

Appendix 7:

Equalities Impact Assessment (EIA)

Equality Impact Assessment

Local Government Reorganisation Proposal

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Executive Summary

This Equality Impact Assessment (EIA) has been written to support the shared vision of 11 unitary, district and borough councils for the future of local government in Hampshire and the Isle of Wight. Local Government Reorganisation (LGR) will be the greatest change in local government in over 50 years, and we are committed to re-thinking how we deliver services and creating new local government structures that are built around our residents. LGR will impact individuals and communities across Hampshire and the Isle of Wight, especially those with protected characteristics under the Equality Act 2010.

This EIA is a high-level assessment, intended to consider and inform the strategic direction of the case for change, and the potential impacts our four new mainland and Isle of Wight unitary model may have on residents. It is intended as the beginning of the consideration of equality, diversity and inclusion. As we progress through LGR, additional, more detailed and targeted EIAs will be developed to support our communities, and our staff through the transition and help us ensure compliance with the Public Sector Equality Duty at every stage of the process. These will incorporate updated data, community insights, and feedback from service users to ensure a deeper understanding of evolving impacts.

Scope

Hampshire and the Isle of Wight is home to a diverse population, across urban, rural and coastal communities, each with unique identities and challenges. To properly assess the impact of our proposed approach may have on the population, this EIA includes all the protected characteristics, as well as the armed forces community, people experiencing socio-economic deprivation, and rural communities.

This assessment draws on data from the 2021 census and the Joint Strategic Needs Assessments for Hampshire and the Isle of Wight, Portsmouth and Southampton, all of which is publicly available.

Key Findings

LGR presents the opportunity to design localised, responsive, inclusive and integrated services. Our four new mainland and Isle of Wight unitary model leans into these opportunities, with services designed around how people live and work. Local governance would be tailored, coordinated and close, enabling improved responsiveness, robust local relationships, more inclusive engagement strategies and stronger partnerships. When designing services, the existing councils, who are already working together, would share good practice and learning, and ensure a balanced approach to rural and urban needs.

Potential risks identified apply to LGR and the period of transition ahead more broadly, such as disruption to service provision, loss of specialist knowledge, digital exclusion and loss of trusted relationships. Fragmentation of services is a risk that pertains to our approach. As the responsibility

of service delivery shifts from county to the unitaries, gaps in service integration may be temporarily exacerbated. To mitigate this risk, the existing council, partners and stakeholders will be co-designing future services, to ensure continuity and embed operational expertise.

This EIA also considers the workforces of the existing councils. LGR will likely bring substantial changes for staff, with potential new working practices, team structures and working environments. Potential risks identified at this stage are around staff wellbeing and support, and retention as well as the possibility of differing practices across the unitaries during the transition period. Clear and timely communication and engagement with staff will be increasingly important as LGR progresses and will help mitigate these risks.

Mitigations and Risks

The table below contains an overview of the risks and mitigations identified. Under each characteristic, risks are recognised, and all of the current mitigations can be found in section 16.

Risk Summaries	Mitigation Summaries
Disruption to trusted community relationships (e.g. LGBTQ+, faith groups, rural residents)	Community engagement: ongoing, inclusive engagement ensures continuity, trust and visibility of diverse community voices in shaping services.
Fragmentation of services during transition	Stakeholder engagement and workshops: co-design with service leads and partners embeds operational expertise and continuity into future models.
Workforce instability and loss of specialist knowledge	Transition planning: builds on existing unitary structures and proven delivery models. Guided by shared principles focused on workforce wellbeing and continuity.
Risk of exclusion or inaccessible services (e.g. digital exclusion and cultural sensitivity)	Inclusive service design: embeds local insight and co-production to ensure services are culturally competent, accessible and responsive to diverse needs.
Underrepresentation of groups in service design	Community engagement: ensures lived experience informs service transformation, particularly for groups at risk of being overlooked in structural change. A key principle of this proposal is that service delivery should align with distinct communities, engaging them upfront in the shaping of future service.
Disruption to characteristic specific or intersectional services	Transition Planning & Inclusive Service Design: maintains continuity of specialist services and ensures intersectional needs are embedded in future service models.

1. Introduction

Hampshire and the Isle of Wight is home to a diverse population of approximately two million people, spread across a mix of urban centres, coastal communities, rural areas, and the Isle of Wight. The area includes major economic hubs such as Southampton, Portsmouth, Winchester, and Basingstoke, each with distinct identities, strengths, and challenges.

Local Government Reorganisation (LGR) presents a significant opportunity to reshape how public services are delivered across this varied landscape, ensuring they are more responsive, resilient, and reflective of the way people live.

Eleven district, borough, and unitary councils across mainland Hampshire and the Isle of Wight have come together to propose a new model for local government: the creation of four new mainland unitary authorities, with the Isle of Wight retaining its existing unitary status.

Communities are at the heart of this proposal, aiming to provide high-quality, prevention focussed, financially sustainable and place-based services which are responsive to local needs. This structure is designed to align council boundaries with established economic areas and population centres, enabling more effective service delivery, stronger local leadership, and improved outcomes for communities.

This high-level Equality Impact Assessment (EIA) has been undertaken to explore how our four new mainland and Isle of Wight unitary authorities may affect individuals and communities, particularly those with protected characteristics under the Equality Act 2010. Given the size and diversity of the region, the assessment will also consider the impact on the Armed Forces community and areas experiencing different types of deprivation.

Any change carries potential risk, this EIA aims to highlight the key opportunities for our communities with a four new mainland and Isle of Wight unitary model, as well as begin to identify and mitigate potential risks. Supporting informed decision making with communities in mind, ensuring that equality, diversity and inclusion are embedded from the outset. This EIA also recognises the importance of the local government workforce in delivering high-quality, inclusive services. As the structure of local authorities change, so too will the working environments, patterns, and relationships that underpin effective service delivery. These high-level workforce factors will be explored further in the assessment to ensure that staff needs are considered alongside those of residents.

As the process to establish new unitary authorities progresses, more detailed and targeted Equality Impact Assessments will be developed, incorporating additional data and community insights to ensure a deeper understanding of potential impacts.

1.1 Insights and Data

To inform this EIA data has been drawn from the 2021 census, Hampshire's Joint Needs Assessment, Portsmouth's Joint Needs Assessment, Southampton's Joint Needs Assessment, the English Index of Multiple Deprivation. All of the data in this report, except where otherwise specified is from the 2021 census.¹

In this report, the area that currently makes up the county of Hampshire, including the Isle of Wight, Portsmouth and Hampshire is referred to as 'Hampshire and the Isle of Wight' and 'Hampshire'. As such, when data refers to 'Hampshire' or 'Hampshire and the Isle of Wight', the data is the cumulative figure of the areas covered by the following local authorities:

Basingstoke and Deane Borough Council	East Hampshire District Council	Eastleigh Borough Council	Fareham Borough Council	Gosport Borough Council	Hart District Council	Havant Borough Council
Isle of Wight Council	New Forest District Council	Portsmouth City Council	Rushmoor Borough Council	Southampton City Council	Test Valley Borough Council	Winchester City Council

Alongside quantitative data, the twelve councils have undertaken extensive engagement with stakeholders and communities to ensure the proposals are shaped by local insight, shared priorities, and lived experience. Communication and engagement activities across Hampshire and the Isle of Wight have helped residents understand what local government reorganisation could mean for them and provided valuable perspectives on the options being considered. These conversations, through surveys, workshops, and deliberative sessions, have helped ensure that the voices of communities, particularly those most directly affected, are reflected in the development of the proposals, in this Equality Impact Assessment and future assessments going forward.

¹ Information about the 2021 census can be found here: [About census - Office for National Statistics](#)

2. Age

2.1 Data Analysis

2.1.1 Hampshire and the Isle of Wight Analysis

According to the 2021 census, the population of Hampshire (including Southampton, Portsmouth and the Isle of Wight) was 2,185,933. Overall, Hampshire and the Isle of Wight has an ageing population compared to the UK as a whole, with people aged 55 and above making up a larger portion of the population – 34.3% in Hampshire compared to 23.8% in the UK.

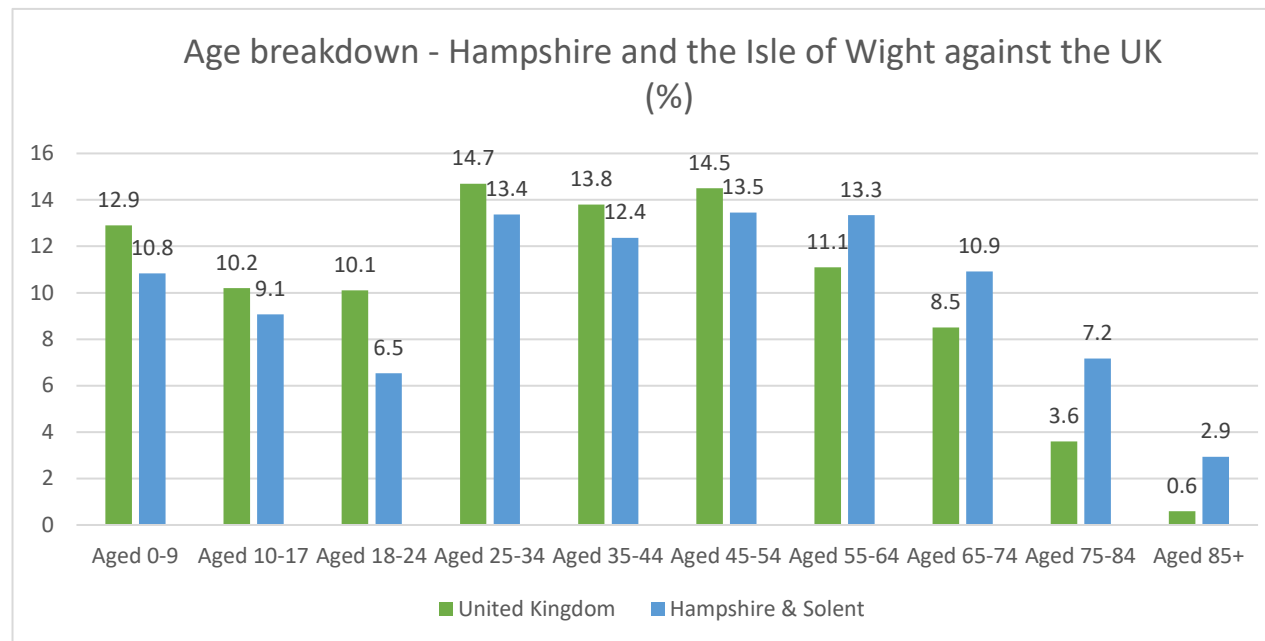
Those aged 75-85 and over make up a considerably larger proportion of the population, 7.2% compared 3.6% of the UK population. People aged 75 and over tend to be more reliant on council services than most of their younger counterparts.

Those aged 25-54 are represented relatively similarly in Hampshire and the Isle of Wight compared to the UK, though they make up a smaller portion of the population in Hampshire and the Isle of Wight – 39.3% compared to 43.0% in the UK.

Young people, between birth and aged 24 make up 26.4% of Hampshire and the Isle of Wight's population, compared to 33.2% of the UK's population. Those aged 18-24 are particularly underrepresented when compared to the national figures, 6.5% compared to 10.1% in the UK. However, this is similar to other, more rural areas, which consistently see people aged 18-24 leave for more urban settings.

2.1.2 District and Unitary Analysis

Hampshire and the Isle of Wight contains large areas of rurality, alongside smaller towns and more urban areas, so the districts that currently make up Hampshire and the Isle of Wight are very varied in their age profiles. The city unitaries of Southampton and Portsmouth, and the borough of Rushmoor have notably younger populations (aged 34 and under). The coastal borough of Fareham and the Isle of Wight have older populations (aged 55 and over). Winchester and Test Valley have incredibly similar age profiles; the largest difference is between those aged 25-34, 12.7% of the population of Winchester and 11.6% of the population of Test Valley. Basingstoke and Deane and Eastleigh also have similar age profiles, with the largest difference being between those aged 45-54, 13.8% in Eastleigh and 14.8% in Basingstoke and Dean.



Children and young people (aged 0-17 years)

19.9% of Hampshire and the Isle of Wight's population is aged 17 or under. Using this as a base figure, Eastleigh with a 0-17 population of 19.9%, Hart with 22.2%, Rushmoor with 25.8% and Test Valley at 20.3% have the largest proportion of children and young adults. The boroughs of Basingstoke and Dean 19.5, and Winchester 19.6%, both home to large towns also have a large population of children and young people, at 19.5%

and 19.6% respectively. Meanwhile, the populations of the city unitaries of Portsmouth and Southampton consist of 17.6% and 18.1% 0–17-year-olds respectively.

Young adults (aged 18-34)

20.1% of Hampshire and the Isle of Wight's population is aged 18-34. Young adults tend to leave more rural areas for urban areas in search of job opportunities and appropriate housing. Rushmoor has the largest percentage of young adults at 29.6%, likely in part due to its status as a Garrison town. The populations of Basingstoke and Winchester consist of 20.4% and 21.0% people aged 18-34 respectively. 28.1% of Southampton's population and 25.8% of Portsmouth's population are aged 18-34.

