%	7%
Sikh	0.2%	0.3%	2%	1%
Other religion	0.3%	1%	1%	1%
No religion	18%	27%	27%	37%
Religion not stated	6%	7%	7%	6%
Minority religion	53%	44%	25%	11%

Source: 2021 Census, ONS- religion

The table above outlines that:

- The proportion of the population who are Christian in the LIA (23%) is broadly in line with Tower Hamlets (22%) but considerably lower than regional (41%) and national (46%) proportions.
- The proportion of the population who are Muslim in the LIA (50%) is considerably higher than Tower Hamlets (40%), regional (15%) and national (7%) proportions.
- The proportion of the population who have no religion within the LIA (18%) is considerably lower than Tower Hamlets (27%), regional (27%) and national (37%) proportions.
- The proportion of the population who have religious affiliation with a minority religion within the LIA (53%), is considerably higher than Tower Hamlets (44%), regional (25%) and national (11%) proportions.

A.9 Sex

Table A.9 below shows the proportion of the population who are male and female in the local impact area, Tower Hamlets, London and England as a whole.

Table A.9: Population by sex

Location	% of population who are male	% of the population who are female
Local impact area	49%	51%
Tower Hamlets	50%	50%
London	49%	52%
England	49%	51%

Source: ONS 2021 Census

The table above outlines that:

- The proportion of the population who are male within the LIA (49%) is broadly in line with Tower Hamlets (50%), London (49%) and England as a whole (49%).
- The proportion of the population who are female within the LIA (51%) is broadly in line with Tower Hamlets (50%), London (52%) and England as a whole (51%).

A.10 Sexual orientation

Table A.10 below shows the sexual orientation of Tower Hamlets, London and England as a whole. Data is unavailable at a local impact area level, therefore the borough of Tower Hamlets will be compared against regional and national proportions.

Table A.10: Sexual orientation of the population

Location	Straight or heterosexual	Gay or lesbian	Bisexual	All other sexual orientation
Local impact area	Not available	Not available	Not available	Not available
Tower Hamlets	83%	4%	3%	1%
London	86%	2%	2%	1%
England	89%	2%	1%	0.3%

Source: 2021 Census, ONS – sexual orientation

The table above outlines that:

- The proportion of the population who are straight/heterosexual within Tower Hamlets (83%) is lower than the regional (86%) proportion and considerably lower than the national (89%) proportion.
- The proportion of the population who identify as gay/lesbian, bisexual, or any other sexual orientation, within Tower Hamlets is broadly in line with the regional and national proportions.

A.11 Socio-economic data

Table A.11 below shows the proportion of the population by deprivation quintile, using the Index of Multiple Deprivation as a measure.

Table A.11: Deprivation

Location	Most deprived quintile	Second deprivation quintile	Third deprivation quintile	Fourth deprivation quintile	Least deprived quintile
Local impact area	57%	43%	0%	0%	0%
Tower Hamlets	30%	47%	14%	8%	2%
London	17%	33%	23%	16%	11%
England	20%	20%	20%	20%	19%

Source: ONS 2021 census population and MHCLG mid-year population estimates and MHCLG 2019 Indices of Multiple Deprivation

The table above outlines that:

- The proportion of the population within the most deprived quintile within the LIA (57%) is considerably higher than Tower Hamlets (30%), regional (17%) and national (20%) proportions. This therefore indicates there are high levels of deprivation within the local impact area.
- The proportion of the population within the second deprivation quintile within the LIA (43%) is lower than Tower Hamlets (47%), however considerably higher than regional (33%) and national (20%) proportions.
- The proportion of the population within the third deprivation quintile within the LIA (0%) is considerably lower than Tower Hamlets (14%), regional (23%) and national (20%) proportions.
- The proportion of the population in the fourth deprivation quintile within the LIA (0%) is considerably lower than Tower Hamlets (8%), regional (16%) and national (20%) proportions.
- The proportion of the population in the least most deprived quintile within the LIA (0%) is broadly in line with Tower Hamlets (2%), however considerably lower than regional (11%) and national (19%) proportions.
- Data indicates that as 0% of the LIA reside in the third deprivation quintile, fourth deprivation quintile or least deprived quintile, the whole local impact area population resides in the top two most deprived quintiles. This demonstrates high levels of deprivation.

B. Literature Review

This appendix sets out the finding of the desk-based review process, providing a literature review of the potential effects of the Scheme on people with protected characteristics. All potential risks and opportunities of a typical redevelopment scheme project have been considered.

Section B.1 discusses the potential effects on residents during redevelopment; Section B.2 sets out the impact on community and community resources during redevelopment; and Section B.3 sets out the impact on the community after redevelopment.

All are segmented into key thematic areas.

B.1 Impact on existing residents during redevelopment

B.1.1 Health effects caused by relocation

Relocation can have a negative impact on an individual's mental health and well-being, as measured by the SF-12 Mental Health Composite Score¹⁷ and Warwick-Edinburgh Mental Wellbeing Scale test.¹⁸ These tests have shown that relocation can create increased levels of depression and anxiety.¹⁹ The associated impacts have been found to be more severe when there is a lack or perceived lack of control over the decision.²⁰ This stress has been attributed to the anticipation of disruption, extra costs for residents and undermining of community stability and support networks.

The effects of relocation on the mental health and wellbeing of temporary accommodation tenants is likely to be heightened, as they are more likely to be going through difficult periods of their lives, dealing with greater levels of uncertainty, and having to relocate more frequently.

Relocation can create a great deal of stress and anxiety amongst children and young people due to the need to adapt to new routines, facilities and surroundings.²¹ Families in temporary accommodation are more likely to be lone parent families, and for children and young people in that situation, the effects of relocation are likely to be more significant and can affect development.²²

¹⁷ The SF-12 is a multipurpose short form survey with 12 questions, all selected from the SF-36 Health Survey (Ware, Kosinski, and Keller, 1996). The questions are combined, scored, and weighted to create two scales that provide glimpses into mental and physical functioning and overall health-related-quality of life.

¹⁸ The Warwick-Edinburgh Mental Well-being scale was developed to enable the monitoring of mental wellbeing in the general population and the evaluation of projects, programmes and policies which aim to improve mental wellbeing. WEMWBS is a 14 item scale with 5 response categories, summed to provide a single score ranging from 14-70. The items are all worded positively and cover both feeling and functioning aspects of mental wellbeing.

¹⁹ Cleland, C., Kearns, A., Tannahill, C. and Ellaway, A. (2016). The impact of life events on adult physical and mental health and well-being: longitudinal analysis using the GoWell health and well-being survey. Available at: <https://bmcrenotes.biomedcentral.com/articles/10.1186/s13104-016-2278-x>

²⁰ Shelter (2024) Unwanted moves cost renters more than half a billion pounds a year. Available at: [Unwanted moves cost renters more than half a billion pounds a year - Shelter England](#)

²¹ Better Help (2025) Moving With A Child: The Mental Health Effects Of Family Relocation On Children. Available at: [Moving With A Child: The Effects Of Family Relocation On Children](#)

²² Shelter (2004): 'Sick and tired: the impact of temporary accommodation on the health of homeless families' Available at: https://england.shelter.org.uk/_data/assets/pdf_file/0009/48465/Research_report_Sick_and_Tired_Dec_2004.pdf ; Shelter (2018): 'Highest number of older people homeless in a decade'. Available at: https://england.shelter.org.uk/media/press_release/highest_number_of_older_people_homeless_in_a_decade

There is also evidence that involuntary relocation can have a significant impact on older people. For example, it has been shown that mortality rates for those moved involuntarily due to urban redevelopment (either temporarily or permanently) can be higher than non-movers and those who move voluntary.²³

As noted above, for older people and disabled people, the loss of community connections due to relocation may lead to feelings of isolation and loneliness, which are in turn linked to negative health outcomes such as poorer mental health, a higher likelihood of developing certain health conditions (e.g. obesity and alcoholism) and a greater risk of hospitalisation.²⁴

The number of older people and disabled people experiencing homelessness and living in temporary accommodation has risen sharply in recent years. Once again, the negative health effects of relocation on older people and disabled people is likely to be compounded for members of those groups living in temporary accommodation.²⁵

B.1.2 Costs associated with relocation

The need for residents to resettle can lead to an increase in their financial outgoings due to costs associated with moving and obtaining new housing. Rehousing costs could include removal services, the need to adapt a new home or buy new furniture. Access to the required finance to meet relocation and furnishing costs may be most limited for those at most risk of financial exclusion, who experience difficulty trying to access appropriate and mainstream financial services, such as bank accounts and loans.

Financial exclusion arises when an individual faces difficulty when trying to access appropriate and mainstream financial services. In the UK, certain groups are particularly vulnerable to financial exclusion, including young people not in employment, lone parents, Ethnic minority groups and older people, as it has been found that social exclusion can lead to financial vulnerability.²⁶

Low-income ethnic minority households often have limited experience of institutional loan finance.²⁷ They may also be less able to access commercial loans due to poor credit-ratings or their location in 'high risk' postcodes. Furthermore, people from a ethnic minority background are also more likely to live in low income households compared to those who are White British or from Other White Ethnic groups.²⁸

Financial exclusion is also geographically focussed. It is often the case that large numbers of financially excluded individuals live in areas where there are high levels of deprivation. Research suggests that there are strong spatial patterns in the UK, including rural/urban clusters and a North/South divide, linked to digital banking and financial exclusion.²⁹

²³ Jolley, D., Jeffreys, P., Katona, C. and Lennon, S. (2011) 'Enforced relocation of older people when Care Homes close: a question of life and death?', *Age and Ageing*, 40 (5), pp. 534-537

²⁴ IoTUK (2017) 'Social Isolation and Loneliness in the UK'. Available at: <https://iotuk.org.uk/social-isolation-and-loneliness-report/>

²⁵ Shelter (2018): 'Highest number of older people homeless in a decade'. Available at: https://england.shelter.org.uk/media/press_release/highest_number_of_older_people_homeless_in_a_decade; The Independent (2019): 'Homelessness among ill and disabled people rises 53% in a year, figures show'. Available at: <https://www.independent.co.uk/news/uk/home-news/homeless-disabled-ill-rough-sleeping-housing-crisis-a9251756.html>

²⁶ Fernández-Olit, B., Paredes-Gázquez, J.D. & de la Cuesta-González, M. (2018). 'Are Social and Financial Exclusion Two Sides of the Same Coin? An Analysis of the Financial Integration of Vulnerable People.' Soc Indic Res 135, 245–268. Available at: <https://doi.org/10.1007/s11205-016-1479-y>

²⁷ House of Commons Communities and Local Government Committee (2011) 'Regeneration Sixth Report of Session 2010–12'. Available at: <https://publications.parliament.uk/pa/cm201012/cmselect/cmcomloc/1014/1014.pdf>

²⁸ Department for Work and Pensions (2015) 'Low income'

²⁹ Sonea, A, Guo, W, and Jarvis, S (2019). 'An exploratory spatial analysis of access to physical and digital retail banking channels.' Technical Report, Think Forward Initiative.

