

You will need to produce an Equality Impact Assessment (EqIA) if:

- You are developing a new policy, strategy, or service
- You are making changes that will affect front-line services
- You are reducing budgets, which may affect front-line services
- You are changing the way services are funded and this may impact the guality of the service and who can access it
- You are making a decision that could have a different impact on different groups of people
- You are making staff redundant or changing their roles

Guidance notes on how to complete an EqIA and sign off process are available on the Hub under Equality and Diversity. You must read the <u>guidance notes</u> and ensure you have followed all stages of the EqIA approval process (outlined in appendix 1). Section 2 of the template requires you to undertake an assessment of the impact of your proposals on groups with protected characteristics. Equalities and borough profile data, as well as other sources of statistical information can be found on the Harrow hub, within the section entitled: <u>Equality Impact Assessment</u> - sources of statistical information.

	Equality Impact Assessment (EqIA)	
Type of Decision:	Cabinet	Other (state)
Title of Proposal	Housing and Homelessness Strategies	Date EqIA created April-Oct 2019
Name and job title of completing/lead Officer	Meghan Zinkewich-Peotti Housing Strategy Project Manager Housing Services Community Directorate	
Directorate/ Service responsible	Housing Services, Community Directorate	
Organisational approval	Name	
EqlA approved by Directorate Equalities Lead	Name Dave Corby Head of Service- Community Engagement Commissioning Services Community Directorate	Signature ⊠ Tick this box to indicate that you have approved this EqIA Date of approval 05/11/19

1. Summary of proposal, impact on groups with protected characteristics and mitigating actions (to be completed after you have completed sections 2 - 5)

a) What is your proposal?

We are reviewing the Housing Strategy and the Homelessness & Rough Sleeping Strategy to reflect changes in policy and legislation, address local priorities and meet statutory requirements.

The Housing Strategy is a key strategic document. The Homelessness & Rough Sleeping Strategy is a key strategic document and a statutory requirement that must be reviewed every 5 years.

b) Summarise the impact of your proposal on groups with protected characteristics

The Housing Strategy sets out our priorities for increasing the supply of affordable housing, improving standards in private sector housing and meeting the housing needs of vulnerable people which will benefit the community and borough positively in a range of ways.

The Homelessness and Rough Sleeping Strategy priorities of preventing and addressing homelessness and the increased services for rough sleepers and single homeless people will have a positive impact. Changes are proposed to the previous Homelessness and Rough Sleeping Strategy but we anticipate that all applicants who are currently assisted to keep or obtain suitable accommodation by Housing Needs will continue to be assisted and others will now receive some assistance (particularly rough sleepers and single homeless people) and therefore there will be no anticipated adverse influences under any protected characteristic.

c)Summarise any potential negative impact(s) identified and mitigating actions

There are no anticipated adverse influences under any protected characteristic.

protected char- information, co and explain wh	to undertake a detailed analysis of the impact of your proposals on groups with acteristics. You should refer to borough profile data, equalities data, service user nsultation responses and any other relevant data/evidence to help you assess lat impact (if any) your proposal(s) will have on each group. Where there are ou should state this in the boxes below and what action (if any), you will take to			oosal may oted relevant our re impact,	
Protected characteristic	For each protected characteristic, explain in detail what the evidence is suggesting and the impact of your proposal (if any). Click the appropriate box on			jative pact	ct
	the right to indicate the outcome of your analysis.	Positive impact	Minor	Major	No impact
Age	Harrow's resident population at 30 June 2018 was estimated to be just over 250,000. Growth over the last decade is 9%, lower than London's growth of 14% and higher than England's growth of 8%. At the 2011 Census Harrow had the second largest household size of England's 360 local authorities at 2.78 persons per household The total number of households (with at least one person) was 84,300.				
	2018 ONS Mid-Year Population Estimates indicated that 21% of residents were children (aged 0-15), 63.3% were of working age (16-64) and 15.7% were aged 65 and above. The number and proportion of older people in Harrow continue to increase, with implications for housing and adult social care.	⊠			
	Homelessness affects all age groups but in 2017/18 68.1% of homeless applicants were aged 16 to 45 years, 27.4% were aged 45 to 64 years and 4.6% were aged over 65 years.				
	The CHAIN Annual Report shows that there were 33 rough sleepers in Harrow in 17/18, though the unrecorded figure is likely to be much higher. Of the 33				

recorded rough sleepers 8 were aged 18-25 years, 11 were aged 26-35 years, 5 were aged 36-45 years, 6 were aged 46-55 years and 3 were aged over 55 years.

In relation to homelessness applicants, under Part VII of the Housing Act 1996 those considered vulnerable due to their age, or with whom such a person resides or might reasonably be expected to reside, are a group of people considered to be in priority need. Therefore additional consideration is provided for homelessness applicants with this characteristic under the Housing Act 1996 and the associated Statutory Guidance. This may apply to older people, children and care leavers.

