Havering Demographic Profile

Joint Strategic Needs Assessment 2023-2024

Havering
LONDON BOROUGH

Table of Content

Document Control

Version history

Version	Change	Date	Author /Analyst	Dissemination
V0.1	First Draft	1/11/2022	Anthony Wakhisi Mark Holder	Working Group
V0.2	Complete draft for HWB	11/12/2023	Anthony Wakhisi Mark Holder	Public Health SMT
V0.3	Addressed feedback from Mark Ansell, DPH & SMT	13/12/2023	Anthony Wakhisi Louse Dibsdall Mark Holder	Havering HWB
V0.4	Addressed feedback from HWB & SMT	17/01/2024	Anthony Wakhisi Mark Holder	Final Report All Partners

1. Introduction

The Havering demographic profile is the first chapter of the local Joint Strategic Needs Assessment (JSNA). The JSNA is a systematic method for reviewing the issues facing a population, leading to agreed priorities and resource allocation that will improve health and wellbeing and reduce inequalities within the population.

The Health and Social Care Act 2012 supported the principle of local clinical leadership and democratically elected leaders working together to deliver the best health and care services based on the best evidence of local needs. Joint Strategic Needs Assessment (JSNAs) and Joint Health & Wellbeing Strategies (JHWSs) are an important, locally owned process through which to achieve this.

The purpose of JSNAs and JHWSs is to improve the health and wellbeing of the local community and reduce inequalities for all ages. They are not an end in themselves, but a continuous process of strategic assessment and planning. The core aim is to develop local evidence-based priorities for commissioning which will improve the public's health and reduce inequalities. Their outputs, in the form of evidence and the analysis of needs, and agreed priorities, are used to help to determine what actions local authorities, the local NHS and other statutory and voluntary sector partners need to take to meet health and social care needs, and to address the wider determinants that impact on health and wellbeing[1]

This chapter provides a snapshot of key geographic, demographic and socio-economic facts and figures for the London Borough of Havering[2], with the intention that this will be the "one version of the truth" or reference document for all local stakeholders. The data presented in this chapter is complemented by an online tool to facilitate both the interrogation and further exploration of useful data, reports, and maps by interested stakeholders (Local Insight (communityinsight.org)).

The work to date on the Demographics chapter has been carried out by the Public Health intelligence team and overseen by the Director of Public Health.

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[1] https://assets.publishing.service.gov.uk/media/5a7b88cced915d131105fdff/Statutory-Guidance-on-Joint-Strategic-Needs-Assessments-and-Joint-Health-and-Wellbeing-Strategies-March-2013.pdf

[2] Simply referred to as "Havering" throughout this document.

2. Geographic Profile

2. Geographic Profile

2.1 Geographical Location

Havering is the third largest London borough, covering some 43 square miles. It is located on the northeast boundary of Greater London. The location of Havering in the context of Greater London is presented in Figure 1. Havering is bordered to the north and east by the Essex countryside, to the south by a three mile River Thames frontage, and to the west by the neighbouring London boroughs of Redbridge and Barking & Dagenham.

Figure 1: The London Borough of Havering

Source: London Councils

Havering has 20 electoral wards (see Figure 2). Residents' postcodes mainly fall into the Romford postal area (RM1 to RM7 and RM11 to RM14) but a small number fall into the Chelmsford postal area (CM12 and CM13).

Figure 2: The London Borough of Havering ward boundaries

Source: LBH Public Health Intelligence

2.2 Parks & Green spaces

Havering is mainly characterised by suburban development, with almost half of the area dedicated to open green space, particularly to the east of the borough where strict Green Belt restrictions have prohibited the extension of existing developments (see Figure 3).

Figure 3: Green spaces, Havering 2021
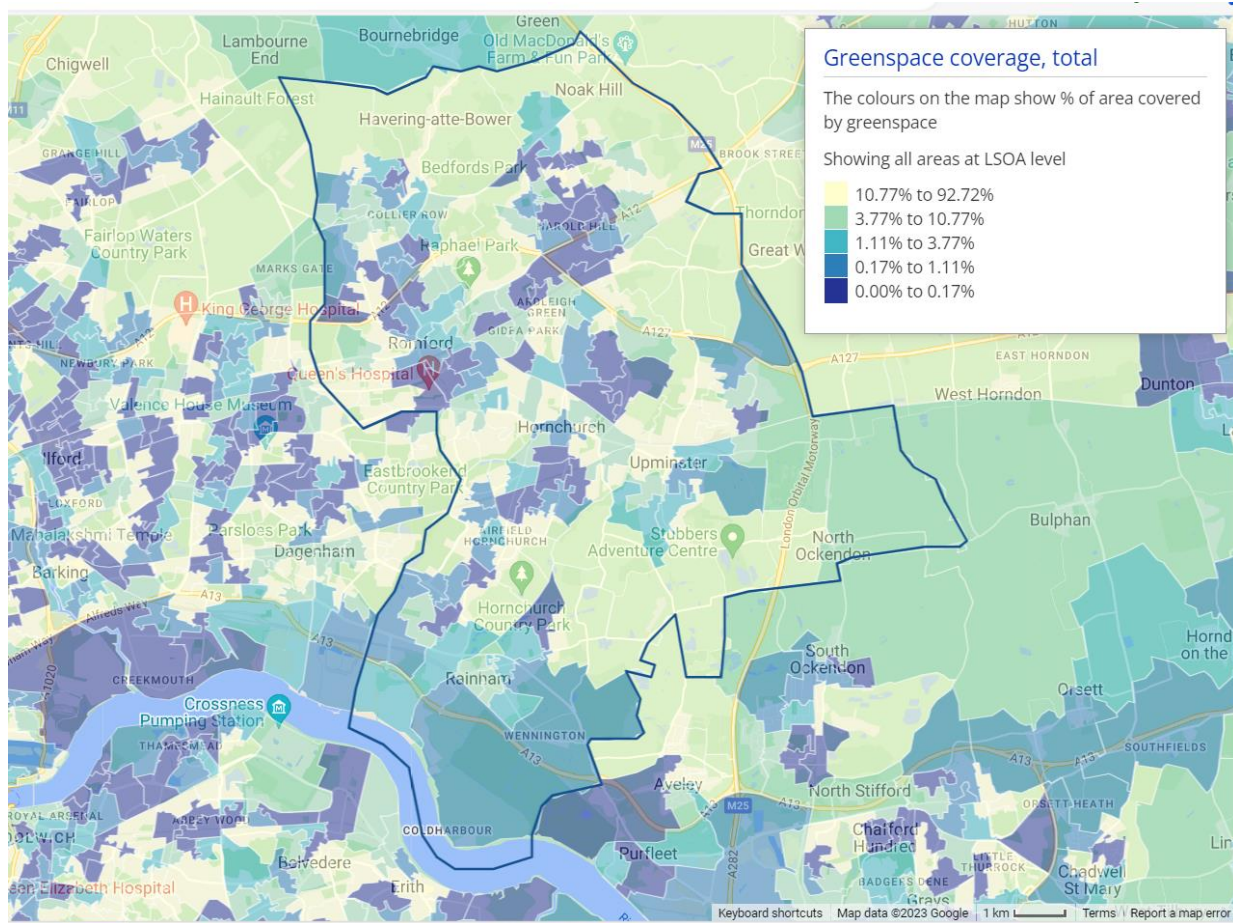
Source: Havering Local Insight

2.3 Population density

Havering's average population density is relatively lower compared with other London boroughs and is estimated to be 2,332 persons per square kilometre (ONS Census, 2021).[3] On the other hand, its principal town (Romford), is densely populated (see Figure 4), and is a major metropolitan retail and night time entertainment centre. The southern part of Havering adjacent to the Thames is within the London Riverside section of the Thames Gateway redevelopment area. This will therefore continue to be a site of increasing development and population change.

Figure 4: Population Density, Havering 2021
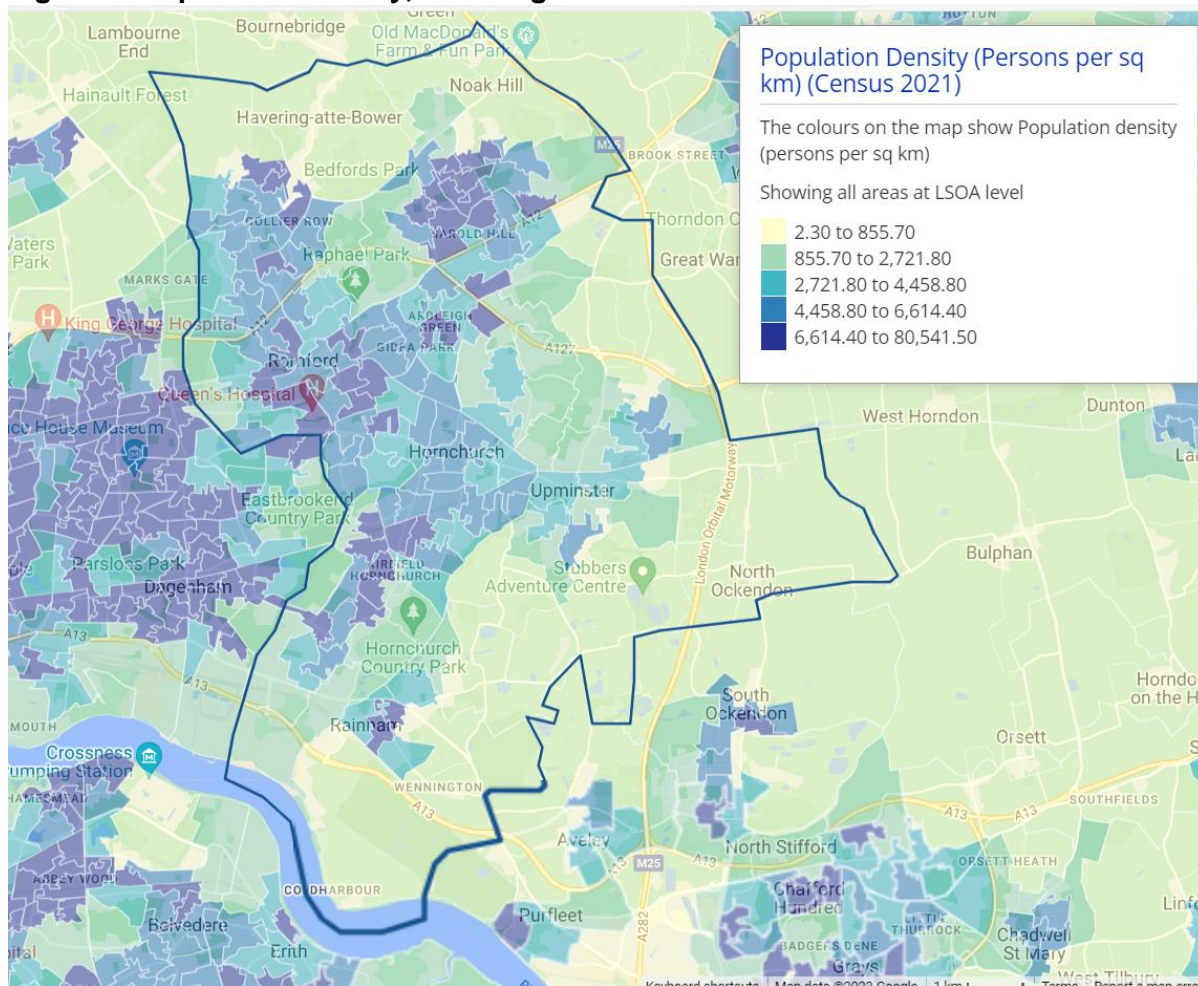
Source: Havering Local Insight

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[3] Population estimates - Office for National Statistics (ons.gov.uk)

2.4 Deprivation

The Index of Multiple Deprivation (IMD)[4] combines many different facets of disadvantage into a single measure. Levels of disadvantage for Havering as a whole are modest but vary significantly within the borough with pockets of significant disadvantage in Harold Hill, Rainham and parts of Romford (see Figure 5).

Figure 5: Havering % of LSOAs[5] in each national deprivation decile, 2019[6].

Source: Ministry of Housing Communities & Local Government

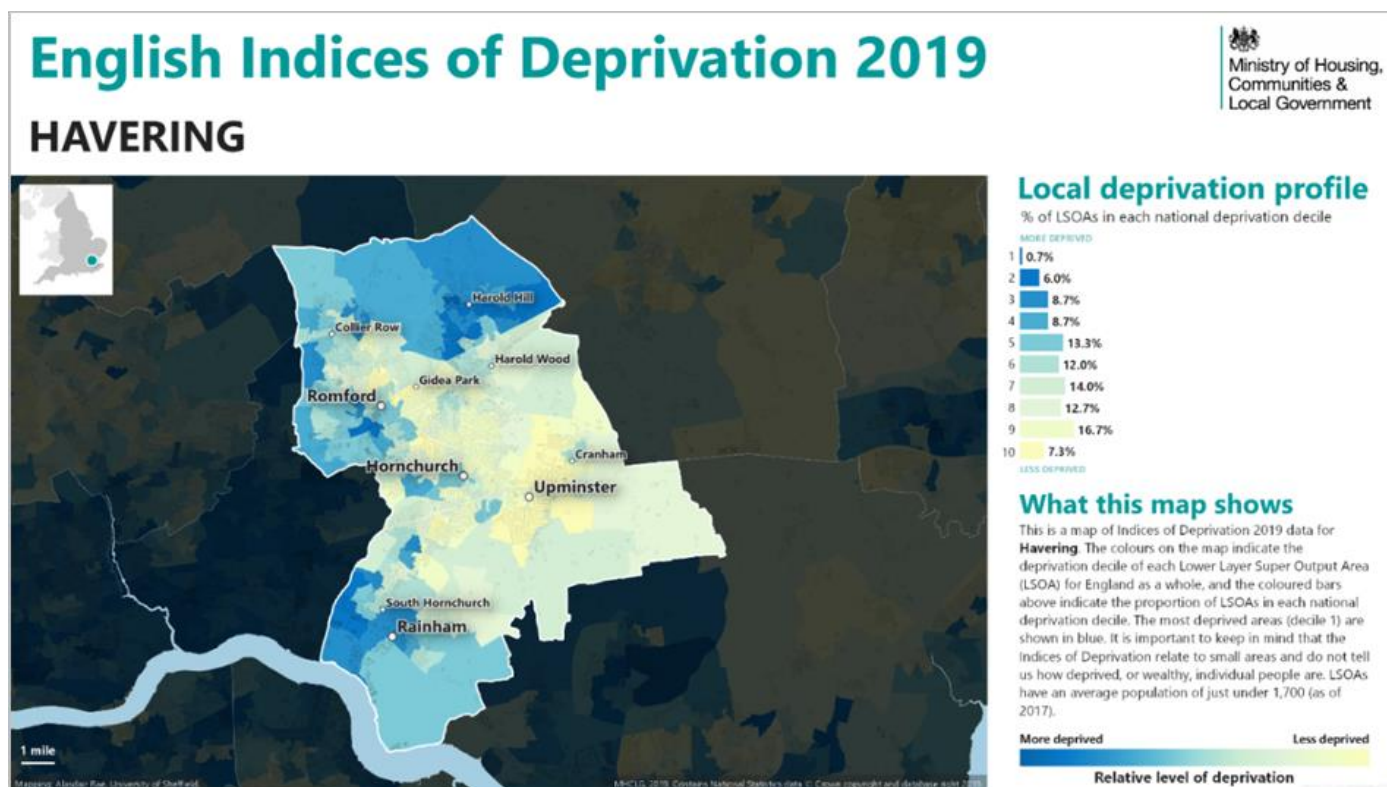The strong association between levels of disadvantage and life expectancy is evidence that the wider determinants are the most important driver of whether we are healthy or not. At local level, the levers to affect the socio-economic determinants of health tend to lie with councils rather than the NHS.

Health and wellbeing boards give NHS partners the opportunity to ensure that local plans regarding tackling poverty, employment opportunities, educational attainment, housing etc. are robust,

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[4] In September 2019, the Department for Communities and Local Government (CLG) published the English Indices of Multiple Deprivation 2019 (IMD 2019). This includes county and district summary measures, and a series of separate domains and other measures at the level of Lower Super Output Area (LSOA). The Indices of Deprivation are typically updated every 3 to 4 years, but the dates of publication for future Indices have not yet been scheduled.

[5] LSOA - Lower Layer Super Output Areas are a geographic hierarchy used by Office for National Statistics (ONS) to improve the reporting of small area statistics. They are built from groups of contiguous Output Areas and have been automatically generated to be as consistent in population size as possible, and typically contain from four to six Output Areas. The minimum population is 1000 and the mean is 1500.

[6] Deprivation quintile: A 'quintile' basically represents 20% (or one-fifth) of a given population. Deprivation quintiles are derived when a population is ranked in order of deprivation and split into 5 groups – from the most deprived to the least deprived quintile.

focused on reducing inequality and those groups most vulnerable to poor health and wellbeing. However, the health and social care system also has a direct role to play in tackling disadvantage. Residents living with physical and mental illness are at greater risk of disadvantage in all its forms, worsening their wellbeing still further. Effective action to support people with health problems into work or stable accommodation can improve health and reduce demand on health and social care services.

In addition, NHS agencies and Councils have the opportunity to directly impact on the wider determinants to the benefit of local people. To this end, they should view themselves as 'anchor institutions[7]' and consciously seek to maximise the contribution they make to the local community over and above the direct provision of services for example by:

- Further strengthening links (e.g. through work experience, apprenticeships, bursaries etc.) between the health and social care system and local schools and colleges to increase the numbers of young people who aspire to and train towards a relevant career, prioritising more disadvantaged groups and hard to recruit to professions.
- Providing an exemplary work place health scheme to employees and help local SMEs to improve the offer to their workforce.
- Routinely considering the potential for additional 'social value' when procuring goods and services; and how bids from local businesses can be facilitated.

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[7] https://www.health.org.uk/newsletter-feature/the-nhs-as-an-anchor

3. Resident & GP Population

3. Resident & GP Population Profiles

3.1 Havering Residents Population

According to the ONS Census 2021, the Havering resident population is estimated as 262,052. The number of people that live in Havering has increased over the last decade from 237,232 in 2011 to 262,052 in 2021 (a 10.4% increase).Table 1 shows the Havering population breakdown by gender and five-year age bands and the population pyramid in Figure 6 compares the population figures for Havering with London and England by five-year age bands. Figure 6 shows a much older age structure for the population of Havering compared to London but similar to England.

Table 1: Estimated population of residents in Havering by gender and five-year age group, 2021

Age Band (Years)	Male	Female	Persons
00-04	8,503	7,987	16,490
05-09	8,588	8,273	16,861
10-14	8,196	7,769	15,965
15-19	7,320	7,047	14,367
20-24	7,094	7,009	14,103
25-29	8,077	8,861	16,938
30-34	8,951	10,340	19,291
35-39	9,131	10,059	19,190
40-44	8,453	8,987	17,440
45-49	7,945	8,268	16,213
50-54	8,338	9,032	17,370
55-59	8,231	8,726	16,957
60-64	7,207	7,546	14,753
65-69	5,706	6,166	11,872
70-74	5,656	6,470	12,126
75-79	3,831	4,894	8,725
80-84	2,653	3,766	6,419
85+	2,504	4,468	6,972
All Ages	**126,384**	**135,668**	**262,052**

Source: ONS Census, 2021

Figure 6: Havering, London & England 2021 Population Estimates Pyramid
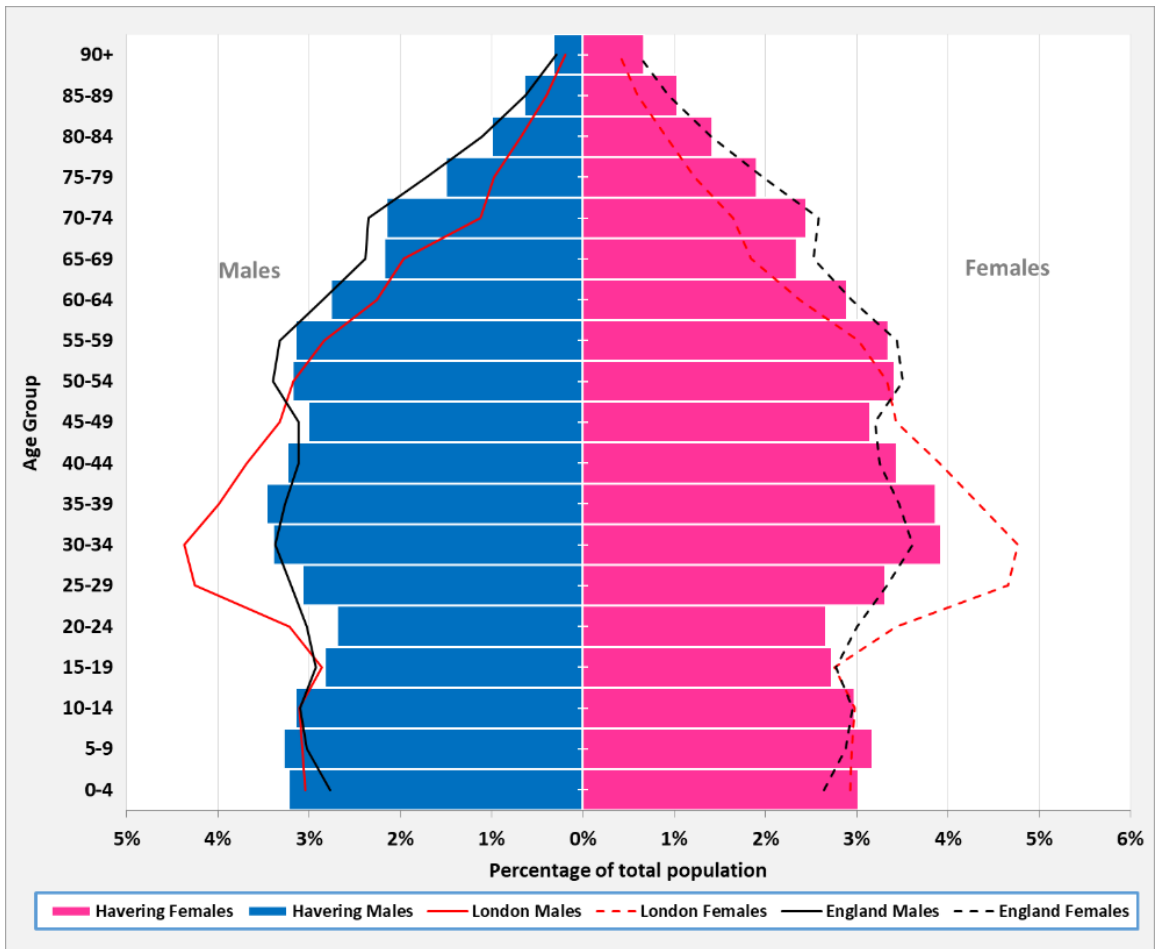
Source: ONS 2021 Mid-Year Population Estimates; Produced by LBH Public Health Intelligence

3.2 Havering GP Registered Population

According to the NHS records, 291,795 persons are registered with GP practices in Havering. This is a higher figure by nearly 30,000 as compared to the resident population. This may be attributed to cross border registrations from neighbouring boroughs and some patients not notifying their practices after moving out of the borough. However, the GP population structure (see Table 2 and Figure 7) is similar to the resident's one.