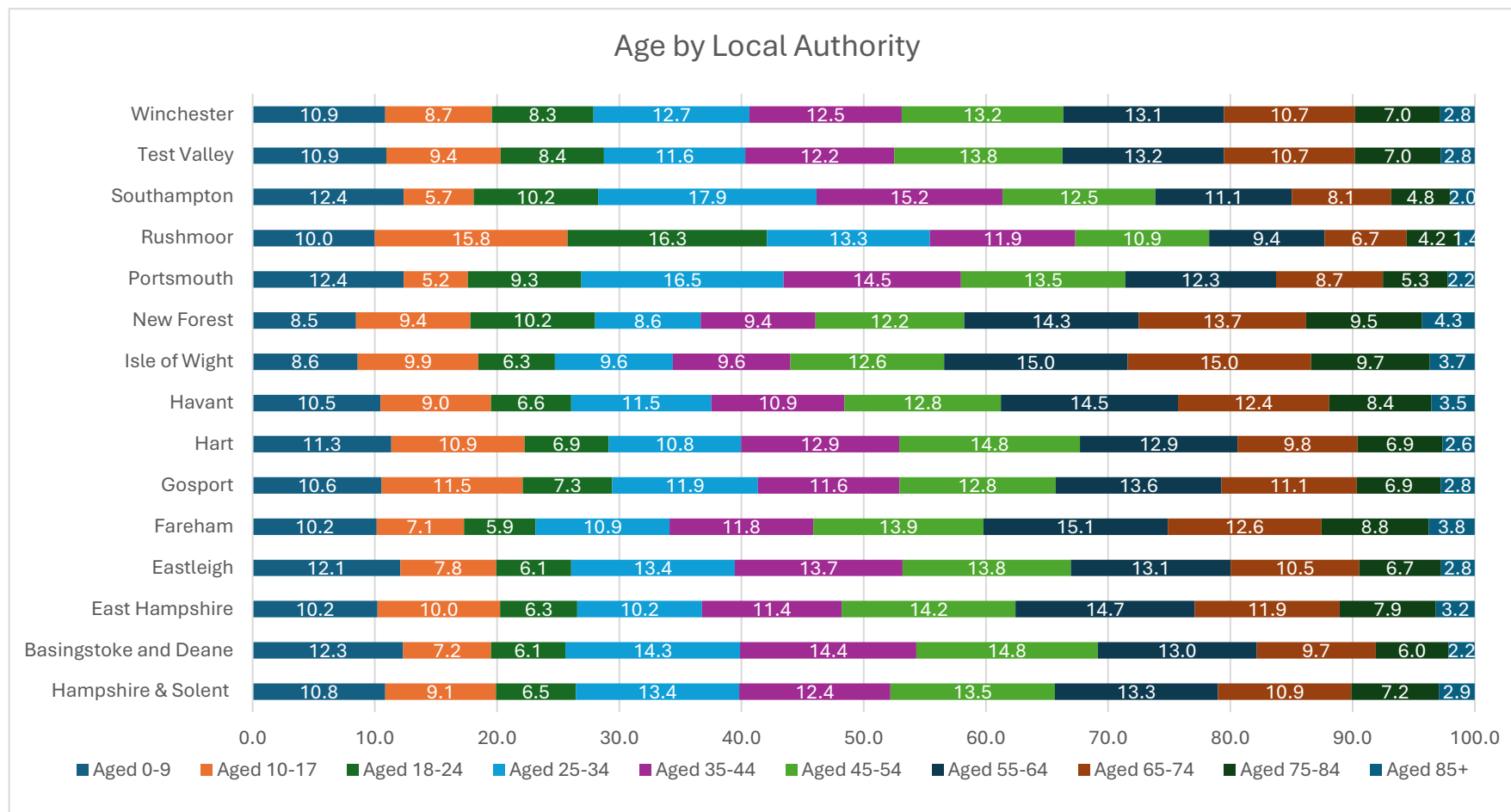
Adults (35-54)

25.9% of Hampshire and the Isle of Wight's population is aged 35-54. In Test Valley, where there is a mix of rural and more urban towns, 26.0% of the population are 35-54, just above the figure for Hampshire and the Isle of Wight. With its continuous urban area, 27.5% of Eastleigh's population is 35-54. Hart's population consists of 27.7% people aged 35-44, the figure for Basingstoke is 29.2%. As urban centres, both Southampton and Portsmouth have large 35-54 groups, at 27.7% and 28.0% respectively.

Older adults (aged 55-74)

24.2% of Hampshire and the Isle of Wight's population is aged 55-64. Six of the districts that currently make up mainland Hampshire have larger proportions of 55-64 than Hampshire and the Isle of Wight as a whole. The populations of the coastal boroughs of Gosport and Fareham contain 24.7% and 27.7% people aged 55-64 respectively. 26.9% of Havant's population, and 26.6% of East Hampshire's population are within this age bracket. The two areas home to the largest percentage of people aged 55-64 are New Forest at 28.0% and the Isle of Wight at 30.0%.

Elderly Adults (75+) 9.9% of the Isle of Wight's population is aged 75-85+. New Forest has the largest number of people aged 75+ at 13.8%, followed by the Isle of Wight at 13.4%. The bordering districts of Havant and East Hampshire consist of 11.9% and 11.1% of the population aged 75 and over. Finally, Fareham's population is 12.5% people aged 75+.



2.2 Community Impact- Age

Across Hampshire and the Isle of Wight, people engage with local authorities across different stages of their lives. This is often shaped by age, circumstances, and community context.

For older adults, key touchpoints include adult social care, housing support, health and wellbeing services, transport, and community safety. This is particularly true for those aged 75–85, who are likely to interact with a wide range of services — from waste management and housing to health and social care — and whose needs must be carefully considered when designing future services and their locations.

Working-age adults engage with services such as employment support, transport and infrastructure, housing, digital access, and family-related services. Those aged 25–54 often use a broad mix of services, including housing provision, business and employment support, highways and transport, and digital services. Many in this group are also parents, guardians, or carers, making children and young people’s services, adult social care, and education particularly relevant.

Young people interact with local authorities through education, youth services, early intervention and safeguarding, and community and leisure activities. For those aged 0–17, education and children’s services are central, while 18–24-year-olds may focus more on housing, employment support, and transitions into adulthood.

In addition to statutory services, access to cultural opportunities and green spaces plays a vital role in supporting wellbeing across all age groups. Hampshire and the Isle of Wight benefit from a rich cultural offer, including museums, heritage sites, and community events, as well as significant natural assets such as Queen Elizabeth Country Park, Itchen Valley Country Park, and many local parks and open spaces. Our proposed four new mainland and Isle of Wight unitary model enables each new authority to draw on a mix of urban and rural environments, helping to promote healthier lives and stronger communities. These assets contribute to physical and mental wellbeing, social connection, and a sense of place. All of which are essential to inclusive, age-responsive service delivery.

Our four new mainland and Isle of Wight unitary model offers a strong foundation for tailoring services to these life stages. By aligning governance with real economic and social geographies, the model supports more locally responsive service delivery, enabling authorities to better understand and meet the needs of residents at different ages. This includes supporting preventative approaches in adult social care, improving transitions for young people, and ensuring services are rooted in community identity.

In contrast, fewer or larger unitary authorities risk diluting these connections. Larger geographies may struggle to reflect the lived experiences of residents, particularly where age-related needs vary significantly between communities. Our four new mainland and Isle of Wight unitary model enables a more place-based approach, fostering collaboration between local partners and ensuring services remain accessible, relevant, and responsive across all age groups.

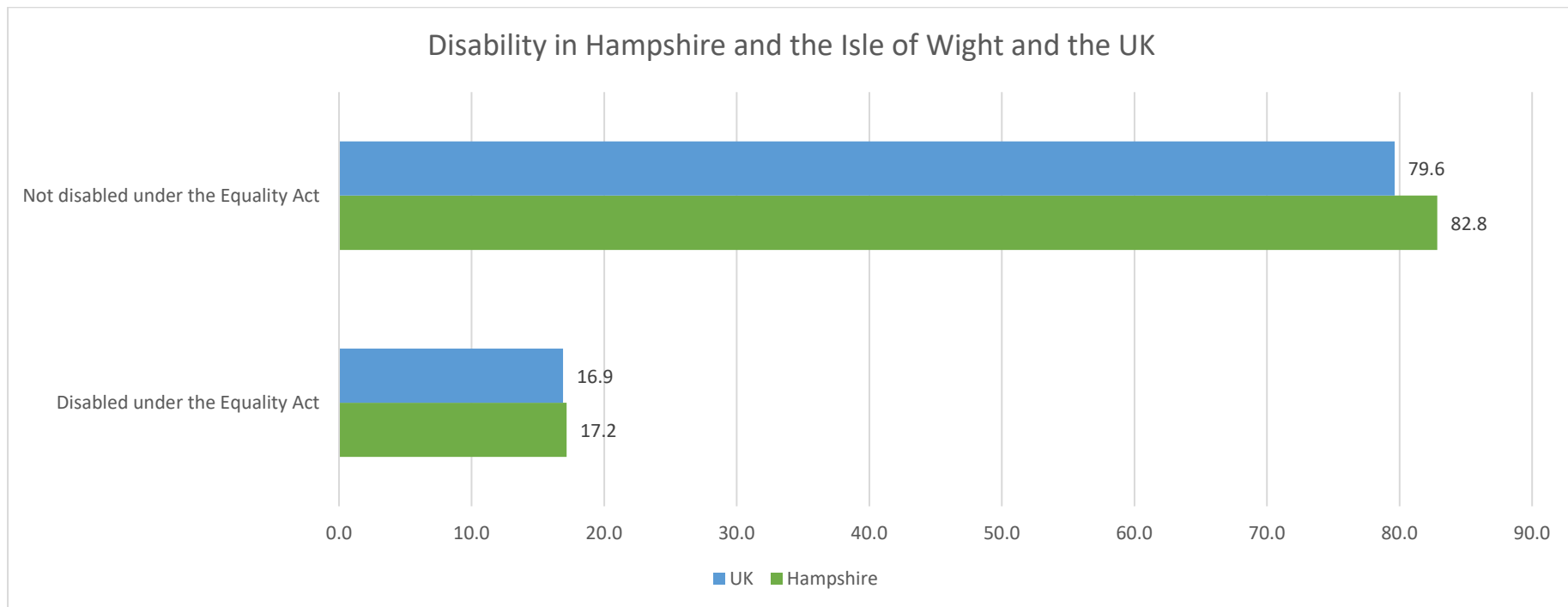
Positive Impacts
Localised Neighbourhood Service Delivery: Our four new mainland and Isle of Wight unitary model ensures that services are designed around how people live and work. Enabling services to be closer to where people live, which is especially important for older adults who may rely more on local networks or connections or struggle with access or transport. As well as enable continuity of care to build on existing community relationships. Alignment with NHS 10-year plan: The NHS 10-year plan prioritises prevention, integration and community resilience, all of which benefit older adults by reducing hospital admissions and promote independent living. This alignment between NHS, four new unitary authorities and local health systems, means existing well-functioning operation models can be built on. Especially in areas like Mid Hampshire where place-based care is already embedded. Balanced scale and proximity: Our four new mainland and Isle of Wight unitary model combines strategic capacity with closeness to communities, enabling services to be more person centred and reduces risk of over-centralisation of larger models
Negative Impacts
Transition planning must ensure continuity of care and workforce stability to avoid exacerbating existing gaps. Transitioning to a new structure may disrupt existing arrangements in adult social care and children’s services which could result in delays or inconsistencies in care and service delivery. Fragmentation: Although our four new mainland and Isle of Wight unitary model aims to reduce fragmentation, the transition from county-district arrangements could temporarily exacerbate gaps in service integration. Disruption in local relationships and informal networks: Even with place-based interventions, structural change can disrupt long-standing relationships between older residents and local service providers. Which could result in a loss of trust or familiarity which in turn could reduce engagement during transition.

3. Disability

3.1 Data Analysis

3.1.1 Hampshire and the Isle of Wight Analysis

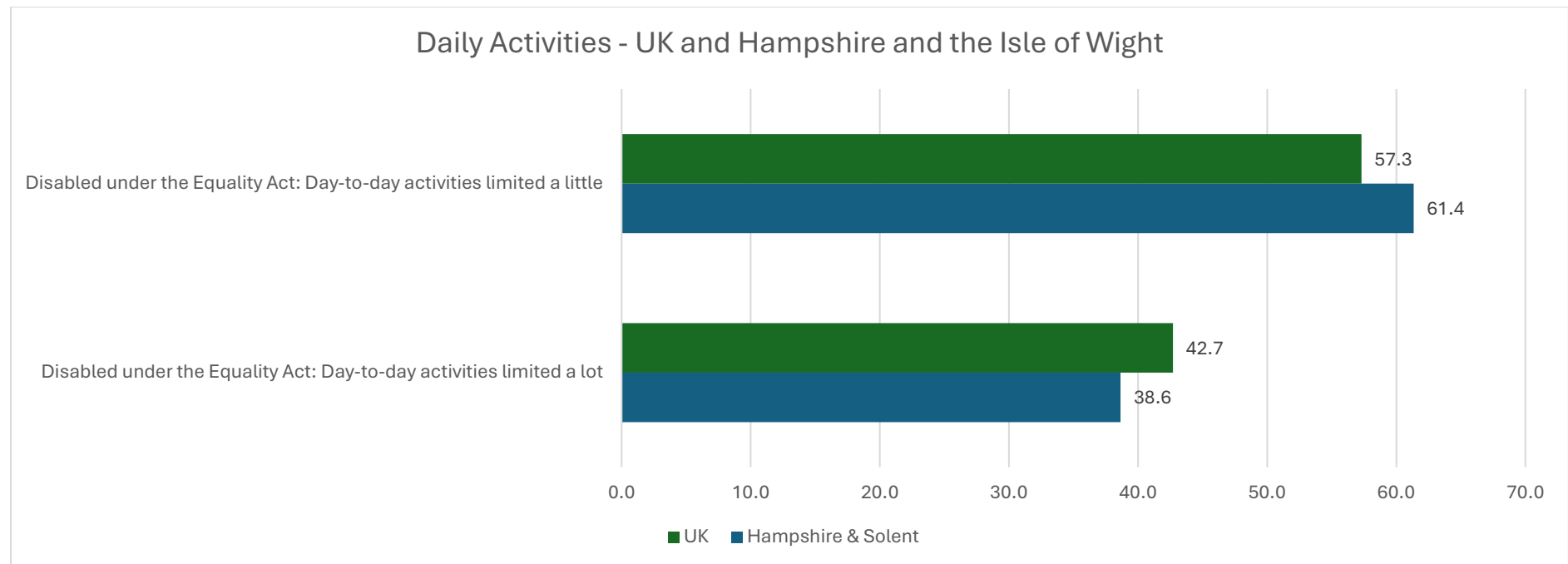
At the time of the 2021 Census, 17.2% of the population of Hampshire and the Isle of Wight identified themselves as disabled under the 2010 Equality Act. The equivalent figure for the UK is 16.90%, and 17.3% for England. While on the surface, these figures are similar, the day-to-day impact people experience, and often the types of support required, varies.