The Housing Strategy priorities of increasing the supply of affordable housing, improving standards in the private sector and meeting the needs of vulnerable people will have a positive impact on all age groups. The objective to promote realistic housing options for those needing to move may benefit older people, particularly under-occupiers. The focus on increasing the supply of extra care housing will have a positive impact on older people with care and support needs.

The objective to improve housing standards helps to mitigate the risk and effect of climate change for everyone. Poor energy efficiency can impact the wellbeing of residents and the links between cold homes and poor health are well established. The factors that make people vulnerable to the impacts of climate change are most acute amongst particular groups, typically older people. Older people are physiologically at most risk of health impacts from extreme heat and cold. The benefits of warm homes include reduced incidence of childhood asthma and improved school attendance and educational achievements. Improving housing standards is likely to benefit children and older people in particular.

The Homelessness and Rough Sleeping Strategy priorities of preventing and addressing homelessness and the increased services for rough sleepers and

single homeless people will benefit all age groups. The data on rough sleepers and single homelessness people is too limited to draw reliable conclusions.

While the overriding priority is to prevent and relieve homelessness the need to relocate, sometimes several times, can be disruptive to households. The Homelessness and Rough Sleeping Strategy sets out which groups will be allocated local homelessness accommodation to mitigate where possible this potential disruption.

When allocating homelessness accommodation, priority for local accommodation within Harrow is given to families who have a child or children with particular educational needs that can only be met locally at their existing school or college, such as a child who is in key stages of education in years 11 or 13 (and in some cases years 10 and 12, depending on the curriculum) and due to take exams; or who have a Statement of Special Educational Needs (SEN) or Education Healthcare Plan (EHC Plan) that cannot be transferred or similar services obtained elsewhere; or who have other exceptional educational needs.

When allocating homelessness accommodation, priority for local accommodation within Harrow for working age households is given to families where one or more family members are in employment and similar employment is not available in another area where they could be accommodated or who could not commute within a reasonable time and at an affordable cost to their existing employment from another area where they could be accommodated.

When allocating homelessness accommodation, priority for local accommodation within Harrow for all ages is given to families where one or more family members have exceptional medical needs and are in receipt of a significant care package or specialist healthcare that cannot be obtained or transferred elsewhere.

	When allocating homelessness accommodation, priority for local accommodation within Harrow for all ages is given to families who have other special reasons to stay locally and are unable to travel back to the area as reasonably needed, such as significant care, welfare or social needs that require the family to remain in the area. The Council recognises it also has duties to children and young people under other legislation, such as the Children Act 1989 and the Children and Families Act 2014, pursuant to which accommodation may be provided to the person or to the person and their family.		
Disability	In the ONS Annual Population Survey 2017 13.7% of Harrow's working age population classified themselves as disabled, a total of 22,100 people. 6,470 individuals, 2.6% of the total population, received Disability Living Allowance. The CHAIN Annual Report shows that there were 33 rough sleepers in Harrow in 17/18, though the unrecorded figure is likely to be much higher. Of the 33 recorded rough sleepers 15 were experiencing mental ill health. In relation to homelessness applicants, under Part VII of the Housing Act 1996 those considered vulnerable due to mental illness, learning disability or physical disability or other special reason, or with whom such a person resides or might reasonably be expected to reside are groups of people considered to be in priority need. Therefore additional consideration is provided for homelessness applicants with these characteristics under the Housing Act 1996 and the associated Statutory Guidance The Housing Strategy priorities of increasing the supply of affordable housing, improving standards in the private sector and meeting the needs of vulnerable people will have a positive impact on people with disabilities. The objective to improve housing standards helps to mitigate the risk and effect		

	of climate change for everyone. Poor energy efficiency can impact the wellbeing of residents and the links between cold homes and poor health are well established. The benefits of warm homes include increased life expectancy, reduced health inequalities, improved mental and physical health, promotion of social health and independent living, and reduced admissions to hospitals and care homes. Improving housing standards is likely to benefit people with disabilities and long-term conditions in particular. The Homelessness and Rough Sleeping Strategy priorities of preventing and addressing homelessness and the increased services for rough sleepers and single homeless people will benefit people with disabilities. While the overriding priority is to prevent and relieve homelessness the need to relocate, sometimes several times, can be disruptive to households where a household member has a disability or long-term health condition. The Homelessness and Rough Sleeping Strategy sets out which groups will be allocated local homelessness accommodation to mitigate where possible this potential disruption. When allocating homelessness accommodation, priority for local accommodation within Harrow is given to families where one or more family members have exceptional medical needs and are in receipt of a significant care package or specialist healthcare that cannot be obtained or transferred elsewhere. When allocating homelessness accommodation, priority for local accommodation within Harrow is given to families who have other special reasons to stay locally and are unable to travel back to the area as reasonably needed, such as significant care, welfare or social needs that require the family to remain in the area.		
Gender	There is limited data held about this protected characteristic for the Harrow population. The England/Wales Census and Scottish Census have not asked if		