Table 2: Havering GP registered population by gender and five-year age groups, 2023

Age Band (Years)	Male	Female	Persons
00-04	8,611	8,038	16,649
05-09	9,602	9,257	18,859
10-14	9,214	8,716	17,930
15-19	8,431	8,163	16,594
20-24	8,013	7,644	15,657
25-29	9,114	9,661	18,775
30-34	10,413	11,316	21,729
35-39	10,975	11,605	22,580
40-44	10,620	10,439	21,059
45-49	9,111	8,857	17,968
50-54	9,146	9,150	18,296
55-59	9,140	9,476	18,616
60-64	8,390	8,392	16,782
65-69	6,611	6,899	13,510
70-74	5,424	6,174	11,598
75-79	4,914	5,936	10,850
80-84	2,852	4,007	6,859
85-89	1,810	2,856	4,666
90+	898	1,920	2,818
All Ages	**143,289**	**148,506**	**291,795**

Source: NHS Digital, June 2023

Figure 7: Havering, London & England GP registered population pyramid, 2023
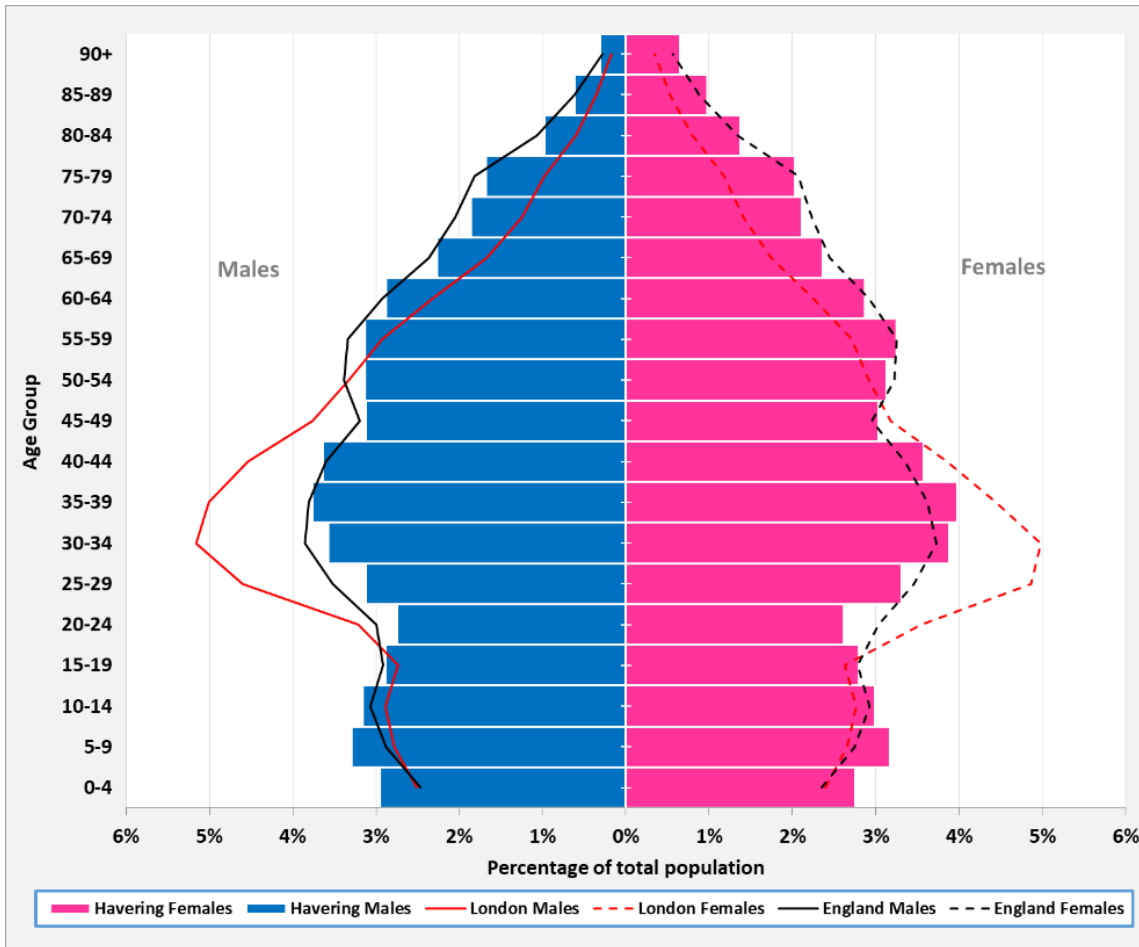
Source: NHS Digital, June 2023; Produced by LBH Public Health Intelligence

4. Population Change

4. Population Change

4.1 Annual Population Change and Associated Factors

Havering's population has increased year on year since 1998 to approximately 262,000 in 2021 (see Figure 8).

Figure 8: Trend in population size in Havering, 1991-2021
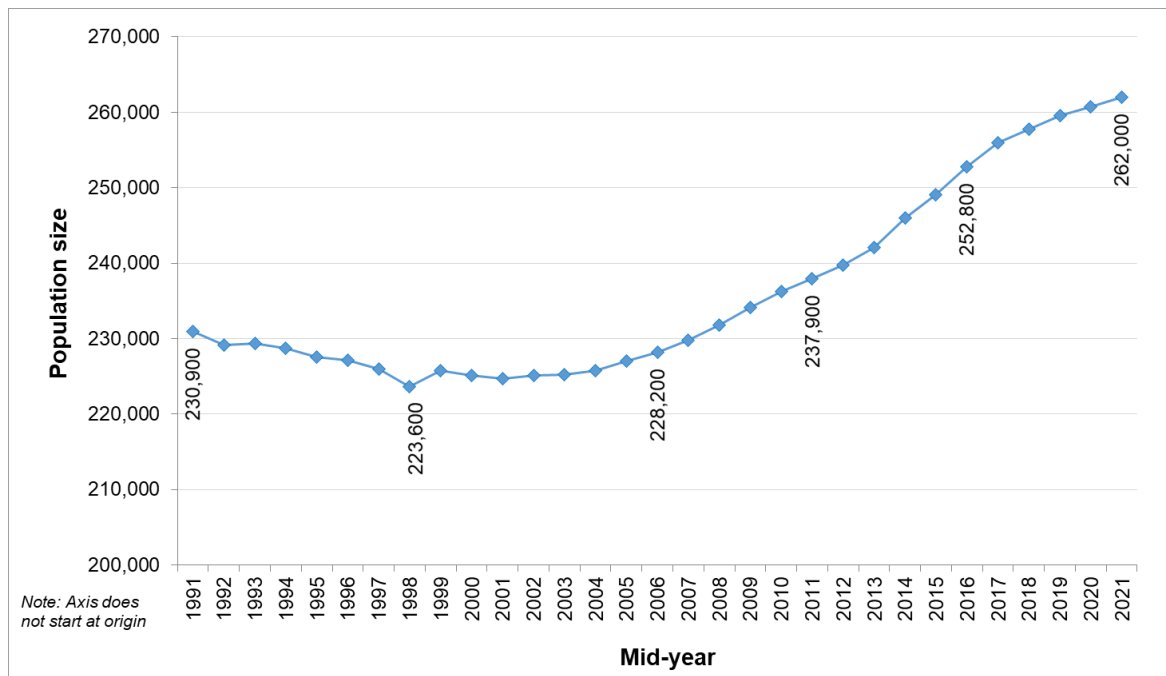
Source: ONS 2021 Mid-Year Population Estimates; Produced by LBH Public Health Intelligence

The ONS mid-year population estimates show an increase of 180 residents (0.1%) between 2020 and 2021. This increase is mainly due to a net international migration of 511 people (0.2%). Internal migration saw a reduction in population of 956 people (0.4%) (Table 3).

Table 3: Havering Components of Population Change, from 2020 to 2021

	Number	Percentage
Estimated Population mid-2020	261,906	
Estimated Population mid-2021	262,086	
Overall Population Change	**180**	**0.07%**
• Due to Births and Deaths	391	0.15%
• Due to Internal Migration	-956	-0.37%
• Due to International Migration	511	0.20%
• Due to Other Adjustments	234	0.09%

Source: Analysis of Population Estimates Tool, ONS 2023

4.2 Population change between 2011 and 2021 census

The number of people that live in Havering has increased over the last decade from 237,232 in 2011 to 262,052 in 2021. This is a 10.4% increase compared to a 7.7% increase across London and a 6.6% increase across England. Tower Hamlets had the highest population increase among London boroughs (22.1%) (Figure 8). Between the last two censuses, the median age in Havering decreased by one year, from 40 to 39 years of age. This was higher than London as a whole (35 years) but slightly lower than England (40 years).

Table 4: Havering population change between 2011 and 2021 census

	Number	Percentage
Census Population 2011	237,232	
Census Population 2021	262,052	
Overall Population Change	**24,820**	**10.4%**

Figure 9: London boroughs percentage population change between 2011 and 2021 census
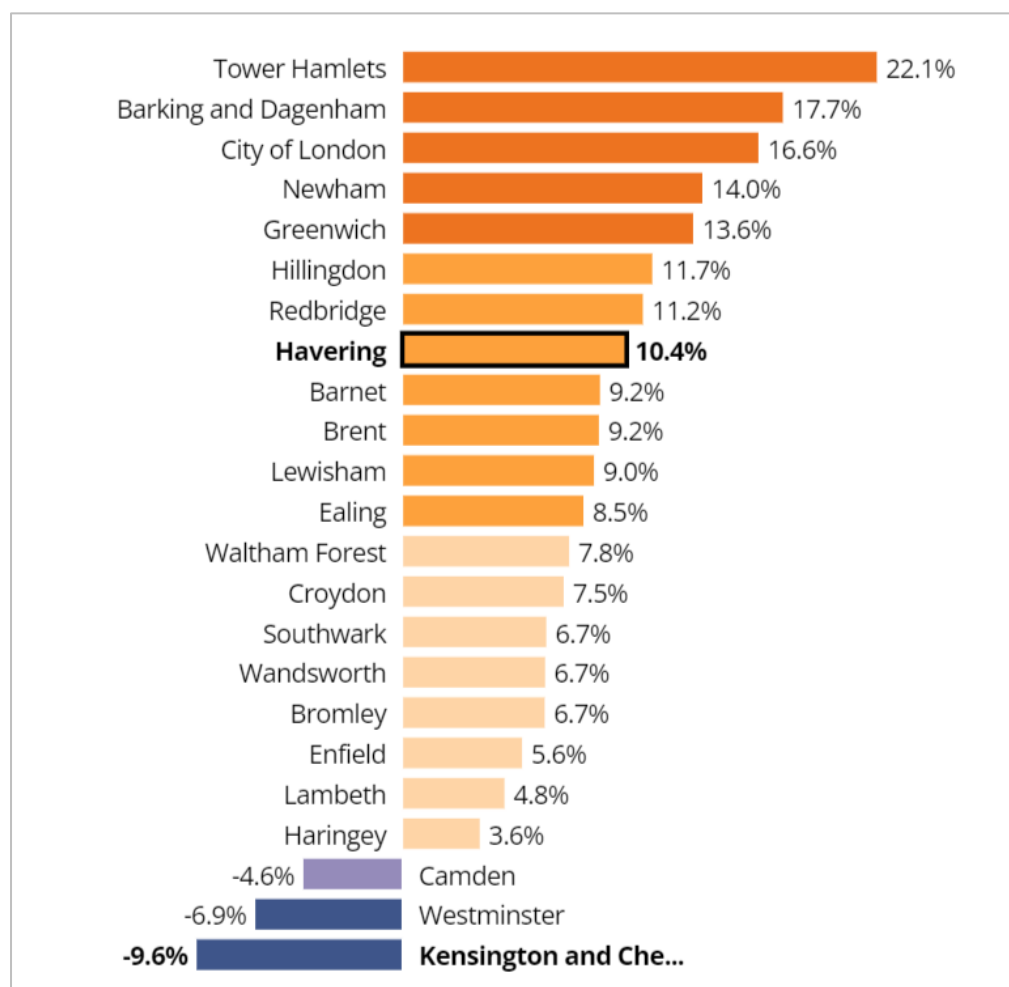
Source: ONS Census, 2021

4.3 Ward Level population change

Between 2019 and 2020, Emerson Park ward saw the largest decline (of around 0.8%); Romford Town, Pettits, Hacton, St Andrews, Hylands, Mawneys and Hylands all had a small decline in population whereas all other wards experienced an increase. Brooklands, Heaton and Harold Wood experienced the highest percentage increase in population. The likely explanations for population increase include economic growth and new developments within Brooklands and inflow migration from neighbouring boroughs into bordering wards such as Gooshays, Havering Park and Harold Wood. Potential explanations for the slight decline in population within wards include outflow migration into bordering boroughs and residents migrating between Havering wards.

Table 5: Havering ward population change from 2019 to 2020

	Mid- 2019 Population	Mid- 2020 Population	Change	%Change		Rank of % Change (1 is highest, 18 is lowest)
HAVERING	259,552	260,651	**1,099**		0.42%	-
Brooklands	18,773	19,112	**339**		1.81%	1
Heaton	15,037	15,248	**211**		1.40%	2
Harold Wood	14,908	15,117	**209**		1.40%	3
South Hornchurch	14,839	15,039	**200**		1.35%	4
Havering Park	14,156	14,347	**191**		1.35%	5
Gooshays	17,284	17,443	**159**		0.92%	6
Upminster	13,178	13,260	**82**		0.62%	7
Rainham and Wennington	13,309	13,384	**75**		0.56%	8
Squirrel's Heath	14,260	14,295	**35**		0.25%	9
Cranham	12,971	12,973	**2**		0.02%	10
Hylands	13,294	13,284	**-10**		-0.08%	11
Mawneys	13,863	13,848	**-15**		-0.11%	12
Elm Park	13,107	13,072	**-35**		-0.27%	13
St Andrew's	13,875	13,819	**-56**		-0.40%	14
Hacton	12,434	12,374	**-60**		-0.48%	15
Pettits	13,313	13,253	**-60**		-0.45%	16
Romford Town	18,998	18,925	**-73**		-0.38%	17
Emerson Park	11,953	11,858	**-95**		-0.79%	18

Source: ONS 2020 Mid-Year Population Estimates; Produced by LBH Public Health Intelligence

4.4 Age Population Change and Associated Factors

Figure 9 & Table 6 show the population change in Havering between 2021 and 2022 by contributory factor and age. Figure 10 shows the net change in population due to migration by five-year age groups. Inclusive of 'natural change' (i.e. births and deaths), children aged 0-4 years are the largest contributors to population change, largely due to births. The year 2022 saw a net increase in young adults (20-44 years) largely due to internal migration and a net decrease in adults aged 75 years and over largely due to deaths. There was a significant decrease of 15-19 year olds who may have left the borough to pursue higher education elsewhere in the country (see Figures 10 and 11).

Figure 10: Havering population change between 2021 and 2022 by component and five-year age-groups
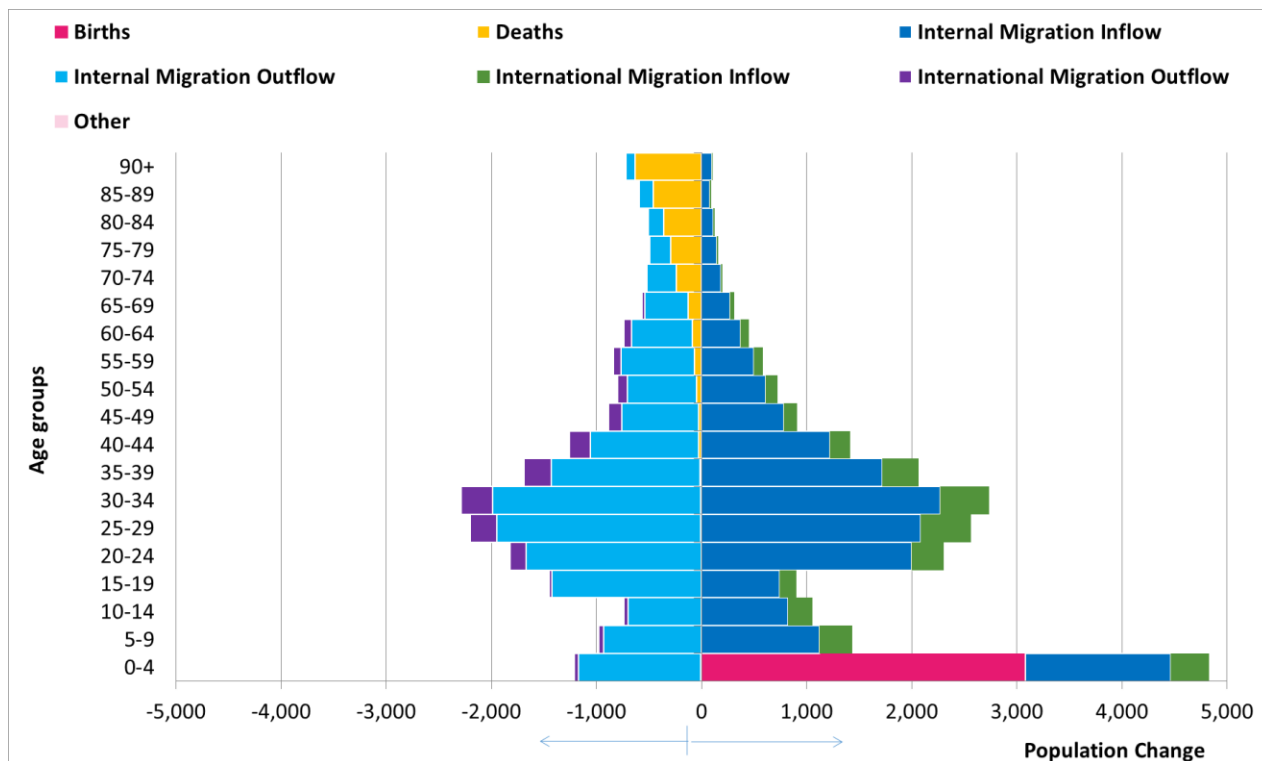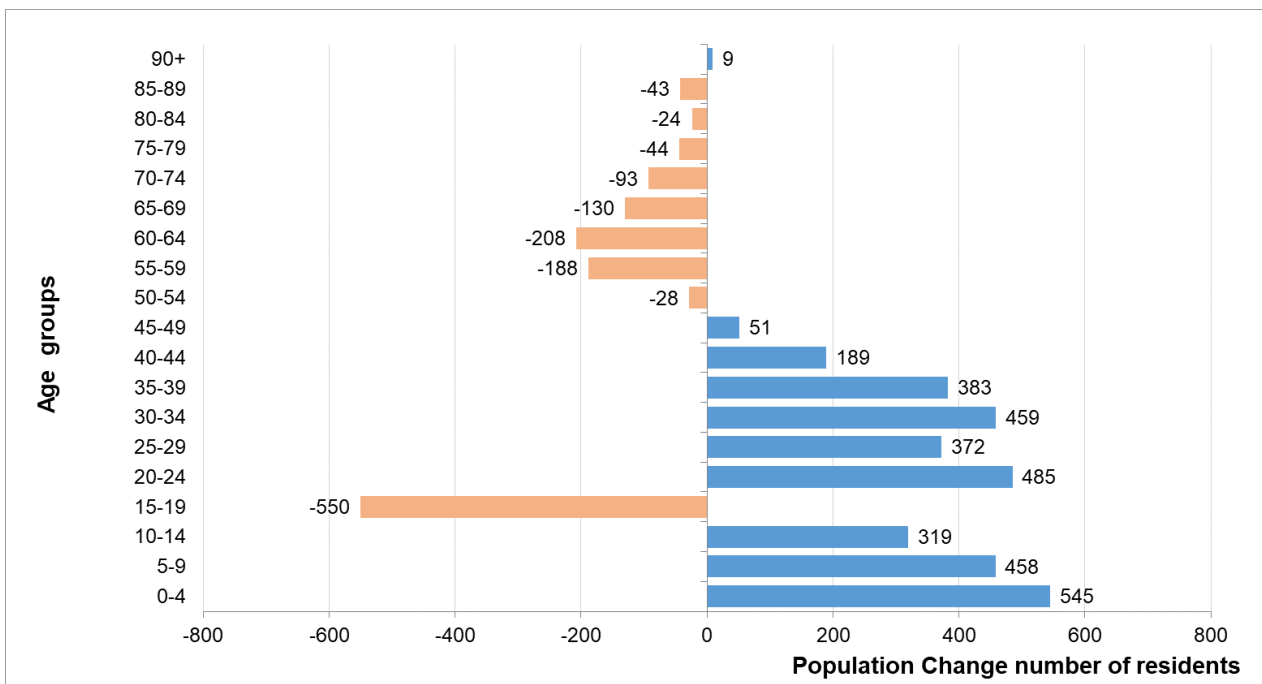

Data source: ONS Mid-Year Population Estimates 2022 Analysis Tool; Produced by LBH Public Health Intelligence

Table 6: Havering population change between 2021 and 2022 by component and five-year age-groups

| Age group	Births	Deaths	Internal Migration Inflow	Internal Migration Outflow	International Migration Inflow	International Migration Outflow	Other
0-4	3,082	-9	1,379	-1,160	365	-39	
5-9	0	-1	1,119	-930	317	-48	
10-14	0	-3	823	-699	229	-34	
15-19	0	-3	743	-1,420	156	-29	
20-24	0	-4	1,999	-1,665	303	-152	
25-29	0	-8	2,085	-1,937	478	-254	
30-34	0	-9	2,274	-1,976	461	-300	
35-39	0	-12	1,720	-1,421	343	-259	
40-44	0	-27	1,218	-1,033	198	-194	
45-49	0	-26	782	-735	125	-121	
50-54	0	-46	609	-659	113	-91	
55-59	0	-69	496	-695	84	-73	
60-64	0	-85	369	-584	79	-72	
65-69	0	-127	270	-413	40	-27	
70-74	0	-241	182	-281	18	-12	
75-79	0	-293	144	-200	14	-2	
80-84	0	-361	113	-147	11	-1	
85-89	0	-459	81	-132	8	0	
90+	0	-633	96	-88	1	0	

Data source: ONS Mid-Year Population Estimates 2022 Analysis Tool; Produced by LBH Public Health Intelligence

Figure 11: Net population change due to migration in Havering, from mid-2021 to mid-2022, five-year age-groups.