The need for residents to relocate can cause difficulty in accessing affordable housing. As above, access to the required finance to obtain new housing may be most limited for those at risk of financial exclusion, who experience difficulty trying to access appropriate and mainstream financial services, such as bank accounts, loans and mortgages. This is also exacerbated by the increasing unaffordability of homeownership for many people in England and Wales over the past decade.³⁰ Only 51% of households in London own their homes, and housing in the London Borough of Newham has become considerably less affordable in the last five years.³¹

Rates of homeownership have fallen significantly for **young people** over the last 20 years due to the increasing unaffordability of housing in the country. Increases in property prices relative to incomes have made it more difficult to save for a deposit or access a mortgage, whilst a lack of social housing investment has made it more difficult to access affordable rented properties.³²

Women are disproportionately represented among lone parent households. Around 90% of single parents are women, and have the highest poverty rate amongst working- age adults, with 43% living in poverty (rising to 51% in London)³³ This makes the risk of financial exclusion higher as women who are single parents are more likely to spend a higher portion of their income on housing costs. This can increase the risk of homelessness, with single mother families accounting for one quarter of all homeless households in London in 2019.³⁴

Disabled people may be impacted by the availability of affordable homes when moving to new areas, as they are more likely to live in poverty.³⁵ Indeed, rising numbers of disabled people are becoming homeless - up 53% in 2019 alone.³⁶

Disabled people are less likely to be able to own their own home and are more likely to rent social housing than their non-disabled peers.³⁷ Whilst some Shared Ownership homes are specifically designed to be accessible for disabled people, only 1.1% of households who purchased a shared ownership home in London in 2017/18 included a disabled household member, likely due to the cost. Indeed, 36% of Londoners who live in families where someone is disabled live in poverty, after housing costs are paid.³⁸

People with a disability who live in social housing could experience particularly acute effects. The 'removal of the spare room subsidy' or 'bedroom tax' in 2013 has had a disproportionate impact on disabled people in social housing; two thirds of those affected have a disability. Research shows that disabled people have found it difficult to take up proposed mitigation

³⁰ Office for National Statistics (2018): 'Housing affordability in England and Wales- 2018'. Available at: <https://www.ons.gov.uk/peoplepopulationandcommunity/housing/bulletins/housingaffordabilityinenglandandwales/2018>

³¹ Mayor of London (2020): 'Housing in London- 2020'. Available at: <https://data.london.gov.uk/dataset/housing-london>; Office for National Statistics (2019): 'Housing affordability in England and Wales- 2019'. Available at: <https://www.ons.gov.uk/peoplepopulationandcommunity/housing/bulletins/housingaffordabilityinenglandandwales/2019>

³² Institute for Fiscal Studies, (2018). 'Barriers to homeownership for young adults'. Available at: <https://www.ifs.org.uk/publications/13475>

³³ Gingerbread (2019). 'Single parents- facts and figures'. Available at: <https://www.gingerbread.org.uk/what-we-do/media-centre/single-parents-facts-figures/>; Gingerbread (2020). 'Living standards and poverty. Available at: <https://www.gingerbread.org.uk/policy-campaigns/living-standards-and-poverty/>

³⁴ Mayor of London (2020): 'Housing in London- 2020'. Available at: <https://data.london.gov.uk/dataset/housing-london>

³⁵ Joseph Rowntree Foundation (2019): 'Poverty rates in families with a disabled person'. Available at: <https://www.jrf.org.uk/data/poverty-rates-families-disabled-person>

³⁶ The Independent (2019). 'Homelessness amongst ill and disabled people rises 53% in a year, figures show'. Available at: <https://www.independent.co.uk/news/uk/home-news/homeless-disabled-ill-rough-sleeping-housing-crisis-a9251756.html>

³⁷ Office for National Statistics (2019): 'Disability and housing, UK- 2019'. Available at: <https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/disability/bulletins/disabilityandhousinguk/2019>

³⁸ Mayor of London (2020) 'Intermediate housing: Equality Impact Assessment'. Available at: https://www.london.gov.uk/sites/default/files/intermediate_housing_equality_impact_assessment_for_part_1_consultation_response_report.pdf

measures, such as taking up work, working longer hours or downsizing, and thus have had their income reduced by £12 to £22 per week, depending on the number of spare bedrooms. These changes have resulted in increased poverty and adverse effects on health, well-being and social relationships of disabled residents in social housing.³⁹

Ethnic minority households may also be affected by the availability of affordable housing when relocating to new areas. It was reported in 2017 that rents are less affordable for most Ethnic minority groups when compared to White British households.⁴⁰ Two-fifths of people from an ethnic minority background live in low-income households.⁴¹ 42% of ethnic minority or mixed ethnicity households living in the private rented sector earn below £30,000, making intermediate housing (such as Shared Ownership and Shared Equity buying schemes) less affordable.⁴²

For **older people**, research suggests that they (particularly those in major cities and in the rural or tourism-dependent municipalities) are more reluctant to move.⁴³ Older people often lack the same financial means and income flexibility that afford people from younger age groups and those in full time employment the widest range of home ownership options. Relocation may also require older people who have savings and investments to use them in order to secure a new home, affecting their financial independence and stability.

When relocating, a lack of affordable and/or quality housing is more likely to adversely affect older people (and particularly pensioners) who have lower average incomes than working-age people and are therefore less likely to be able to secure additional sources of income to buy a new property.⁴⁴ Research has found that older people often lack the same financial means and income flexibility compared to other age groups, especially younger people and those in employment.⁴⁵ A lack of financial means can limit the range of ownership options, including intermediate options such as Shared Ownership, available to older people and relocation may cause older people to use savings and investments in order to secure a new home. This can potentially affect their long-term financial independence and stability. Research from the Council of Mortgage Lending shows that older people only account for one per cent of all mortgage lending, which further indicates that they may experience difficulties in accessing finance to facilitate relocation.⁴⁶

Older people are also experiencing homelessness at increasing rates. Over 2,500 people aged over 60 were official homeless in 2018, double the number in 2009.⁴⁷

B.1.3 Access to appropriate and accessible housing

As redevelopment processes often involve the rehousing of many residents, issues may arise regarding sourcing suitable housing that meets the needs of the following groups:

Families with **children** may also find it difficult to find housing that can accommodate their needs. Two million children in England, one in every five, are living in overcrowded,

³⁹ Moffatt, S., Lawson, S., Patterson, R., Holding, E., Dennison, A., Sowden, S., & Brown, J. (2015). A qualitative study of the impact of the UK 'bedroom tax'. *Journal of Public Health*, 38(2), 197-205.

⁴⁰ Shelter (2017) 'ethnic minority homelessness matters and is disproportionately rising – time for the government to act'. Available at: <http://blog.shelter.org.uk/2017/10/ethnic-minority-homelessness-matters-and-is-disproportionately-rising-time-for-the-government-to-act/>

⁴¹ The Poverty Site (2017). See: <http://www.poverty.org.uk/06/index.html>

⁴² Mayor of London (2020) 'Intermediate housing: Equality Impact Assessment'. Available at: https://www.london.gov.uk/sites/default/files/intermediate_housing_-_equality_impact_assessment_for_part_1_consultation_response_report.pdf

⁴³ Abramsson, M. and Andersson, E. (2016). 'Changing Preferences with Ageing – Housing Choices and Housing Plans of Older People.' *Housing, Theory and Society* 33(2). Available at: <https://doi.org/10.1080/14036096.2015.1104385>

⁴⁴ Council of Mortgage Lending. (2015): 'Pension tension: the challenges for older borrowers'

⁴⁵ Age UK (2022) 'Poverty in later life'. Available at: [poverty-in-later-life-briefing-january-2022-.pdf](https://www.ageuk.org.uk/poverty-in-later-life-briefing-january-2022/)

⁴⁶ Council of Mortgage Lending. (2015): 'Pension tension: the challenges for older borrowers'

⁴⁷ Age UK (2019) 'Older homelessness'. Available at: [ppp_older_homelessness_england.pdf](https://www.ageuk.org.uk/ppp_older_homelessness_england.pdf)

unaffordable or unsuitable homes.⁴⁸ Evidence suggests that children who live in overcrowded accommodation have an increased risk of emotional and behavioural problems, as well as negatively impacted maths and reading test scores.⁴⁹ It can also increase their risk of injury, for example, bed sharing, which is more likely to occur in overcrowded houses, has been identified as a factor contributing to Sudden Infant Death Syndrome (SIDS). Sleep disturbance is also more common amongst children in overcrowded households. Overall, overcrowded conditions present a potential source of stress and can negatively impact a child's emotional and physical health in the long term.⁵⁰

Disabled people (particularly those with mobility impairments) often experience difficulties trying to find a suitable, accessible home. According to the English Housing Survey 2018-2019, only 9% of homes have accessibility features.⁵¹ A report by Leonard Cheshire Disability highlights that only 4% of those with mobility impairments who have looked for accessible homes said they were easy to find. In addition, they also found that some disabled people have also experienced difficulties in terms of local authorities being reluctant to fund adaptations that would allow them to live independently.⁵²

A report published by the Equality and Human Rights Commission has further highlighted some of the existing issues in terms of housing for disabled people. The report states that across all housing tenures, there is a severe shortage of accessible housing. For example, one in three disabled people living in private rented properties live in unsuitable accommodation. This figure is one in five for disabled people living in social housing, and one in seven for disabled people who own their own home. Overall, in England, only 7% of homes offer the basic four accessibility features to make a home fully accessible (level access to the entrance, a flush threshold, sufficiently wide doorways and circulation space, and a toilet at entrance level).⁵³ One conclusion of the report was that there are too many gaps in data held by local authorities. For example, 65% of local authorities do not know whether its social or affordable rented housing stock is accessible.⁵⁴

Research has highlighted that people from **all ethnic minority groups** are more likely to live in overcrowded housing when compared to the White British population. For example, around 23% of Bangladeshi people and 17% of Arab people in the UK live in overcrowded housing, compared to almost 2% of White British households.⁵⁵ Therefore, it is possible that ethnic minority households could experience difficulties in finding suitable housing that accommodates their needs.