Daily Activities

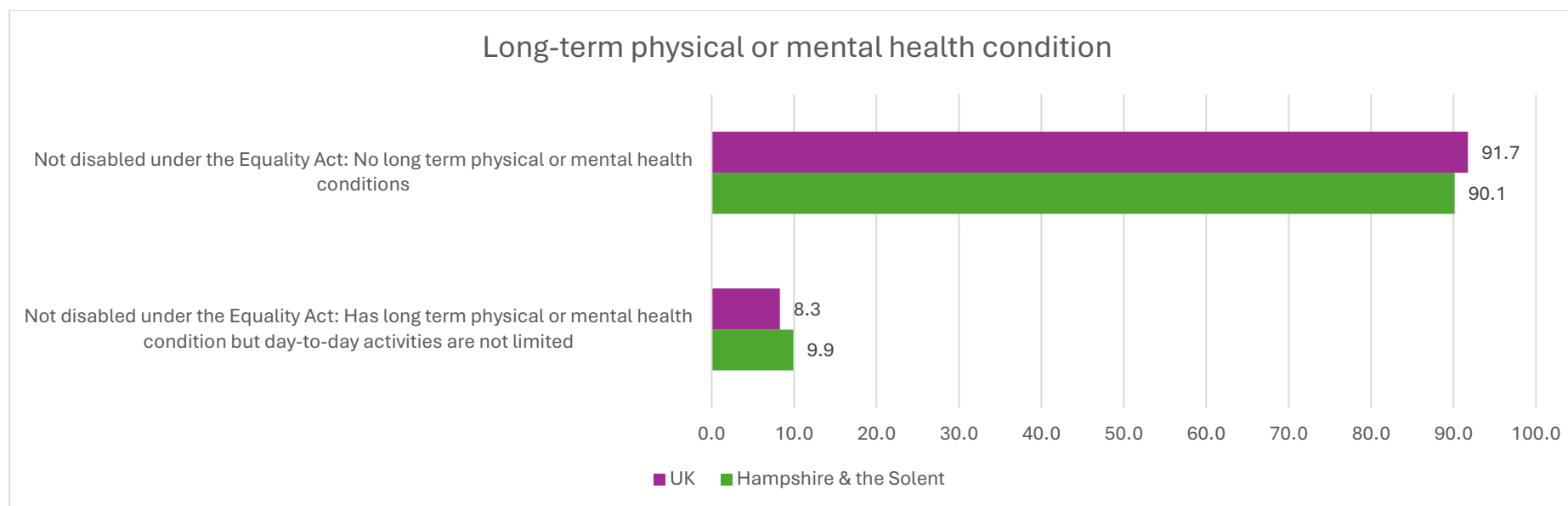
Of the population in Hampshire and the Isle of Wight who are disabled, 61.4% said that their disability impacts their daily activities a little, the equivalent figure for the UK is 57.3%. Comparatively, across the UK, people who are disabled experience more limitations when going about daily activities – 42.7%, compared to 38.6% in Hampshire and the Isle of Wight. Overall, disabled people in Hampshire and the Solent experience less impact on their daily activities than the disabled population in the UK more widely.

While this data is useful, it should be noted that in the census, there is no description or example, making people's answers entirely subjective.



Long-term conditions

Of the population who are not disabled under the Equality Act, some recorded a long term physical or mental health condition which does not limit their daily activities. In Hampshire and the Isle of Wight, this group accounts for 9.9% of the population who aren't disabled, compared to 8.3% in the UK. While daily activities are not limited, this group may require more assistance from health and wellbeing services.

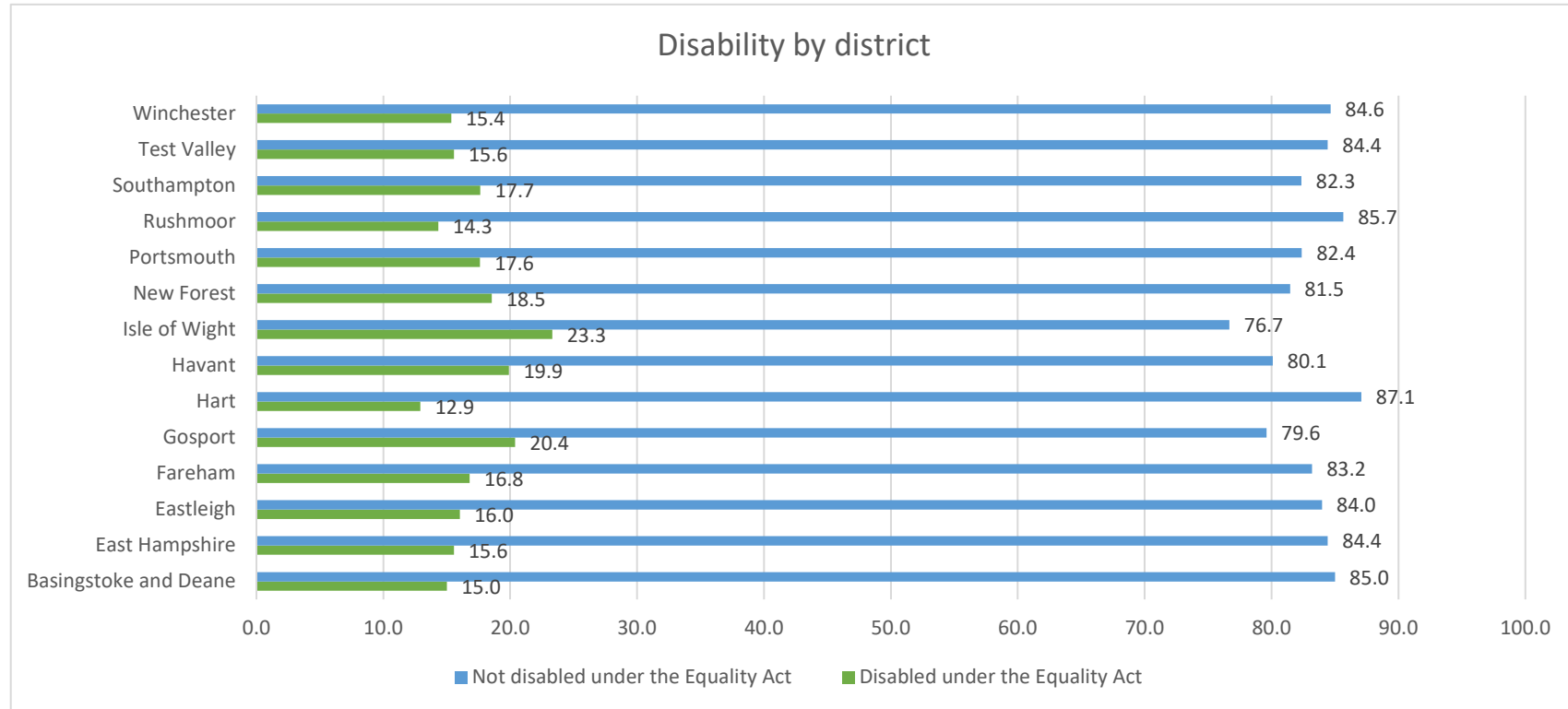


3.1.2 District and Unitary Analysis

The percentage of people who are disabled in each district varies massively, by over 10.0%. Six of the districts that currently make up Hampshire and the Isle of Wight have larger disabled populations than in Hampshire and the Isle of Wight, and the UK as a whole. Hart's disabled population is the lowest, at 12.9%, which equates to 12,850 people.

Seven of the districts sit between 14.0-17.0% of the population identifying as disabled. In Rushmoor, 14.3% of the population are disabled, this equates to 14,309 people. 15.0% of Basingstoke's population are disabled – 27,778 people, and 15.4% of Winchester's population are disabled –

19,566 people. Test Valley and East Hampshire's populations consist of 15.6%, or 20,316 and 19,579 disabled people respectfully. In Eastleigh, 16.0% of the population, 21,869 are disabled, and 16.8% of Fareham's population are disabled – 19,252 people.



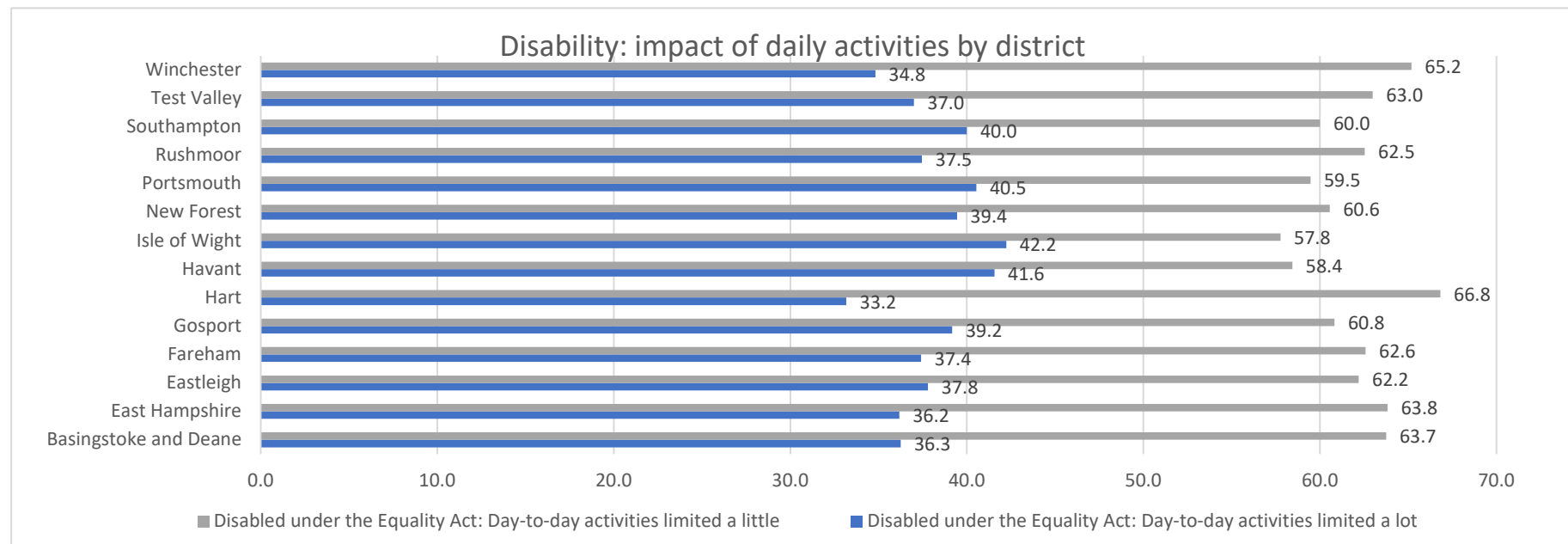
Areas with slightly higher percentages of disabled people include the city unitaries of Southampton (17.7%) and Portsmouth (17.6%), equating to 43,937 and 36,648 people respectively and the New Forest, where 19.9% of the population, or 32,591 are disabled.

The coastal communities of Gosport and Havant, both of which have older age profiles than the majority of the other districts, have higher percentages of disabled people. 19.9% of Gosport's population (16,714 people) and 20.4% of Havant's population (24,718 people) are disabled.

The Isle of Wight has the highest disabled population, at 23.3%, which equates to 32,755. While this raw figure is similar to the number of people with disabilities in the New Forest, Southampton, and Portsmouth, each area is distinct, with its own geographical challenges and community networks.

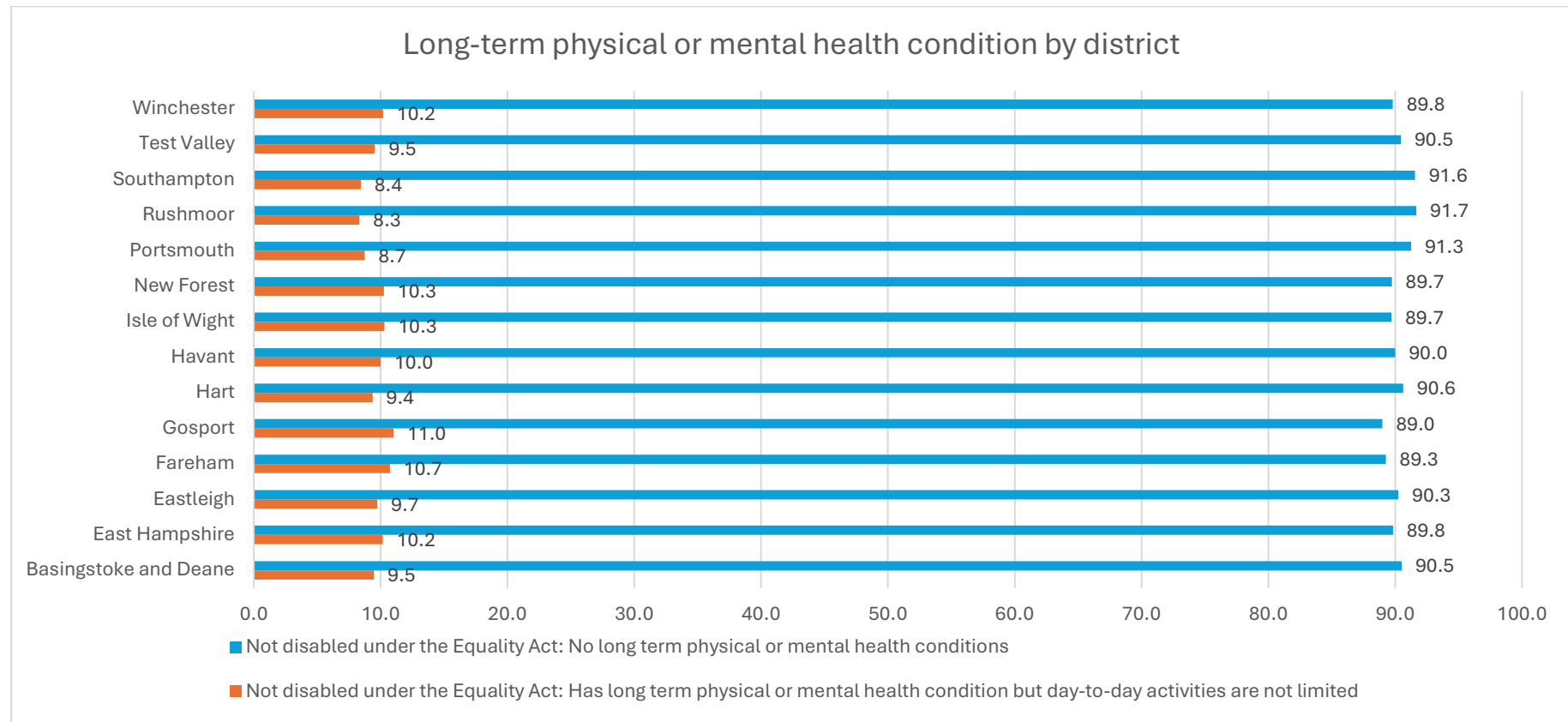
Daily Activities

The impact disabilities can have on people's daily lives and activities is, in this case broadly similar to the disabled populations. Hart, which has the lowest population of disabled people, has the lowest percentage of people whose disability impact their daily activities a lot. The Isle of Wight, which has the largest disabled population in the area has the highest percentage of people whose disability impact their daily activities a lot. With the exception of the Isle of Wight, all of Hampshire and the Isle of Wight has a lower percentage of people whose daily activities are limited a lot than the UK as a whole. Meanwhile eight of the districts have a lower percentage of people whose daily activities are limited a lot than Hampshire and the Isle of Wight.