Data source: ONS Mid-Year Population Estimates 2022 Analysis Tool; Produced by LBH Public Health Intelligence
4.5 Births and Migration of Children

Up to 2017, the number of births among Havering women was on an upward trend. A decline thereafter continued until 2022 when a slight increase of 25 births was observed (see Figure 12). The general fertility rate (GFR)[8] trend has been consistent with the number births as shown in Figure 13. The latest (2021) GFR for Havering was 59 per 1,000 women aged 15-44, higher than the outer London, London and England averages.

Figure 12: Number of live births to women residents in Havering, 2002 to 2022
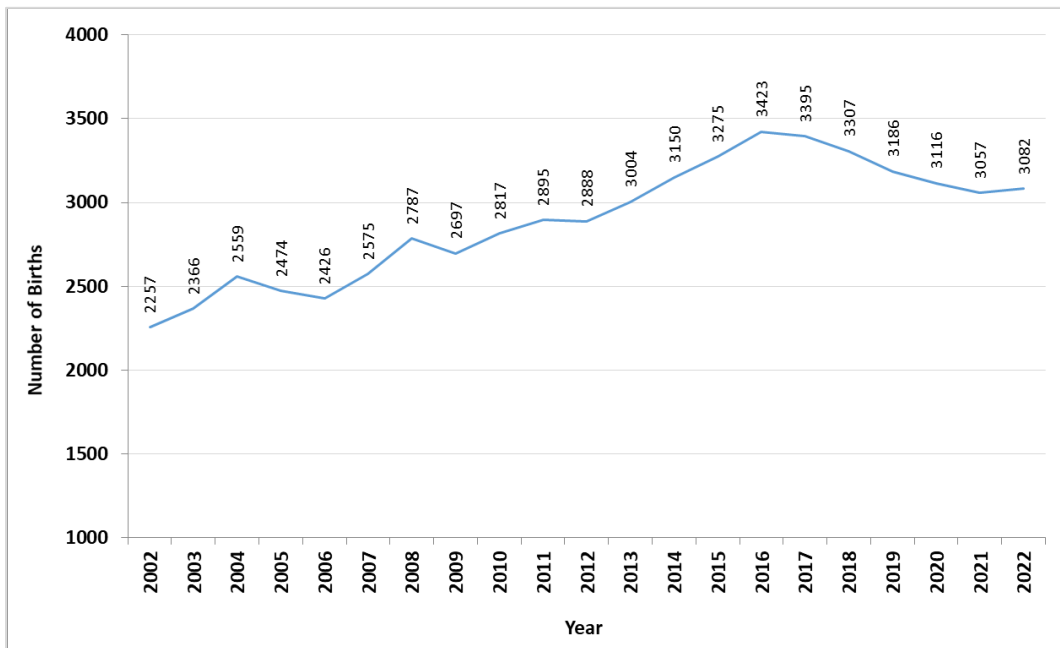
Source: Nomis, Official Census and Labour Market Statistics; Produced by LBH Public Health Intelligence

Figure 13: Trend in general fertility rate of women residents aged 15 to 44 years in Havering, Outer London, London and England, 2013 to 2021
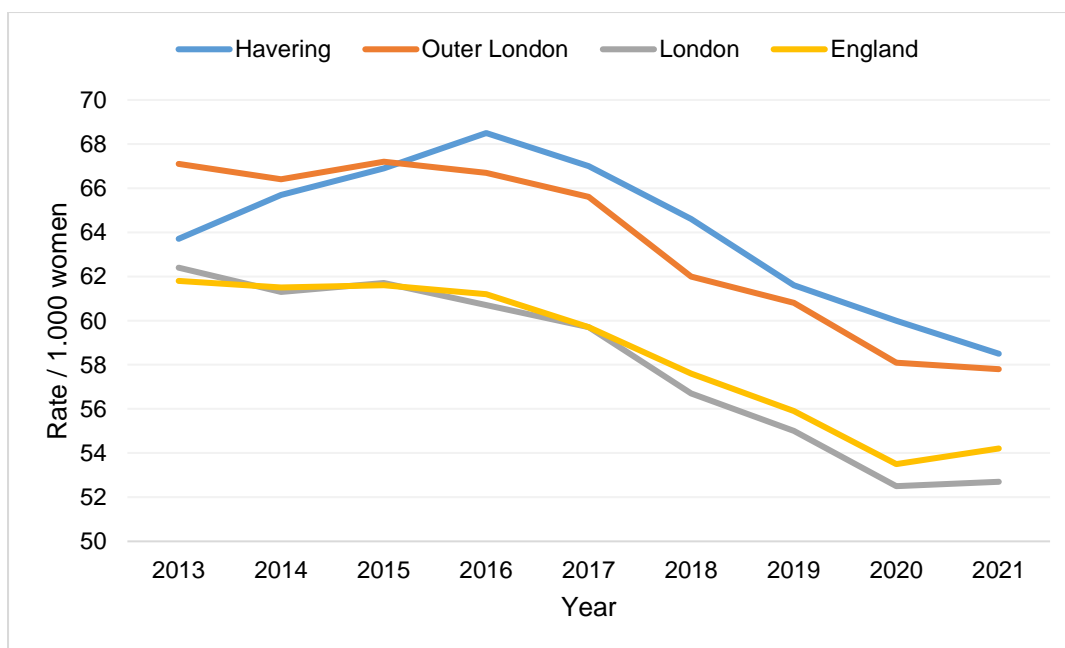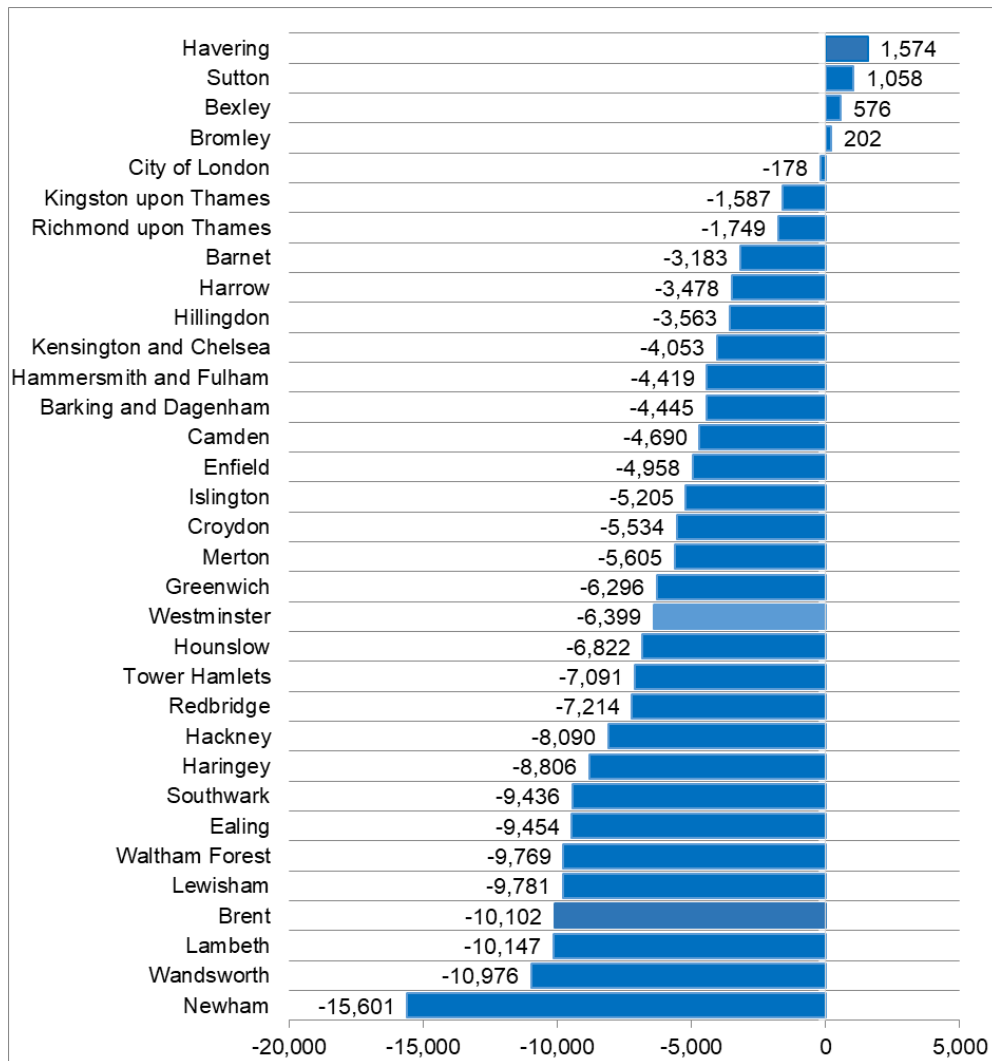

Source: Nomis, Official Census and Labour Market Statistics; Produced by LBH Public Health Intelligence

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[8] This is a measure of current fertility levels and denotes the number of live births as a rate per 1,000 women aged 15 to 44 years. Fertility rates are closely tied to growth rates for an area and can be an excellent indicator of future population growth or decline in that area.

In addition, Havering has experienced the largest net inflow of children across all London boroughs in recent years. In a four year period (from 2016 to 2020), 1,574 children have settled in the borough from another part of the United Kingdom (see Figure 14). Figure 14 also illustrates that there is migration of children out of Inner London Boroughs, which have experienced a negative net flow, into Outer London Boroughs. However, the biggest inflows of children into Havering in 2020 came from neighbouring Outer London Boroughs, Redbridge (407 children) and Barking & Dagenham (342 children).

Figure 14: Net migration flow of children by London Borough, 2016-2020

Borough	Net flow
Havering	1,574
Sutton	1,058
Bexley	576
Bromley	202
City of London	-178
Kingston upon Thames	-1,587
Richmond upon Thames	-1,749
Barnet	-3,183
Harrow	-3,478
Hillingdon	-3,563
Kensington and Chelsea	-4,053
Hammersmith and Fulham	-4,419
Barking and Dagenham	-4,445
Camden	-4,690
Enfield	-4,958
Islington	-5,205
Croydon	-5,534
Merton	-5,605
Greenwich	-6,296
Westminster	-6,399
Hounslow	-6,822
Tower Hamlets	-7,091
Redbridge	-7,214
Hackney	-8,090
Haringey	-8,806
Southwark	-9,436
Ealing	-9,454
Waltham Forest	-9,769
Lewisham	-9,781
Brent	-10,102
Lambeth	-10,147
Wandsworth	-10,976
Newham	-15,601

Data source: Greater London Authority (GLA); Produced by Public Health Intelligence

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4.6 Projected Population Change

4.6.1 Borough Level Projections

According to the Greater London Authority (GLA) Local authority population projections, housing led[9] (Table 4), Havering's population is projected to increase from 261,978 in 2021 to:

- 274,901 in 2026 (5%)
- 281,866 in 2031 (8%)
- 288,489 in 2036 (10%)

4.6.2 Ward Level Projections

Table 7 shows the projected population and projected percentage population change in Havering at ward level for the next 5, 10 and 15 years. The populations in Beam Park and Hacton wards are expected to increase the most over the next 10 – 15 years.

Table 7: Projected population growth among Havering wards from 2021 to 2036

| Ward	2021	2026		2031		2036	
	Number	Number	% change from 2021	Number	% change from 2021	Number	% change from 2021
Beam Park	4,619	5,916	28.1%	7,545	63.3%	8,394	81.7%
Cranham	13,010	13,334	2.5%	13,356	2.7%	13,418	3.1%
Elm Park	16,068	16,666	3.7%	16,708	4.0%	16,648	3.6%
Emerson Park	8,956	9,164	2.3%	9,264	3.4%	9,504	6.1%
Gooshays	17,703	18,263	3.2%	18,084	2.2%	17,953	1.4%
Hacton	8,843	9,385	6.1%	10,966	24.0%	13,297	50.4%
Harold Wood	13,652	14,321	4.9%	14,275	4.6%	14,391	5.4%
Havering-atte-Bower	16,265	16,714	2.8%	16,817	3.4%	16,941	4.2%
Heaton	17,940	18,589	3.6%	18,299	2.0%	18,024	0.5%
Hylands & Harrow Lodge	14,057	14,534	3.4%	14,462	2.9%	14,689	4.5%
Marshalls & Rise Park	12,827	13,191	2.8%	13,219	3.1%	13,313	3.8%
Mawneys	14,454	14,792	2.3%	14,731	1.9%	14,725	1.9%
Rainham & Wennington	13,445	13,857	3.1%	13,977	4.0%	14,349	6.7%
Rush Green & Crowlands	15,410	16,674	8.2%	17,855	15.9%	18,806	22.0%
South Hornchurch	10,496	10,776	2.7%	10,848	3.3%	11,188	6.6%
Squirrels Heath	16,075	16,857	4.9%	17,148	6.7%	17,265	7.4%
St Alban's	8,770	10,278	17.2%	11,757	34.1%	12,110	38.1%
St Andrew's	14,585	15,128	3.7%	15,212	4.3%	15,391	5.5%
St Edward's	11,463	12,637	10.2%	13,274	15.8%	13,791	20.3%
Upminster	13,339	13,825	3.6%	14,069	5.5%	14,292	7.1%
Total	261,978	274,901	4.9%	281,866	7.6%	288,489	10.1%

Data source: GLA 2021-based Demographic Projections – Local Authority Population Projection Housing-led Model; Produced by Public Health Intelligence

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[9] This models the population size for each age group based on trend data and strategic housing building plans (the assumption is that the proportion of people in each age group remains relatively stable over the next ten years). The tool is updated annually to reflect the latest ONS mid-year estimates. These projections incorporate assumptions about future development based on the results of the 2016 Strategic Housing Land Availability Assessment (SHLAA).

4.6.3 Age Level Projections

Figure 15 and Table 8 show change in population by age group as from 2021 to 2036. It is projected that the largest percentage increases in population will occur among older people age groups (65 years and above).

Figure 15: Projected population change by age group from 2021 to 2036
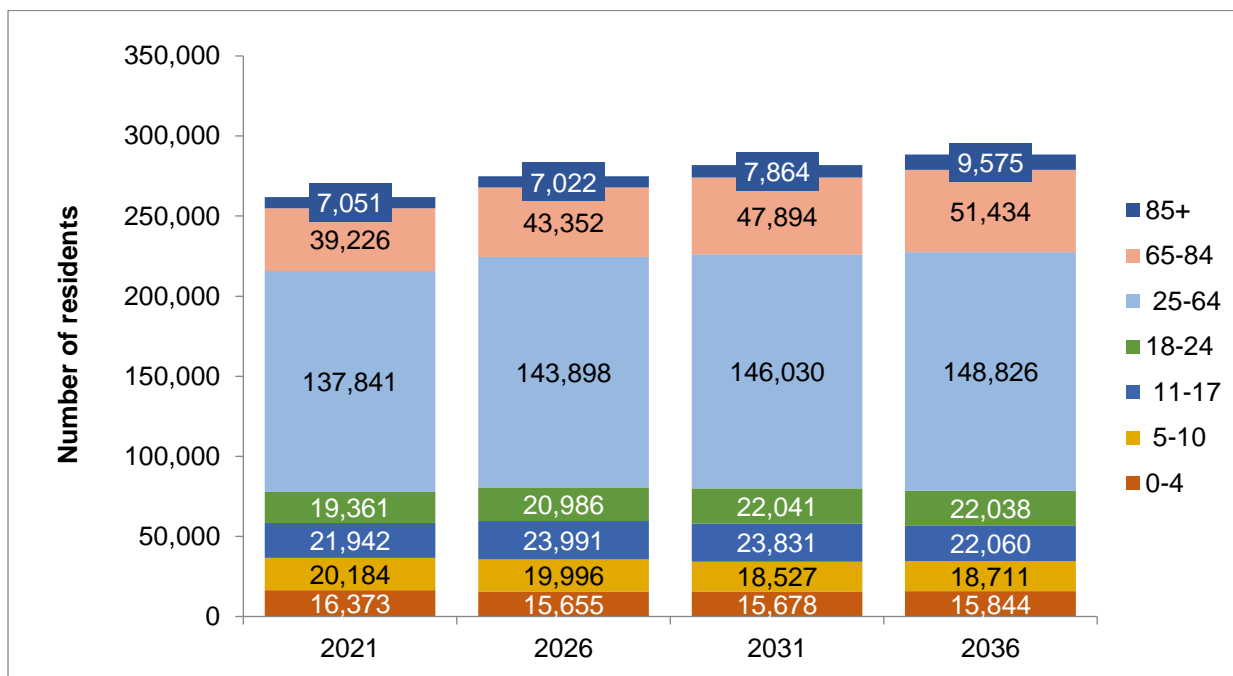
Data source: GLA 2021-based Demographic Projections – Local Authority population projection Housing-led Model; Produced by Public Health Intelligence

Table 8: Projected percentage population change by age group from 2021 to 2036

Age band	Percentage change from 2021 to		
	2026	**2031**	**2036**
0-4	-4%	-4%	-3%
5-10	-1%	-8%	-7%
11-17	9%	9%	1%
18-24	8%	14%	14%
25-64	4%	6%	8%
65-84	11%	22%	31%
85+	0%	12%	36%

Data source: GLA 2021-based Demographic Projections – Local Authority population projection Housing-led Model; Produced by Public Health Intelligence

5. Protected Characteristics

5. Protected Characteristics

5.1 Ethnicity

Havering's ethnic structure has significantly changed in the last 10 years. According to the 2021 census data, 66% of its residents were recorded as White British in the 2021 census as compared to 83% in 2011. However this remains higher than the London average but lower than the England average (see Table 9 and Figure 16).

Table 9: Havering Ethnic Groups, Number & Percentage

Ethnicity	Male	Female	Total	Percentage
White British	84449	89783	174232	66%
Other White	10872	12210	23082	9%
Black	9979	11588	21567	8%
Asian	13799	14351	28150	11%
Mixed	4746	5001	9747	4%
Other	2539	2735	5274	2%
Total	126384	135668	262052	100%

Source: Census 2021; Produced by Public Health Intelligence

Figure 16: Havering 2021 Census Population, broken down by proportion of White British and BAME (Black and Minority Ethnic) groups
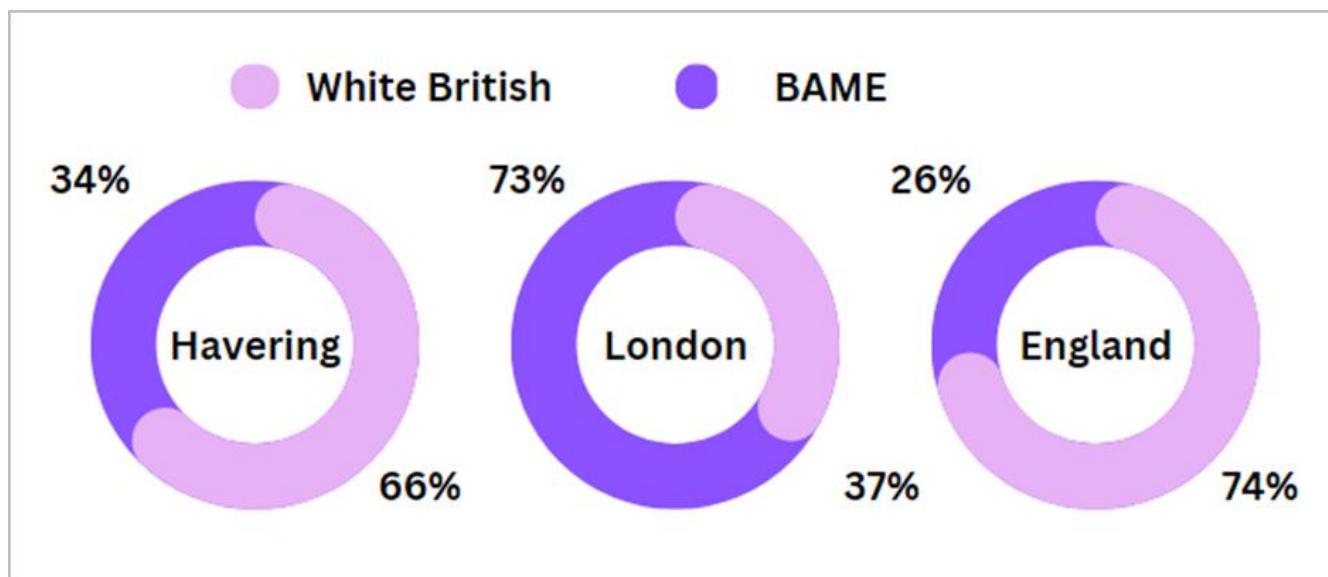
Source: Census 2021; Produced by Public Health Intelligence

Figure 17 presents the distribution of non-white population[10] across Havering wards.
Beam Park, Emerson Park, Heaton, Rush Green & Crowlands are the wards with the highest proportion of non-white categories.