⁴⁸ National Housing Federation (2021) 1 in 5 children in need of a new home. Available at: [National Housing Federation - 1 in 5 children in need of a new home](#)

⁴⁹ Clair, A. (2019). *Housing: an Under-Explored Influence on Children's Well-Being and Becoming.* Child Ind Res 12, 609–626. Available at: <https://doi.org/10.1007/s12187-018-9550-7>

⁵⁰ National Children's Bureau (2016): 'Housing and the health of young children: Policy and evidence briefing for the VCSE sector'. Available at: <https://www.ncb.org.uk/sites/default/files/field/attachment/Housing%20and%20the%20Health%20of%20Young%20Children.pdf>

⁵¹ GOV.UK (2018) 'English Housing Survey 2018: accessibility of English homes – fact sheet'. Available at: [English Housing Survey 2018: accessibility of English homes - fact sheet - GOV.UK](#)

⁵³ DCLG (2015). 'English Housing Survey: Adaptations and Accessibility Report' Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/539541/Adaptations_and_Accessibility_Report.pdf

⁵³ DCLG (2015). 'English Housing Survey: Adaptations and Accessibility Report' Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/539541/Adaptations_and_Accessibility_Report.pdf

⁵⁴ Equality and Human Rights Commission (2018): 'Housing and disabled people: Britain's hidden crisis'. Available at: <https://www.equalityhumanrights.com/sites/default/files/housing-and-disabled-people-britains-hidden-crisis-main-report.pdf>

⁵⁵ GOV.UK (2023) 'Overcrowded households'. Available at: [Overcrowded households - GOV.UK Ethnicity facts and figures](#)

Black people are four times less likely than white people to have access to a garden, or other form of outdoor space at home.⁵⁶ Furthermore, 21% of households in London have no access to outdoor space at home.

Older people are also more likely to need specialist housing which meets their needs. As such, it is likely to be more difficult for older people to relocate to appropriate housing. Health effects, such as increases in respiratory disease, have been associated with poor housing and could arise as a consequence of the need to relocate to a less well-suited property. Older people have a higher rate of health conditions such as respiratory disease, compared to the general population. This makes such effects more likely to arise amongst this group.⁵⁷

B.2 Impact on community and community resources during redevelopment

B.2.1 Loss of social infrastructure and access to community resources

The redevelopment process can involve temporary or permanent resettlement of residents and demolition of housing and community resources. This could lead to the risk of loss of social cohesion and temporary or permanent access to this amenity provision. In particular, it can increase residents' distances from facilities or places of social connection located on or in close proximity to their neighbourhood. This can impact on all parts of the community, but can have a disproportionately negative effect on **children, older people, disabled people, people who are pregnant, people from ethnic minority backgrounds and people from minority faith groups**.

The instability caused by involuntary relocation has the potential to be particularly disruptive to **children**. Such disruption can be attributed to stress and anxiety relating to changing schools and the need to adapt to new routines, staff, facilities and peers. It is generally accepted that children develop better in stable environments with a degree of routine; sudden and dramatic disruptions can be both stressful and affect feelings of security.⁵⁸

Evidence outlined by the Centre for Social Justice has indicated that where residential moves are accompanied by school moves for older children, the impact can be severe. It suggests that school moves can disrupt learning and are associated with a weaker educational performance within secondary school, particularly for children from disadvantaged backgrounds.⁵⁹ Only 27 per cent of students who move secondary schools three times or more achieve five A* to C grade GCSEs, compared to the national average of 60 per cent.⁶⁰ Research from the Centre for

⁵⁶ Office for National Statistics (2020). 'One in eight British households has no garden'. Available at: [https://www.ons.gov.uk/economy/environmentalaccounts/articles/oneineightbritishhouseholdshasnogarden/2020-05-14#:~:text=One%20in%20eight%20households%20\(12.Survey%20\(OS\)%20map%20data.&text=This%20is%20according%20to%20survey%20data%20from%20Natural%20England](https://www.ons.gov.uk/economy/environmentalaccounts/articles/oneineightbritishhouseholdshasnogarden/2020-05-14#:~:text=One%20in%20eight%20households%20(12.Survey%20(OS)%20map%20data.&text=This%20is%20according%20to%20survey%20data%20from%20Natural%20England).

⁵⁷ Housing Age UK (2014): 'Housing in later life'

⁵⁸ Lionetti, F., Spinelli, M., Moscardino, U., Ponzetti, S., Garito, M., Dellagiulia, A., . . . Pluess, M. (2022). The interplay between parenting and environmental sensitivity in the prediction of children's externalizing and internalizing behaviors during COVID-19. *Development and Psychopathology*, 1-14. Available at: <https://doi.org/10.1017/S0954579421001309>

⁵⁹ The Centre for Social Justice (2016) '*Home Improvements, a social justice approach to housing policy*'. Available at: <https://www.centreforsocialjustice.org.uk/core/wp-content/uploads/2016/08/Home-Improvements-full-report.pdf>

⁶⁰ The Centre for Social Justice (2016) '*Home Improvements, a social justice approach to housing policy*'. Available at: <https://www.centreforsocialjustice.org.uk/core/wp-content/uploads/2016/08/Home-Improvements-full-report.pdf>

Social Justice also found that two or more school moves before the age of twelve can lead to behavioural problems later in childhood.⁶¹

Children with autism spectrum conditions may also find new routines, expectations, and social relationships of a new school environment to be especially challenging, which can have further negative effects on educational attainment and wellbeing.⁶²

Relocation can often mean a longer journey travelling to school, which can result in negative effects on health and well-being due to increased time spent inactive. Research has found that the travel distance to school influences the transportation mode choice of children, and longer distances can result in a change from active transportation such as cycling or walking, to sedentary transportation, such as vehicular transport.⁶³

Children from low-income families may be particularly impacted by relocation due to loss of local informal childcare support. A study from the Joseph Rowntree Foundation showed that informal childcare support from grandparents was one important factor in enabling parents to work, generating income and preventing families from going without daily necessities.⁶⁴

Relocation can also have negative mental health effects on children and adolescents for a number of reasons, including: weakened social ties, disturbed social networks, household disruption, social isolation and a reduction in parent-child interactions.⁶⁵

Older studies show that a loss of relationships with peers and adults can cause anxiety and hinder both social development and educational attainment.⁶⁶ Children at key stage two experience an average of a twelve per cent drop in Maths and English attainment within a year of a changing schools.⁶⁷

The loss of facilities where children can socialise, and play could be particularly detrimental to children living in the local area. Demolition and resource relocation could adversely affect access to child social networks. Evidence suggests that early years provision plays an important role in a child's development and that free play in early childhood is a vital experience thorough which child learn social, conceptual and creative skills, as well as increasing their knowledge and understanding of the world.⁶⁸

Children who are living in temporary accommodation can experience worsened health impacts from home relocation. In the third quarter of 2019, 71% of households assessed by local authorities in England as homeless had dependent children, and half of all homeless people

⁶¹ The Centre for Social Justice (2016) '*Home Improvements, a social justice approach to housing policy*'. Available at: <https://www.centreforsocialjustice.org.uk/core/wp-content/uploads/2016/08/Home-Improvements-full-report.pdf>

⁶² National Autistic Society (2020) 'Dealing with change – a guide for all audiences'. Available at: [A guide for all audiences](#)

⁶³ Juliane Stark, Ilil Beyer Bartana, Alexander Fritz, Wiebke Unbehaun, Reinhard Hössinger (2018). '*The influence of external factors on children's travel mode: A comparison of school trips and non-school trips*', Journal of Transport Geography, Vol. 68, 55-66. Available at: <https://doi.org/10.1016/j.jtrangeo.2018.02.012>

⁶⁴ Joseph Rowntree Foundation (2016) '*Falling short: the experience of families living below the minimum income standard*'. Available at: <https://www.jrf.org.uk/report/falling-short-experiences-families-below-minimum-income-standard>

⁶⁵ Morris, T, Manley D, Northstone, K, Sabel, C, (2017): '*How do moving and other major life events impact mental health? A longitudinal analysis of UK children*'

⁶⁶ Adam, Emma K., and P. Lindsay Chase-Lansdale. (2002): 'Home Sweet Home(s): Parental Separations, Residential Moves, and Adjustment in Low-Income Adolescent Girls.' *Developmental Psychology* 8(1) :792–80

⁶⁷ RSA. (2013): '*Falling between the cracks; Exploring in-year admissions in schools in England*'

⁶⁸ Lee, R.L.T., Lane, S.J., Tang, A.C.Y., Leung, C., Louie, L.H.T., Browne, G. and Chan, S.W.C. (2020) 'Effects of an Unstructured Free Play and Mindfulness Intervention on Wellbeing in Kindergarten Students', *International Journal of Environmental Research and Public Health*, 17 (15). Available at: [Effects of an Unstructured Free Play and Mindfulness Intervention on Wellbeing in Kindergarten Students - PMC](#)

living in temporary accommodation are children.⁶⁹ The total number of children who were homeless and in temporary accommodation increased to 126 020 in England in 2019, of whom 88,080 were in London and, moreover, children living in temporary accommodation during the COVID-19 pandemic have reported immediate and long-term impacts to optimal health and brain development as a result of their living situation.⁷⁰ Meanwhile, 50% of parents in a study reported a negative impact on their children's physical health, reporting an increase in respiratory problems, the physical impacts of sleep deprivation, and weight loss.⁷¹

The loss of long-standing community links risks creating feelings of isolation, particularly amongst **older people**. Physical isolation, a lack of social resources and a removal of familiarity can all contribute to feelings of isolation and loneliness amongst older people.⁷² This in turn can lead to negative health outcomes such as poorer mental health, a higher likelihood of developing certain health conditions (e.g. obesity and alcoholism) and a greater risk of hospitalisation.⁷³ Loneliness increases the likelihood of mortality by 26 per cent among those over the age of 65 and raises the risk of developing conditions, such as high blood pressure, heart disease and stroke.⁷⁴ The link between older people and the likelihood of experiencing feelings of isolation and loneliness indicates that this group may be disproportionately negatively impacted by relocation. This can equally be the case for older people remaining in or very close to an area being redeveloped.⁷⁵