Long term conditions

The highest percentage of those who are not disabled but do have a long term physical or mental health condition is in Gosport where the figure is 11.0%. All of Hampshire and the Isle of Wight have a higher percentage of people with a long term physical or mental health condition than the UK (at 8.3%), with the exception of Rushmoor, which has the same percentage of 8.3%.



3.2 Community Impact- Disability

Individuals with disabilities may engage with local authorities through a wide range of services, including those that support independence, wellbeing, and inclusion. These touchpoints often include adult social care, housing adaptations, transport and mobility support, education and SEND provision, employment services, and digital accessibility. Local authorities also play a vital role in coordinating with health and voluntary sector partners to ensure joined-up, person-centred support.

Our four new mainland and Isle of Wight unitary model offers an opportunity to strengthen these connections by embedding services within local communities and aligning delivery with the way people live. This approach enables more responsive and inclusive service design, ensuring that the diverse needs of disabled residents are understood and met at a local level. It also supports the development of integrated, community-based delivery models that can better respond to complex needs and reduce reliance on crisis interventions.

In contrast, fewer or larger unitary authorities risk creating more distant and standardised service models, which may overlook local variation in need and reduce opportunities for co-production with disabled residents and their representative groups. This could also reduce opportunities for coproduction and weaken visibility of specific challenges.

Our four new mainland and Isle of Wight unitary model's emphasis on collaborative working, local representation and community engagement helps mitigate these risks by ensuring services are shaped by those who use them. It also supports investment through transformation, digital inclusion and workforce development. All of which are essential to delivering high-quality, person-centred support for residents with disabilities.

Positive Impacts

More responsive, localised service design: Embedding services within communities allows for better understanding of local needs and lived experiences of disabled residents. Services such as housing adaptations, mobility support and adult social care can be tailored more effectively to localised contexts.

Improved accessibility through place-based planning: Our four new mainland and Isle of Wight unitary model enables authorities to better understand the physical and digital accessibility of local infrastructure and service design. Which in turn enhances inclusion in public life for disabled residents.

Stronger integration with health and voluntary sector partners: Our four new mainland and Isle of Wight unitary model supports joined up, person centred care through closer collaboration between Councils, health partners and community organisations. Reducing duplication and improving continuity of care.

Negative Impacts
Risk of disruption during transition: Reorganisation may temporarily disrupt services which could result in delays or confusion in accessing support for disabled residents. Loss of specialist expertise and relationships: If not carefully managed, the transition could lead to temporary fragmentation of specialist teams with localised knowledge and relationships. Which could impact the quality of support for individuals with a disability or complex needs. A digital first approach may exclude some residents who struggle to use or access technology. Without robust offline alternatives and inclusive design, digital self-service could become a barrier for disabled residents.

4. Gender reassignment

4.1 Data Analysis

4.1.1 Hampshire and the Isle of Wight Analysis

The below data on gender identity is taken from the 2021 census. The Office for National Statistics notes that they are ‘statistics in development’, as the first time the census featured questions on gender identity was 2021.

95.0% of Hampshire and the Isle of Wight area’s population gender identity is the same as the sex they were assigned at birth. This is lower than in the UK, where the figure is 93.5%. 4.6% of people in Hampshire and the Isle of Wight did not answer this question, meaning 0.4% of people have a gender identity different to the sex they were assigned at birth, compared to 0.8% in the UK. Of this 0.4%, 0.1% had a gender identity different to the sex they were assigned at birth. 0.2% were transgender (0.1% were trans women, 0.1% were trans men) and 0.1% had other gender identities, such as non-binary.

Area	Gender identity the same as sex assigned at birth (%)	Gender identity different from sex assigned at birth but no specific identity given (%)	Transgender (Trans man or Trans woman) (%)	All other gender identities (including non-binary)	Not answered
Hampshire and the Isle of Wight	95.0	0.1	0.2	0.1	4.6
UK	93.5	0.2	0.5	0.1	6.0

4.1.2 District and Unitary Analysis

People aged 18-24 are more likely to report that their gender identity is different from the sex they were assigned at birth. Hampshire and the Isle of Wight broadly follows this national trend, as the areas with the youngest age profiles have the highest percentage of people whose gender identity is different from the sex they were assigned at birth. Southampton is the highest, with 0.9% of people having a gender identity different to the sex they were assigned at birth. The figure for Rushmoor is 0.7%, and for Portsmouth, 0.6%. For eleven areas, 0.4% of the population has a different gender identity than sex assigned at birth, and in the New Forest, the figure is 0.3%.

Area	Gender identity the same as sex assigned at birth (%)	Gender identity different from sex assigned at birth but no specific identity given (%)	Transgender (Trans man or Trans woman) (%)	All other gender identities (including non-binary)	Not answered
Portsmouth	93.1	0.2	0.2	0.2	6.2
Southampton	92.3	0.3	0.4	0.2	6.9
Isle of Wight	93.6	0.1	0.2	0.1	6.0
Basingstoke and Deane	95.1	0.1	0.2	0.1	4.5
East Hampshire	95.0	0.1	0.2	0.1	4.7
Eastleigh	95.5	0.1	0.2	0.1	4.2
Fareham	95.4	0.1	0.2	0.1	4.3
Gosport	95.4	0.1	0.2	0.1	4.2
Hart	95.8	0.1	0.2	0.1	4.0

Havant	94.9	0.1	0.2	0.1	4.7
New Forest	94.7	0.1	0.2	0.1	5.1
Rushmoor	93.9	0.4	0.2	0.1	5.3
Test Valley	95.0	0.1	0.2	0.1	4.7
Winchester	94.8	0.1	0.2	0.1	4.8

4.2 Community Impact- Gender Reassignment

Individuals undergoing or having undergone gender reassignment may engage with local authorities through a range of services where inclusion, privacy, and respectful treatment are essential. These touchpoints may include housing, community safety, health and wellbeing services, and access to inclusive digital platforms. Local authorities also play a vital role in fostering inclusive environments through staff training, service design, and community engagement.

Our four new mainland and Isle of Wight unitary model offers an opportunity to strengthen these approaches by embedding inclusive practices at a local level. More locally connected authorities are better placed to build trusted relationships, respond to community-specific needs and codesign services with trans and non-binary residents and respective organisations. This place-based approach supports visibility, dignity and responsiveness in everyday service delivery.

In contrast, fewer or larger unitary authorities may struggle to maintain visibility and responsiveness, particularly for communities whose needs may be less prominent within broader structures. A place-based approach supports meaningful engagement and ensures that inclusion is not only embedded in policy but reflected in everyday service delivery.

Positive Impacts

More localised and inclusive service design: Our four new mainland and Isle of Wight unitary model means authorities are better positioned to embed inclusive practices in everyday service delivery and designed with greater sensitivity to privacy, dignity and respectful treatment.

Stronger relationships and trust: Localised governance fosters closer relationships between authorities and communities, enabling more meaningful engagement with trans and non-binary residents. Building trust may encourage individuals to seek support earlier with less fear of discrimination or misunderstanding.

Enhanced visibility and responsiveness: Our four new mainland and Isle of Wight unitary model allows for more tailored approaches that reflect local demographics and need. Ensuring that the needs of trans individuals are not lost within broader, standardised service models.

Negative Impacts

Transition planning must ensure continuity of care and workforce stability to avoid exacerbating existing gaps. Transitioning to a new structure may disrupt existing arrangements in adult social care and children's services which could result in delays or inconsistencies in care and service delivery.

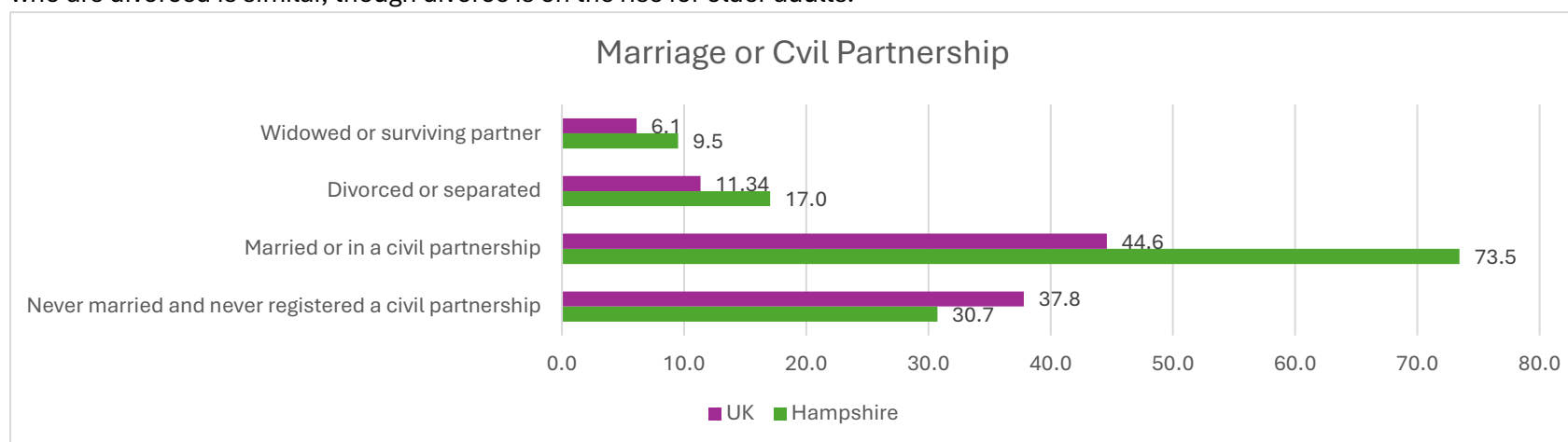
Fragmentation: Although our four new mainland and Isle of Wight unitary model aims to reduce fragmentation, the transition from county-district arrangements could temporarily exacerbate gaps in service integration.

5. Marriage and Civil Partnership

5.1 Data Analysis

5.1.1 Hampshire and the Isle of Wight Analysis

In Hampshire and the Isle of Wight, 73.5% of the population aged 18 and over are married or in a civil partnership, compared to 44.6% of the UK's population. In the UK, the proportion of adults who are not married has been rising since 1991 across all age groups, and the percentage of people who are divorced is similar, though divorce is on the rise for older adults.

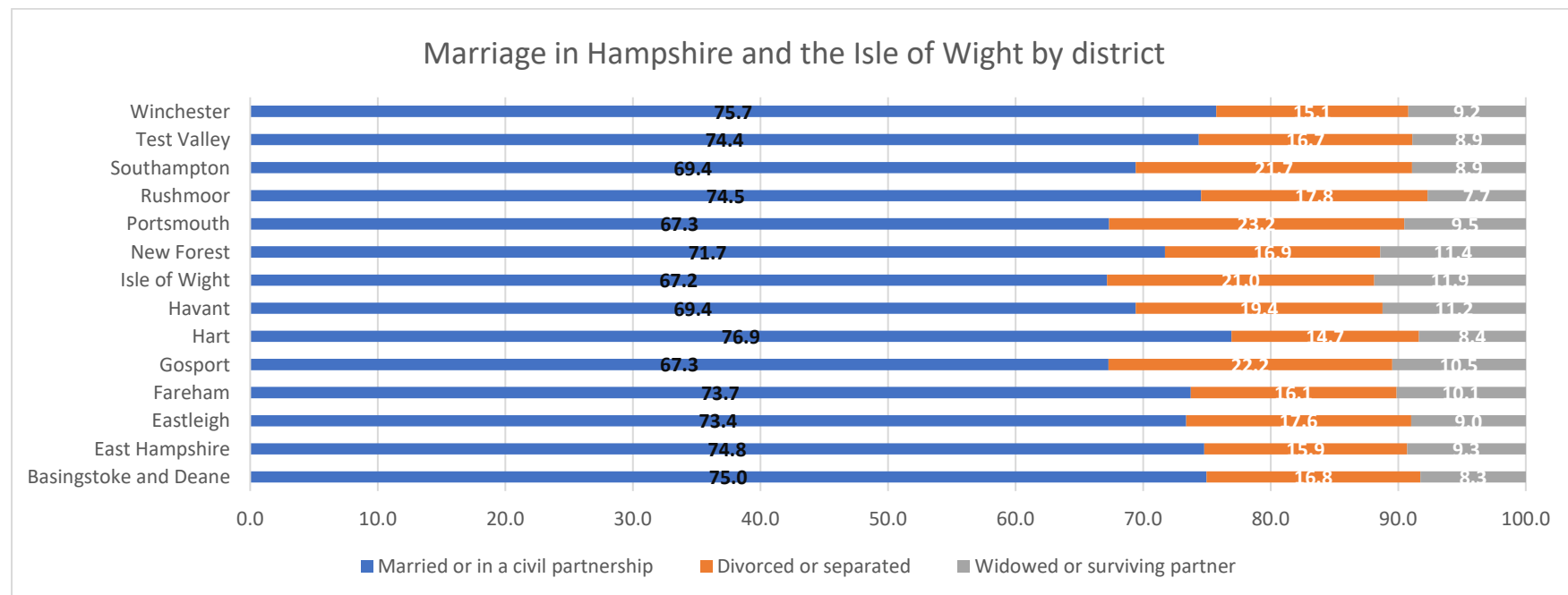


Perhaps due to the older age profile of Hampshire and the Isle of Wight as well as the high percentage of marriages, the percentage of divorces or separations is higher than the UK – 17.0% compared to 11.3% in the UK. Additionally, the percentage of people who are widowed, or the surviving partner is higher – 9.5% in Hampshire and the Isle of Wight and 6.1% in the UK.