Figure 17: The distribution of non-white population across wards in Havering, 2021
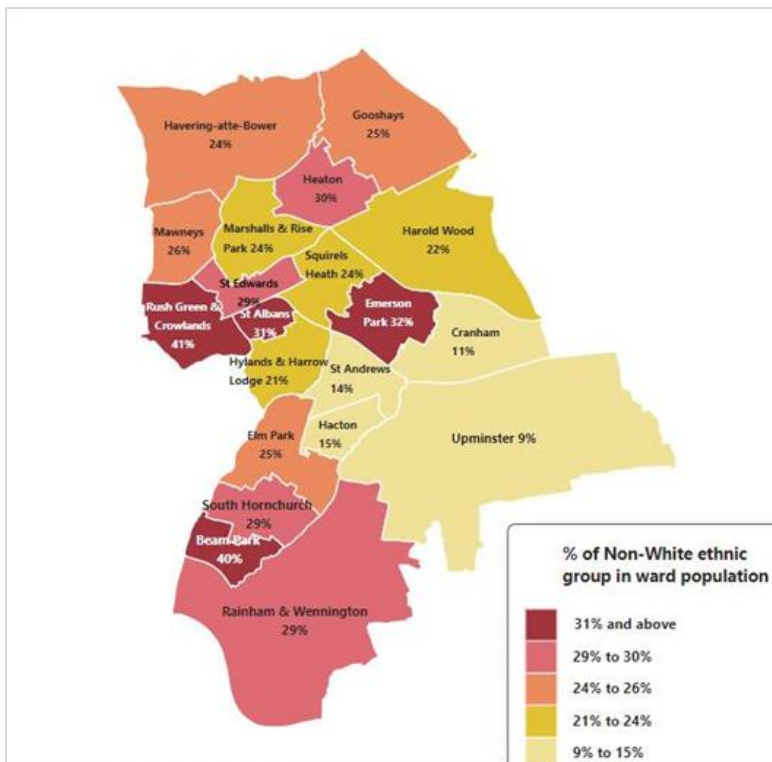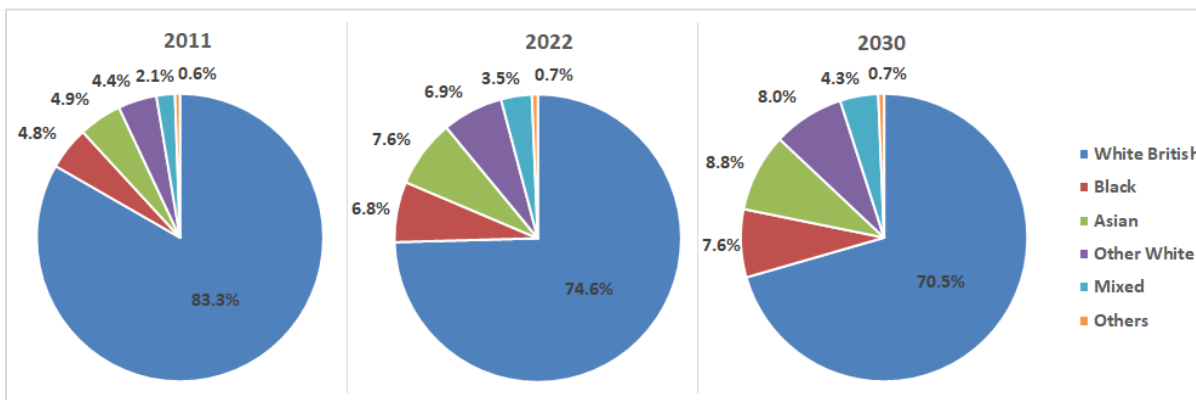

Source: Census 2021; Produced by Public Health Intelligence

Ethnic population projections

Ethnic diversity has increased in Havering since last census in 2011. Nonetheless, Havering remains more similar to England as a whole than London in terms of ethnic diversity with 74.6% estimated to be White British in 2022. This is expected to reduce to 70.5% by 2030 (Figure 18).

**Figure 18: Havering ethnic population projections, 2011-2030**

Data Source: GLA Ethnic Projections; Produced by Public Health Intelligence

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[10] Note that non-white population group excludes minority white ethnic groups

Country of Birth

According to the Census 2011 report, 81% of the residents in Havering were born in the United Kingdom (UK). A breakdown of the minority proportion of Havering residents born out of the UK (19%) is presented in Figure 19. It shows that most of the residents born outside of the UK are from Romania, India, Nigeria and other European countries.

Figure 19: Count and proportion of UK born and non-UK born Havering residents and their countries and regions of origin, 2021
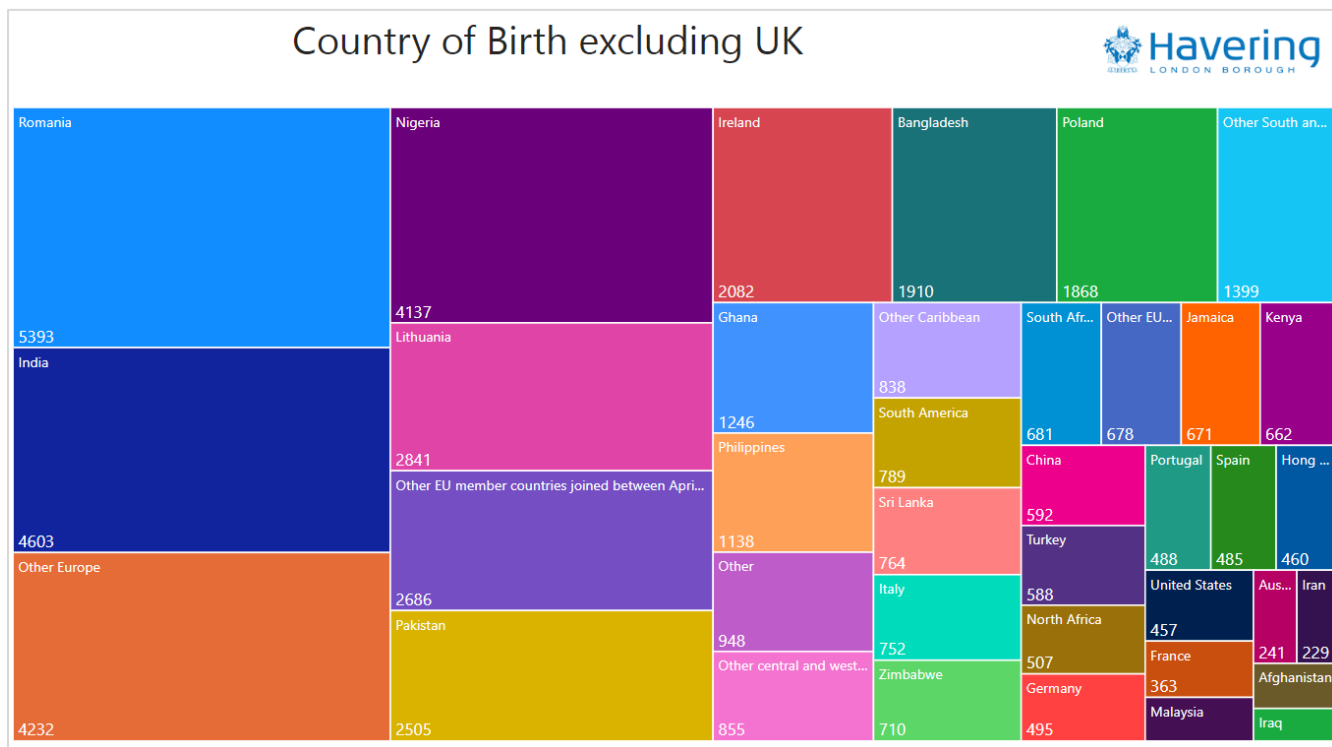
Source: Census 2021; Produced by Public Health Intelligence

5.2 Main Languages

According to Census 2021 data, the most spoken language in Havering is English (90%) followed by other European languages (4%). The most spoken non-European language is Panjabi (0.6%).

Table 10: Main Languages spoken in Havering

Main Language	Number	Percentage
English (English or Welsh if in Wales)	227,346	90.1%
Other European language (EU): Any other European languages	10,198	4.0%
South Asian language: Panjabi	1,393	0.6%
Other European language (EU): Polish	1,320	0.5%
South Asian language: Any other South Asian languages	1,178	0.5%
South Asian language: Bengali (with Sylheti and Chatgaya)	1,131	0.4%
South Asian language: Urdu	1,081	0.4%
European languages (non-EU)	1,001	0.4%
African languages	912	0.4%
East Asian language: Any other East Asian languages	769	0.3%
Portuguese	730	0.3%
Russian	719	0.3%
East Asian language: Mandarin, Cantonese and other Chinese languages	707	0.3%
South Asian language: Tamil	669	0.3%
Turkish	603	0.2%
South Asian language: Gujarati	599	0.2%
Spanish	537	0.2%
West or Central Asian languages	447	0.2%
Arabic	371	0.1%
French	326	0.1%
All usual residents aged 3 and over	**252,281**	

Source: Census 2021

According to School Census 2023 data, the first language for most children in Havering is English (74%) followed by Romanian (4%). The highest percentage among non-European languages is Urdu (2%).

Table 11: Top 10 First Language for Children in Havering Schools

First Language	Number	Percentage
English	31,567	74.4%
Romanian	1,740	4.1%
Urdu	866	2.0%
Lithuanian	720	1.7%
Bengali	625	1.5%
Polish	494	1.2%
Albanian	441	1.0%
Yoruba	404	1.0%
Punjabi	368	0.9%
Russian	352	0.8%

Data Source: School Census, 2023

5.3 Traveller population

There were 192 caravans occupied by travellers in Havering as at January 2023, an increase by 34 from the previous year (158) (see Table 12). Only 30 were on authorised sites while 57 were tolerated. [11] The total number of caravans has been consistent over the last two years and the number with permanent planning permission is increasing.

Table 12: Count of Traveller Caravans in Havering, Last Seven Counts, January 2020 to January 2023

			2020		2021		2022		2023
			Jan	Jul	Jan	Jul	Jan	Jul	Jan
Authorised sites (with planning permission)	**Socially Rented Caravans**		0	No data	No data	0	0	0	0
	Private Caravans	**Temporary Planning Permission**	122	No data	No data	122	121	0	0
		Permanent Planning Permission	25	No data	No data	25	22	22	30
		All Private Caravans	147	No data	No data	147	143	22	30
Unauthorised sites (without planning permission)	**No. of Caravans on Sites on Travellers' own land**	**"Tolerated"**	0	No data	No data	0	0	54	57
		"Not tolerated"	0	No data	No data	15	15	116	105
	No. of Caravans on Sites on land not owned by Travellers	**"Tolerated"**	0	No data	No data	0	0	0	0
		"Not tolerated"	0	No data	No data	0	0	0	0
Total All Caravans			**147**	**No data**	**No data**	**162**	**158**	**192**	**192**

Data Source: Department for Communities and Local Government (DCLG)

5.4 Sexual Orientation

According to the ONS Census 2021, the majority of Havering residents aged 16 and above (91%) identify as straight or heterosexual. In total, 2% identify with one of the LGB+ orientations ("Gay or Lesbian", "Bisexual" or "Other sexual orientation") (Table 13).

**Table 13: Detailed breakdown of sexual orientation in Havering for residents aged 16 and over, 2021**

Sexual Orientation	Number	Percentage
Straight or Heterosexual	191,007	91.1%
Gay or Lesbian	1,993	0.95%
Bisexual	1,540	0.73%
Pansexual	436	0.21%
Asexual	56	0.03%
Queer	21	0.01%
All other sexual orientations	46	0.02%
Not answered	14,631	7.0%
Total	**209,730**	**100%**

Source: ONS Census, 2021

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[11] A 'tolerated' site is one where the local authority has decided not to seek the removal of the encampment, and where the encampment has been, or is likely to be, allowed to remain for an indefinite period of months or years

Havering has the lowest proportion of residents aged 16 and over in London who identify as LGB+ orientation ("Gay or Lesbian", "Bisexual" or "Other sexual orientation") (Figure 20).

Figure 20: Percentage of LGB+ residents, London boroughs and England, 2021
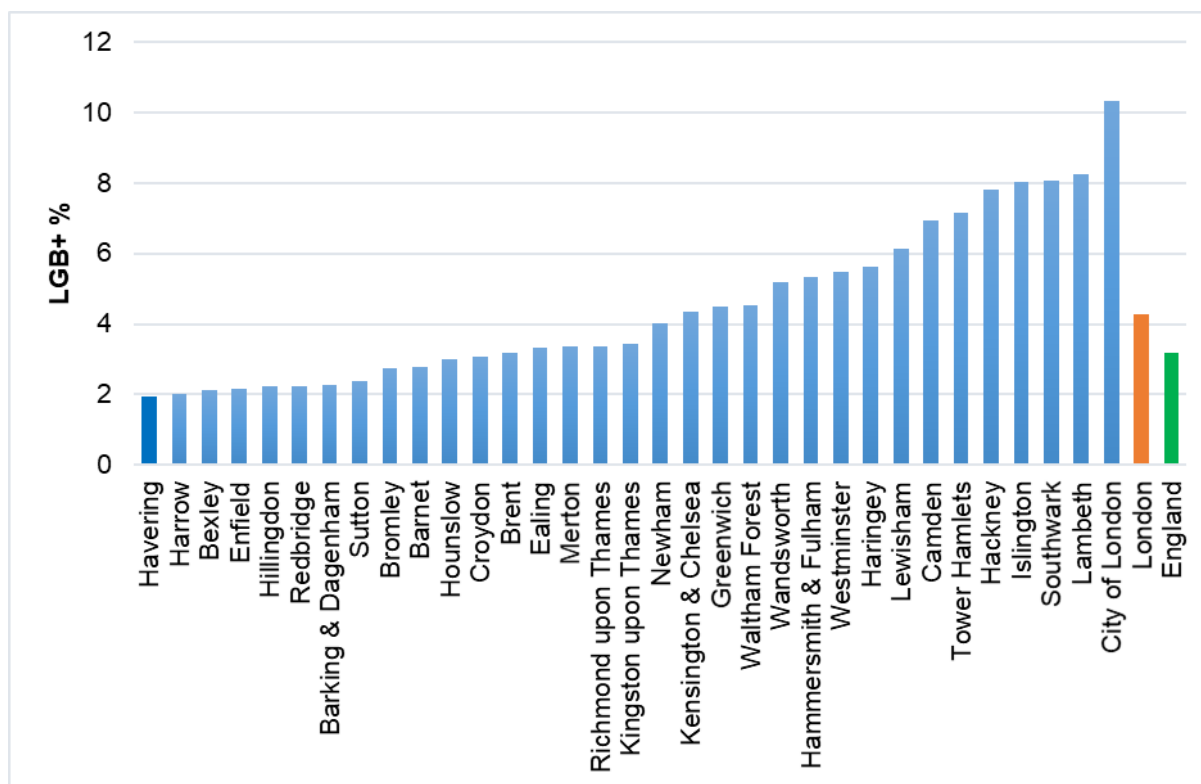
Source: ONS Census, 2021; Produced by LBH Public Health Intelligence

5.5 Gender Identity

According to the ONS Census 2021, the majority of Havering residents aged 16 and above report a gender identity that aligns with the sex they were assigned at birth. In total, less than 1% identify with gender identity different from the one registered at birth (Table 14).

Table 14: Detailed breakdown of gender identity in Havering for residents aged 16 and over, 2021

Gender Identity	Number	Percentage
Gender identity the same as sex registered at birth	196,462	93.7%
Gender identity different from sex registered at birth but no specific identity given	528	0.25%
Trans woman	228	0.11%
Trans man	212	0.10%
Non-binary	60	0.03%
All other gender identities	39	0.02%
Not answered	12,201	5.8%
Total	**209,730**	**100%**

Source: ONS Census, 2021

Within London, Havering has the 5th lowest proportion of residents aged 16 and over reporting that the gender that they identify with now is different to their sex registered at birth.

Figure 21: Percentage of people that identify as a different sex to that registered at birth, Havering, London boroughs and England, 2021
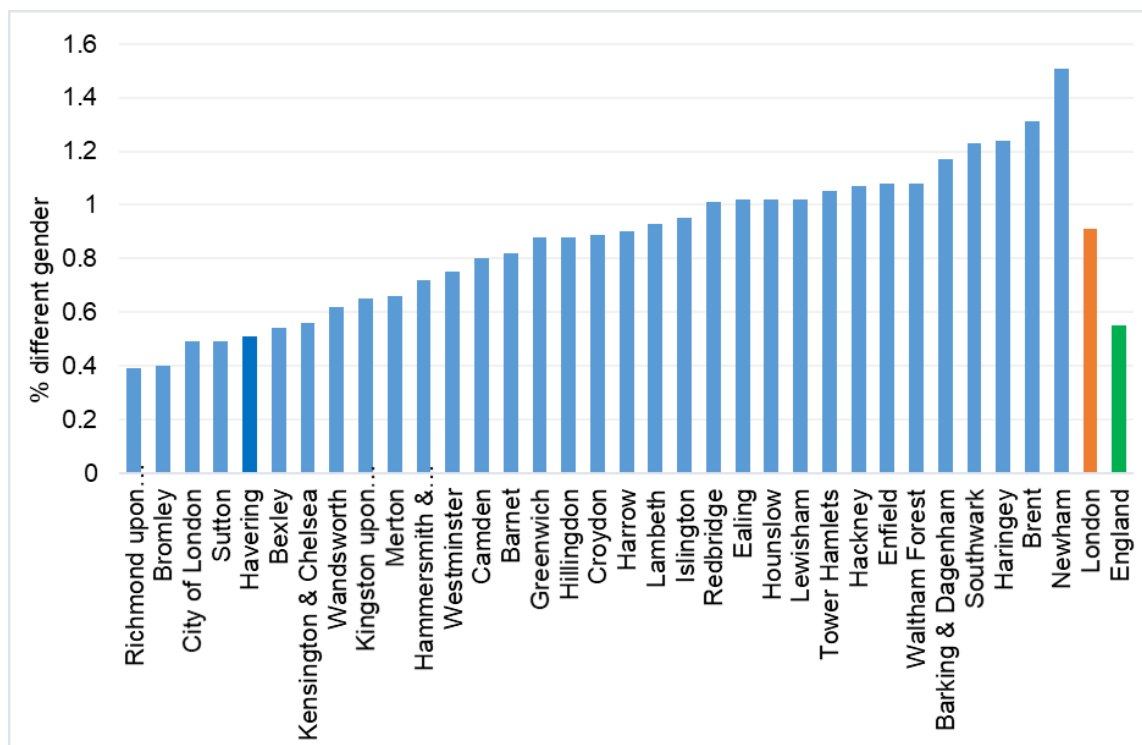
Source: ONS Census, 2021; Produced by LBH Public Health Intelligence

5.6 Religion

According to the ONS Census 2021, just over a half (52%) of Havering residents identify as Christians. This is a significant reduction from 65.6% in 2011. No religion was the second most common response, with 30.6% identifying in this category, up from 22.6% in 2011. Other religions accounted for 11.7% of the total Havering population, which is an increase from 5.1% in 2011.

Table 15: Number and percentage of the population by religion in Havering, London and England, 2021.

Religion	Havering		London		England	
	number	%	number	%	number	%
Christian	136,765	52.2	3,577,681	40.7	26,167,899	46.3
Buddhist	1,092	0.4	77,425	0.9	262,433	0.5
Hindu	6,454	2.5	453,034	5.1	1,020,533	1.8
Jewish	1,305	0.5	145,466	1.7	269,283	0.5
Muslim	16,135	6.2	1,318,754	15.0	3,801,186	6.7
Sikh	4,498	1.7	144,543	1.6	520,092	0.9
No religion	80,235	30.6	2,380,405	27.1	20,715,667	36.7
Other religion	1,056	0.4	86,755	1.0	332,406	0.6
Religion not stated	14,512	5.5	615,662	7.0	3,400,548	6.0
All Usual Residents	262,052	100	8,799,725	100	56,490,047	100

Source: ONS Census 2021

5.7 Recommendations

- *The local authority, NHS and other partners should continue to work together in supporting the needs of the growing young and working age population by ensuring access to essential resources that may include childcare, school places, relevant health services and employment opportunities.*

- *The local authority, NHS and other partners to ensure priority services, particularly those that provide early help and support to prevent escalation of need, are adequately resourced to meet the demands of the growing population of children and young people.*

- *The local authority, NHS and partners should consider the implications of the increasing ethnic diversity in Havering in their plans, including enhancing cultural competence in order to meet specific health and wellbeing needs.*

- *The local authority, NHS and other partners should continue to work together in supporting the growing population of older people to remain as healthy and independent as possible for as long as possible and to ensure they receive the highest quality care when they need it.*

6. Health Outcomes

6. Health Outcomes

6.1 Life expectancy at birth

As is the case nationally, life expectancy at birth in Havering has increased steadily over recent decades but the rate of improvement has slowed markedly since 2000 (Figure 22). Life expectancy continued to increase, albeit slowly, until 2020.

The most recent data available at borough level, aggregated for the period 2018-2020, shows that life expectancy in Havering actually reduced for both men (by 0.4yrs to 79.7yrs) and women (by 0.6yrs to 83.5yrs) (Figure 22). However, it remains similar to national averages, which also experienced a similar downturn, most likely as a result of the Covid-19 pandemic.

Figure 22: Life expectancy at birth (years), by gender, Havering compared to London and England, 3-year rolling periods, 2001-03 to 2018-20
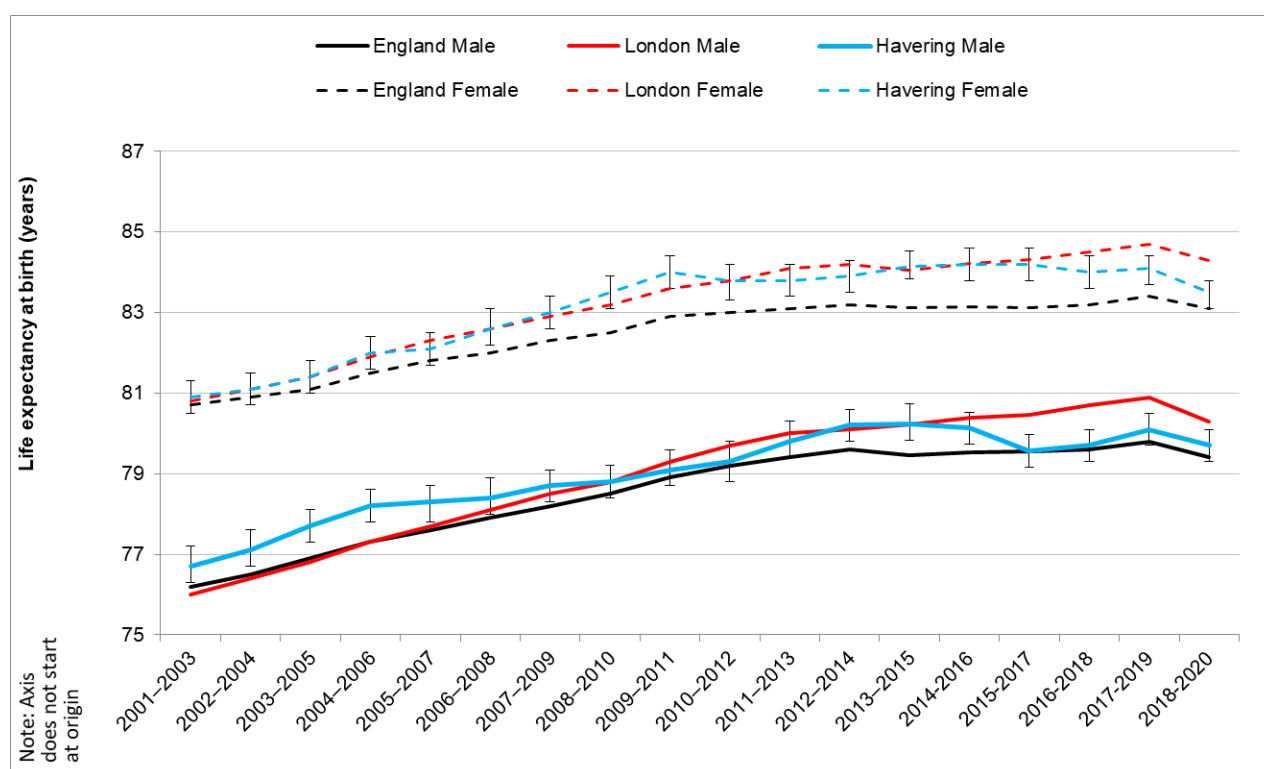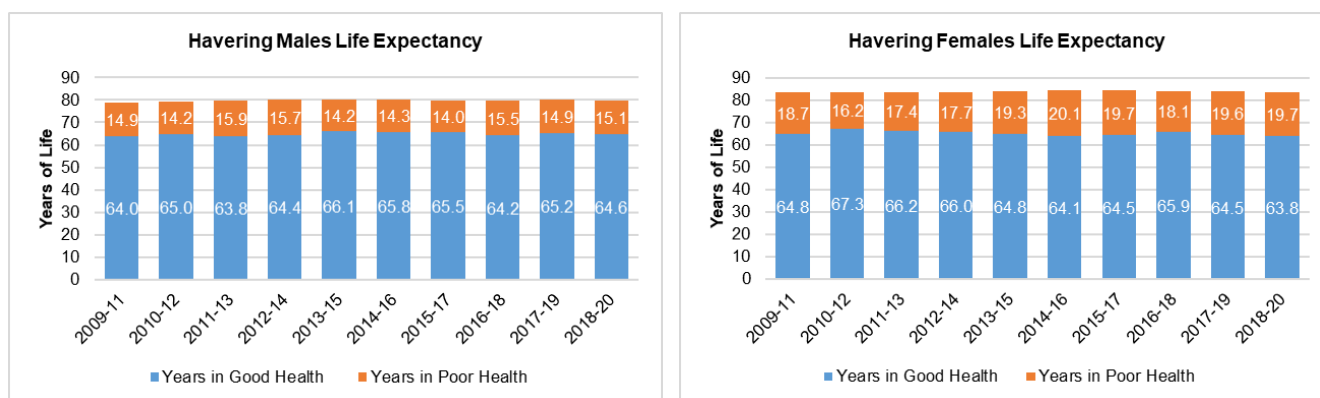

Source: Office for Health Improvement & Disparities (OHID – Fingertips); Produced by LBH Public Health Intelligence

The impact of the pandemic is only partially captured in this period and a further reduction in life expectancy is likely when data for 2021 are included in borough level estimates.