As demolition proceeds, local amenities and services (such as shops, community centres and health facilities) may decide to close. Some community resources may be included in the demolition process. The loss of these resources can have a disproportionately negative effect on older people remaining in the neighbouring areas, who may find it more challenging to travel to new services outside of their neighbourhood.⁷⁶ Furthermore, for local businesses, the loss of their traditional customer base following the relocation of residents can force closures, further reducing the choice of services available to people in the community, with older people among the most likely to be affected. Research from Age UK found that reduced access to community facilities can, have serious negative effects on mental health and wellbeing, and increase rates of cardiovascular disease in older people.⁷⁷

Relocation has the potential to cause stress, anxiety and uncertainty for **disabled people**. Changes, both minor and major, to some disabled people's routines and surroundings may adversely affect feelings of security and comfort. For example, research shows that people on the autism spectrum, tend to prefer set routines (such as traveling via the same routes) and rigid structures (such as preferences to room layouts or objects) as they can help to bring order to their daily life so that they know what is going to happen and when.⁷⁸

⁶⁹ Shelter (2020) 'Homeless and Forgotten: Surviving lockdown in temporary accommodation'. Available at: https://england.shelter.org.uk/_data/assets/pdf_file/0004/2036803/TA_report_FINAL_PDF.pdf

⁷⁰ Rosenthal, Diana Margot, Ucci, Marcella, Heys, Michelle, Hayward, Andrew, Lakhanpaul, Monica (2020). 'Impacts of COVID-19 on vulnerable children in temporary accommodation in the UK', 5(5). Available at: [https://doi.org/10.1016/S2468-2667\(20\)30080-3](https://doi.org/10.1016/S2468-2667(20)30080-3)

⁷¹ Shelter (2020) 'Homeless and Forgotten: Surviving lockdown in temporary accommodation'. Available at: https://england.shelter.org.uk/_data/assets/pdf_file/0004/2036803/TA_report_FINAL_PDF.pdf

⁷² Shankar, R. (2015) 'Loneliness, Social Isolation, and its Effects on Physical and Mental Health', *Missouri Medicine*, 120(2), pp. 106-108.

⁷³ IoTUK (2017): 'Social Isolation and Loneliness in the UK' Available at: <https://iotuk.org.uk/social-isolation-and-loneliness-report/>

⁷⁴ Age UK (2015): 'Campaign to end loneliness: threat to health'.

⁷⁵ Age UK (2015): 'Loneliness and Isolation evidence review'

⁷⁶ Luiiu, C. and Tight, M. (2021) 'Travel difficulties and barriers during later life: Evidence from the National Travel Survey in England', *Journal of Transport Geography*, 91. Available at: [Travel difficulties and barriers during later life: Evidence from the National Travel Survey in England - ScienceDirect](https://www.sciencedirect.com/science/article/pii/S0966686921001000)

⁷⁷ Age UK (2015): 'Campaign to end loneliness: Threat to health'

⁷⁸ National Autistic Society (2016) 'Obsessions, repetitive behaviour and routines'. Factsheet. Available at: <https://www.autism.org.uk/about/behaviour/obsessions-repetitive-routines.aspx>

The loss of community links may also have a disproportionate impact on disabled people. Findings from the Jo Cox Commission on Loneliness found that over half of disabled people say they are lonely, with around one in four feeling lonely every day.⁷⁹ The report also states that forming and maintaining social connections can be a challenge for people with a range of disabilities, including those with sensory impairments, learning disabilities, autism, physical and mobility impairments, mental health conditions, dementia, head and brain injury, neurological conditions, cancer and HIV. As disabled people can experience more barriers to forming social connections the loss of existing local social connections through residential displacement or loss of social resources could lead to disabled people experiencing further loneliness and isolation.

Relocation can also create stress, anxiety and uncertainty for people with disabilities regarding the accessibility of their new home. A report published by the EHRC identifies that across all housing tenures, there is a severe shortage of accessible housing. For example, one in three disabled people living in private rented properties live in unsuitable accommodation. This figure is one in five for disabled people living in social housing, and one in seven for disabled people who own their own home. Overall, in England, only 9% of homes offer the basic four accessibility features to make a home fully accessible (level access to the entrance, a flush threshold, sufficiently wide doorways and circulation space, and a toilet at entrance level).⁸⁰ This suggests that disabled people are more likely to be concerned about the accessibility of their new home compared to other residents. Additionally, a report by Leonard Cheshire Disability highlights that only 4% of those with mobility impairments who have looked for accessible homes said they were easy to find. In addition, they also found that some disabled people have also experienced difficulties in terms of local authorities being reluctant to fund adaptations that would allow them to live independently.⁸¹

The disruption of social networks caused by relocation may also cause negative health outcomes for people with mental health problems and autism, many of whom depend on social networks to maintain their standard of living.⁸² People with mental health problems may be disproportionately impacted by stress and anxiety, especially if relocation is unexpected or accompanied by financial stress.⁸³ Research from Wilding et al. (2018) found that increased rates of mental ill health are associated with involuntary residential relocation.⁸⁴

Ethnic minority and **minority faith** communities are also likely to experience adverse effects as a result of relocation. It has been identified that these groups may be more reliant on social networks, faith and cultural facilities. They are likely to have concerns over loss of social networks and facilities, as well as fears of isolation, harassment or language barriers in new locations.⁸⁵ Ethnic minority communities also tend to experience greater difficulty in accessing health care when compared to other sections of the population, and rehousing may exacerbate the issue.⁸⁶

⁷⁹ Sense for the Jo Cox Commission on Loneliness (2017) 'Someone cares if I'm not there'. Available at: <https://www.sense.org.uk/support-us/campaign/loneliness/>

⁸⁰ GOV.UK (2018) 'English Housing Survey 2018: accessibility of English homes – fact sheet'. Available at: [2018-19 EHS Adaptations and Accessibility Fact Sheet.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/748419/EHS_Adaptations_and_Accessability_Fact_Sheet.pdf)

⁸¹ Leonard Cheshire Disability (2014): 'The hidden housing crisis' Available at: <https://www.leonardcheshire.org/sites/default/files/Hidden%20Housing%20Crisis%20July%202014.pdf>

⁸² National Autism Society. (2017): 'Moving house' URL: <https://www.autism.org.uk/movinghouse> 56

⁸³ Wilding et al., (2018): 'Place and preference effects on the association between mental health and internal migration within Great Britain' Health and Place. 52(1), pp 180-187

⁸⁴ Wilding, S., Martin, D. and Moon, G. (2018): 'Place and preference effects on the association between mental health and internal migration within Great Britain' Health and Place. 52(1), pp 180-187

⁸⁵ Della Puppa, Francesco and King, Russell (2019). 'The new 'twice migrants': motivations, experiences and disillusionments of Italian-Bangladeshis relocating to London.' Journal of Ethnic and Migration Studies, 45(11). Available at: <https://doi.org/10.1080/1369183X.2018.1438251>

⁸⁶ BME Health Forum (2010) 'Good Access in Practice: Promoting community development in the delivery of healthcare'. Available at: http://bmehf.org.uk/files/9013/6536/5135/Good_Access_in_Practice_final.pdf

Evidence has suggested that women who move home while **pregnant** tend to experience an increase in stress and depression levels above and beyond that of women who move home when not pregnant.⁸⁷ Evidence also suggests that the stress and physical exercise involved with relocation can slightly increase the risk of miscarriage, preterm delivery, small for gestational age new-borns, low birthweight, preeclampsia / gestational hypertension and can exacerbate deep vein thrombosis which pregnant women are more at risk of.⁸⁸

Relocation can result in adverse health effects on those who are pregnant. A 2015 survey carried out by the Care Quality Commission assessed the impact that having the same midwife had on pregnant women. The results showed that women who had the same midwife throughout pregnancy had more positive midwifery experiences than those who did not. The most negative experiences occurred with those who wanted to see the same midwife but were unable to.⁸⁹ Should relocation result in the need to make changes to preestablished antenatal services and relationships, this could negatively impact pregnant individuals.

B.2.2 Health effects caused by changes to general environmental conditions

Older people and disabled people are also likely to be disproportionately affected by changes in air quality that may occur throughout the demolition and construction stages of a scheme. Older people with respiratory conditions such as asthma are likely to be more susceptible to the effects of air pollution when compared to other groups. This is particularly the case if they have underlying COPD (Chronic Obstructive Pulmonary Disease).⁹⁰ Disabled people with heart or lung conditions are also at an increased risk of becoming ill and needing treatment as a result of air pollution.⁹¹

Noise pollution may arise as a result of demolition and construction. Research has linked noise pollution to several adverse outcomes for older people, including cardiovascular diseases, sleep disturbance, tinnitus, and stress.⁹²

Children are likely to be disproportionately affected by changes in noise pollution and air quality that may occur throughout the demolition and construction stages of a scheme. Noise associated with demolition and construction can also impact the health of vulnerable people remaining in the nearby community. Research shows that noise can negatively affect children's cognitive learning and memory.⁹³

Exposure to air pollution during infancy can result in neurodevelopment and long-term cognitive health problems.⁹⁴ In addition, research from Asthma UK highlights that air pollution is more

⁸⁷ Tunstall, H., Pickett, K. and Johnsen, S. (2010): 'Residential mobility in the UK during pregnancy and infancy: Are pregnant women, new mothers and infants 'unhealthy migrants'?'

