

Property and Housing Services Asbestos Control Policy (2025)

Equality and Health Impact Assessment (EqHIA)

Document control

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| Title of activity: | Asbestos Control Policy (2025) |
| Lead officer: | Ian Saxby - Assistant Director Property Housing & Assets |
| Approved by: | Paul Walker - Director of Property and Housing |
| Author: | Joe Agius, Housing Policy and Strategy Officer |
| Date completed: | July 2025 |
| Scheduled date for review: | July 2028 |

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| Did you seek advice from the Corporate Policy & Diversity team? | NO |
| Did you seek advice from the Public Health team? | NO |
| Does the EqHIA contain any confidential or exempt information that would prevent you publishing it on the Council's website? | NO |

Equality & Health Impact Assessment checklist

About your activity

| | | |
|----------|--|---|
| 1 | Type of activity | Policy. |
| 2 | Who will be affected by this activity | Havering Council property occupiers (tenants, leaseholders), Housing Services staff and management. |
| 3 | Scope of activity | <p>This policy applies to all LBH tenants and leaseholders, LBH staff and LBH appointed contractors.</p> <p>The scope of this policy extends to properties owned or managed by LBH.</p> |
| 4 | Is this a new document for EqHIA approval? | YES. |
| 5 | Does this document have the potential to impact upon people with protected characteristics as detailed herein? | YES. |
| 6 | Does this document have the potential to impact upon affected people's health and wellbeing as detailed herein? | YES. |

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|----------------------|---|
| Completed by: | Joe Agius, Housing Policy and Strategy Officer. |
| Date: | July 2025. |

| 1. Age | | |
|-----------------------------------|---|--|
| Please tick (✓) the relevant box: | | Overall impact: Positive This policy does not discriminate. It will help further protect and improve the health, safety and wellbeing of members of this protected characteristic group. Thus, the overall impact of this policy on the basis of age has been assessed as positive . |
| Positive | ✓ | |
| Neutral | | |
| Negative | | |

Evidence:

Asbestos is especially dangerous to children and older adults due to their unique vulnerabilities:

Children are at higher risk due to the following reasons;

- **Developing lungs:** Children's respiratory systems are still maturing, making them more susceptible to damage from inhaled fibres.
- **Faster breathing rate:** They inhale more air per body weight than adults, increasing exposure to airborne asbestos.
- **Behavioural exposure:** Kids often play in dusty environments or touch contaminated surfaces, then put their hands in their mouths, raising the risk of ingestion.
- **Longer latency window:** Diseases like mesothelioma can take decades to develop. Exposure at a young age means more time for illness to manifest.

In older adults:

- **Weakened immune systems:** Aging bodies may struggle to repair damage caused by asbestos fibres.
- **Cumulative exposure:** Older individuals may have had prolonged exposure over their lifetimes, especially if they worked in construction or buildings where Asbestos has been present.
- **Higher incidence of asbestos-related diseases:** Conditions like asbestosis, lung cancer, and mesothelioma are more common in older populations due to long-term fibre retention.

UK public health data reports that more than 5,000 asbestos-related deaths occur annually, with mesothelioma disproportionately affecting older adults.

| 2. Disability | | |
|--|-------------------------------------|--|
| <i>Please tick (✓) the relevant box:</i> | | Overall impact: Positive This policy does not discriminate. It will help further protect and improve the Health and Safety of members of this protected characteristic group. Thus, the overall impact of this policy on the basis of disability has been assessed as positive . |
| Positive | <input checked="" type="checkbox"/> | |
| Neutral | <input type="checkbox"/> | |
| Negative | <input type="checkbox"/> | |

Evidence:

While there is limited direct research specifically isolating the effects of Asbestos on disabled people, these are confirmed reasons why disabled people may be more vulnerable:

- Pre-existing respiratory conditions (like muscular dystrophy or spinal cord injuries affecting lung function) can make asbestos exposure more dangerous.
- Reduced mobility may lead to longer exposure in contaminated environments, especially in older buildings with asbestos-containing materials.
- Socioeconomic factors often intersect with disability, increasing the likelihood of living in poorly maintained housing where asbestos risks are higher.
- Conditions like asbestosis can lead to progressive respiratory failure, which may compound existing disabilities.
- People with disabilities may face barriers to early diagnosis or treatment, making asbestos-related diseases harder to manage.