The pandemic is also likely to leave a legacy of persistent ill-health and disability. This additional burden of ill-health will further emphasise the trend established before the pandemic whereby a significant proportion of life expectancy (19% for men and 23% for women) is impaired by ill health and disability resulting in poor quality of life and significant need for health and social care services.
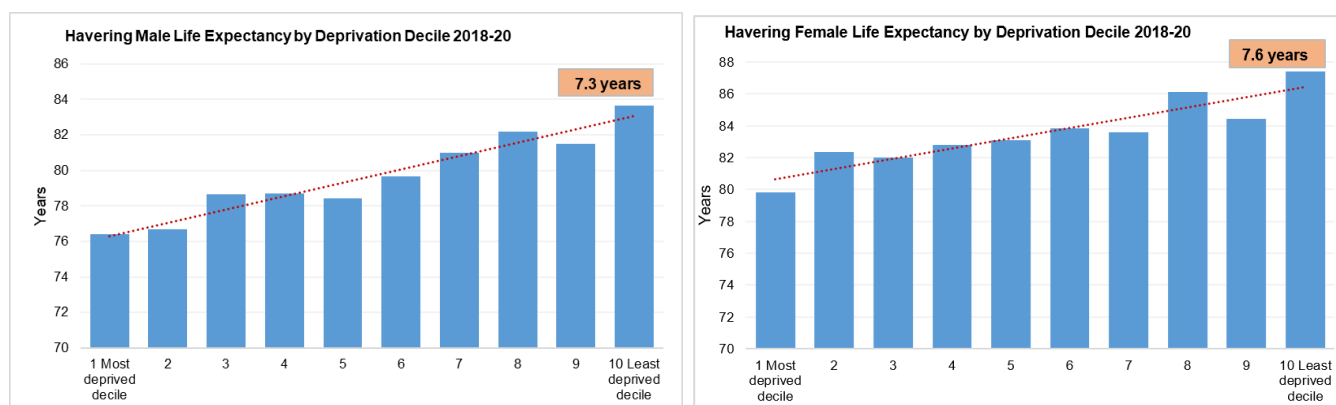
Figures 23 & 24: Havering Life expectancy 2009-11 to 2018-20

Havering Males Life Expectancy

2009-11: 64.0 / 14.9
2010-12: 65.0 / 14.2
2011-13: 63.8 / 15.9
2012-14: 64.4 / 15.7
2013-15: 66.1 / 14.2
2014-16: 65.8 / 14.3
2015-17: 65.5 / 14.0
2016-18: 64.2 / 15.5
2017-19: 65.2 / 14.9
2018-20: 64.6 / 15.1

■ Years in Good Health ■ Years in Poor Health

Havering Females Life Expectancy

2009-11: 64.8 / 18.7
2010-12: 67.3 / 16.2
2011-13: 66.2 / 17.4
2012-14: 66.0 / 17.7
2013-15: 64.8 / 19.3
2014-16: 64.1 / 20.1
2015-17: 64.5 / 19.7
2016-18: 65.9 / 18.1
2017-19: 64.5 / 19.6
2018-20: 63.8 / 19.7

■ Years in Good Health ■ Years in Poor Health

Source: OHID – Fingertips; Produced by LBH Public Health Intelligence

Residents living in the most disadvantaged decile[12] of the borough have a significantly lower life expectancy (7.3 years for males and 7.6 years for females) than peers in the least deprived decile (Figures 17 & 18). The inequality in life expectancy for both men and women widened as compared to 2017-19 (0.4 for men and 0.6 for women).

Figures 25 & 26. Havering Life expectancy at birth by Deprivation, 2018-20

Havering Male Life Expectancy by Deprivation Decile 2018-20 — 7.3 years

Havering Female Life Expectancy by Deprivation Decile 2018-20 — 7.6 years

Source: OHID – Fingertips; Produced by LBH Public Health Intelligence

As well as lower life expectancy, national evidence shows people living in disadvantage have proportionally less healthy life expectancy than less disadvantaged peers.[13]

6.2 Life expectancy at 65

The latest data (2018-20) shows the life expectancy at age 65 for males in Havering is 18.2 years. This is shorter than the life expectancy for males in both London (19.2 years) and England (18.7 years).

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[12] 10 categories of Havering LSOAs based on IMD ranks where decile 1 is the most deprived category and 10 the least deprived.
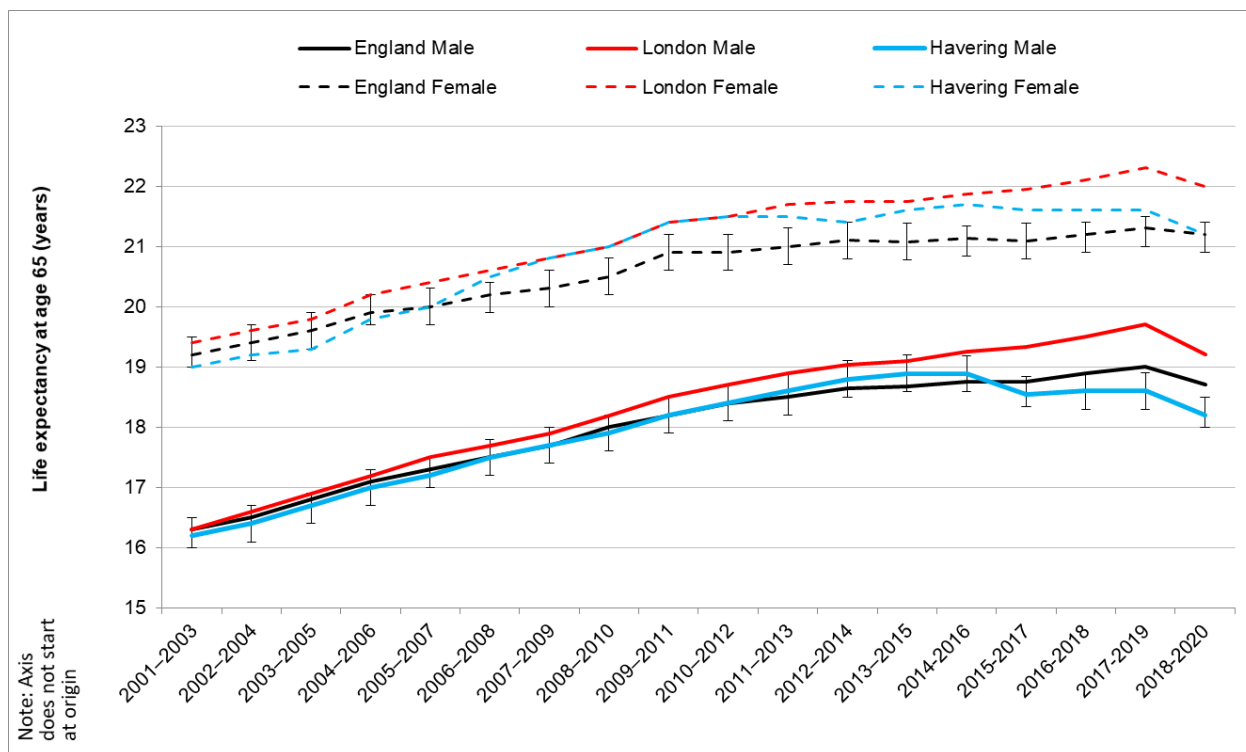[13] Life expectancy and healthy life expectancy at birth by deprivation - The Health Foundation

Over the last ten-year period (of 3-year rolling periods – from 2008-10 to 2018-20), the increase in life expectancy at age 65 for males in Havering has been minimal as compared to the London and England averages (see Figure 27).

The life expectancy at age 65 for females in Havering is 21.2 years, 3 years longer than for males; this is similar to England but significantly lower than London (22 years).

Over the last ten-year period (of 3-year rolling periods – from 2008-10 to 2018-20), the increase in life expectancy at age 65 for females in Havering has been minimal as compared to the London average (Figure 27).

Figure 27: Life expectancy at age 65 (years), by gender, Havering compared to London and England, 3-year rolling periods, 2001-03 to 2018-20

Source: OHID – Fingertips; Produced by LBH Public Health Intelligence

6.3 Healthy Life expectancy at 65

The latest data for the period 2018-20 shows males in Havering have a healthy life expectancy of 9.8 years at 65 as compared to females who have a higher expectancy of 11.8 years. The differences between Havering and the London and England averages are not statistically significant. The changes over the last 10 years have also not been statistically significant.

Figure 28: Healthy Life expectancy at age 65 (years), males, Havering compared to London and England, 3-year rolling periods, 2009-11 to 2018-20

Source: OHID – Fingertips; Produced by LBH Public Health Intelligence

Figure 29: Healthy Life expectancy at age 65 (years), females, Havering compared to London and England, 3-year rolling periods, 2009-11 to 2018-20
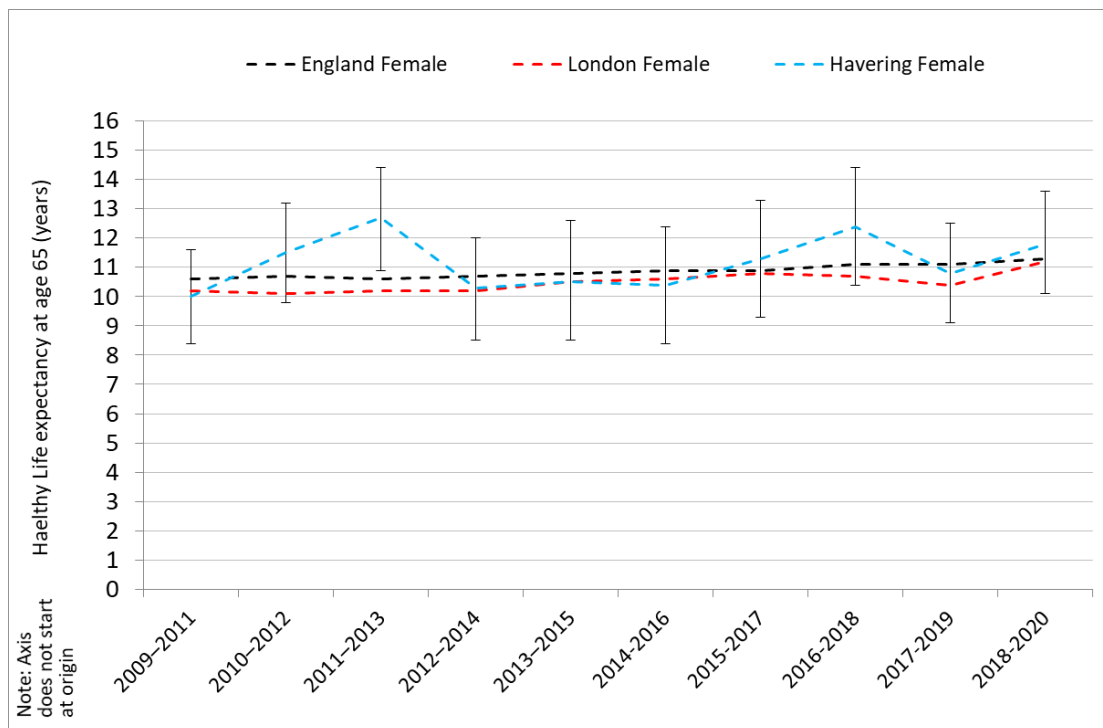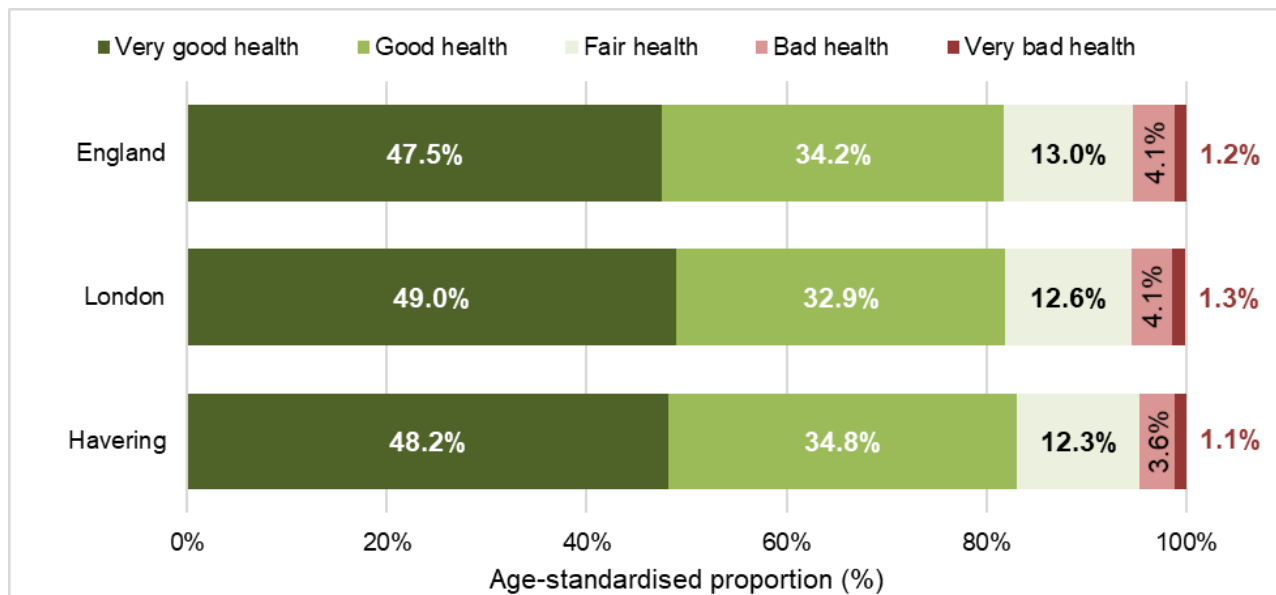

Source: OHID – Fingertips; Produced by LBH Public Health Intelligence

6.4 Health Status

In Havering an estimated 219,777 residents had 'good' or 'very good' health in 2021. This is an age-standardised proportion (ASP) [14] of 83.0%, which is higher than London (81.9%) and England (81.7%) (See figure 30 below).

Figure 30: ASP (%) reported health of the population

Source: ONS Census 2021; Produced by LBH Public Health Intelligence

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[14] Age-standardised proportions (ASPs) account for different age structures in populations and are more appropriate than crude percentages. ASPs allow for comparison between populations over time and across geographies.

The neighbourhoods (MSOA[15]) in Havering that had the highest crude proportion (%) of residents reporting 'good' or 'very good' health were Upminster North & Cranham West, Upminster South & Corbets Tey, and Ardleigh Green (*see figure 31 - darker shades represent areas with a higher proportion of residents reporting good or very good health*). The neighbourhoods in Havering that had the highest crude proportion (%) of residents who reported 'bad' or 'very bad' health were Harold Hill East, Dagnam Park & Noak Hill and Havering-atte-Bower & Chase Cross (*see figure 32 – darker shades represent areas with a higher proportion of residents reporting bad or very bad health*).

Figure 31: Crude percentage of residents by neighbourhood (MSOA) that reported 'good' or 'very good' health
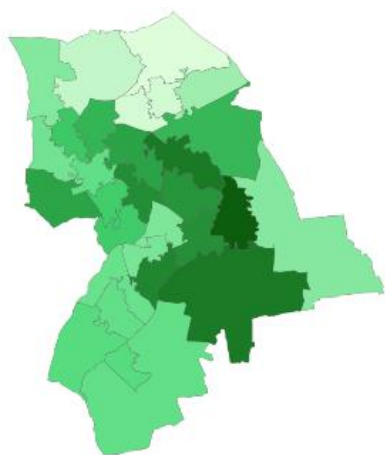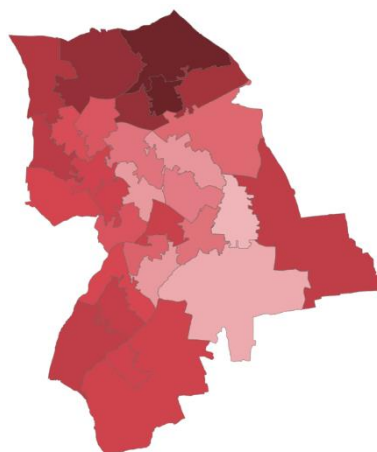
Figure 32: Crude percentage of residents by Havering neighbourhood (MSOA) that reported 'bad' or 'very bad' health
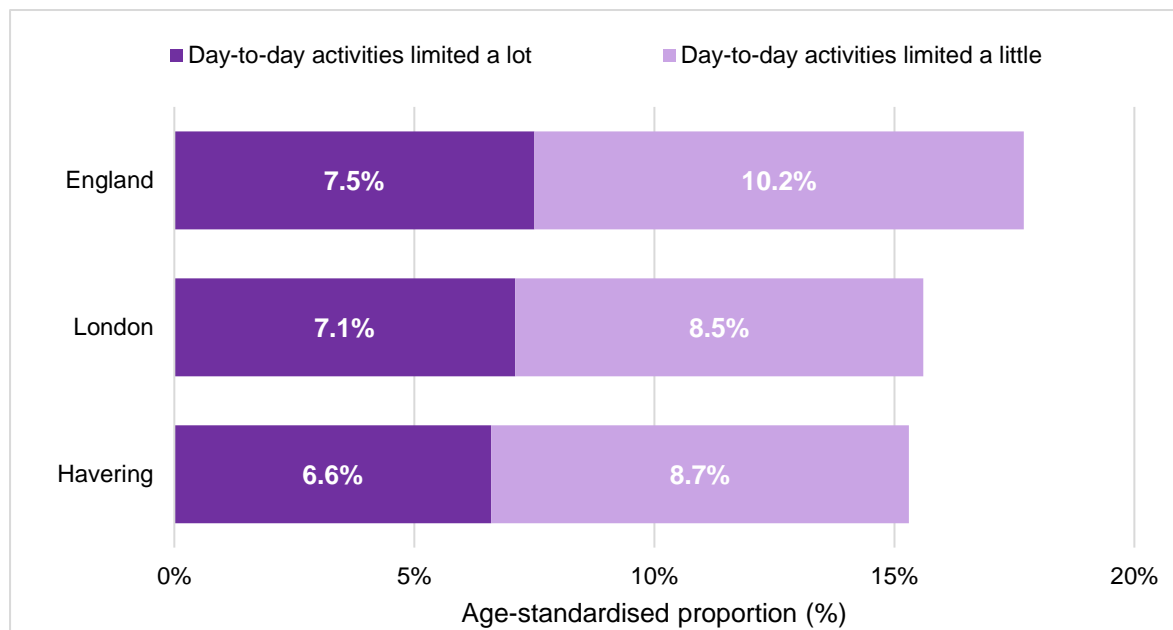

Source: ONS Census 2021; Produced by LBH Public Health Intelligence

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[15] MSOA (Middle Layer Super Output Areas) are a geographic hierarchy designed to improve the reporting of small area statistics. The minimum population of an MSOA is 5,000 and on average is 7,200

6.5 People with Disabilities

In Havering an estimated 38,449 residents reported having a disability[16] in 2021. This is an Age standardised proportion (ASP) of 15.3%, which is slightly lower than London (15.6%) and lower than England (17.7%). 6.6% reported that their day-to-day activities were limited a lot and 8.7% reported their day-to-day activities were limited a little, due to a disability (see figure 33 below).

**Figure 33: Age standardised proportion (ASP) (%) of population with a disability**

Source: ONS Census 2021; Produced by LBH Public Health Intelligence

29,742 households in Havering had at least one person with a disability. Of these households, 6,181 had two or more members with a disability.   The neighbourhoods in Havering that have the highest number of households where at least one member is disabled were Hornchurch Marshes, Rush Green and Harold Hill East. The lowest were Emerson Park, Upminster North & Cranham West and Hacton (*see figure 34 below - darker shades represent areas with a higher number of households where at least one person has a disability*). There are nearly three (2.7) times more households with a disabled person in the highest ranked neighbourhood (Harold Hill East – 1,605) compared to the lowest (Emerson Park – 596).

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[16] People who assessed their day-to-day activities as limited by long-term physical or mental health conditions or illnesses are considered disabled. This definition of a disabled person meets the harmonised standard for measuring disability and is in line with the Equality Act (2010).