⁸⁸ NHS (2016): 'Deep vein thrombosis'; Royal College of Physicians and Faculty of Occupational Medicine (date unknown): 'Advising women with a healthy, uncomplicated, singleton pregnancy on: heavy lifting and the risk of miscarriage, preterm delivery and small for gestational age'

⁸⁹ Care Quality Commission (2015): '2015 survey of women's experiences of maternity care'. Available at: https://www.cqc.org.uk/sites/default/files/20151215b_mat15_statistical_release.pdf

⁹⁰ Asthma UK (2017). 'Pollution'. Available at <https://www.asthma.org.uk/advice/triggers/pollution/>

⁹¹ Department for Environmental Food and Rural Affairs (2013): 'Guide to UK Air Pollution Information Resources'. Available at:

⁹² World Health Organisation (2011): 'Burden of disease from environmental noise Quantification of healthy life years lost in Europe'. Available at: http://www.who.int/quantifying_ehimpacts/publications/e94888.pdf?ua=1

⁹³ Gupta, A. et al (2018): 'Noise Pollution and Impact on Children Health'. Available at: <https://link.springer.com/article/10.1007/s12098-017-2579-7>

⁹⁴ Royal College of Physicians (2016) 'Every breath we take: the lifelong impact of air pollution'. Available at: <https://www.rcplondon.ac.uk/projects/outputs/every-breath-we-take-lifelong-impact-air-pollution>

detrimental to children when compared to other age groups with the condition. This is due to children have faster breathing rates and lungs that are still developing.⁹⁵

Lastly, antenatal exposure to air pollution may alter the lung development of a baby whilst in the womb. If a baby is exposed to significant levels of air pollution, this can increase the risk of premature birth and low birth weight.⁹⁶

B.2.3 Changes to landscape and the visual environment

During the construction and operation phase of the scheme there is potential for changes to the landscape and visual environment as a result of new infrastructure being provided. Such changes may impact groups particularly sensitive to the changes in visual stimuli including older people and disabled people, particularly those with autism.

As people age, visual acuity tends to worsen, increasing the risk of eye disorders such as cataracts.⁹⁷ Due to sensory changes, eyes become more sensitive to glare which can make reflective and shiny surfaces difficult, and even painful, to see clearly.⁹⁸ **Older people, and people with dementia** are more likely to be more sensitive to light pollution and rapid visual changes around them.

Research has shown that almost 90% of **children with autism** spectrum conditions develop atypical sensory experience, which can involve hypersensitivity to visual stimuli.⁹⁹ This results in more detail-focused perception in people with autism, so that any minor visual change might have detrimental impact on quality of life and socio-psychological wellbeing.¹⁰⁰

B.2.4 Safety and security

In the lead up to the redevelopment process and during the rehousing and demolition of properties in the area, properties will be vacated and can fall into disrepair. This can, if preventative steps are not taken, attract unwanted activity including anti-social behaviour and crime such as increased vandalism, arson, break-ins and other damage to neighboring homes.¹⁰¹

This potential increase in crime can impact a number of vulnerable groups remaining in the community during demolition, who are more likely to be a victim or witness of crime. An Ipsos MORI survey on public views of policing in England and Wales in 2016 determined that groups who were more likely to have had contact with their local police as a victim or witness include: young people aged 16-34 years, disabled people, those from ethnic minority backgrounds, and LGBT people.¹⁰²

⁹⁵ Asthma UK (2017). 'Pollution'. Available at <https://www.asthma.org.uk/advice/triggers/pollution/>

⁹⁶ British Lung Foundation (2016): 'How air pollution affects your children's lungs'. Available at: <https://www.blf.org.uk/support-for-you/signs-of-breathing-problems-in-children/air-pollution>

⁹⁷ Dinarvand, D., Panthakey, J., Hassan, A. and Ahmed, M. H. (2024) 'Frailty and Visual Impairment in Elderly Individuals: Improving Outcomes and Modulating Cognitive Decline Through Collaborative Care Between Geriatrics and Ophthalmologists', *Diseases*, 12 (11). Available at: [Frailty and Visual Impairment in Elderly Individuals: Improving Outcomes and Modulating Cognitive Decline Through Collaborative Care Between Geriatricians and Ophthalmologists - PMC](#)

⁹⁸ Sensory Trust (2017) 'Designing landscapes for older people' Available at: <https://www.sensorytrust.org.uk/information/factsheets/age-friendly-landscape-1.html>

⁹⁹ Baron-Cohen, S. and Robertson, C.E (2017) 'Sensory perception in autism' Available at: docs.autismresearchcentre.com/papers/2017_Robertson_Sensory-perception-in-autism.pdf

¹⁰⁰ Bakroon, A. and Lakshminarayanan, V. (2016) 'Visual function in autism spectrum disorders: a critical review'

¹⁰¹ Haringey Council (2020) 'Empty Homes Policy'. Available at: [Empty homes policy - July 2020](#)

¹⁰² Ipsos MORI (2016): 'Public views of policing in England and Wales'. Available at: <https://www.ipsos.com/sites/default/files/migrations/en-uk/files/Assets/Docs/Publications/sri-public-views-of-policing-in-england-and-wales.pdf>

The Crime Survey for England and Wales (CSEW), has also identified that a number of protected characteristic groups are more likely to be victims to crime:

- Men are more likely to be victims of violent crime than women.¹⁰³
- Mixed and Asian ethnic groups are more likely to have said they were victim of crime compared to white people.¹⁰⁴
- Younger people aged 16 to 24 are more likely to be victims of violence than those in older age groups.¹⁰⁵

In addition, the fear of crime is also more prevalent amongst the following groups, and consequently this can have an effect on individual mental health and wellbeing.¹⁰⁶

- Evidence from Age UK suggests that although older people are generally at a lower risk of crime compared to other ages, they are often more fearful of crime.¹⁰⁷
- Fear of crime can be an issue for women when they are travelling. Data from the ONS Crime Survey for England and Wales suggests that women fear more for their safety than men when walking alone at night – two fifths of women reported feeling 'somewhat unsafe' and one in eight reported feeling 'very unsafe'.¹⁰⁸
- A study by Transport for London highlights that ethnic minority individuals are more likely to express concerns over safety and security when travelling (particularly after dark) than white people and are more likely to say that their frequency of travel is affected 'a lot' or 'a little' due to these concerns.¹⁰⁹
- Research from Stonewall demonstrates that LGBT people often fear for their safety and well-being in public spaces and on pedestrian journeys.¹¹⁰

It has been suggested that fear of crime can contribute to social isolation, particularly for vulnerable groups such as children, older people, Ethnic minority groups and women.¹¹¹

B.2.5 Accessibility and mobility in the surrounding area

Evidence suggests that during construction the accessibility and mobility of the local area can be affected. In particular, construction can cause difficulties in relation to increased traffic in the local area, reduced parking (construction vehicles and subcontractors in parking), the construction activities blocking access to homes, shops, bus stops and pavements and safe routes, as well as effects on wayfinding.

¹⁰³ Office for National Statistics (2018) 'The nature of violent crime in England and Wales: year ending March 2018' Available at: <https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/articles/thenatureofviolentcrimeinenglandandwales/yearendingmarch2018>

¹⁰⁴ Gov.uk (2019) 'Victims of crime'. Available at: <https://www.ethnicity-facts-figures.service.gov.uk/crime-justice-and-the-law/crime-and-reoffending/victims-of-crime/latest>

¹⁰⁵ Gov.uk (2019) 'Victims of crime'. Available at: <https://www.ethnicity-facts-figures.service.gov.uk/crime-justice-and-the-law/crime-and-reoffending/victims-of-crime/latest>

¹⁰⁶ The Health Foundation (2024) 'Relationship between neighbourhood crime and health'. Available at: [Relationship between neighbourhood crime and health | The Health Foundation](https://www.healthfoundation.org.uk/relationship-between-neighbourhood-crime-and-health)

¹⁰⁷ Age UK (2006) 'Crime and fear of crime: help the aged policy statement 2006'. Available at: https://www.ageuk.org.uk/documents/en-gb/for-professionals/communities-and-inclusion/crime_and_fear_of_crime_2006_pro.pdf?dtrk=true

¹⁰⁸ ONS (2015) Crime Survey for England and Wales. Available at: <https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/bulletins/crimeinenglandandwales/2015-07-16>

¹⁰⁹ Transport for London (2013) 'Attitudes to Safety and Security – Annual Report'. Available at: <https://tfl.gov.uk/corporate/publications-and-reports/safety-and-security>

¹¹⁰ Stonewall (2017) LGBT in Britain: Hate Crime. Available at: <https://www.stonewall.org.uk/comeoutforLGBT/lgbt-in-britain/hate-crime>

¹¹¹ Lorenc, T et al (2013) 'Fear of crime and the environment: systematic review of UK qualitative evidence'. Available at: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC366893/>

Children

Changes in road traffic levels may reduce children's access to community and recreational facilities due to road severance and traffic delays.¹¹² Increased traffic in proximity to schools, or community facilities that are frequently used by children can also impact their concentration and long-term cognitive development.¹¹³

Similar to disabled people and older people, the accessibility and design of physical spaces can also affect parents' ability to travel freely with small children, especially if using pushchairs. The presence of uneven surfaces, lack of dropped kerbs, use of shared spaces as well as lack of dedicated car parking space can all limit the mobility of parents with a small child, making use of the pedestrian environment more challenging for this group.¹¹⁴

Research shows that the presence of vehicular traffic can present a barrier for disabled people accessing community resources. National Travel Survey data shows disabled people are generally more likely to experience travel difficulties in the daily trips that they make.¹¹⁵ Disabled people who travel by car are more likely to report difficulties due to congestion and roadworks, especially where the severity of the disability increases.¹¹⁶ Many people with both physical and hidden disabilities have a parking concession through the Blue Badge scheme. This allows eligible disabled people to park close to their destination, providing them with an increased degree of independence and suitable access to a range of services and facilities, including their home. Short-term change to transport networks, road alignment and parking can act as a barrier for disabled people wanting to access community facilities, exacerbating issues such as loneliness and social isolation.¹¹⁷

Changes to surface transport resulting from redevelopment of a housing site may affect how older people interact with community facilities.¹¹⁸ Older people may find it difficult to access public spaces further away from their home or integrate into new social networks, due to severance caused by increases in road traffic.¹¹⁹

B.2.6 Information and communication

Complex material and information on the regeneration may present a challenge to those who have different information and communication needs, this includes but is not limited to **people with learning disabilities**, people with low literacy levels, **older people**, **people with visual or hearing impairments** and **people who use English as a second language**.