5.1.2 District and Unitary Analysis

All of the districts that currently make up Hampshire and the Isle of Wight have a higher percentage of people who are married or in a civil partnership than the UK. Hart has the highest percentage at 76.9%, followed by Winchester at 75.7% and the Solent has the lowest percentage at 67.2%.

Portsmouth has the highest percentage of divorced or separated people at 23.3%, followed by Gosport at 22.2% and Hart has the lowest at 14.7%. The Isle of Wight has the highest percentage of widows or surviving partners at 11.9%, followed by the New Forest at 11.4% and Rushmoor has the lowest at 7.7%.



5.2 Community Impact- Marriage and civil partnership

Individuals who are married or in a civil partnership may engage with local authorities through a range of services that support family life and household stability. These touchpoints can include housing services, council tax and benefits, registration services, and access to family support or mediation. While this characteristic may not always result in distinct service needs, it remains important that services are delivered in a way that recognises and respects diverse family structures.

Our four new mainland and Isle of Wight unitary model offers an opportunity to strengthen this approach by enabling more locally responsive and inclusive service delivery. By aligning governance with established community and economic geographies, councils will be better placed to understand and reflect the needs of residents who are married or in a civil partnership and throughout different stages of life. The model also supports enhanced neighbourhood working, enabling decision-making at the lowest effective level and fostering more personalised engagement with residents. Through tailored governance and leadership, councils can develop strategies that reflect the unique social and economic contexts of their areas, improving outcomes for people in marriages and civil partnerships.

In contrast, fewer or larger authorities may risk standardising services in ways that overlook the nuances of relationship diversity. Larger, less locally connected structures could dilute community identity and reduce opportunities for personalised support, particularly in areas with distinct cultural and demographic profiles. This could impact the visibility of different relationship arrangements and limit the ability of councils to respond to specific needs. Such as housing for older couples, support for same sex partnerships or when navigating complex life events.

Our four new mainland and Isle of Wight unitary model's emphasis on collaborative working, local representation and community engagement helps mitigate these risks by embedding services within communities and ensuring they are shaped by lived experience.

Positive Impacts
Enhanced neighbourhood working: Decision making at the lowest effective level allows councils to engage more personally with residents in marriage or civil partnerships. Supporting nuanced service design and delivery which may be particularly beneficial for those navigating complex life events that may involve multiple services support. Tailored governance and leadership: Councils can develop strategies that reflect the unique social and economic contexts of their areas, in ways which are reflective of how people live their lives. Improving outcomes across different life stages e.g. young adults forming households to older couples requiring care or support.
Negative Impacts

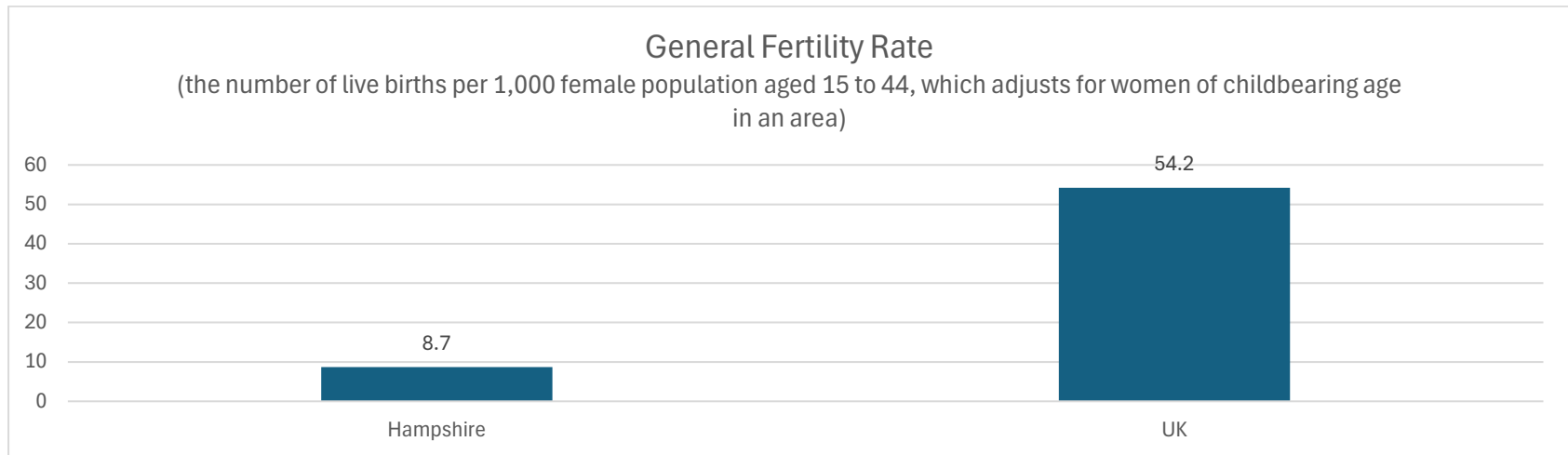
Complexity during transition: The shift to new local authorities may temporarily disrupt services that support household stability, such as benefits processing, housing allocation or registration services. Particularly if systems and staff structures are being reorganised.

6. Pregnancy and maternity

6.1 Data Analysis

6.1.1 Hampshire and the Isle of Wight Analysis

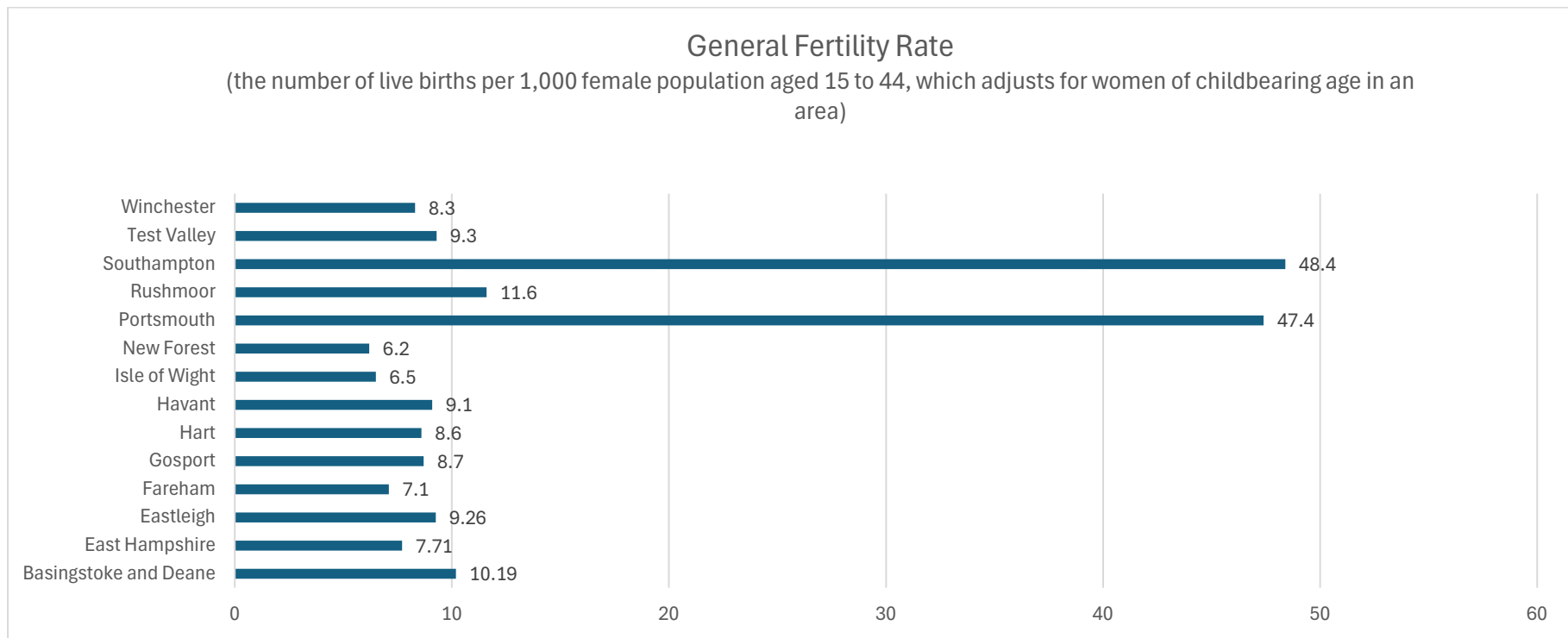
The UK census does not directly ask any questions on pregnancy, so for this data analysis, the general fertility rate (GFR) will be used, taken from the Joint Strategic Needs Assessments for Hampshire and Isle of Wight, Portsmouth, and Southampton. The GFR is the number of live births per 1,000 of the female population aged 15-44, as this age bracket is considered to be 'childbearing age'. In Hampshire and the Isle of Wight, the GFR is 8.7, considerably lower than the GFR for the UK, which is 54.2. This is likely due to the older age profile of Hampshire and the Isle of Wight, as well as national pressures such as the cost of living.



² GFR rates are taken from the Joint Strategic Needs Assessments for Hampshire and the Isle of Wight, Portsmouth and Southampton available here:
Hampshire: [Microsoft Power BI](#)

6.1.2 District and Unitary Analysis

At the local level, GFR varies greatly. In the cities of Southampton and Portsmouth, the GFR is much closer to the national figure – 48.4 for Southampton and 47.4 for Portsmouth. Rushmoor, with a comparatively younger age profile than Hampshire and the Isle of Wight overall has the GFR of 11.6 and Basingstoke and Dean, with the large town of Basingstoke has the GRF of 11.16. Six of the districts have a GFR between 8.3 and 9.3, they are: Winchester (8.3), Hart (8.6), Gosport (8.7) Havant (9.1), Eastleigh (9.26), and Test Valley (9.3). The four districts with the lowest GFR are East Hampshire (7.71), Fareham (7.1), the Isle of Wight (6.5) and the New Forest with a GFR of 6.2.



Southampton: <https://data.southampton.gov.uk/population/births/>

Portsmouth: [Portsmouth births - JSNA report - Portsmouth City Council](#)

6.2 Community Impact- pregnancy and maternity

Pregnancy and maternity represent key life stages where individuals may engage with a range of local authority services. These touchpoints often include access to housing and benefits support, early years and childcare provision, public health services, and community-based support networks. Local authorities also play a role in coordinating with health partners to ensure wraparound care and safeguarding for both parent and child.

Our four new mainland and Isle of Wight unitary model offers an opportunity to strengthen support for pregnant individuals and new parents by embedding services within communities and aligning delivery with how people live. This place-based approach enables more responsive and inclusive service design tailored to local demographic. As well as improved coordination across services (such as housing, early years and social care), where current challenges can be exacerbated for those also experiencing deprivation, rural isolation or complex needs. It also created the opportunity for stronger relationships with community organisations, which are often key in supporting families during pregnancy and early parenthood.

In contrast, a model with three or fewer mainland authorities' risks creating larger, less connected structures that may dilute visibility of local needs. Standardised service models could overlook the nuances of pregnancy and maternity. Particularly in areas with distinct cultural, economic and geographic profiles. Our four new mainland and Isle of Wight unitary model's emphasis on local representation, neighbourhood working, and collaborative leadership helps ensure that services are shaped by lived experience and delivered in ways that promote dignity, continuity, and inclusion at a critical life stage.

Positive Impacts
Enhanced coordination between services: Our four new mainland and Isle of Wight unitary model allows for closer alignment with local NHS trusts and boundaries, which supports more integrated and wraparound care and support.
Improved responsiveness to local needs: Authorities aligned to the way people live their lives with clearer geographic and demographic focus, may be more agile in responding to local emerging issues. Localised data can inform targeted interventions that may support (for example) young parents, or pregnant people experiencing homelessness.
Stronger community-based support networks: Embedding services within communities enabled councils to strengthen relationships with voluntary and community organisations that support families, improving access to informal and preventative support.
Negative Impacts

Disruption during transition: Structural change may temporarily disrupt existing arrangements in adult social care, children’s services and early years provision. This could result in delays or inconsistencies in care, particularly for families navigating multiple services.

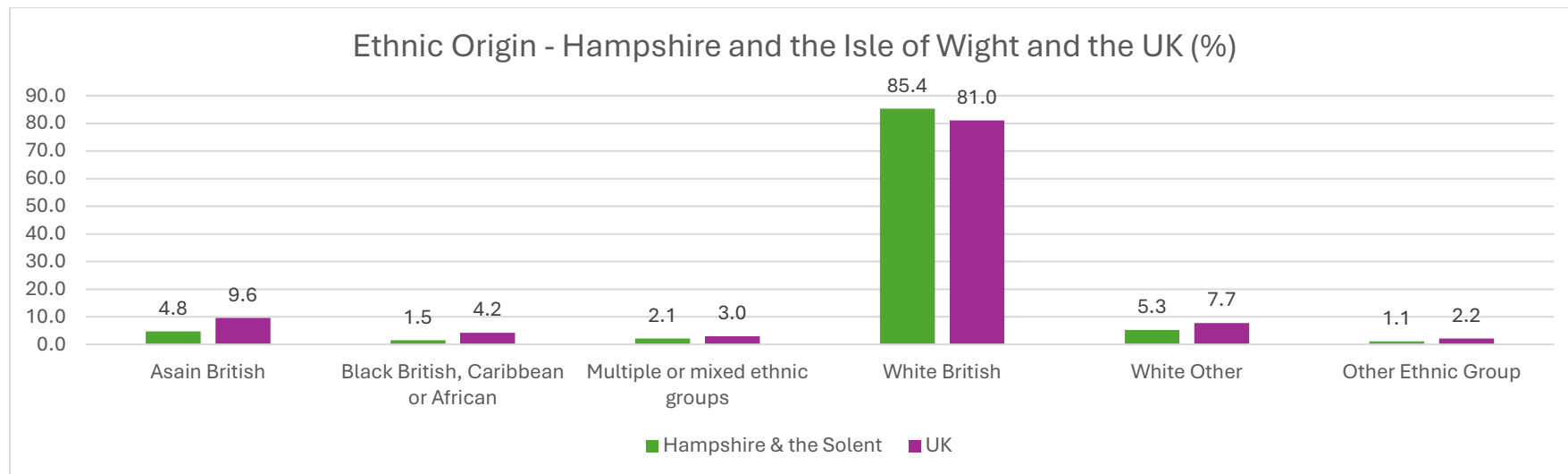
Disruption to informal or trusted relationships: Structural change can disrupt long standing relationships between individuals and service providers which could reduce engagement, particularly among vulnerable or marginalised groups who rely on trusted contacts.