Figure 34: Number of households where at least one person has a disability by Havering neighbourhood (MSOA)
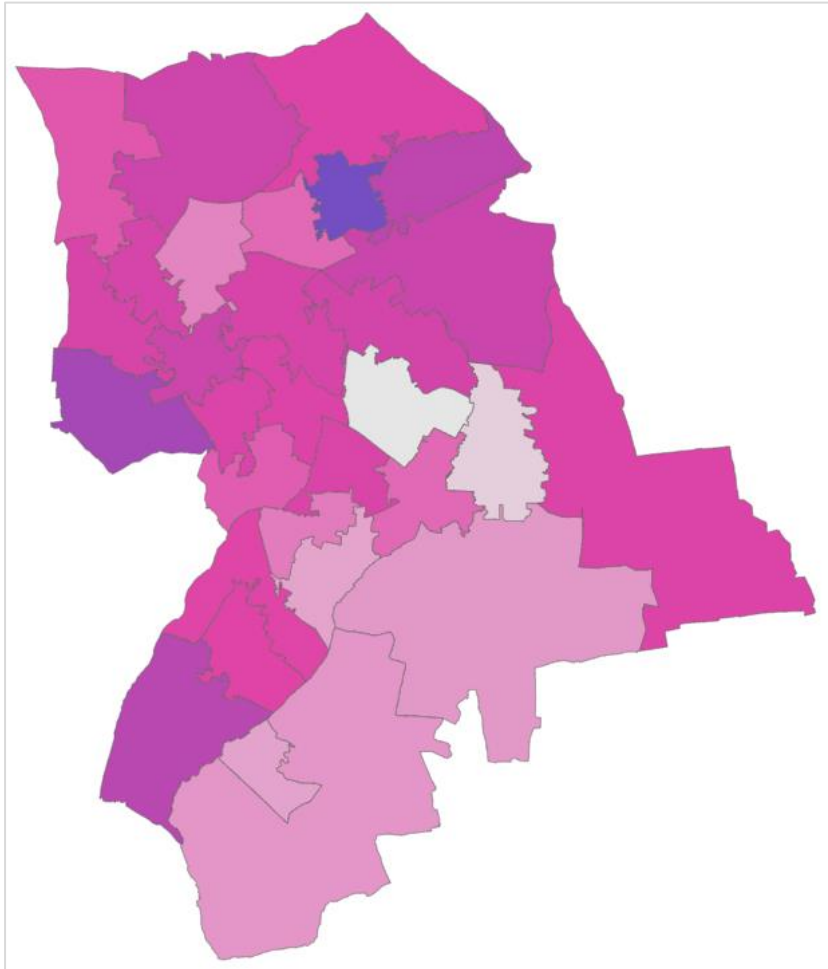
Source: ONS Census 2021; Produced by LBH Public Health Intelligence

According to the ONS/PANSI projections, the estimated number of people in Havering aged 18-64 with impaired mobility is 8,653, a rate of 5,463 per 100,000 population. This rate is significantly higher than the London average (4,945) but similar to England's (5,515) (see Figure 35).

Figure 35: Population aged 18-64 estimated to have impaired mobility, rate per 100,000 in Havering and other London boroughs, London and England, 2023.
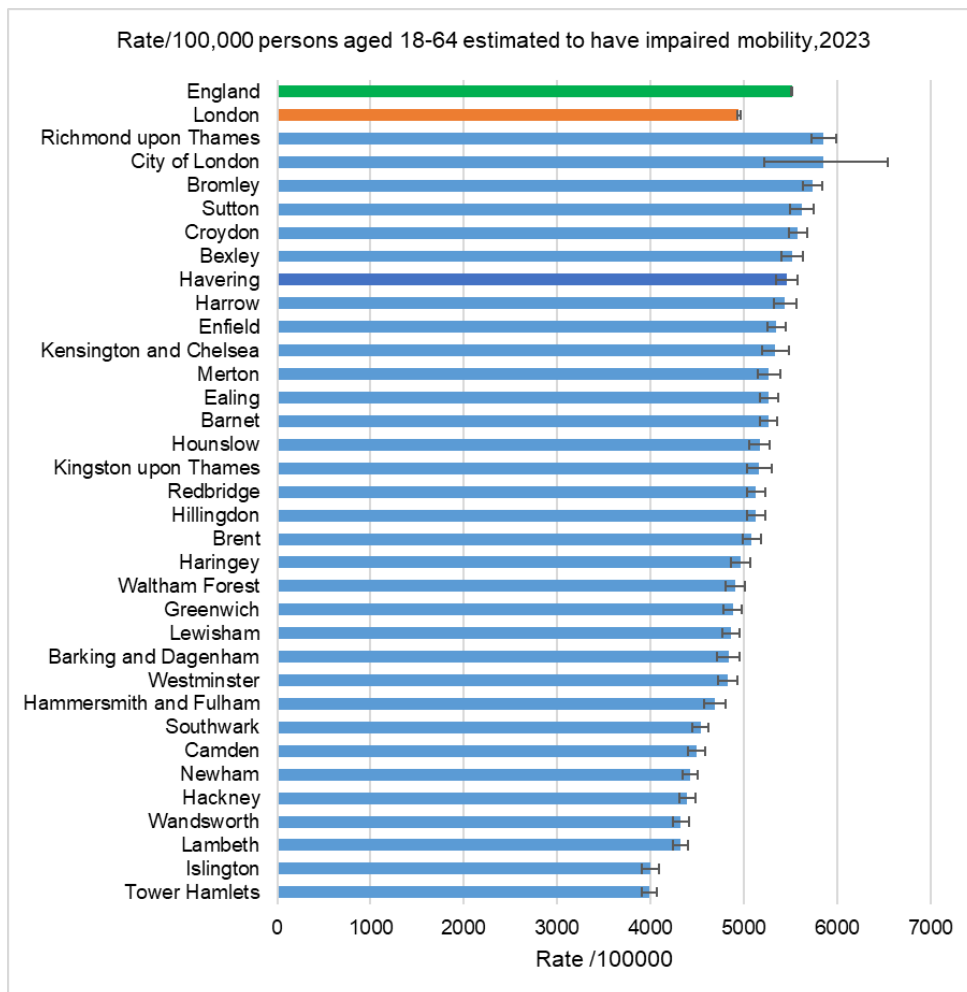
Data Source: ONS Projecting Adult Needs and Service Information System (PANSI, 2022); Produced by LBH Public Health Intelligence

Table 16 shows that Havering is expected see an increase in persons aged 18-64 with mobility problems of 1.6% by 2035, higher than London (0.9%) and England (-2.2%).

Table 16: Population projections for persons aged 18-64 with impaired mobility in Havering, 2023 - 2035

Year	2023	2025		2030		2035	
Number &%	Number	Number	% change	Number	% change	Number	% change
Havering	8653	8770	1.4	8845	0.9	8985	1.6
London	294378	298964	1.6	303356	1.5	306059	0.9
England	1889192	1910483	1.1	1898163	-0.6	1856653	-2.2

Data Source: Projecting Adult Needs and Service Information System (PANSI, 2022); Produced by LBH Public Health Intelligence

11.5.1 Population aged 18-64 estimated to have a moderate or severe learning disability

It is estimated that the number of people in Havering aged 18-64 with moderate or severe learning disability is 884 (Table 17), a rate of 5463 per 100,000 population. This rate is similar to the London and England averages (See Figure 37).

Figure 37: Population aged 18-64 estimated to have a moderate or severe learning disability, 2023
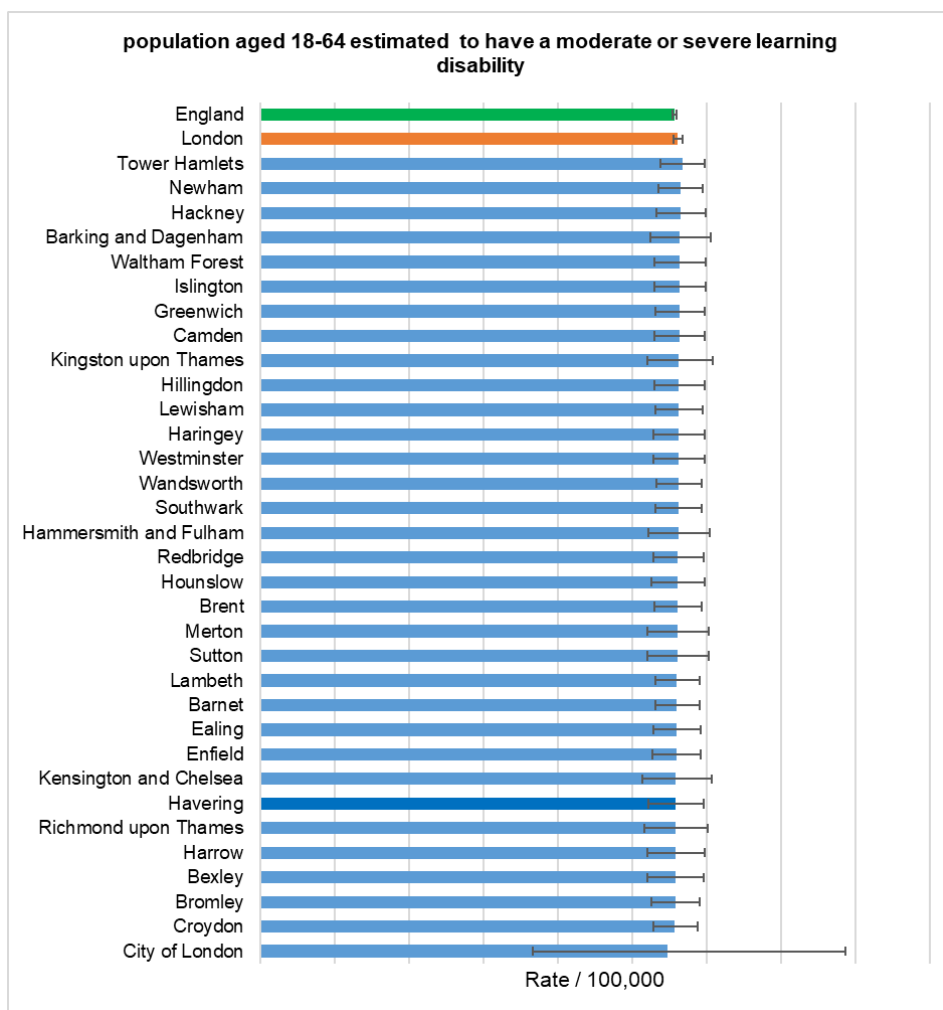
Data Source: Projecting Adult Needs and Service Information System (PANSI, 2022); Produced by LBH Public Health Intelligence

Table 17 shows that Havering is expected see an increase in persons aged 18-64 with moderate or severe learning disability of 2.8% by 2035, higher than the London and England average changes.

Table 17: Population projections for persons aged 18-64 with moderate or severe learning disability in Havering, 2023 – 2035

Year	2023	2025		2030		2035	
Number &%	Number	Number	% change	Number	% change	Number	% change
Havering	884	895	1.2	920	2.8	946	2.8
London	33411	33588	0.5	33996	1.2	34350	1.0
England	190725	191772	0.5	194194	1.3	195698	0.8

Data Source: Projecting Adult Needs and Service Information System (PANSI, 2022); Produced by LBH Public Health Intelligence

11.5.2 Estimated Population aged 65 and over unable to manage at least one activity on their own

The estimated number of people in Havering aged 65 and over unable to manage at least one activity on their own is 9,408 (table 15), a rate of 19,478 per 100,000 population (equivalent to 1 in 5). This rate is the highest in London (alongside Bexley) and significantly higher than the London and England averages (See Figure 25).

Figure 38: Estimated population aged 65 + unable to manage at least one activity on their own, 2023
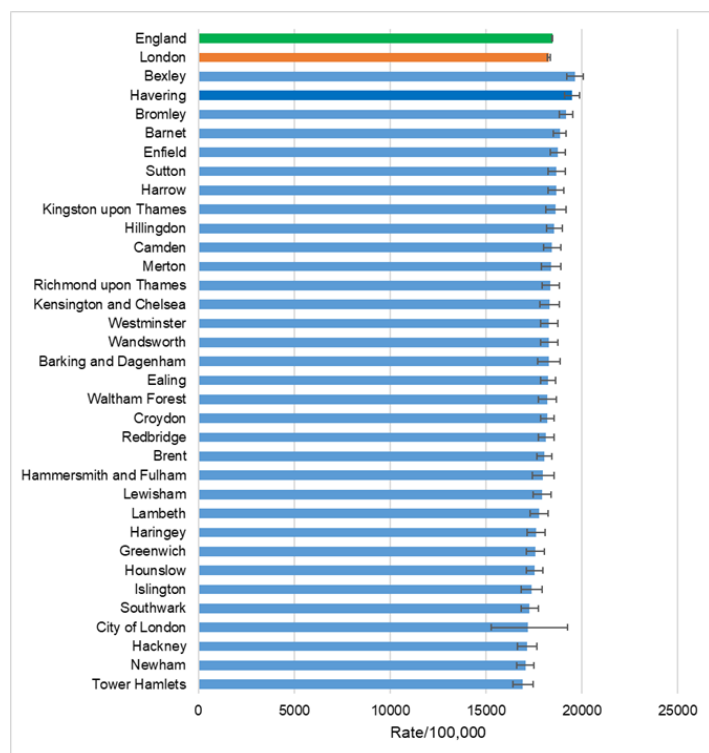
Data Source: Projecting Older People Population Information (POPPI, 2022); Produced by LBH Public Health Intelligence

Table 18 shows that Havering is expected see an increase in persons aged 65 and over unable to manage at least one activity on their own of 8.6% by 2035 but lower than the London and England average changes.

Table 18: Population projections for persons aged 65 and over unable to manage at least one activity on their own, 2023 – 2035

Year	2023	2025		2030		2035	
Number &%	Number	Number	% change	Number	% change	Number	% change
Havering	9408	9555	1.6	10192	6.7	11070	8.6
London	215661	225430	4.5	254818	13.0	289865	13.8
England	2039239	2120599	4.0	2372114	11.9	2643889	11.5

Data Source: Projecting Older People Population Information (POPPI, 2022)

11.5.3 Estimated population aged 65 and over with a limiting long term illness whose day-to-day activities are limited a lot

The estimated number of people in Havering aged 65 and over with a limiting long term illness whose day-to-day activities are limited a lot is 12,081 (table 19), a rate of 25012 per 100,000 population (1 in 4). This rate is significantly higher than the England average but similar to the London average.

Figure 39: Estimated population aged 65 and over with a limiting long term illness whose day-to-day activities are limited a lot, 2023
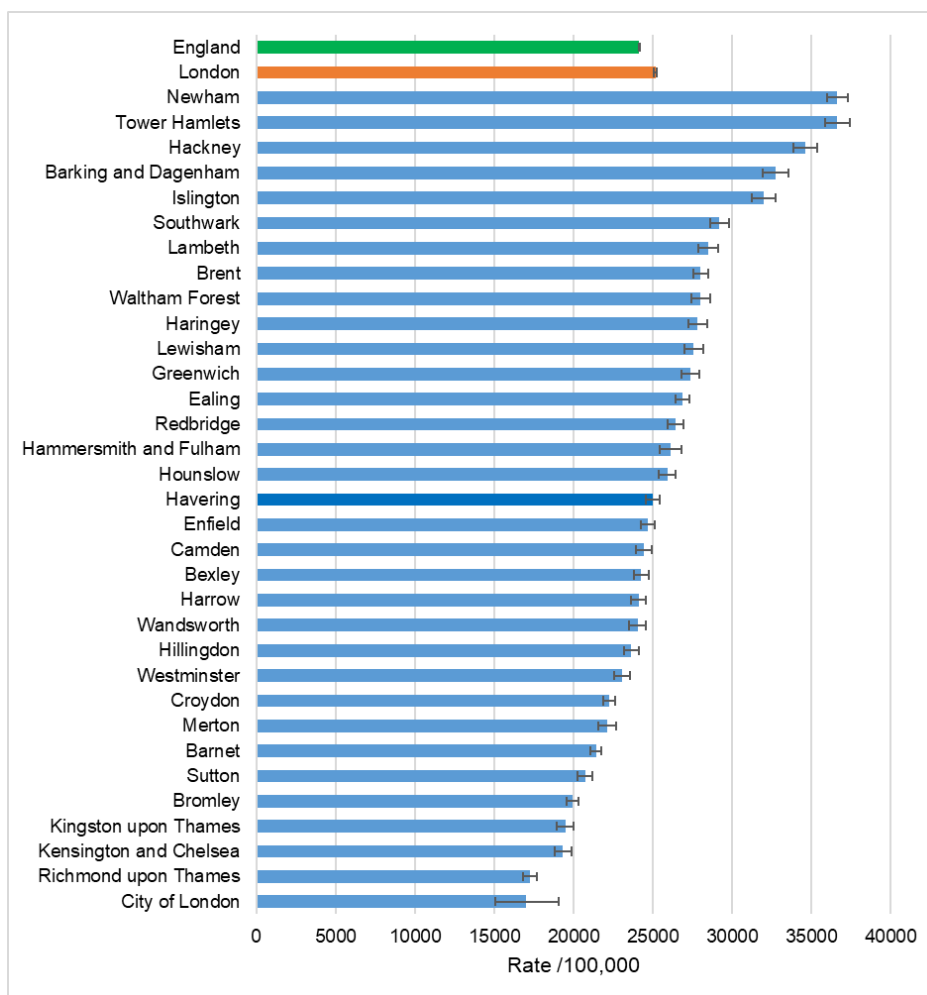
Data Source: Projecting Older People Population Information (POPPI, 2022); Produced by LBH Public Health Intelligence

Table 19 shows that Havering is expected see an increase in persons aged 65 and over with a limiting long term illness whose day-to-day activities are limited a lot of 8.6% by 2035, lower than the London and England average changes.

Table 19: Population projections for persons aged 65 and over with a limiting long term illness whose day-to-day activities are limited a lot, 2023 - 2035

Year	2023	2025		2030		2035	
Number &%	Number	Number	% change	Number	% change	Number	% change
Havering	12081	12288	1.7	13081	6.5	14201	8.6
London	296788	311189	4.9	351468	12.9	397724	13.2
England	2664927	2773647	4.1	3070761	10.7	3390179	10.4

Data Source: Projecting Older People Population Information (POPPI, 2022)

6.6 Premature Mortality

Life expectancy and other measures based on death rates highlight diseases that result in early death. Considerable harm to health is also caused by diseases that primarily result in prolonged illness and disability.

DALYs (Disability Adjusted Life Years)[17] are a means of combining years of life lost (YLLs) due to premature death and the years of healthy life lost due to disability (YLDs) into a single measure of harm to population health (Figure 40).

Pre-pandemic, neoplasms (cancers) and cardiovascular diseases (e.g. heart attack and stroke) caused the greatest loss of good health as measured in DALYs, largely due to premature mortality. Musculoskeletal conditions and mental health disorders caused the next greatest loss of DALYs but as a result of years of healthy life lost to disability.

Figure 40. Disease groups and their health impact as measured by DALYs, Havering, 2019
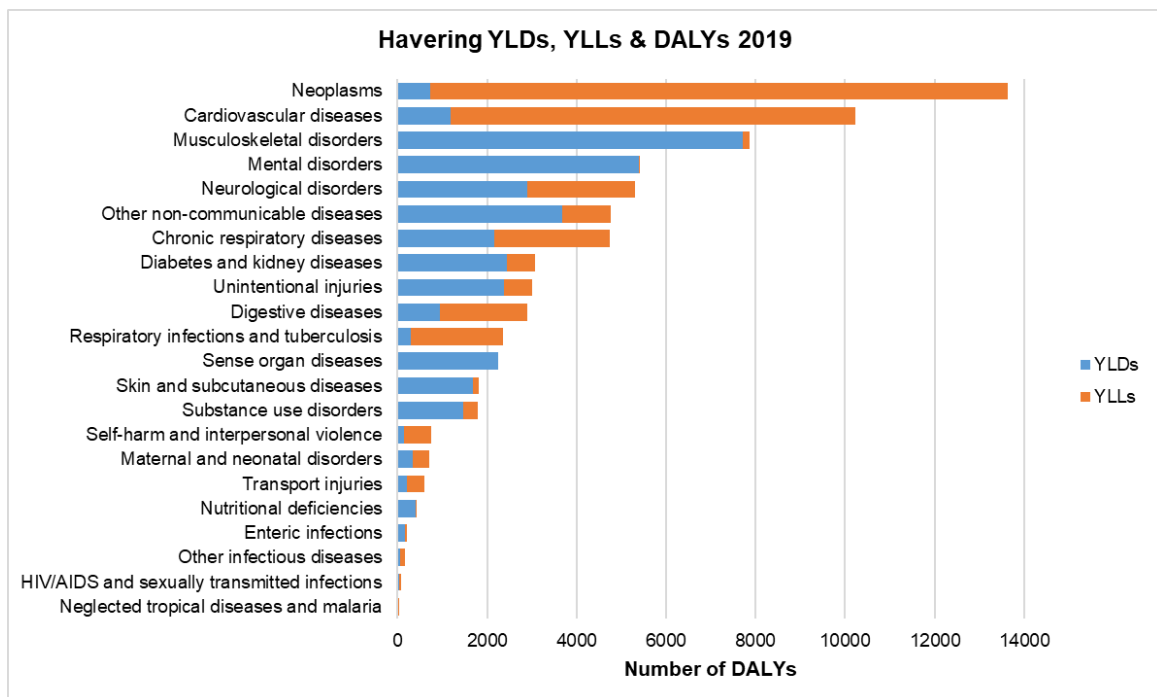
Data Source: Global Burden of Disease, 2019; Produced by LBH Public Health Intelligence

6.7 Recommendations

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[17] Disability-adjusted life years (DALYs) (who.int)

- *All partners should be encouraged to adopt a Health in All Policies approach that takes into consideration health and wellbeing impacts in decision-making, including on the social determinants of health to maximise the wellbeing of residents and the overall healthy life expectancy.*

- *The local authority, NHS and partners should consider the implications of the growing population of persons with disability in Havering in their policies and plans in order to meet specific health and wellbeing needs of these groups and protect them from experiencing inequalities related access and experience of essential support and services.*

- *Strengthen social prescribing as an effective alternative / adjunct to existing health and social care options. This should include action to identify and strengthen community capacity and self-help options as well as an effective signposting function and bring together NHS, council and CVS stakeholders.*

- *All partners within the integrated care system must give prevention and treatment equal priority if they are to succeed in improving health, narrow inequalities and provide high quality, affordable health and social care services.*

7. Household Profile

7. Household profile

7.1 Accommodation type

According to the ONS Census 2021, there are 101,277 households in Havering, a 4% increase (4,078) since 2011 (from 97,199). Out of these, 77,648 of households live in houses or bungalows (76.7%), an increase of 1,566 since 2011. Although the number of households living in houses has increased in number, as a percentage they have decreased since 2011 (78.3%), but is still higher than London (45.9%) but similar to England (77.4%).