¹¹² Hiscock, R. and Mitchell, R (2011) 'What is needed to deliver places that provide good health to children?' Available at: http://www.edphis.org.uk/Report_on_Place_and_Children.pdf

¹¹³ Institute of Education (2001): 'The effect of travel modes on children's mental health, cognitive and social development: a systematic review'

¹¹⁴ Pettersson, G., (2009), 'Priorities for the use of bus transport by disabled people, older people and parents with young children in buggies', Association of European Transport

¹¹⁵ Department for Transport (2019): 'National Travel Survey: 2018'

¹¹⁶ Department for Transport (2017) 'Disabled people's travel behaviour and attitudes to travel' Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/647703/disabled-peoples-travel-behaviour-and-attitudes-to-travel.pdf

¹¹⁷ Equality and Human Rights Commission (2017): 'Being disabled in Britain: a journey less equal'

¹¹⁸ DfT (2017): 'Health impact analysis for the draft Airports National Policy Statement'

¹¹⁹ NatCen (2019): 'Transport, health and wellbeing: an evidence review for the Department for Transport'

Best practice guidance¹²⁰ and evidence suggests that the following processes can ensure that information documents are fully accessible to everyone and reduce concerns regarding access to information:

- information should be in short, concise sentences without jargon;
- pictures should be included where possible to support the text;
- the format, layout and length of document should be carefully considered;
- easy read, braille, audio and large print should be provided upon request; and
- information should be translated into people's first language upon request.

The COVID- 19 pandemic has seen an increased shift to the use of digital tools to aid information and communication during engagement programmes. However, some groups are more likely to be digitally excluded, and an over-reliance on these forms of information communication could exclude many from the regeneration conversation. A third of **older people** are not online; whilst a fifth of **disabled people** are not internet users.¹²¹ Level of education (associated with **deprivation**) is often also a factor in digital exclusion- just 36% of people with no qualifications are internet users.¹²²

'Seldom- heard' groups- such as **children and young people, disabled people, people from deprived areas**, and people from **ethnic minority** backgrounds- are at particular risk of exclusion from the engagement process.¹²³ It is recommended that engagement 'go the extra mile' to reach these groups by:

- meeting people 'on their own turf' and at times which suit them best
- offering a range of meeting times and venues
- reimbursing travel costs
- publicising events in languages other than English.

B.3 Impact on community following redevelopment process

B.3.1 Provision of community resource and improved social cohesion

Community resources provide important places of social connection and promote wellbeing for **children, older people, disabled people, people from a ethnic minority background and pregnant women**. Regeneration of areas can include both continued access to and the creation of community resources, improving social cohesion and community relations. This can impact on all parts of the community, but can have a disproportionate effect on the above groups

¹²⁰ Change (2015): 'how to make information accessible: a guide to producing easy read documents' Available at: [How-to-make-info-accessible-guide-2016-Final \(changepeople.org\)](#) Department for Health and Social Care (2010): 'Making written information easier to understand for people with learning disabilities' Available at: [Making written information easier to understand for people with learning disabilities - GOV.UK \(www.gov.uk\)](#) MENCAP (date unknown): 'Making myself clear' Available at: [Making-Myself-Clear.pdf \(accessibleinfo.co.uk\)](#)

¹²¹ Citizens Online (2020). 'Digital exclusion in population screening programmes'. Available at: <https://www.citizensonline.org.uk/wp-content/uploads/2020/05/ScreeningEIAReportSummaryProofedSignedOff.pdf>

¹²² Citizens Online (2020). 'Digital exclusion in population screening programmes'. Available at: <https://www.citizensonline.org.uk/wp-content/uploads/2020/05/ScreeningEIAReportSummaryProofedSignedOff.pdf>

¹²³ Scottish Government (2017). 'Barriers to community engagement in planning: a research study. Available at: <https://www.gov.scot/binaries/content/documents/govscot/publications/factsheet/2017/05/barriers-to-community-engagement-in-planning-research/documents/barriers-community-engagement-planning-research-study-pdf/barriers-community-engagement-planning-research-study-pdf/govscot%3Adocument/Barriers%2Bto%2Bcommunity%2Bengagement%2Bin%2Bplanning%2B-%2Ba%2Bresearch%2Bstudy.pdf>

Improved provision of affordable and accessible facilities for sports and physical activity would positively impact groups that often face barriers to participation, including older people, disabled people, ethnic minority communities, and those who identify as **LGBT**.¹²⁴

Improved provision of sports facilities has also been linked to reducing crime rates and anti-social behaviour amongst **young people**, by providing them with something to do and increasing social inclusion. Indeed, 70% of teenagers believe that anti-social behaviour occurs because young people are bored and have little else to do. By providing a diversion, which can lead to personal development in areas such as self-regulation and problem-solving abilities, sports clubs and facilities do lead to a decrease in anti-social behaviour.¹²⁵

B.3.2 Tackling crime and disorder

Levels of crime have in part be attributed to the urban environment. Using theoretical approaches such as Rational Choice Theory¹²⁶ and Broken Windows Theory,¹²⁷ a strong argument has developed which links the design of neighbourhoods and towns to levels of crime and disorder.¹²⁸ It has been argued that the opportunity for some forms of crime can be reduced through better thought-out approaches to planning and design of neighbourhoods and towns. For example, concepts such as Crime Prevention Through Environmental Design (CPTED)¹²⁹ are more frequently used today to ensure buildings and public spaces are designed in a way that aims to reduce the occurrence of crime and alter the environmental factors that might encourage criminal behaviour. Indeed, evidence suggests that homes built to 'Secured by Design' principles can reduce burglary and crime rates by up to 75%.¹³⁰

Changes to the urban environment that affect crime and disorder can impact on those who are more likely to be a victim or witness of crime, including **young people, disabled people, people from ethnic minority backgrounds, men and LGBT people**. Changes may also affect those who are likely to be adversely impacted by fear of crime, including **children, older people, Ethnic minority groups, women and LGBT people**.

B.3.3 Improved housing provision

Regeneration can lead to the relocation of residents. Whilst negative effects can arise as a result of relocation, positive effects may also arise. This is particularly likely to be the case should residents move to an area with more green space, and better air quality. Groups that are susceptible to air pollution (see section A.1.4), and may therefore benefit from relocation, include children, older people, disabled people and those who are pregnant.

Section 3.3.3 outlines the importance of appropriate, accessible, and affordable housing for particular protected characteristic groups, including children, disabled people, and people from an ethnic minority background. The regeneration of the area will improve the housing provision in the local areas increasing capacity and quality. This can affect all parts of the community but can have a disproportionate effect on the above groups.

¹²⁴ Assembly, N. I. (2010). 'Barriers to Sports and Physical Activity Participation'.

¹²⁵ Sport and Recreation Alliance (2012) 'Game of Life: How Sport and Recreation can help make us healthier, happier and richer'. Available at: <http://sramedia.s3.amazonaws.com/media/documents/2d77274e-af6d-4420-bdfb-da83c3e64772.pdf>

¹²⁶ Felson and Clarke (1998) 'Opportunity Makes the Thief, Practical Theory of Crime Prevention'. Available at: <https://pdfs.semanticscholar.org/09db/dbce90b22357d58671c41a50c8c2f5dc1cf0.pdf>

¹²⁷ Wilson and Kelling (1982) 'Broken Windows: The police and neighbourhood safety'. Available at: <https://www.theatlantic.com/magazine/archive/1982/03/broken-windows/304465/>

¹²⁸ See for example, Monahan and Gemmell (2015) 'Reducing Crime Hotspots in City Centres'. Available at: <http://www.bre.co.uk/filelibrary/Briefing%20papers/102417-Crime-Hotspots-Briefing-Paper-v4.pdf>

¹²⁹ Jeffery (1971) 'Crime Prevention Through Environmental Design'. Sage publications

¹³⁰ Secured by Design (2014) 'Secured by Design: Reducing crime by good design'. Available at: <https://mbp.co.uk/wp-content/uploads/2017/06/Secured-by-Design-Reducing-Crime-by-Good-Design-reduced.pdf>

Children and older people

Through redevelopment, homes can be re-provided to a high standard, including better sound proofing and lower energy costs and consumption levels.¹³¹ With regard to noise, reduced levels due to redevelopment can disproportionately impact children and older people.

With regard to insulation, the Decent Homes Standard (DHS) requires local authorities to make sure all social housing provides a reasonable degree of thermal comfort to its residents. This includes ensuring efficient heating is provided with use of minimum insulation levels. However, the DHS does not require local authorities to ensure all social housing is heated affordably, and therefore does not always automatically serve to address issues such as fuel poverty.¹³²

Fuel poverty and cold housing can have several detrimental effects on individual's physical and mental health. Children living in cold homes are more than twice as likely to suffer from a variety of respiratory problems than children living in warm homes.

Cold housing can negatively impact children's educational attainment, emotional wellbeing and resilience.¹³³

Effects of cold housing are also evident among older people in terms of higher mortality risk, physical health and mental health. Older people spend on average 80% of their time at home, making them more susceptible to cold or damp related health problems. Cold temperatures can increase the levels of minor illnesses such as colds and flu, contribute towards excess winter deaths, negatively affect mental health, and exacerbate existing conditions such as arthritis and rheumatism.¹³⁴

Disabled people

Research from disability charity Scope evidences that long term impairments or conditions have a significant impact on energy costs, with many disabled people consuming more energy because of their impairment or condition. In particular those with limited mobility report having to use more heating to stay warm.¹³⁵

People from an ethnic minority background

In England, fuel poverty is more common with ethnic minority households when compared to white households.¹³⁶ Data shows that in 2019/21, 19% of ethnic minority households were living in fuel poverty compared to 13% of White households.¹³⁷

B.3.4 Improved public realm

The ability to access and use the public realm is vitally important to ensuring people feel that they are active members of their society. This includes basic activities such as using local shops or meeting up with people in a shared space outside close to home.¹³⁸

¹³¹ City of Westminster Council (2018): 'My Ebury: Shaping the preferred scenario'.

¹³² Centre for Sustainable Energy (2006): 'Tackling fuel poverty at local and regional level: opportunities to deliver action and policies to stimulate success'. Available at: <https://www.cse.org.uk/downloads/reports-and-publications/fuel-poverty/tackling-fuel-poverty-at-local-&-regional-level.pdf>

¹³³ Marmot Review Team (2011) 'The Health Impacts of Cold Homes and Fuel Poverty'. London: Department of Epidemiology and Public Health, University College London.

¹³⁴ The Housing and Ageing Alliance (2013) 'Policy Paper: Health, Housing and Ageing', Available at www.housingalliance.org.uk/HAA/

¹³⁵ Scope (2018) 'Out in the Cold', Available at <https://www.scope.org.uk/Scope/media/Images/Out-in-the-cold.pdf>

¹³⁶ This does not include White ethnic minority households.

¹³⁷ GOV.UK (2022) Fuel poverty. Available at: [Fuel poverty - GOV.UK Ethnicity facts and figures](https://www.gov.uk/government/statistics/fuel-poverty)

¹³⁸ House of Commons Women and Equalities Committee (2017): 'Building for Equality: Disability and the Built Environment'.