7. Ethnicity

7.1 Data Analysis

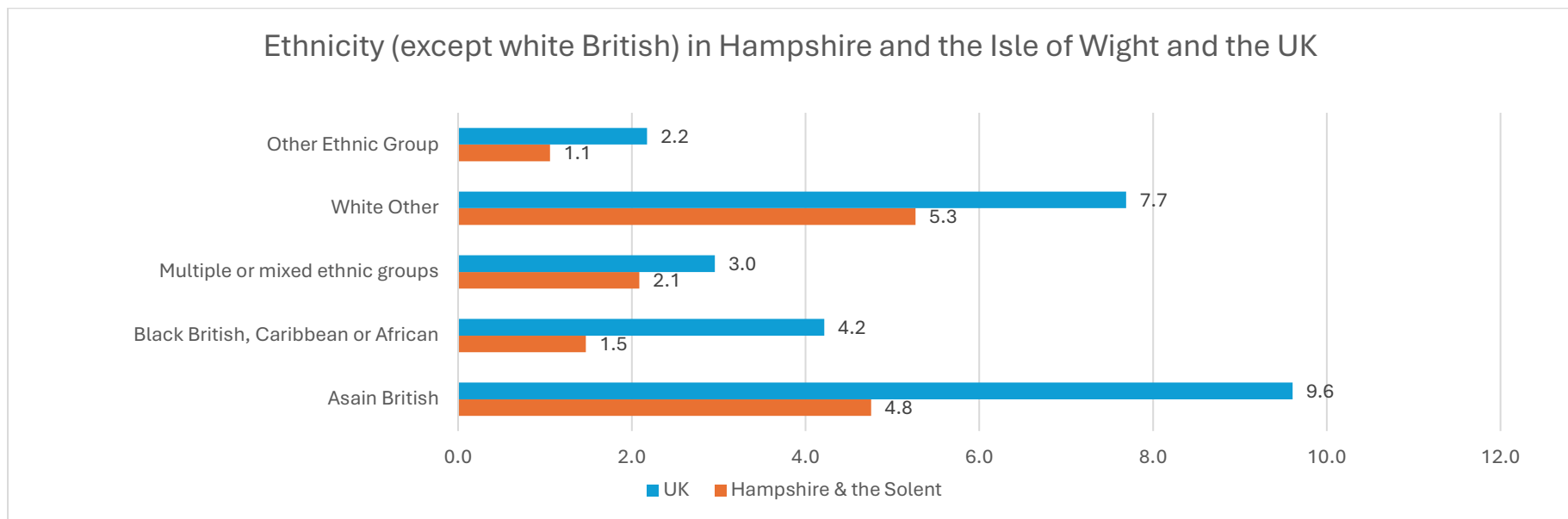
7.1.1 Hampshire and the Isle of Wight Analysis

As with the UK, the most common ethnicity for residents in Hampshire and the Isle of Wight is white. In this data analysis, white has been separated into white British and white other. This is because white other includes people who are Gypsy, Roma and/or Traveller, a group which are often disadvantaged. In Hampshire and the Isle of Wight, 85.4% of the population is white British, and 5.3% are white other. The population of the UK is slightly more diverse, with 81.0% identifying as white British, and 7.7% are white other.



The next most populous group in Hampshire and the Isle of Wight is Asian British, at 4.8% of the population, the same is true for the UK, where the figure is 9.6%. Black British, Caribbean, or African people make up 1.5% of Hampshire and the Isle of Wight's population and 4.2% of the UK's population. People who have multiple or mixed ethnic groups make up 2.1% of the population in Hampshire and the Isle of Wight, compared to 3.0% in the UK, and other ethnic groups make up 1.1% of Hampshire and the Isle of Wight's population, compared to 2.2% in the UK.

The graph below shows the ethnicities of people in the UK and Hampshire and the Isle of Wight, without white British, for a clearer comparison. In Hampshire and the Isle of Wight, with the exception of white British, the most common ethnicity is white other at 7.7%, in the UK it's Asian British at 9.6%.



7.1.2 District Analysis

As with Hampshire and the Isle of Wight as a whole, within the districts the most common ethnicity is white British, though the percentage of the population varies. The Isle of Wight has the largest percentage of white British people at 94.4%, followed by the New Forest at 93.7%. The city of Southampton has the lowest percentage of white British people at 68.7%, preceded by Rushmoor with 71.7% white British. Twelve of the districts share white other as their second most populous group, though in Basingstoke and Deane white other makes up the same percentage as Asian or

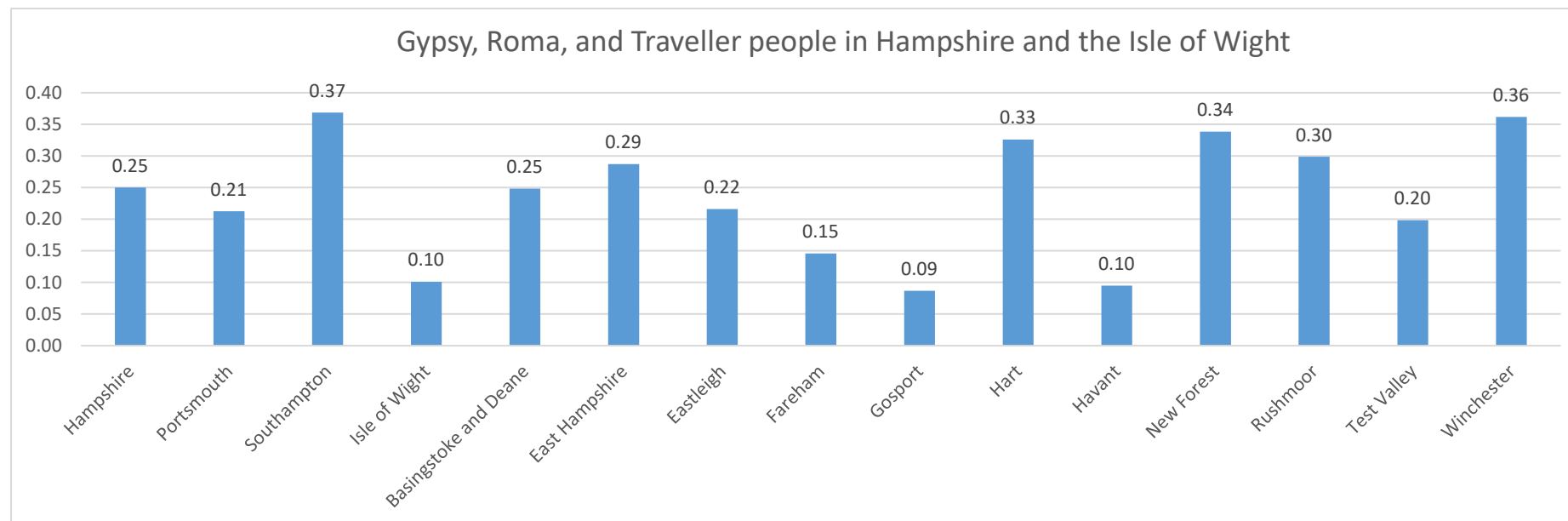
Asian British at 5.9%. In Eastleigh and Rushmoor, the second largest ethnic group is Asian or Asian British, accounting for 3.9% of Eastleigh's population and 14.7% of Rushmoor's.

Other ethnic groups account for the smallest amount of the population in twelve of the districts, though in East Hampshire, Hart, the Isle of Wight and the New Forest Black, Black British, Caribbean or African people share the same percentage as other ethnic groups. In Rushmoor and Winchester, Black, Black British, Caribbean or African people account for the smallest percentage of the population – 0.6% in Winchester and 2.5% in Rushmoor.

Key	Largest group	Second largest group	Smallest Group			
AREA	Asian or Asian British (%)	Black, Black British, Caribbean, or African (%)	Mixed or Multiple ethnic groups (%)	White British (%)	White Other (%)	Other ethnic group (%)
Basingstoke and Deane	5.9	2.0	2.5	82.6	5.9	1.1
East Hampshire	1.9	0.5	1.7	91.1	4.3	0.5
Eastleigh	3.9	1	2.1	88.6	3.8	0.7
Fareham	1.8	0.6	1.5	93.2	2.4	0.4
Gosport	1.4	1.2	1.5	92.8	2.5	0.5
Hart	3.6	0.8	2.2	87.7	4.8	0.8
Havant	1.7	0.6	1.4	93.6	2.3	0.4
Isle of Wight	1.2	0.3	1.2	94.4	2.6	0.3
New Forest	1.2	0.4	1.3	93.7	3.1	0.4
Portsmouth	6.9	3.4	2.6	78.2	7.0	1.8
Rushmoor	14.7	2.5	2.6	71.7	5.7	2.8
Southampton	10.6	3	3.3	68.7	11.9	2.3
Test Valley	3.3	1.1	1.8	88.5	4.6	0.8
Winchester	3.1	0.6	2.0	88.8	4.8	0.7

Gypsy, Roma, and Traveller (GRT) people

At the time of the 2021 census, 4,911 GRT people were recorded in Hampshire and the Isle of Wight accounting for 0.25% of the population. The needs and challenges of GRT people are unique. GRT people tend to have poorer health and as a result, lower life expectancies. GRT people are twice as likely to live in social rented accommodation and live in overcrowded conditions. Self-employment is more common among GRT people, as is provision of over 50 hour a week of unpaid care.



7.2 Community Impact- Ethnicity

Individuals from racially and ethnically diverse backgrounds engage with local authorities across a broad spectrum of services, including housing, education, health and wellbeing, community safety, and employment support. To ensure equitable outcomes, it is essential that these services are not only accessible but also culturally competent, inclusive, and responsive to the specific needs of diverse communities.

Local authorities have a critical role in fostering community cohesion, addressing racial discrimination, and ensuring meaningful representation in decision-making processes. This includes actively addressing structural inequalities and ensuring that engagement mechanisms are designed to reach and empower underrepresented groups.

Our four new mainland and Isle of Wight unitary model strengthens the ability to meet these responsibilities by enabling more locally informed service design and delivery. By aligning governance with established community and economic geographies, councils can better reflect the lived experiences of residents and tailor services to local demographic profiles. This supports targeted interventions, inclusive planning, and stronger partnerships with community-led organisations, many of which are best placed to build trust and deliver effective support.

The model also enhances local leadership and accountability, allowing each authority to develop bespoke strategies that reflect the cultural diversity and economic potential of their areas. This includes promoting inclusive regeneration, supporting diverse business communities, and ensuring that cultural and community assets are protected and celebrated.

In contrast, a model with three or fewer mainland authorities' risks diluting the visibility of ethnically diverse communities, particularly in areas where populations are smaller or more dispersed. Larger, less connected structures may lead to standardised service delivery that overlooks cultural nuance, reduces opportunities for co-design, and weakens local representation. This could result in poorer outcomes in areas such as education, health, housing, and economic inclusion.

Our four new mainland and Isle of Wight unitary model helps mitigate these risks by embedding services within communities, supporting inclusive engagement, and ensuring that diversity is recognised as a strength in shaping future governance and service delivery.

Positive Impacts

Greater responsiveness to diverse needs: Place-based authorities can better reflect the demographic makeup of their communities, allowing for more culturally competent service design and delivery. This is particularly beneficial in urban centres like Southampton and Portsmouth, which have higher proportions of racially and ethnically diverse residents.

Improved community engagement and representation: Our four new mainland and Isle of Wight unitary model will enable more targeted and inclusive engagement strategies, increasing visibility and voice of underrepresented groups in decision making. Due to the place-based nature of the authorities, the most appropriate methods can be used to engage with communities, addressing barriers like rurality or isolation.

Stronger partnerships: Authorities which are more connected to their local populations supports collaboration with grassroots and culturally specific organisations that are trusted within communities and can deliver effective, targeted support.

Ability to address inequalities: Our four new mainland and Isle of Wight unitary model means authorities will be better equipped to identify and respond to disparities in service delivery for diverse communities. This includes tailoring interventions to address inequalities and promote equity.

Negative Impacts

Disruption to community relationships: Reorganisation may affect established partnerships between councils and ethnic minority communities, especially if staff or structures change.

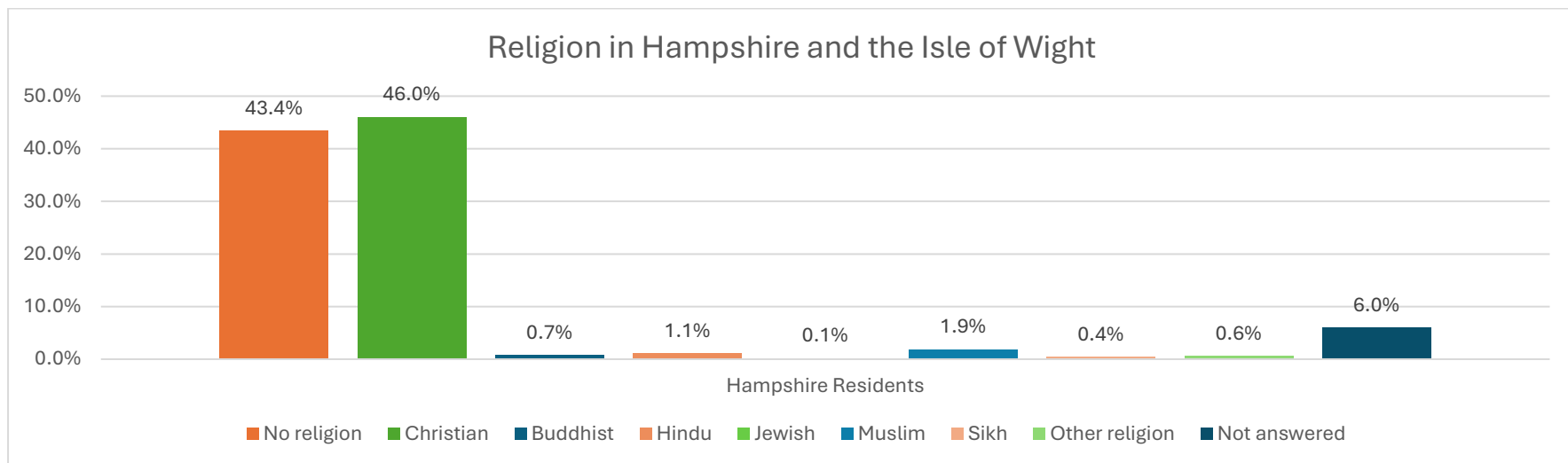
Access barriers: Diverse communities may be disproportionately affected by digital exclusion, particularly in areas of deprivation. Transitioning to new digital systems or platforms should be carefully managed to avoid creating new barriers to access.