| 3. Sex/gender | | |
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| <i>Please tick (✓) the relevant box:</i> | | Overall impact: Positive This policy does not discriminate. It will help further protect and improve the Health and Safety of members of this protected characteristic group. Thus, the overall impact of this policy on the basis of sex/gender has been assessed as positive . |
| Positive | <input checked="" type="checkbox"/> | |
| Neutral | <input type="checkbox"/> | |
| Negative | <input type="checkbox"/> | |

Evidence:

There is growing evidence that asbestos inhalation affects men and women differently, not just in terms of exposure routes but also in disease patterns and diagnosis.

Mesothelioma latency (time from exposure to disease) tends to be longer in women, possibly due to lower exposure levels.

Men still account for the majority of mesothelioma cases (about 83%), but female cases are rising faster, a 93% increase between 1993 and 2018 compared to 47% in men.

Females often have unknown exposure histories, making diagnosis more difficult, and are more likely to experience secondary or environmental exposure, such as:

- Handling contaminated clothing from family members.
- Working in buildings (schools, hospitals, offices) where asbestos remains in walls, ceilings, or insulation.

| 4. Ethnicity/race | | |
|--|-------------------------------------|--|
| <i>Please tick (✓) the relevant box:</i> | | Overall impact: Positive This policy does not discriminate. It will help further protect and improve the Health and Safety of members of this protected characteristic group. Thus, the overall impact of this policy on the basis of ethnicity/race has been assessed as positive . |
| Positive | <input checked="" type="checkbox"/> | |
| Neutral | <input type="checkbox"/> | |
| Negative | <input type="checkbox"/> | |

Evidence:

There is evidence suggesting that asbestos inhalation affects different racial and ethnic groups in distinct ways, but the differences are largely driven by occupational exposure, geographic location, and systemic disparities - not biological susceptibility.

For example, US studies have concluded that:

- **White and Hispanic men** have historically had higher rates of mesothelioma due to overrepresentation in high-risk jobs like construction, while
- **Black and Asian men** tend to have lower rates of mesothelioma, likely because they were less represented in these occupations during peak asbestos use.

Geographic clustering also plays a role, and regular/constant exposure - or living near - to asbestos increases risk regardless of race.

While genetic susceptibility may play a role in who develops asbestos-related diseases, current research suggests environmental and occupational factors are far more influential. However, there is no strong evidence that biological race affects how asbestos impacts the body.

| 5. Religion/faith | | |
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| Please tick (✓) the relevant box: | | Overall impact: Positive This policy does not discriminate. It will help further protect and improve the Health and Safety of members of this protected characteristic group. Thus, the overall impact of this policy on the basis of religion/faith has been assessed as positive . |
| Positive | ✓ | |
| Neutral | | |
| Negative | | |

Evidence:

There is currently no scientific evidence suggesting that asbestos inhalation affects people differently based on their religion or faith.

Asbestos-related diseases—like mesothelioma, asbestosis, and lung cancer—are caused by physical exposure to asbestos fibres, and not by any spiritual, cultural, or religious factors.

That said, religion and faith can intersect with asbestos exposure in indirect but important ways:

- Places of worship built before asbestos bans (e.g. churches, mosques, temples) may still contain asbestos in insulation, ceiling tiles, or roofing.
- Volunteers, clergy, or maintenance staff working in these buildings could be exposed during renovations or repairs.

Religious beliefs may shape attitudes toward medical treatment, which can affect how quickly someone seeks help for asbestos-related symptoms. In some cases, faith-based organisations provide healthcare or housing in older buildings, potentially increasing exposure risk if asbestos is present.

| 6. Sexual orientation | | |
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| Please tick (✓) the relevant box: | | Overall impact: Positive This policy does not discriminate. It will help further protect and improve the Health and Safety of members of this protected characteristic group. Thus, the overall impact of this policy on the basis of sexual orientation has been assessed as positive . |
| Positive | <input checked="" type="checkbox"/> | |
| Neutral | <input type="checkbox"/> | |
| Negative | <input type="checkbox"/> | |

Evidence:

There is no scientific evidence that asbestos inhalation affects people differently based on their sexual orientation.