reassignmen t	people identify as transgender. The charity GIRES estimated in their Home Office funded study in 2009 the number of transgender people in the UK to be between 300,000 and 500,000. Although Gender Reassignment is a protected characteristic under equalities legislation, there is insufficient data and no evidence that the proposal will have a negative impact on any individual or group due to gender reassignment.		
Marriage and Civil Partnership	The 2011 Census showed that 54% of Harrow's residents are married, which was the highest level in London. 21% of households were married, or in same-sex civil partnerships, with dependent children, the highest level in London. At 31 December 2016 there had been 142 Civil Partnerships in Harrow, 19 of		×
	which had been converted to marriage. There had been 32 same sex marriages in Harrow since inception on 29th March 2014. There is no evidence that the proposal will have a negative impact on any		
	individual or group due to marriage or civil partnership. There is limited data held about this protected characteristic for the Harrow population. ONS births figures show Harrow as having 3,582 live births in 2018.		
	In 2016 there were 14.5 live births per 1000 population which is higher than the UK average of 11.8. For women under the age of 18, the birth rate was 3.7 per 1000 population which is in line with the London average of 3.8 and lower than the UK average of 5.7. Harrow has the lowest levels of live births outside of marriage in the country (19.4%).		
Pregnancy and Maternity	In relation to homelessness applicants, under Part VII of the Housing Act 1996 someone who is pregnant, or with whom such a person resides or might reasonably be expected to reside, are people considered to be in priority need. Therefore additional consideration is provided for homelessness applicants with this characteristic under the Housing Act 1996 and the associated Statutory Guidance.		
	Furthermore, homeless applicants who are pregnant, or who reside with or might reasonably be expected to reside with a pregnant woman, or have dependent		

children who reside with them, or might reasonably be expected to reside with them, can only be housed in a B&B for a maximum of 6 weeks. This applies to emergency or temporary accommodation that is considered to be a privately-owned B&B under the Homelessness (Suitability of Accommodation) Order 2003 because the accommodation has either a shared toilet, shared personal washing facilities, or shared cooking facilities. Self-contained temporary accommodation is considered to be more suitable for such applicants. Consideration is therefore given to this protected characteristic when allocating homelessness accommodation.

While the overriding priority is to prevent and relieve homelessness the need to relocate, sometimes several times, can be disruptive to households where a household member is pregnant or has a baby. The Homelessness and Rough Sleeping Strategy sets out which groups will be allocated local homelessness accommodation to mitigate where possible this potential disruption.

When allocating homelessness accommodation, priority for local accommodation within Harrow is given to families where one or more family members have exceptional medical needs and are in receipt of a significant care package or specialist healthcare that cannot be obtained or transferred elsewhere. This might apply to someone with a high risk pregnancy or with a baby who has a serious illness requiring specialist healthcare.

When allocating homelessness accommodation, priority for local accommodation within Harrow is given to families who have other special reasons to stay locally and are unable to travel back to the area as reasonably needed, such as significant care, welfare or social needs that require the family to remain in the area. This might apply someone with specific needs and special reasons related to pregnancy or maternity.

Race/ Ethnicity	Harrow's population is one of the most diverse nationally. The 2011 Census showed that 69.1% of residents were from minority ethnic groups and 31.9% of residents stated that they were White-British. 26.4% of Harrow's residents were of Indian origin, the largest minority ethnic group. Harrow is also home to the country's largest Sri Lankan born community. Homelessness affects all communities regardless of ethnicity. However, it seems that a disproportionately large number of Black households are affected each year. In 2017/18, 8.6% of Harrow's population were Black but they constituted 27% of homeless acceptances. This may reflect particular issues of housing need within this group. 2018/19 indicative data suggests this figure to be around 30%. The CHAIN Annual Report shows that there were 33 rough sleepers in Harrow in 17/18, though the unrecorded figure is likely to be much higher. Of the 33 recorded rough sleepers 10 were White British, 1 was White Irish, 5 were White Other, 4 were Black, 8 were Asian, 2 were Mixed, 2 were Other and 1 was Refused/unknown. The Housing Strategy priorities of increasing the supply of affordable housing, improving standards in the private sector and meeting the needs of vulnerable people will have a positive impact on people from all ethnic groups. The Homelessness and Rough Sleeping Strategy priorities of preventing and addressing homelessness and the increased services for rough sleepers and single homeless people will benefit people from all ethnic groups. However further work is needed to understand the over representation of Black homeless applicants.		
Religion or belief	Religious diversity is strong in Harrow. At the 2011 Census Harrow was the most religiously diverse borough in the country. The 2011 Census showed that Harrow has the highest number (and proportion) of Hindu followers in the		×