**Figure 41: Comparing Havering Accommodation Types to London and England in 2021 and 2011**
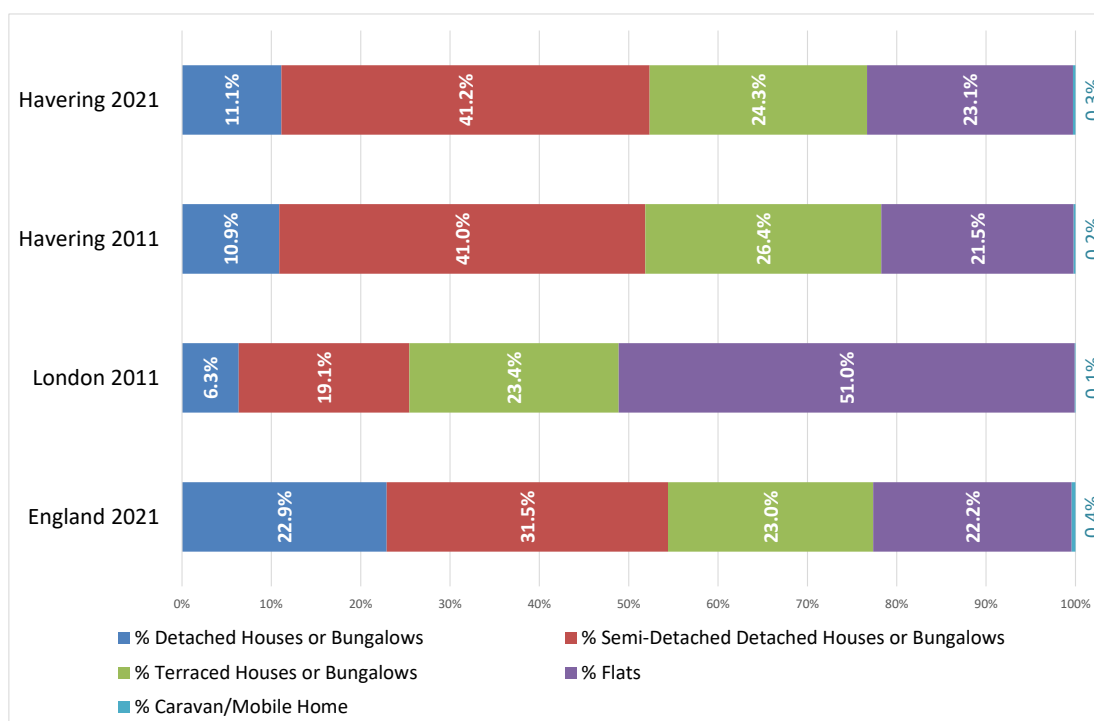
Source: Office for National Statistics (ONS), Census 2021: Produced by Housing Performance

7.2 Tenure

Tenure is classified in terms of whether a household rents or owns the accommodation that it occupies. Census data shows that Havering has the highest proportion of households that own their accommodation[18] across all London boroughs, at 70.5% (71,355). This is higher than England (62.3%) and London (46.8%), but is a slight decrease from 74.4% (72,284) in 2011. This decrease has also been apparent for England (64.1% in 2011) and London (49.5% in 2011).

Figure 42: Comparing Havering Tenure Types to London and England in 2021
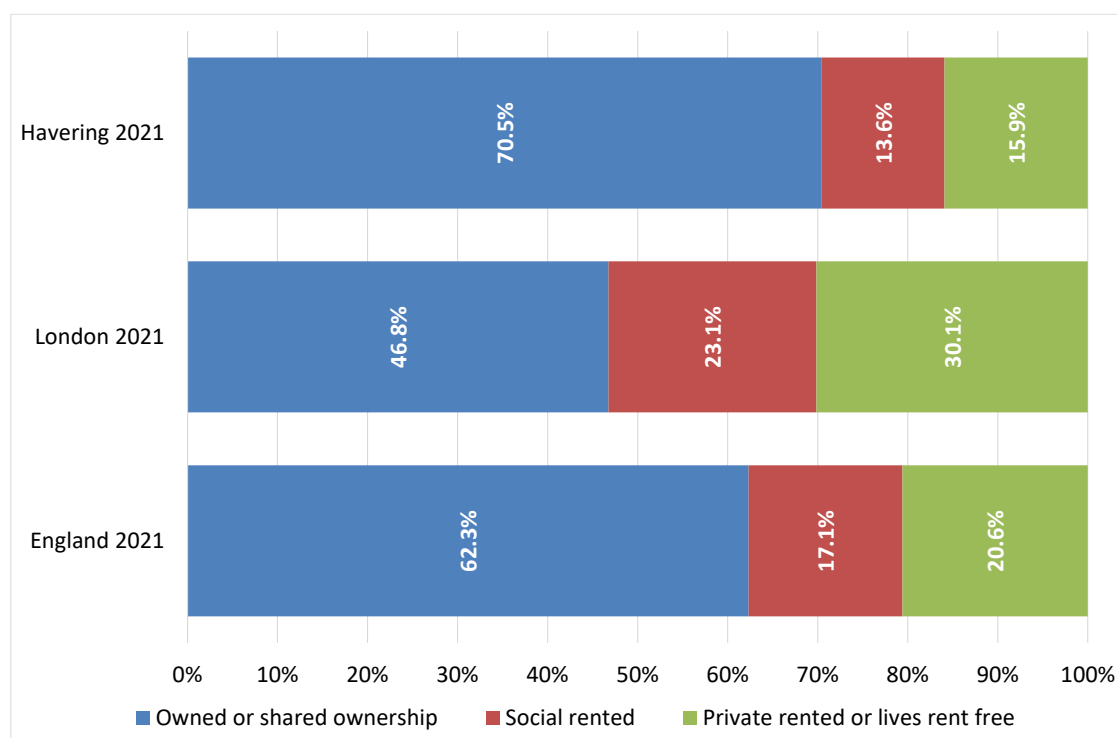
Source: Office for National Statistics (ONS), Census 2021: Produced by Housing Performance

The local area with the greatest increase in home ownership in Havering was Harold Park & Harold Wood (10.8%). Hylands (11.3%) saw a higher percentage change of those who owned their home outright. The area with the greatest decrease was in Romford South (-6.7%).

As a consequence of the overall reduction in home ownership, there has been an increase in the proportion of households that rent their accommodation, from 24.8% (24,136) in 2011 to 29.5% (29,826) in 2021. Within Havering, the area seeing the greatest increase in number of households renting is Rush Green, rising from 1,205 in 2011 to 2,269 in 2021, an increase of 87.5%. The area within Havering with the

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[18] Households that own their accommodation either outright or with a mortgage, loan or in shared ownership

highest proportion of socially rented properties from the local authority was Harold Hill East (18.2%). (See Figure 43).

Figure 43: Distribution of Social Renting from council or Local Authority within Havering in 2021

Figure 5 - Distribution of Social Renting from Council or Local Authority

Dark Shading = Higher
Lighter Shading = Lower
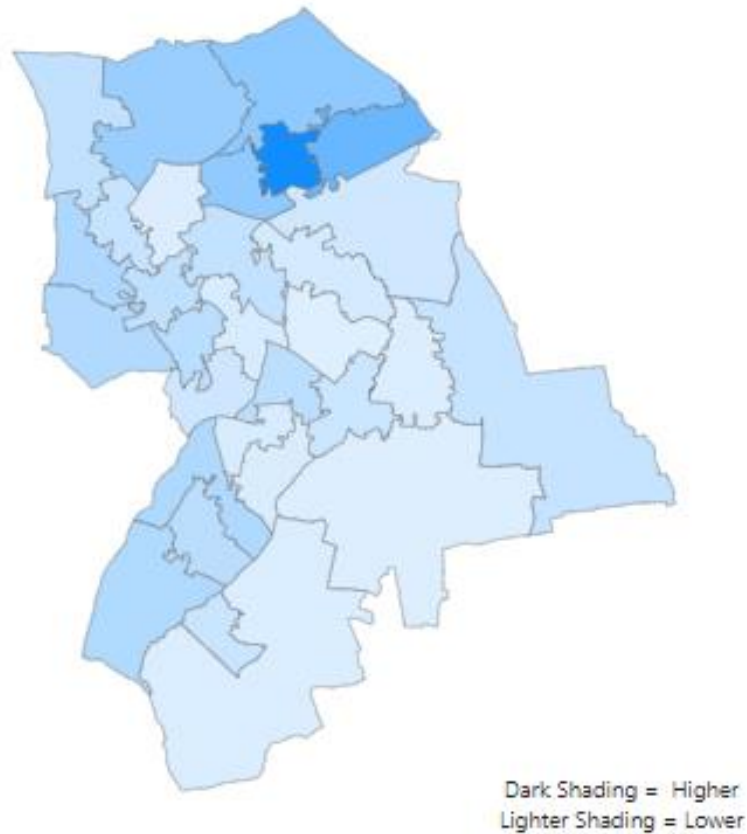
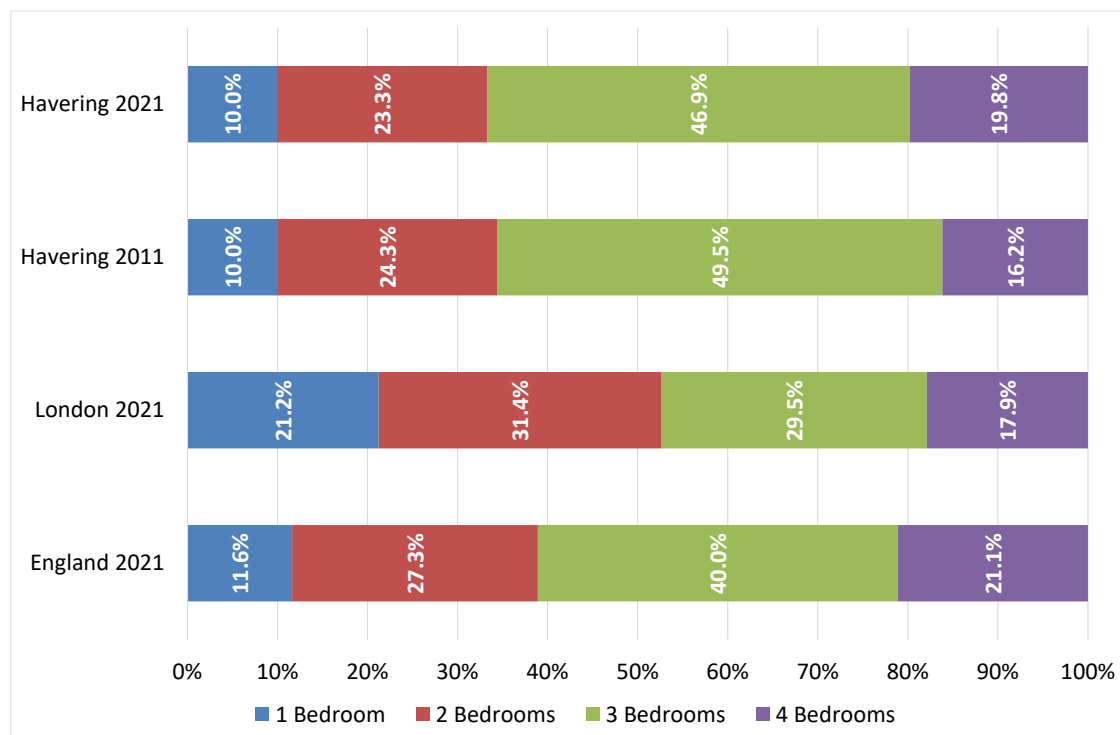Source: Office for National Statistics (ONS), Census 2021; Produced by Housing Performance

7.3 Rooms, bedrooms, and occupancy rating

Just under half of all Havering's households have three bedrooms (46.9% of the 101,277 households). This is the highest percentage across all of the London boroughs and is higher than London (29.5%) and England (40%).

Figure 44: Comparing Number of Bedrooms in Havering, London and England, 2021

Source: Office for National Statistics (ONS), Census 2021; Produced by Housing Performance

Within Havering, Central Romford has the highest percentage of one bedroom (30.4%) and two bedroom (39.4%) properties. South Hornchurch has the highest percentage of three bedroom properties (63.9%) and Emerson Park has the highest percentage of four bedroom properties (59.6%).

7.4 Overcrowding and Under-Occupancy

Occupancy rating provides a measure of whether a household's accommodation is overcrowded (too few rooms/bedrooms for the number of people living at the address) or under-occupied (more rooms/bedrooms than people living at the address).

England and local authorities in London have shown an average decrease in household overcrowding based on rooms per household size over the last decade. However, Havering has seen a slight increase (0.5%) in the number of households who are overcrowded (7.4% (7,166) in 2011 to 7.9% (8,050) in 2021). Barking & Dagenham (0.3%) are the only other London borough to see an increase.

6.0% of households (6,125) in Havering as a whole, have fewer bedrooms than required, compared to 4.0% (3,901) in 2011. This means that the number of households over occupying bedrooms has increased by 57.0% since 2011.

28.0% (28,368) of households in Havering had the required number of bedrooms, with the remaining 65.9% (66,784) of households having more bedrooms than required (a

decline from 69.2% in 2011). This is below England (68.8%) but above London (48.9%) in 2021.

The proportion of households that had more bedrooms than required (under occupancy) within Havering was highest in Upminster South & Corbets Tey, with Harold Hill East having the highest rates of bedroom overcrowding in Havering.

7.5 Car or Van Availability

In 2021, Havering had a lower percentage of households with no cars or vans (21.5%) as compared to London (42.1%) and England (23.5%). This was a reduction from 23% reported in 2011. The percentage of households with two cars or vans in 2021 was 24.9%, significantly higher than London (13.6%), but lower than England (26.1%). Havering also a higher percentage of households with three cars or more (9.4%) as compared to London (4%) and England (9.1%).

Figure 45: Comparing Number of Cars in Households, Havering, London and England, 2021
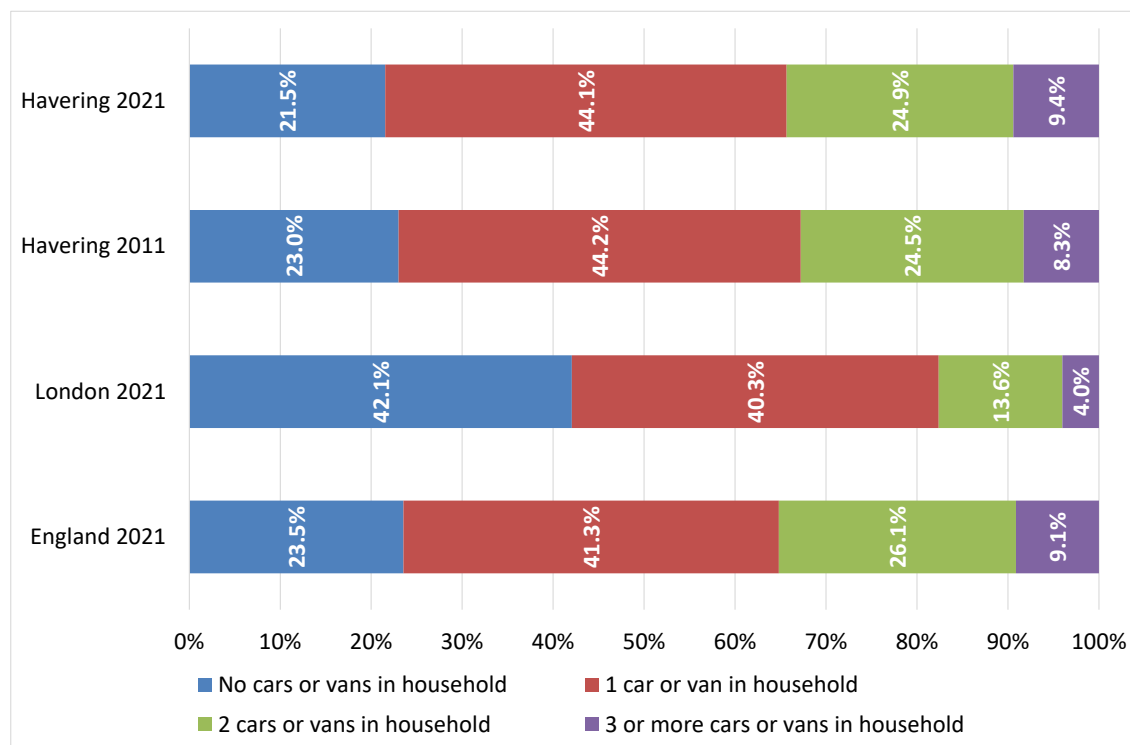
Source: Office for National Statistics (ONS), Census 2021; Produced by Housing Performance

7.6 Homelessness

There are 774 homeless households with dependent children owed a duty under the Homelessness Reduction Act[19] in Havering. The Havering's rate (24.3 per 1,000 households) is among the highest in London boroughs and significantly higher than London (17.4 per 1,000) and England (14.4 per 1,000) averages. Homelessness is associated with severe poverty and is a social determinant of health. It often results from a combination of events such as relationship breakdown, debt, and adverse experiences in childhood and through ill health.[20]

Figure 46: Number of homeless households with dependent children owed a duty under the Homelessness Reduction Act per 1,000 household in Havering, 2021
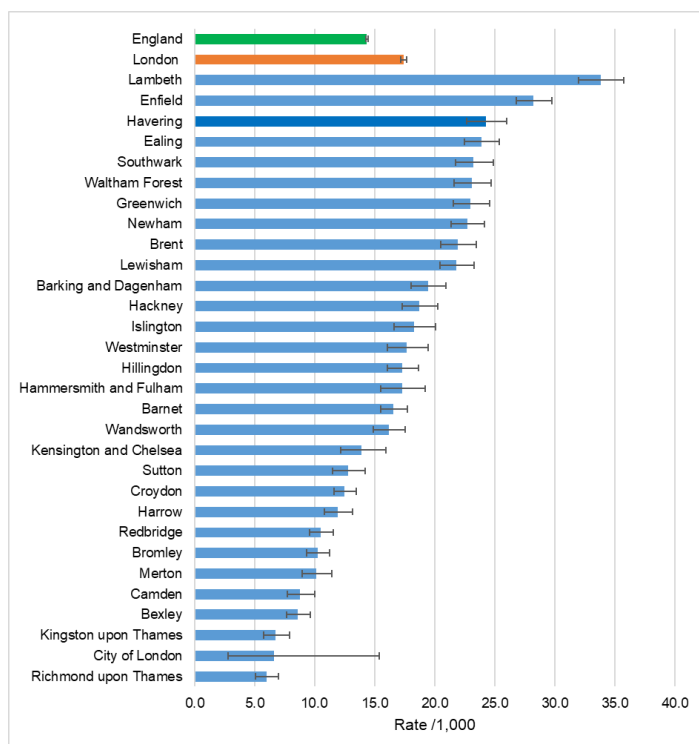
Source: OHID – Fingertips; Produced by LBH Public Health Intelligence

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[19] The Homelessness Reduction Act (HRA) introduced new homelessness duties which meant significantly more households are being provided with a statutory service by local housing authorities than before the Act came into force in April 2018. The HRA introduced new prevention and relief duties, that are owed to all eligible households who are homeless or threatened with becoming homeless, including those single adult households who do not have 'priority need' under the legislation.
(https://www.legislation.gov.uk/ukpga/2017/13/contents/enacted).

[20] Homelessness is associated with poor health, education and social outcomes, particularly for children. (The Impact of Homelessness on Health, LGA 2017, https://www.local.gov.uk/impact-health-homelessness-guide-local-authorities)

7.7 Social isolation

According to Census 2021, about 12.7% (12,838) of the population aged 66 years and above are living in one-person households. This is the second highest proportion after Bexley in London[21]. Older people living alone can be an indicator of social isolation and may require more support from health and social care services.

Table 22: One-person household: Aged 66 years and over, Havering, London & England, 2021

Area	Number	%
Bromley	17443	12.8
Havering	12838	12.7
Bexley	11968	12.6
Richmond upon Thames	10039	12.4
Kensington and Chelsea	7750	11.6
Sutton	9497	11.5
Camden	9718	10.5
Kingston upon Thames	6894	10.5
Barnet	15208	10.2
Hillingdon	11143	10.2
Enfield	12251	10.1
Harrow	9050	10.1
City of London	494	10
Westminster	9498	10
Croydon	14652	9.6
Redbridge	9669	9.3
Merton	7507	9.2
Hammersmith and Fulham	7351	9
Ealing	11837	8.9
Hounslow	9176	8.9
Haringey	8958	8.5
Greenwich	9581	8.4
Brent	9712	8.2
Barking and Dagenham	5991	8.1
Waltham Forest	8254	8
Islington	7636	7.9
Wandsworth	10880	7.9
Lewisham	9365	7.7
Southwark	9507	7.3
Hackney	7489	7.1
Lambeth	9531	7.1
Newham	6377	5.5
Tower Hamlets	5786	4.8
London	**313049**	**9.1**
England	**3001789**	**12.8**

Source: ONS Census 2021

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[21] *Census 2021 (Household Composition by Age), Office for National Statistics (ONS)*

Table 23: Population aged 65 and over in Havering predicted to live alone, 2023 - 2040

	2023	2025	2030	2035	2040
Total population aged 65-74 predicted to live alone	5,758	5,916	6,611	7,030	6,943
Total population aged 75 and over predicted to live alone	10,350	10,516	10,840	11,638	12,815
Total	**16,108**	**16,432**	**17,451**	**18,668**	**19,758**

Source: ONS & Projecting Older People Population Information (POPPI) 2022.

7.8 Recommendations

- *The local authority and partners need to prioritise addressing the issue of homelessness and overcrowding by including more affordable houses in their housing plans as well as identifying and utilising under-occupied homes.*

- *The local authority needs to engage with other local partners to address the issue of loneliness and social isolation as these are multi-faceted issues and effective responses should be delivered in cross authority partnerships including the voluntary and community sectors.*

8. Economic Profile

8. Economic Profile

8.1 Income

The average gross annual household income in Havering for full time workers (£36873) is lower than the London average (£39800) but higher than the England average (£33,582). It is in the lowest third of all London boroughs.