However, it has been acknowledged that **disabled people** and **ethnic minority** communities are less likely to take part in public life than other sections of the population.¹³⁹ For disabled people, public spaces can often be inaccessible. The presence of vehicular traffic and lack of accessible design (such as the use of appropriate paving and lighting) can present a barrier to using outdoor, shared public spaces.¹⁴⁰ And, evidence suggests that in areas where over 40% of residents are ethnic minority, there is 11 times less green space when compared to areas where residents are largely White.¹⁴¹

The inclusion of community gardens and other public green spaces through redevelopment can also benefit **older people, children, and disabled people**. Research reports that interaction with nature or gardening can improve attentional functioning for children who have Attention Deficit Hyperactivity Disorder (ADD) and can also reduce stress levels and improve self-esteem for children. Such inclusion can also improve self-identity and a sense of purpose for those with dementia, and can generally improve social interaction, social mixing, and community building.¹⁴²

Better access to, and management of, the public realm is also important to the provision of play space for children. When children are able to play in an outdoor environment, they tend to be more active which supports positive mental health and wellbeing.

Disabled people

Research into the health benefits of urban green space has found that it can positively impact both physical and mental health. With physical health, a UK study found that those who live within 500 meters of accessible green space are 24% more likely to take part in 30 minutes of physical activity daily. In terms of mental health, green space can provide areas that encourage social interaction and integration and can indirectly benefit the wellbeing of users.¹⁴³

People from ethnic minority backgrounds

Research has found that in urban areas ethnic minority groups tend to have less access to local green space, and the space they can access is often of poor quality. For example, in the UK, wards that have an ethnic minority population of less than 2% have six times as much green space as wards where the ethnic minority population is over 40%.¹⁴⁴ The provision of green space is therefore likely to benefit this group.

Children

Children are likely to benefit from urban green space. Research carried out by UCL highlighted that urban green space can have a positive role in a child's cognitive functioning. The study found that children who lived in areas with more green space outperformed those from areas with less green space.¹⁴⁵ Exposure to green space is also important for a child's wellbeing and healthy development. However, children living in London can experience barriers in access to

¹³⁹ Greater London Authority (2017): 'The Mayor's vision for a diverse and inclusive city: Draft for consultation'.

¹⁴⁰ House of Commons Women and Equalities Committee (2017): 'Building for Equality: Disability and the Built Environment'.

¹⁴¹ CAGE (2016): 'Community green: using local spaces to tackle inequality and improve health'.

¹⁴² Maheshwari, S. (2017). 'Food in the City: Review of Psychological Impact of Growing Food in Urban Spaces'. *Journal of Innovation for Inclusive Development*, 2(1), 36-43.

¹⁴³ Houses of Parliament, Parliamentary Office of Science & Technology (2016): 'Green Space and Health'. Available at: <https://www.ethnicity-facts-figures.service.gov.uk/housing/housing-conditions/fuel-poverty/latest>
<http://researchbriefings.files.parliament.uk/documents/POST-PN-0538/POST-PN-0538.pdf>

¹⁴⁴ Commission for Architecture and the Built Environment (2010): 'Community green: Using local spaces to tackle inequality and improve health'. Available at: <https://www.designcouncil.org.uk/sites/default/files/asset/document/community-green-full-report.pdf>

¹⁴⁵ UCL (2018): 'Greener neighbourhoods may be good for children's brains'. Available at: <https://www.ucl.ac.uk/ioe/news/2018/sep/greener-neighbourhoods-may-be-good-childrens-brains>

green space compared to the rest of the UK. This is due to the high population densities, deficiencies in green space and poor access to private gardens that are characteristic of London.¹⁴⁶

The presence of urban green space also presents an opportunity to incorporate play space into regeneration schemes. Research by Play England has highlighted the benefits of play to children, and how play is central to a child's physical, psychological and social wellbeing. Play space can enable children to form friendships, interact with others and feel part of a group, something that is important to levels of self-esteem. Play space can also encourage children to have familiarity with an area and identify as part of a community. Lastly, ensuring that outdoor play space is fun and enjoyable for children is a key motivator for physical activity and exercise.¹⁴⁷

Older people

Urban green space may also benefit older people. Evidence suggests that inner-city green space can promote social cohesion and instil a sense of community. Social contact is especially important for the health and wellbeing of older people as social isolation has been linked to poor health and increased mortality rates.¹⁴⁸

However, in order to ensure the best outcomes, the design and maintenance of green space is important. Well designed and maintained spaces that have attractive green areas and planted vegetation are perceived as safer and more 'walkable'. If green space is not maintained and becomes littered and derelict, the appeal of the green space decreases and anti-social behaviour can occur.¹⁴⁹ Evidence shows that safety of urban green space is particularly important to women and ethnic minority individuals. These groups may perceive themselves as vulnerable when visiting urban green spaces due to previous experiences of victimisation or harassment. Such experiences can result in these groups feeling fearful of urban green space.¹⁵⁰

Overall, the provision and maintenance of green spaces in urban areas can make an important contribution to the health and wellbeing of several groups, specifically ethnic minority, children and older people. However, such space must be appropriately managed and maintained to ensure positive outcomes, and so that users (particularly women and ethnic minority individuals) feel safe.

Children and older people

Through redevelopment, homes can be re-provided to a high standard, including better sound proofing and lower energy costs and consumption levels.¹⁵¹ With regard to noise, reduced levels due to redevelopment can disproportionately impact children and older people.

With regard to insulation, the Decent Homes Standard (DHS) requires local authorities to make sure all social housing provides a reasonable degree of thermal comfort to its residents. This

¹⁴⁶ London Sustainable Development Commission (2011): 'Sowing the seeds: Reconnecting London's children with nature'. Available at: https://www.london.gov.uk/sites/default/files/lfdc_-_sowing_the_seeds_-_full_report_2011.pdf

¹⁴⁷ Bento, G. and Dias, G. (2017) 'The importance of outdoor play for young children's healthy development', *Porto Biomedical Journal*, 2 (5), pp. 157 -160

¹⁴⁸ World Health Organisation (2016): 'Urban green spaces and health, a review of evidence'. Available at: http://www.euro.who.int/_data/assets/pdf_file/0005/321971/Urban-green-spaces-and-health-review-evidence.pdf?ua=1

¹⁴⁹ Houses of Parliament, Parliamentary Office of Science & Technology (2016): 'Green Space and Health'. Available at: <http://researchbriefings.files.parliament.uk/documents/POST-PN-0538/POST-PN-0538.pdf>

¹⁵⁰ World Health Organisation (2016): 'Urban green spaces and health, a review of evidence'. Available at: http://www.euro.who.int/_data/assets/pdf_file/0005/321971/Urban-green-spaces-and-health-review-evidence.pdf?ua=1

¹⁵¹ City of Westminster Council (2018): 'My Ebury: Shaping the preferred scenario'.

includes ensuring efficient heating is provided with use of minimum insulation levels. However, the DHS does not require local authorities to ensure all social housing is heated affordably, and therefore does not always automatically serve to address issues such as fuel poverty.¹⁵²

Fuel poverty and cold housing can have several detrimental effects on individual's physical and mental health. Children living in cold homes are more than twice as likely to suffer from a variety of respiratory problems than children living in warm homes.

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Disabled people

Research from disability charity Scope shows long term impairments or conditions have a significant impact on energy costs, with many disabled people consuming more energy because of their impairment or condition. In particular those with limited mobility report having to use more heating to stay warm.¹⁵⁵

People from an ethnic minority background

In England, fuel poverty is more common with ethnic minority households when compared to white households.¹⁵⁶ Data shows that in 2019/21, 19% of ethnic minority households were living in fuel poverty compared to 13% of White households.¹⁵⁷

B.3.5 Improved access, mobility and navigation

Aging and being disabled can lead to a decline in physical or cognitive functions, resulting in decreased social activity and narrowing of social networks.¹⁵⁸ Leisure activities are considered to be effective mediators between social relationships and wellbeing of **older people** and **disabled people**. This is because leisure is scientifically proven to help people overcome their stress resulting from a chronic condition or negative life event. Leisure activities provide disabled and old people with social support, and further mediate their stress-health relationship. Availability of leisure services and facilities could therefore benefit older and disabled people, who are in a greater need for social interaction than the general population.¹⁵⁹

¹⁵² Ministry of Housing, Communities & Local Government (2021) 'The charter for social housing residents: social housing white paper. Available at: [The charter for social housing residents: social housing white paper - GOV.UK](#)

¹⁵³ Institute of Health Equity (2024) 'Press Release: Left Out in the Cold: The Hidden Impact of Cold Homes'. Available at: [Left Out in the Cold: The Hidden Impact of Cold Homes - IHE](#)

¹⁵⁴ UK Parliament (2023) 'Health inequalities: Cold or damp homes'. Available at: [Health inequalities: Cold or damp homes - House of Commons Library](#)

¹⁵⁵ Scope (2018) 'Out in the Cold', Available at <https://www.scope.org.uk/Scope/media/Images/Out-in-the-cold.pdf>

¹⁵⁶ This does not include White ethnic minority households.

¹⁵⁷ GOV.UK (2022) Fuel poverty. Available at: [Fuel poverty - GOV.UK Ethnicity facts and figures](#)

¹⁵⁸ Leung, A.Y.M., Molassiotis, A. and Carino, D.A> (2021) 'A Challenge to Healthy Aging: Limited Social Participation in Old Age', *Aging and Disease*, 12(7), pp.1536-1538

¹⁵⁹ Liu et al. (2018): 'Social interaction patterns of the disabled people in asymmetric social dilemmas' Available at: <https://www.frontiersin.org/articles/10.3389/fpsyg.2018.01683/full>

C. Engagement

C.1 Surveys

A demographic survey of residents within the Site was undertaken by Mott MacDonald and JTL Research Ltd on behalf of the Council in Spring 2023.

The objective of the demographic survey was to build better understanding of the residents that may be affected by the scheme and the ways in which they might be affected. Questions were also asked in order to gauge respondents' awareness of the redevelopment process and how it might affect them, and to gain a better understanding of the potential needs in the area, in order to provide the appropriate support.

The fieldwork surveys were carried out with up to five visits made to each property understood to be occupied on the Site, including residential properties. The survey included:

- A notification letter distributed to properties to make participants aware of the upcoming survey, including details for translation support
- A letter distributed to properties with a unique link to the survey, so they could complete the survey in their own time
- In-person visits during day and evening hours, with the option to complete this in another language

C.1.1 Residential results

Attempts were made to contact all addresses within the Phase 1 area.