	country (25.3%), the highest number of Jains (2.2%) and the second highest number of Zoroastrians. Harrow's Jewish community was the sixth largest nationally. 37.3% of residents were Christians (the 5 th lowest proportion in the country) and 12.5% were Muslims. Harrow had the 2nd lowest ranking for 'no religion'.		
	The Housing Strategy priorities of increasing the supply of affordable housing, improving standards in the private sector and meeting the needs of vulnerable people will have a positive impact on people from all religions.		
	The Homelessness and Rough Sleeping Strategy priorities of preventing and addressing homelessness and the increased services for rough sleepers and single homeless people will benefit people from all religions.		
Sex	The 2011 Census showed that in Harrow 49.4 per cent of residents were males and 50.6 per cent were females. Overall, the number of males and females living in Harrow is now very similar.		
	Homelessness affects both males and females but in 2017/18 67% of homeless applicants in one person households were male and 95% of homeless applicants in lone parent households with dependent children were female.		
	The CHAIN Annual Report shows that there were 33 rough sleepers in Harrow in 17/18, though the unrecorded figure is likely to be much higher. Of the 33 recorded rough sleepers 8 were female and 25 were male.		⊠
	The Housing Strategy priorities of increasing the supply of affordable housing, improving standards in the private sector and meeting the needs of vulnerable people will have a positive impact on males and females.		
	The Homelessness and Rough Sleeping Strategy priorities of preventing and addressing homelessness and the increased services for rough sleepers and single homeless people will benefit males and females.		

Sexual Orientation	There is limited data held about this protected characteristic for the Harrow population. It is estimated that around 10% of the UK population are lesbian, gay or bisexual, which would equate to approximately 25,000 of our residents. Although Sexual Orientation is a protected characteristic under equalities legislation there is insufficient data and no evidence that the proposal will have a negative impact on any individual or group due to their sexual orientation.				⊠
	re impact – considering what else is happening within the Council and Harrow ative impact on groups with protected characteristics? No ⊠	as a wl	hole, cou	ld your pr	oposals
If you clicked to details in the s	he Yes box, which groups with protected characteristics could be affected and what pace below	is the p	otential in	npact? Incl	ude
	impact - considering what else is happening nationally/locally (national/loca ould your proposals have an impact on individuals/service users, or other gro No ⊠		al policie	es, socio-e	conomic
If you clicked to	he Yes box, Include details in the space below				
3. Actions to	mitigate/remove negative impact				
	e this section if your assessment (in section 2) suggests that your proposals protected characteristics. If you have not identified any negative impacts, plea				
measures will a	low, please state what these potential negative impact (s) are, mitigating actions an address and remove any negative impacts identified and by when. Please also state once implemented.				

State what the negative impact(s) are for each group, identified in section 2. In addition, you should also consider and state potential risks associated with your proposal.	Measures to mitigate negative impact (provide details, including details of and additional consultation undertaken/to be carried out in the future). If you are unable to identify measures to mitigate impact, please state so and provide a brief explanation.	What action (s) will you take to assess whether these measures have addressed and removed any negative impacts identified in your analysis? Please provide details. If you have previously stated that you are unable to identify measures to mitigate impact please state below.	Deadline date	Lead Officer

4. Public Sector Equality Duty

How does your proposal meet the Public Sector Equality Duty (PSED) to:

- 1. Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010
- 2. Advance equality of opportunity between people from different groups
- 3. Foster good relations between people from different groups

The proposal prioritises increasing affordable housing to meet housing need, increasing standards in the private sector, meeting the needs of vulnerable people and addressing homelessness and rough sleeping. These priorities aim to meet the needs of different groups, some of which are protected under equalities legislation.

The review of the strategies has included consultation with stakeholders and the development of a comprehensive evidence base which have considered the protected characteristics and the Equality Act 2010.

Consultation with stakeholders has been undertaken using different formats, which contributes to advancing equality of opportunity between people from different groups.

One of the outcomes of the review of the strategies is to ensure that our priorities are clear to stakeholders, which contributes to fostering good relations between people from different groups.

5. Outcome of the Equality Impact Assessment (EqIA) click the box that applies

	lo change required: the EqIA has not identified any potential for unlawful conduct or disproportionate impact and all opportunities to advance equality of opportunity are being addressed
Α	☐ Outcome 2 Adjustments to remove/mitigate negative impacts identified by the assessment, or to better advance equality, as stated in section 3&4
Т	☐ Outcome 3 This EqIA has identified discrimination and/ or missed opportunities to advance equality and/or foster good relations. However, it is still reasonable to continue with the activity. Outline the reasons for this and the information used to reach this lecision in the space below.
Ir	nclude details here