The health risks like mesothelioma, asbestosis, and lung cancer, are caused by physical exposure to asbestos fibres, and not by someone's identity or orientation.

| 7. Gender reassignment | | |
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| Please tick (✓) the relevant box: | | Overall impact: Positive This policy does not discriminate. It will help further protect and improve the Health and Safety of members of this protected characteristic group. Thus, the overall impact of this policy on the basis of gender reassignment has been assessed as positive . |
| Positive | <input checked="" type="checkbox"/> | |
| Neutral | <input type="checkbox"/> | |
| Negative | <input type="checkbox"/> | |

Evidence:

There is no scientific evidence that asbestos inhalation affects people differently based on their gender reassignment.

The health risks like mesothelioma, asbestosis, and lung cancer are caused by physical exposure to asbestos fibres, and not by someone's identity or orientation.

| 8. Marriage/civil partnership | | |
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| Please tick (✓) the relevant box: | | Overall impact: Positive This policy does not discriminate. It will help further protect and improve the Health and Safety of members of this protected characteristic group. Thus, the overall impact of this policy on the basis of marriage/civil partnership has been assessed as positive . |
| Positive | ✓ | |
| Neutral | | |
| Negative | | |

Evidence:

There is no scientific evidence that asbestos inhalation affects people differently based on their marital/civil partnership status.

The health risks like mesothelioma, asbestosis, and lung cancer are caused by physical exposure to asbestos fibres, and not by someone's marital status.

| 9. Pregnancy, maternity and paternity | | |
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| Please tick (✓) the relevant box: | | Overall impact: Positive This policy does not discriminate. It will help further protect and improve the Health and Safety of members of this protected characteristic group. Thus, the overall impact of this policy on the basis of pregnancy, maternity and paternity has been assessed as positive . |
| Positive | ✓ | |
| Neutral | | |
| Negative | | |

Evidence:

There is no scientific evidence that asbestos inhalation affects people differently based on their maternity or paternity status. The health risks like mesothelioma, asbestosis, and lung cancer, are caused by physical exposure to asbestos fibres, and not by someone's identity or orientation.

Asbestos exposure during pregnancy, on the other hand, is a serious concern, though the direct risk to the unborn child is considered low.

Most studies suggest asbestos fibres are unlikely to cross the placenta or contaminate breast milk.

Still, the potential indirect effects on both the mother and foetus make it important to avoid exposure entirely.

| Health & Wellbeing | | |
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| Please tick (✓) the relevant box: | | Overall impact: Positive |
| Positive | <input checked="" type="checkbox"/> | The Council is committed to the health, safety and well-being of Havering's residents. This policy does not discriminate. |
| Neutral | <input type="checkbox"/> | It will help further protect and improve the Health, Safety and wellbeing of all directly and indirectly (i.e. visitors, neighbours, etc) affected is protected characteristic group. Thus, the overall impact of this policy on the basis of age has been assessed as positive . |
| Negative | <input type="checkbox"/> | |
| Do you consider that a more in-depth Health Impact Assessment is required as a result of this brief assessment? No ✓ | | |

Evidence:

Asbestos exposure can have devastating effects on human health and wellbeing, especially when fibres are inhaled over time.

In the UK, over 5,000 deaths were attributed to asbestos-related diseases in 2024.

Major risks from prolonged exposure include:

- **Mesothelioma:** A rare and aggressive cancer affecting the lining of the lungs or abdomen. It is almost exclusively caused by asbestos exposure and is often fatal.
- **Asbestosis:** A chronic lung disease caused by scarring from asbestos fibres. It leads to shortness of breath, fatigue, and chest pain, and can be fatal in severe cases.
- **Lung Cancer:** Asbestos-related lung cancer looks similar to smoking-related cancer. The risk is significantly higher for smokers exposed to asbestos.
- **Pleural Thickening:** Swelling and thickening of the lung lining, which can cause breathing difficulties and chest discomfort.

Even short-term exposure can be harmful, there is no known 'safe' level.

Review

This EqHIA will be reviewed in July 2028, or beforehand if:

- New, applicable legislation/regulation comes into effect, or
- New, relevant data becomes available.