Figure 47: Gross annual income for all full time workers in Havering, London boroughs, London and England, 2022
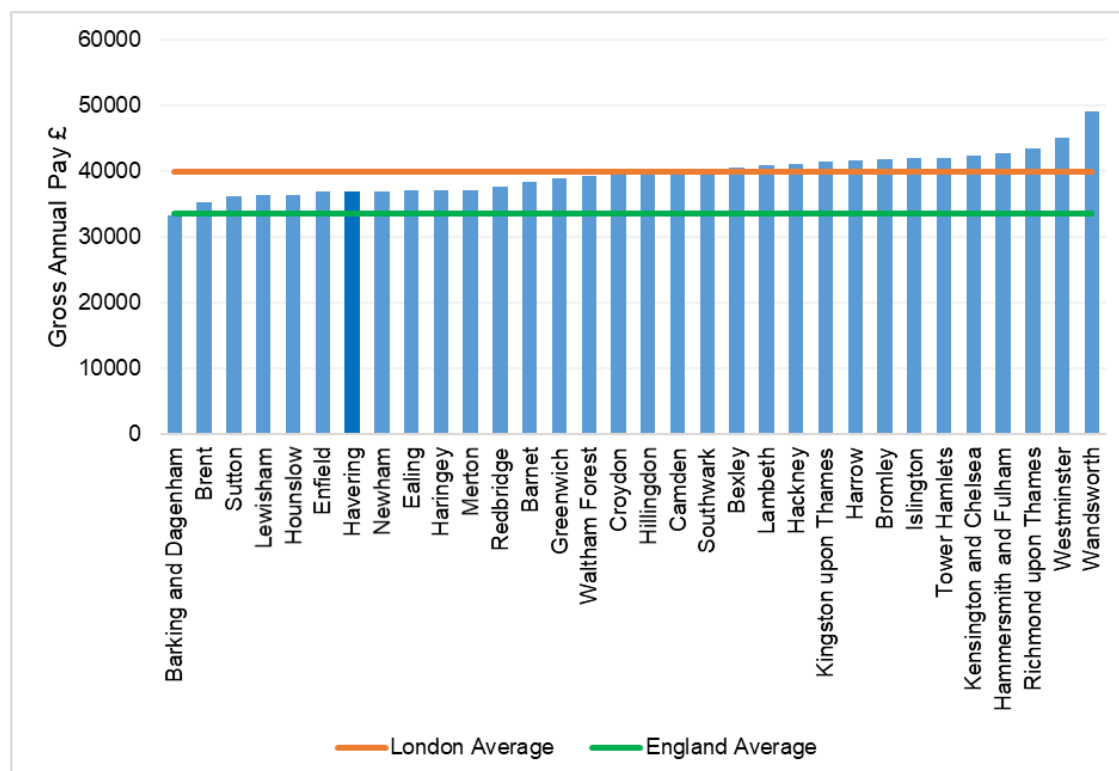
Source: ONS, annual survey of hours and earnings - resident analysis, 2022; Produced by LBH Public Health Intelligence

8.2 Income deprivation affecting children (IDACI)

Over 7,000 children are estimated to be living in poverty in Havering. However, Havering is among the London boroughs with the lowest proportion of children living in poverty (16%). This rate is also significantly lower than the England average (17%) (Figure 48). Within Havering Figure 49 shows a high proportion of children living in poverty are located in the North and South in areas considered as relatively more deprived.

Growing up in poverty damages children's health and well-being, adversely affecting their future health and life chances as adults. Ensuring a good environment in childhood, especially early childhood, is important. A considerable body of evidence

links adverse childhood circumstances to poor child health outcomes and future adult ill health.

Figure 48: Income deprivation affecting children (IDACI), Havering, London & England, 2019

Area	Value	
England	17.1	
London region	-	
Islington	27.5	
Tower Hamlets	26.6	
Hackney	24.9	
Southwark	24.1	
Barking and Dagenham	23.8	
Lewisham	22.9	
Lambeth	22.9	
Enfield	22.5	
Greenwich	21.2	
Haringey	20.8	
Newham	20.1	
Camden	19.3	
Waltham Forest	19.2	
Hammersmith and Fulham	18.7	
Croydon	18.5	
Westminster	18.3	
Brent	18.2	
Hounslow	17.0	
Ealing	16.6	
Bexley	16.0	
Havering	16.0	
Hillingdon	15.7	
Wandsworth	15.4	
Redbridge	13.7	
Merton	13.4	
Bromley	13.1	
Kensington and Chelsea	12.9	
Barnet	12.6	
Sutton	12.6	
Harrow	12.3	
Kingston upon Thames	10.0	
City of London	7.1	
Richmond upon Thames	7.0	

Source: Office for Health Improvement & Disparities - Fingertips

Figure 49: Income deprivation affecting children (IDACI), by Havering LSOA's, 2019
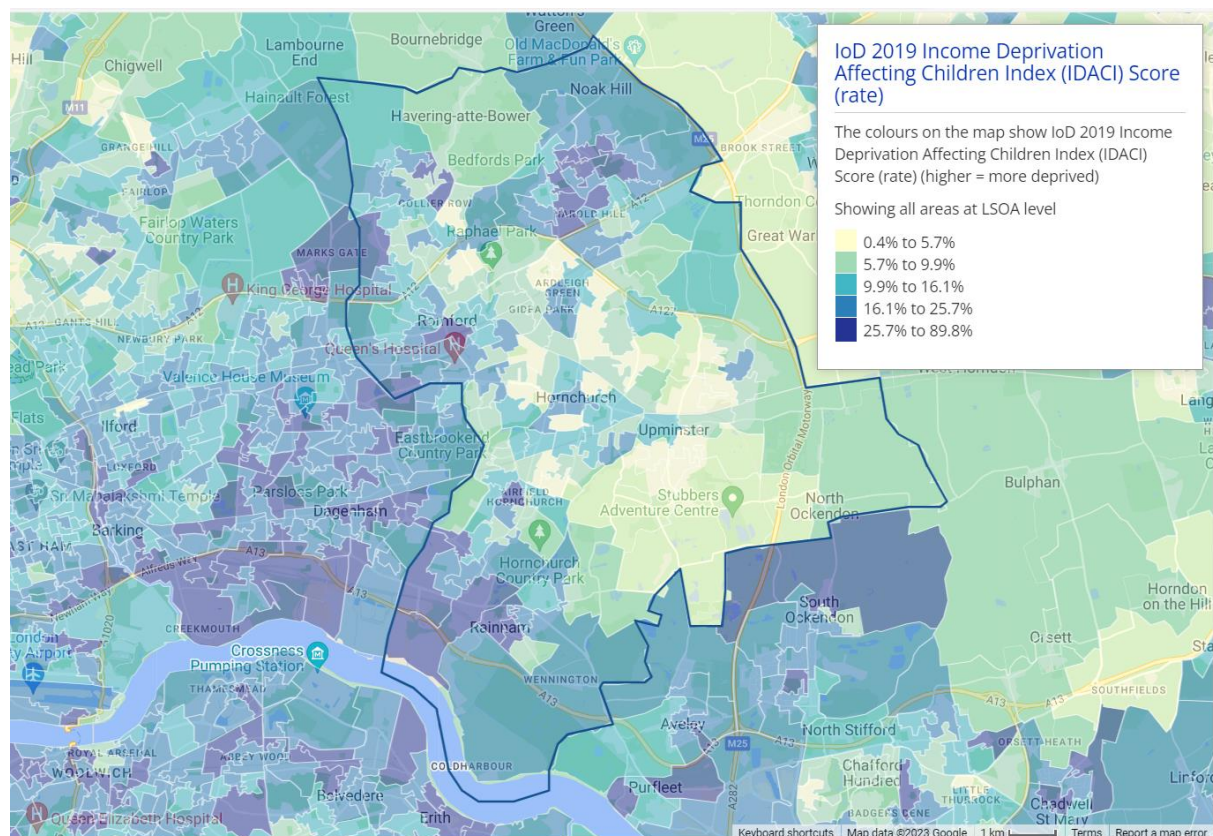
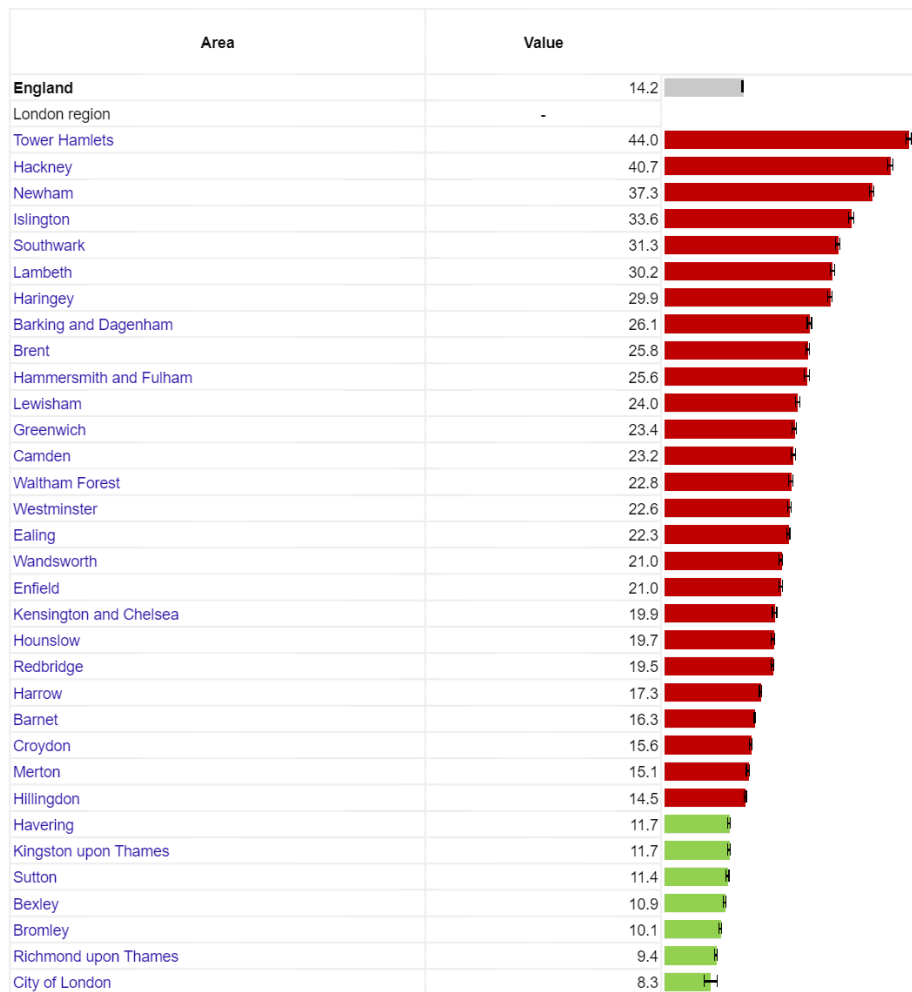Source: Havering Local Insight

8.3 Income deprivation affecting older people (IDAOPI)

Nearly 7,000 older people are estimated to be leaving in poverty in Havering. However, Havering is among the London boroughs with the lowest proportion of older people living in poverty (11.7%). This rate is also significantly lower than the England average (14.2%) (Figure 50). Within Havering Figure – shows a high proportion of older people living in poverty are located in the North and other areas considered as relatively more deprived. Although there are no national targets, there is need to tackle poverty and promote greater independence and well-being in later life. People living in more deprived areas have a greater need for health services.

Figure 50: Older people in poverty, income deprivation affecting older people Index (IDAOPI), Havering, London & England, 2019

Area	Value	
England	14.2	
London region	-	
Tower Hamlets	44.0	
Hackney	40.7	
Newham	37.3	
Islington	33.6	
Southwark	31.3	
Lambeth	30.2	
Haringey	29.9	
Barking and Dagenham	26.1	
Brent	25.8	
Hammersmith and Fulham	25.6	
Lewisham	24.0	
Greenwich	23.4	
Camden	23.2	
Waltham Forest	22.8	
Westminster	22.6	
Ealing	22.3	
Wandsworth	21.0	
Enfield	21.0	
Kensington and Chelsea	19.9	
Hounslow	19.7	
Redbridge	19.5	
Harrow	17.3	
Barnet	16.3	
Croydon	15.6	
Merton	15.1	
Hillingdon	14.5	
Havering	11.7	
Kingston upon Thames	11.7	
Sutton	11.4	
Bexley	10.9	
Bromley	10.1	
Richmond upon Thames	9.4	
City of London	8.3	

Source: Office for Health Improvement & Disparities - Fingertips

Figure 51: Older people in poverty, income deprivation affecting older people Index (IDAOPI) by Havering LSOA's, 2019
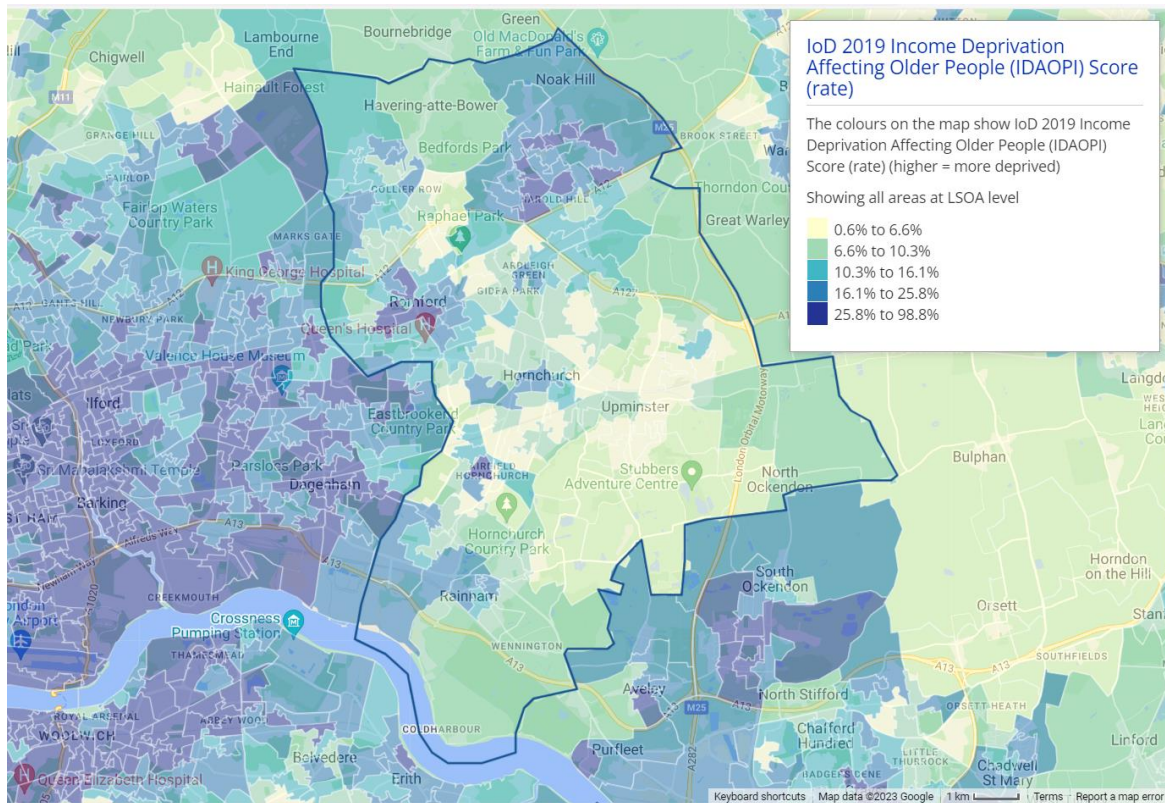
Source: Havering Local Insight
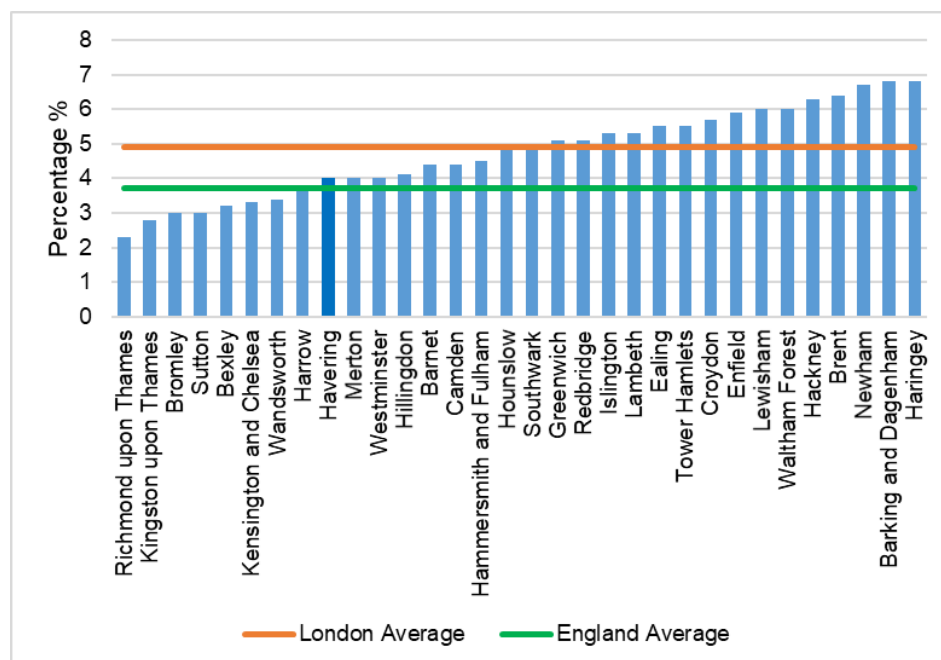
8.4 Employment and unemployment

The overall employment rate in Havering (84%) is higher than the London (74%) and England (76%) averages (See Figure 52). Conversely, the proportion of working age residents in Havering claiming out-of-work benefits (4%) is lower than London (5%) but similar to the England average (4%) (Figure 53).

Figure 52: Proportion of working age residents in employment, Havering, London & England, August 2023
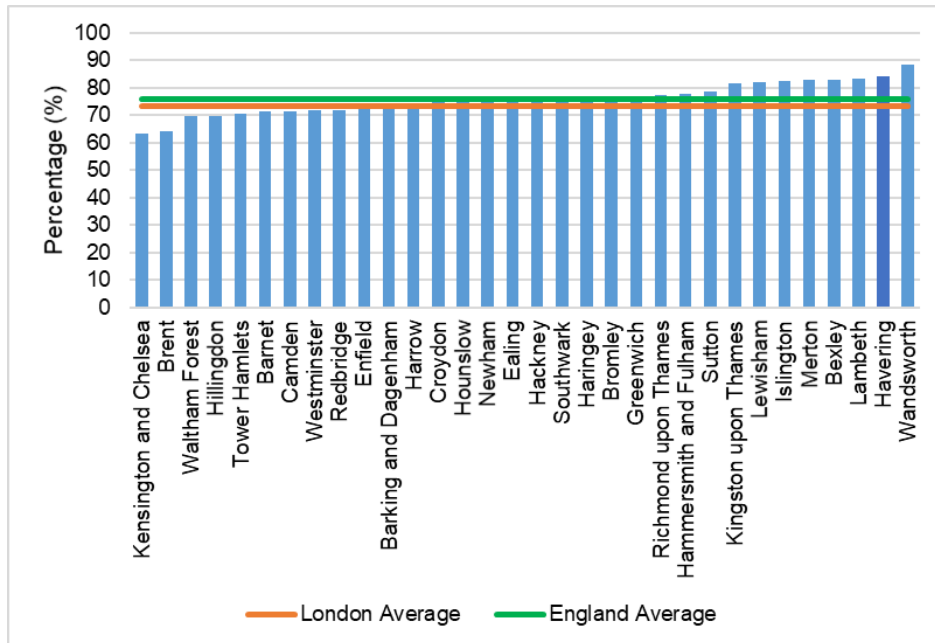
Source: Nomis, Produced by LBH Public Health Intelligence.

Figure 53: Proportion of working age residents claiming out-of-work benefits in London Boroughs, August 2023

Source: Nomis, Produced by LBH Public Health Intelligence.

8.5 Occupation

Havering has lower percentage of persons aged 16 over in employment in the managerial and professional qualifications (31.9%) as compared to London (40.4%) and England (33.2%).

Table 24: Havering all usual residents aged 16 years and over in employment

Occupation (current)	Havering		London		England	
	number	%	number	%	number	%
1. Managers, directors and senior officials	15,438	12.4	634,405	14.6	3,403,916	12.9
2. Professional occupations	24,339	19.5	1,123,398	25.8	5,356,649	20.3
3. Associate professional and technical occupations	16,717	13.4	668,876	15.3	3,499,749	13.3
4. Administrative and secretarial occupations	16,701	13.4	370,335	8.5	2,446,565	9.3
5. Skilled trades occupations	14,375	11.5	328,042	7.5	2,683,139	10.2
6. Caring, leisure and other service occupations	10,294	8.2	336,092	7.7	2,447,148	9.3
7. Sales and customer service occupations	8,162	6.5	276,860	6.3	1,972,553	7.5
8. Process, plant and machine operatives	8,058	6.5	219,351	5.0	1,832,666	6.9
9. Elementary occupations	10,697	8.6	402,718	9.2	2,762,829	10.5
Total:	**124,781**	**100.0**	**4,360,077**	**100.0**	**26,405,214**	**100.0**

Source: Nomis

8.6 Education

Children's education and development of skills are important for their own wellbeing and for that of the nation as a whole. Learning ensures that children develop the knowledge and understanding, skills, capabilities and attributes that they need for mental, emotional, social and physical wellbeing now and in the future.

Children with poorer mental health are more likely to have lower educational attainment and there is some evidence to suggest that the highest level of educational qualifications is a significant predictor of wellbeing in adult life.

Educational qualifications are a determinant of an individual's labour market position, which in turn influences income, housing and other material resources. Educational attainment is influenced by both the quality of education children receive and their family socio-economic circumstances.

The attainment 8 score measures pupil's attainment across 8 qualifications, including Maths, English, Science, Computer Science, History, Geography and Languages. In 2023, the average Attainment 8 score per pupil was **47.3** for Havering children, better than **England (44.6**), but lower than the average score for pupils across the whole of **Outer London (51.0)**[22]

8.7 Recommendations

- *Although Havering as a whole has average levels of disadvantage, there are significant inequalities within the borough, including health inequalities. Health and social care professionals in consultation with patients / residents should consider the extent to which problems with employment, poverty, housing etc. contribute to, or exacerbate a presenting health issue and therefore might benefit from social prescribing in addition to or instead of traditional medical intervention.*

- *Local authority and partners need to work collectively to improve overall educational attainment, address any inequalities in educational outcomes for young people, support them to develop leadership skills and pursue professional careers.*

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[22] Local authority interactive tool (LAIT) - GOV.UK (www.gov.uk)