8. Religion or Belief

8.1 Data Analysis

8.1.1 Hampshire and the Isle of Wight Analysis

According to the 2021 Census, Christianity is the most common religion in Hampshire and the Isle of Wight with 46% of residents identifying as Christian. The second largest group are those who follow no religion, accounting for 43.4% of the population. Out of those who do adhere to a religion, Islam is the next most common religion being followed by 1.9% of Hampshire and the Isle of Wight's population.

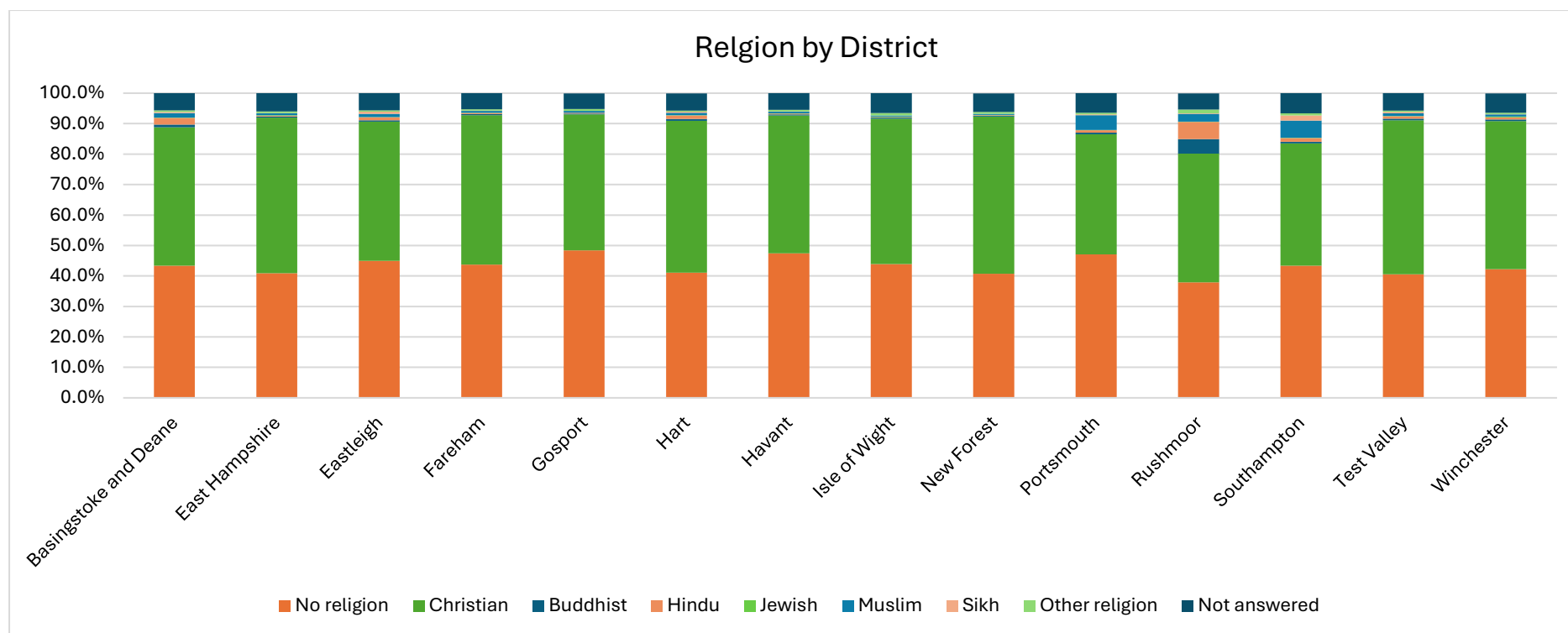


8.1.2 District and Unitary Analysis

When examining religion throughout Hampshire and the Isle of Wight's Local Authorities, Christianity is the most common religion in ten out of the fourteen district and unitary councils. In the remaining four council's, the largest group is those who don't follow a religion.

Whilst this is reflective of the county level data, it is important to note variations in the second most common religions followed throughout the districts. For example, in Rushmoor 5.7% of the population identify as Hindu, compared with the county average of 1.1%, making it the second most followed religion in the district. This can be linked to the sizable Gurka population that can be found in Aldershot Town. Hinduism was also the second most common religion in Basingstoke and Deane (2.2%) and Hart (1.2%) both of which are higher than the county average. In Eastleigh and Winchester Hinduism was the second most common religion alongside Islam.

Additionally, in both the populations of Portsmouth and Southampton, Islam is the second most followed religion, with 4.9% of Portsmouth's population and 5.6% of Southampton's population identifying as Muslim, as opposed to 1.9% of the total Hampshire and the Isle of Wight population. This equates to a Muslim population of 10,147 in Portsmouth and 13,893 in Southampton. In the context of Local Government Reorganisation, this data highlights the benefit of analysing smaller populations as it provides more specific community insights allowing for more inclusive service design that is reflective of local needs.



Key	Largest group	Most Common Secondary Religion								
Area		No religion (%)	Christian (%)	Buddhist (%)	Hindu (%)	Jewish (%)	Muslim (%)	Sikh (%)	Other religion (%)	Not answered (%)
Hampshire		43.4	46.0	0.7	1.1	0.1	1.9	0.4	0.6	6.0
Basingstoke and Deane		43.4	45.4	0.9	2.2	0.1	1.5	0.3	0.6	5.6
East Hampshire		40.9	51.1	0.3	0.3	0.2	0.6	0.1	0.5	6.1
Eastleigh		45.0	45.7	0.4	1.0	0.1	1.0	0.7	0.5	5.6
Fareham		43.7	49.1	0.3	0.4	0.1	0.6	0.1	0.4	5.4

Gosport	48.4	44.6	0.3	0.3	0.0	0.6	0.0	0.6	5.1
Hart	41.1	49.8	0.6	1.2	0.1	0.8	0.3	0.4	5.6
Havant	47.4	45.3	0.3	0.3	0.1	0.5	0.1	0.5	5.5
Isle of Wight	43.9	47.7	0.4	0.2	0.1	0.4	0.0	0.8	6.5
New Forest	40.7	51.6	0.3	0.2	0.1	0.3	0.0	0.6	6.1
Portsmouth	47.1	39.4	0.5	0.8	0.1	4.9	0.2	0.6	6.4
Rushmoor	37.9	42.3	4.7	5.7	0.1	2.5	0.2	1.2	5.3
Southampton	43.4	40.1	0.5	1.3	0.1	5.6	1.7	0.7	6.6
Test Valley	40.6	50.5	0.5	0.8	0.1	0.9	0.4	0.5	5.7
Winchester	42.2	48.6	0.6	0.7	0.2	0.7	0.1	0.5	6.3
Source: Census 2021									

8.2 Community Impact- Religion or Belief

Individuals of different religions or beliefs engage with local authorities through a wide variety of services, including education, public health, community safety, and civic participation. Delivering these services in ways that respect religious practices, promote inclusion, and uphold freedom of belief is essential to fostering trust and equity.

Local authorities are uniquely positioned to support interfaith dialogue and ensure that diverse belief systems are represented and able to access decision-making processes. Our four new mainland and Isle of Wight unitary model strengthens this role by embedding service design within communities, enabling councils to build on established relationships with faith groups and community leaders.

This approach supports co-designed, locally relevant services that reflect religious and cultural diversity. In contrast, fewer, larger authorities risk weakening these connections and reducing visibility for smaller or less prominent faith communities, potentially limiting inclusive engagement and representation.

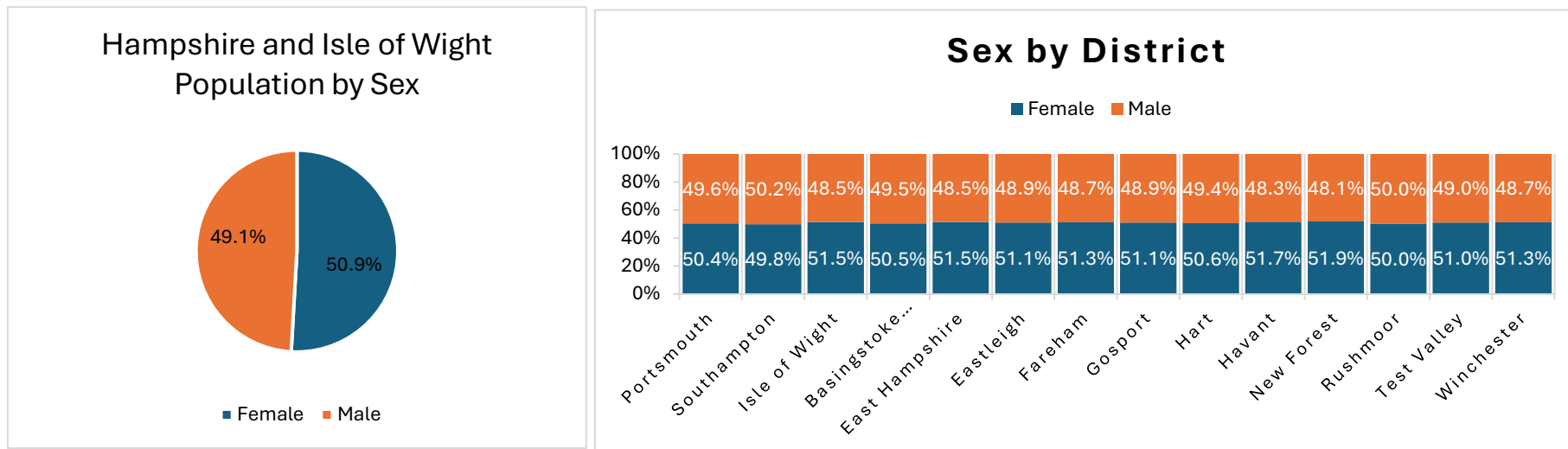
Positive Impacts
Stronger local relationships with faith communities: Smaller, place-based authorities are more likely to maintain and deepen relationships with local faith groups, enabling culturally sensitive service delivery and inclusive civic participation. Enabling community cohesion: Our four new mainland and Isle of Wight unitary model allows for more tailored interfaith initiatives where needed or aspired to locally. Promoting community cohesion and mutual understanding based on more localised geographies. Councils can support forums and partnerships that reflect the religious diversity of their specific areas. Improved representation in decision making: Place-based governance may increase opportunities for faith-based organisations and individuals to contribute to policy development and service design. This is particularly important for smaller or minority faith communities that may be overlooked in larger administrative structures. Culturally competent service design: Embedding services within communities enables councils to better understand and respond to the needs of residents with different beliefs. Building an understanding of barriers in place and actively seeking to improve outcomes in areas of community priority.
Negative Impacts
Weakened local networks: Reorganisation may disrupt established relationships between councils and faith groups, particularly if staff roles or structures change. This loss of continuity could impact trust and collaboration, especially in areas where faith groups play a key role in community support.

9. Sex

9.1 Data Analysis

9.1.1 Hampshire and the Isle of Wight, Unitary and District Analysis

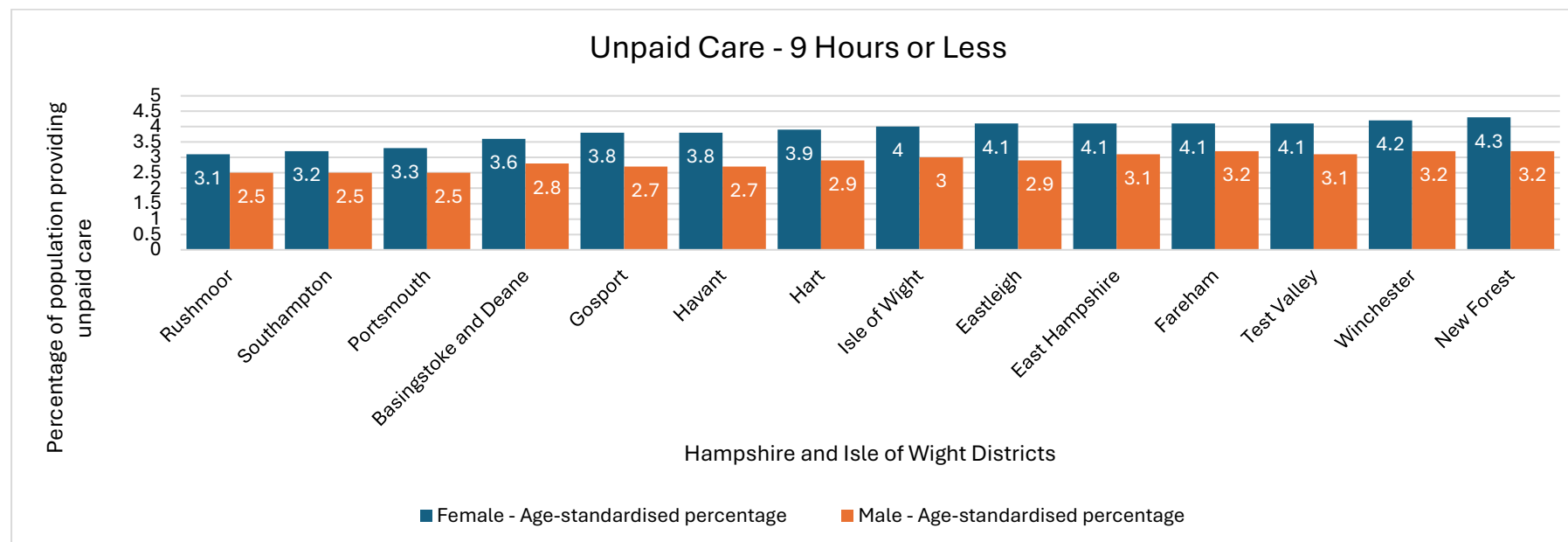
In Hampshire and the Isle of Wight 50.9% of the population is female and the other 49.1% is male. This trend is broadly reflected throughout the unitary and district councils. In twelve of the fourteen unitaries and districts the female population is slightly higher than the male population. Southampton is the only district where the male population, at 50.2%, is higher than the female population at 49.8%. Additionally, in Rushmoor the male and female population is evenly split.