The table below outlines a summary of the residential findings of the survey.

Table C.1: Additional residential findings

Feedback from Residents	Summary of findings
Connection to the property	Residents were asked to confirm their tenancy type. Of the 48 households who responded: • 38 residents (79%) responded that they were renting from Poplar HARCA. • Four residents (8%) responded that they were a council tenant. • Five (10%) respondents were renting from someone else. • One (2%) resident responded that they were an Immediate family member of the tenant. Residents were also asked how long they have lived in their homes. Of the 47 households who responded: • Six (13%) respondents have lived in their homes for 6 -10 years. • 12 (26%) respondents have lived in their homes for 11-20 years. • 14 (30%) respondents have lived in their homes for 20+ years. • 15 (32%) respondents would prefer not to say. Residents were also asked how they would describe their household. Of the 47 households who responded: • Six (13%) respondents live in a single person household. • Five (10%) respondents live in a Lone Parent household. Of these, four (9%) have dependent children; and one (2%) has non- dependent (adult) children at home.

Feedback from Residents	Summary of findings
	25 (53%) respondents live in a couple in their household. Of these, 16 (34%) have dependent children at home, seven (15%) have non dependent adult children at home, and two (4%) have dependent adults at home. 11 (23%) respondents classed their household type as 'Other'. Of these, five (10%) have non-dependent adult children at home; five (10%) have dependent children; and one (2%) has dependent adults. Residents were asked how many usually live at their household. Of the 47 households who responded: - Six (13%) respondents live in a 1-person household. - Five (10%) respondents live in a 2-person household. - Seven (15%) respondents live in a 3- person household. 10 (21%) respondents live in a 4- person household. - Six (13%) respondents live in a 5-person household. - Seven (15%) respondents live in a 7- person household. - Three (6%) respondents live in a 7- person household. - One (2%) respondent live in an 8- person household. - Two (4%) respondents live in a 10- person household.
Protected Characteristic	Summary of findings
Age	The demographic survey identified that 198 people live across the 47 households who responded to the survey. The breakdown of this group in age was as follows: 45 (23%) people are aged under 16 31 (16%) people are aged 16 to 24 31 (16%) people are aged 25 to 34 34 (17%) people are aged 35 to 44 23 (12%) people are aged 45 to 54 21 (11%) people are aged 55 to 64 12 (6%) people are aged 65 to 74 - Three (1.5%) people are aged 75 to 84 - Nobody is aged over 85
Sex	Of the 198 people who were identified in the survey across the 47 households who participated, 104 (52.5%) identify as male and 96 (48%) identify as female.
Disability ¹⁶⁰	Residents were asked how many people in their household are limited in their day-to-day activities because of a health problem or disability which has lasted, or is expected to last, at least 12 months (include any problems related to old age). Of the 31 households who responded, for a total of 120 residents, the breakdown of the households by LTHD was as follows: 98 (82%) people have no long-term health condition or disability - Five (4%) people's day to day lives are limited a little by a LTHD 17 (14%) people's day to day lives are limited a lot by a LTHD Some respondents gave further details on the nature of this: - One (1%) resident has a sensory impairment - Eight (7%) residents have a physical impairment - Three (3%) residents have a learning disability or cognitive impairment

¹⁶⁰ Defined here as 'People whose day to day activities are limited in any way as a result of being disabled or because of a long-term health condition'

Feedback from Residents	Summary of findings
	- One (1%) resident has a long-standing health condition or disability Residents were also asked if any of the household look after, or give any help or support to, anyone because they have long-term physical or mental health conditions or illnesses, or problems related to old age. Five households responded. Of these respondents: - Two (40%) responded no - One (20%) respondent stated that a member of their household provides 20 to 34 hours a week of care - Two (40%) responded that they would prefer not to say.
Race	Residents were asked how many people in their household are from different ethnic groups. All 47 households surveyed responded for members of their household, for a total of 198 people. 24 (12%) people identify as White British - Two (1%) people identify as Roma - Four (2%) people identify as coming from an Other White background - One (0.5%) person identifies as White and Caribbean - Four (2%) people identify as White and Black African - Nine (5%) people identify as being from any other mixed background - Five (3%) people identify as Pakistani 132 (67%) people identify as being Bangladeshi - Five (3%) people identify as being Chinese - Nine (5%) people identify as being African - One (0.5%) person identifies as being Caribbean - Three (1.5%) people identify as coming from another Black/ African/ Caribbean background
Religion	Residents were asked what religion or belief the members of their household identify with. 130 (65%) people identify as Muslim 33 (17%) people identify as Christian 27 (14%) people have no religion - Two (1%) people belong to another religion 7 (3.5%) people preferred not to say
Gender reassignment	Residents were asked if the gender identities of the people in their households was the same as their sex registered at birth. Of the households who responded: 173 (87%) people identify with the gender they were assigned at birth - Five (3%) people do not identify with the gender they were assigned at birth
Sexual orientation	Residents were asked about the sexual orientation of the people in their households. Of the 192 people whose sexual identity was disclosed, the breakdown is as follows: 189 (95%) people identify as heterosexual - Three (1.5%) people identify as gay men
Marriage and civil partnerships	The survey received 200 responses regarding the marital status of the households surveyed. This identified that: 75 (38%) people have never married 45 (23%) people are single 58 (29%) people are married - Two (1%) people are in a registered civil partnership - One (0.5%) person is separated but still legally in a civil partnership - Six (3%) people are divorced - Three (1%) people are formerly in a civil partnership - Two (1%) people are widowed

Feedback from Residents	Summary of findings
Pregnancy and maternity	The demographic survey asked respondents how many members of their household were either currently pregnant or had been pregnant in the last 12 months. Responses were received for 26 people. Of these: Two (1%) people were either pregnant or had been within the last 12 months.
Additional information	Summary of findings
Socio-economic status	Residents were asked how many people in their household receive benefits. Responses were received for 199 members of the 47 households. It was disclosed that: 40 (20%) people are in receipt of Universal Credit 20 (10%) people are in receipt of Child Tax Credits 24 (12%) people are in receipt of Housing Benefit - One (0.5%) person is in receipt of Income Support 13 (6%) people are in receipt of Working Tax credit - Four (2%) people are in receipt of Pension Credit - Nine (4%) people are in receipt of Council Tax reduction support - Eight (4%) people were in receipt of none of the above
Qualifications	Residents were asked the highest level of qualifications which members of their household had received. Responses were received for 153 residents. It was disclosed that: 27 (13%) people have no formal qualifications 18 (9%) people have qualifications to Level 1 20 (10%) people have qualifications to Level 2 37 (18%) people have qualifications to Level 3 23 (11%) people have qualifications to Level 4 or higher 22 (11%) people have other qualifications - Six (3%) people preferred not to say
Employment Status and Household Income	The survey respondent was asked about their employment status. 47 respondents answered. The results showed that: 22 (46%) survey respondents were in full time employment 10 (21%) respondents were in part time employment - Two (4%) respondents were self employed - Two (4%) respondents were unemployed and available for work - Eight (17%) respondents were wholly retired from work - Three (5%) respondents were looking after the home The survey asked respondents for their household income. All 47 households who responded to the survey answered this question. The results showed that: - Six (13%) households have an annual income of less than £10k - Eight (17%) households have an annual income of £10-15k - Eight (17%) households have an annual income of £15-20k - Seven (15%) households have an annual income of £20-25k - Two (4%) households have an annual income of £25-30k - Three (5%) households have an annual income of £30-35k - Two (4%) households have an annual income of £35-40k - Two (4%) households have an annual income of £40-50k - Three (5%) households have an annual income of over £50k - Six (13%) households preferred not to say

Feedback from Residents	Summary of findings
Language	The survey asked respondents for the preferred language of the members of their household. Responses were received for 184 residents. The results were as follows: ● 100 (54%) people speak Bengali as their preferred language ● 77 (41%) people speak English as their preferred language ● Two (4%) people speak Russian as their preferred language ● Five (5%) people speak Urdu as their preferred language
Education status of children	Residents were asked to provide the education status of the under 18 years old within their household. Education status was received for 60 children and young people. ● Four (7%) children are under school age and intend to enrol at a state school in Tower Hamlets ● 34 (56%) children are of school age and enrolled at a state school in Tower Hamlets ● Seven (12%) children are of school age and enrolled at a private school in Tower Hamlets ● 11 (18%) young people are a post 16-18 college student ● 4 (7%) young people are at university
Homes	Residents were asked a series of questions about their current home. The survey asked for details on how many bedrooms each property had. All 47 households who participated responded. ● Four (9%) households have one bedroom ● 15 (32%) households have two bedrooms ● 19 (40%) households have three bedrooms ● Nine (20%) households have four bedrooms The survey asked if the respondents felt that their house had the right number of bedrooms. 23 (50%) households responded Yes; whilst 23 (50%) responded no, they felt their home was overcrowded. The survey asked if the residents had had any aids installed or adaptations made to their home. Three households responded that they had. One of these households stated that they had received a new bath and toilet; whilst one had received bunkbeds. The third household did not provide more information.
Redevelopment	Residents were asked a series of questions regarding how they felt the rebuilding of the estate would affect them. The survey asked how the rebuilding of the estate would impact on the health and wellbeing needs of their household. ● 31 (66%) respondents said that this would have a positive impact ● Six (13%) respondents said that this would have a negative impact ● Six (13%) respondents said this would have no impact ● Four (9%) respondents would need more information to be able to respond. The survey asked how the rebuilding of the estate would impact on the childcare and school provision of young people in their household. ● 14 (30%) people stated this would have a positive impact ● Five (11%) people said that this would have a negative impact ● 25 (53%) people said this would have no impact ● Two (4%) people would need more information The survey asked how the rebuilding of the estate would impact on the employment and skills need of people in their household. ● 14 (29%) people stated this would have a positive impact ● Two (4%) people said that this would have a negative impact ● 28 (60%) people said this would have no impact

**Feedback from
Residents**

Summary of findings

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- Three (6%) people would need more information

The survey asked how the rebuilding of the estate would impact on the care and support required by members of their household.

- 13 (28%) people stated this would have a positive impact
 - 32 (68%) people said this would have no impact
 - Two (4%) people would need more information
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