Example – Unpaid Care

Despite the population of Hampshire and the Isle of Wight being split almost evenly by sex, it is important to consider the ways sex impacts an individual's experience of services. When looking at the provision of unpaid care, the 2021 census shows that more female individuals provide unpaid care compared to male individuals. For example, in Eastleigh 4.1% of female individuals provide 9 hours or less of unpaid care a week as opposed to 2.9% of men. This trend is reflected in the 2021 Census data for all the Hampshire and the Isle of Wight districts and unitaries in each level of unpaid work, ranging from 9 hours to 50 hours. In turn this may lead to increased interactions with services such as Adult Social Care,

Children's services and Health and Wellbeing Services. Therefore, it is important to consider these differences when designing services to ensure they are inclusive and supportive of the varying needs of residents.



9.2 Community Impact- Sex

Individuals of different sexes may interact with local authorities in ways shaped by social, economic, and cultural factors. These services may include education, social care, housing, public health, community safety, and employment support, and may be experienced differently depending on gender.

For example, patterns of engagement can be seen in areas such as childcare provision, domestic abuse support and mental health services. Women may be disproportionately represented among unpaid carers or survivors of domestic abuse, while men may face barriers in access mental health support or parenting services. Recognising and responding to these gendered patterns is essential to ensuring services are inclusive, equitable and meet the needs of all residents.

Our four new mainland and Isle of Wight unitary model supports this by enabling more locally informed service delivery. This allows councils to better understand and respond to gendered needs within each community, ensuring that services are shaped by lived experience and local insight.

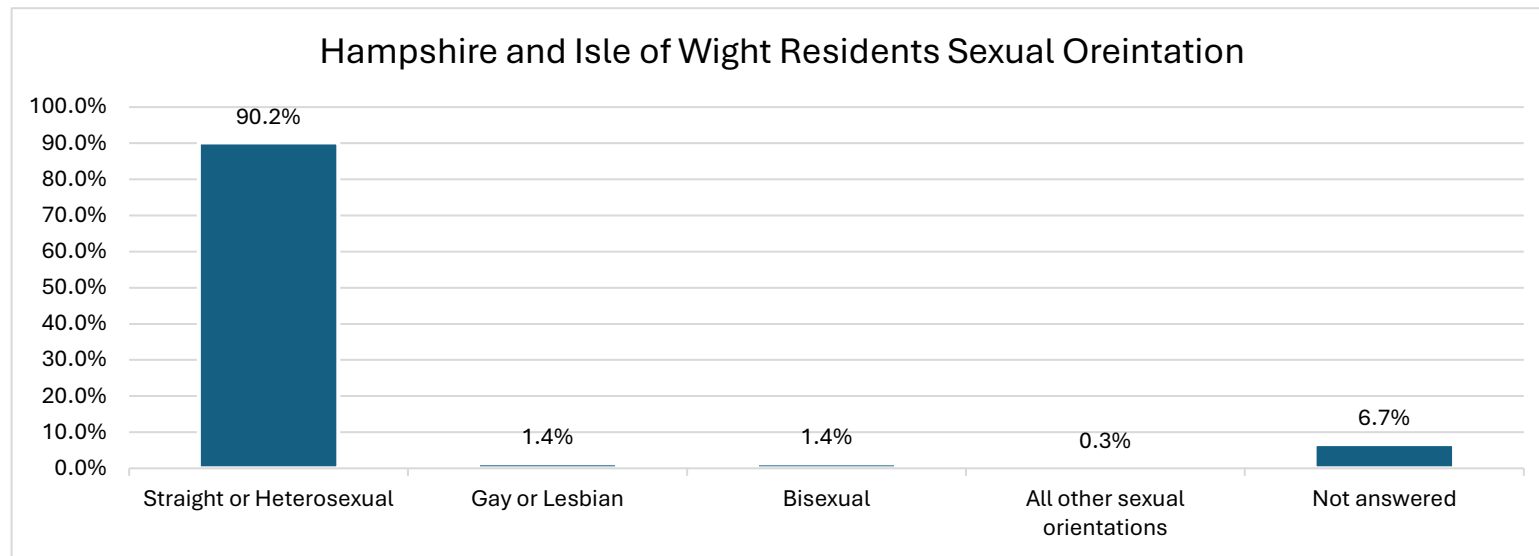
This enables services to be designed and delivered in ways that reflect the realities of residents' lives. In contrast, fewer, larger authorities may risk overlooking these nuances, reducing the visibility of gender-specific issues and limiting opportunities for targeted interventions.

Positive Impacts
Improved responsiveness to gendered needs: Place-based authorities are better positioned to understand and respond to gendered patterns of service use. Enabling more tailored interventions to address underlying need and better resource allocation. Enhanced support for gender-specific services: Our four new mainland and Isle of Wight unitary model allows for more targeted investment in services that may disproportionately affect one sex. Building on local insight based on communities' geographies and the way they access services can help identify gaps and emerging needs more effectively. Stronger community engagement: Place-based governance structures may foster better engagement with gender-focused organisations or advocacy groups, supporting co-design and service delivery. This is particularly important for addressing intersectional issues.
Negative Impacts
Disruption to specialist services: Reorganisation may affect continuity of gender-specific services, such as domestic abuse support or gender-based violence prevention programmes. Changes in staffing, funding or commissioning arrangements could impact service quality and accessibility.

10. Sexual orientation

10.1 Hampshire and the Isle of Wight Analysis

At the time of the 2021 Census, 90.2% of Hampshire and the Isle of Wight residents identified as straight. 1.4% of residents identified as gay or lesbian and 1.4% of residents identified as bisexual. 0.3% of Hampshire and the Isle of Wight residents identified as other sexual orientations.



10.1.2 District and Unitary Analysis

The data reflecting the sexual orientation of residents varies across the different Hampshire and the Isle of Wight districts and unitaries. For example, Rushmoor (90.1%), Winchester (90.1%), Isle of Wight (89.5%), Southampton (86.8%), and Portsmouth (87.7%) have a lower percentage of residents that identify as straight in comparison to the county data. The district with the highest percentage of residents who identify as straight is Hart at 92.4%, whilst the lowest is Southampton at 86.8% meaning the percentage of residents who identify as straight across the districts varies by 5.6%.

In comparison to the county average of 1.4%, Southampton (2%), Portsmouth (2%) and Gosport (1.6%) all have a higher percentage of residents who identify as gay or lesbian. In contrast of New Forest is the district with the lowest proportion of residents who identify as gay or lesbian at 1%.

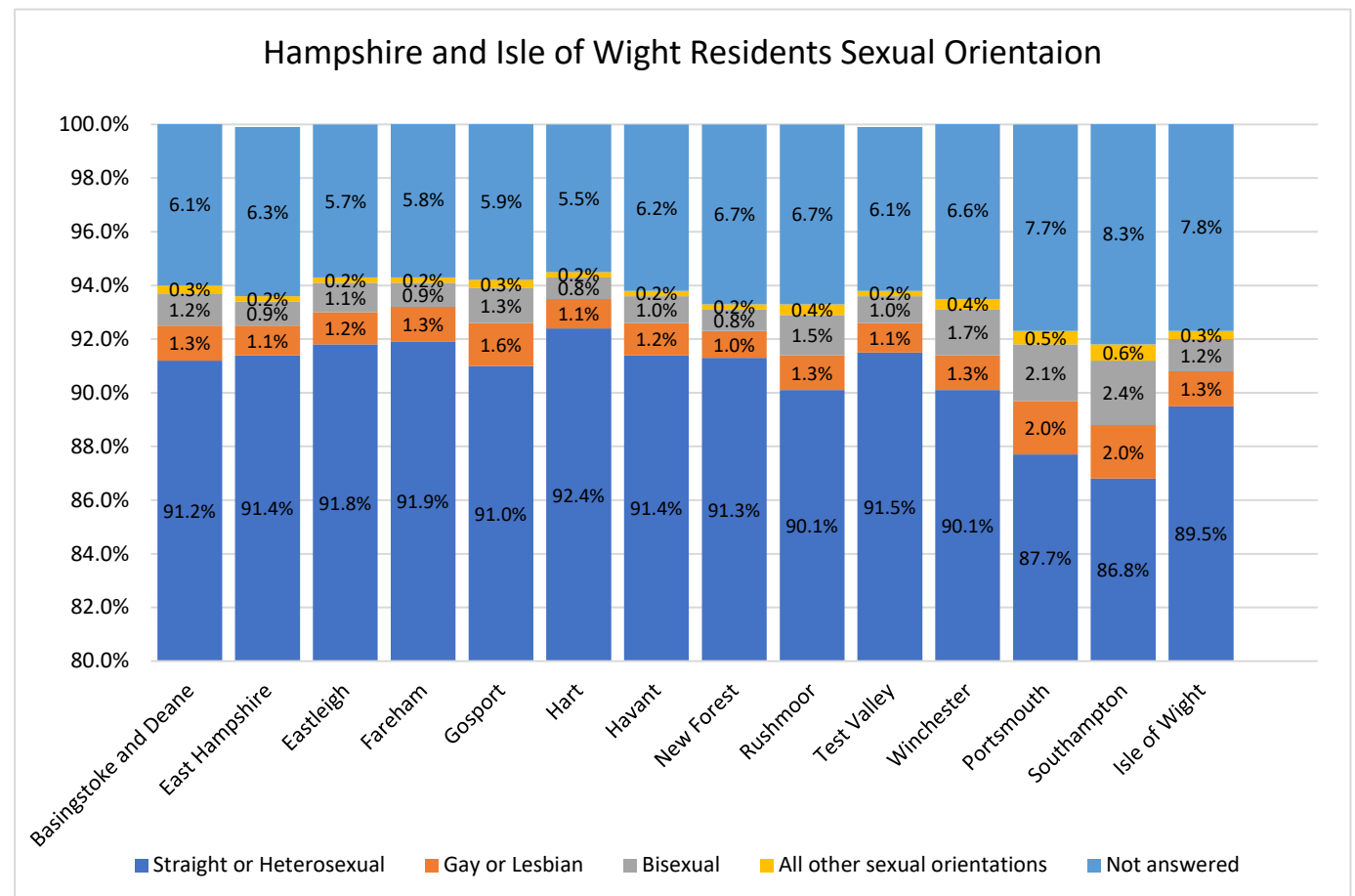
When looking at the data for residents who identify as bisexual, Southampton has the highest proportion of residents at 2.4%, this is closely followed by Portsmouth where 2.1% of residents identify as bisexual, then by Winchester where 1.7% of residents identify as bisexual. Hart and the New Forest have the lowest proportion of residents who identify as bisexual both with 0.8%. This means that there is a variation of 1.6% across the district and unitary councils.

Across the Hampshire and the Isle of Wight districts and unitaries the percentage of residents that identify as other sexual orientation ranges from 0.6% in Southampton and 0.2% in Eastleigh, Test Valley, Havant, East Hampshire, Fareham, New Forest and Hart.

10.2 Community Impact- Sexual Orientation

Individuals of all sexual orientations engage with local authorities through a wide range of services, including housing, health and wellbeing, community safety, and youth or family support. It is essential that these services are inclusive, respectful, and free from discrimination, with staff equipped to understand and respond to the needs of LGBTQ+ residents across all age groups.

Local authorities also play a vital role in promoting equality, tackling prejudice, and creating safe, welcoming spaces for LGBTQ+ individuals. Our four new mainland and Isle of Wight unitary model enhances this by embedding inclusive practices at a more local level, enabling services to be shaped by community insight and lived experience.



Place-based authorities are better positioned to engage with LGBTQ+ communities, understand local challenges and co-design services that are trusted and accessible. This approach supports stronger relationships with LGBTQ+ organisations, networks and advocacy groups, fostering collaboration and ensuring services are shared by lived experience and local insight.

In contrast, fewer or larger authorities may risk diluting local insight and reducing visibility of LGBTQ+ experiences, potentially leading to less responsive and inclusive provision. By taking a place-based focus to commissioning and intervention, local authorities are able to respond to unique challenges and opportunities of each area, which can also better address intersectional needs.

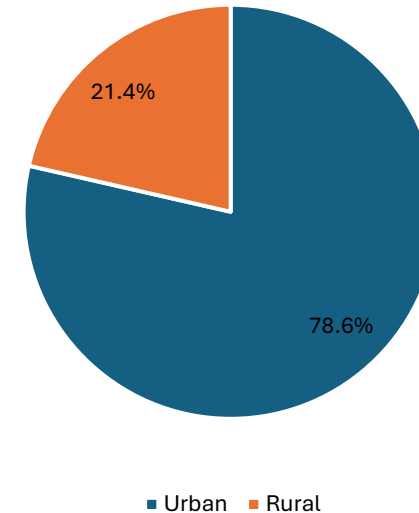
Positive Impacts
Stronger local relationships with LGBTQ+ communities: Place-based local authorities are better positioned to build and maintain relationships with LGBTQ+ organisations, support groups and networks. Fostering trust and ensuring services are shaped by local lived experience and community insight. Inclusive and responsive service design: Localised governance allows authorities to tailor services to the needs of LGBTQ+ organisations and residents, including in areas like housing, mental health support and youth services. Improved visibility and representation: Our four new mainland and Isle of Wight unitary model will enhance the visibility of LGBTQ+ issues within local decision making, enabling more inclusive civic participation and policy development. Councils can more easily support local events, campaigns or initiatives that support LGBTQ+ communities due to the closer proximity to communities.
Negative Impacts
Disruption to informal or trusted relationships: Structural change can disrupt long standing relationships between individuals and service providers which could reduce engagement, particularly among vulnerable or marginalised groups who rely on trusted contacts.

11. Rurality

11.1 Hampshire and the Isle of Wight Analysis

According to the 2021 Census Rural Urban Classification, 78.6% of the Hampshire and the Isle of Wight district and unitary councils are classified as Urban whilst 21.4% of districts are classified as rural. The local authorities classified as rural include the Isle of Wight, East Hampshire, and Winchester. The Classification defines Urban areas ‘as settlements with populations of 10,000 or more, based on the 2021 Census’ and Rural areas as ‘everywhere else’ including ‘rural towns, villages, hamlets, isolated dwellings and open countryside’.

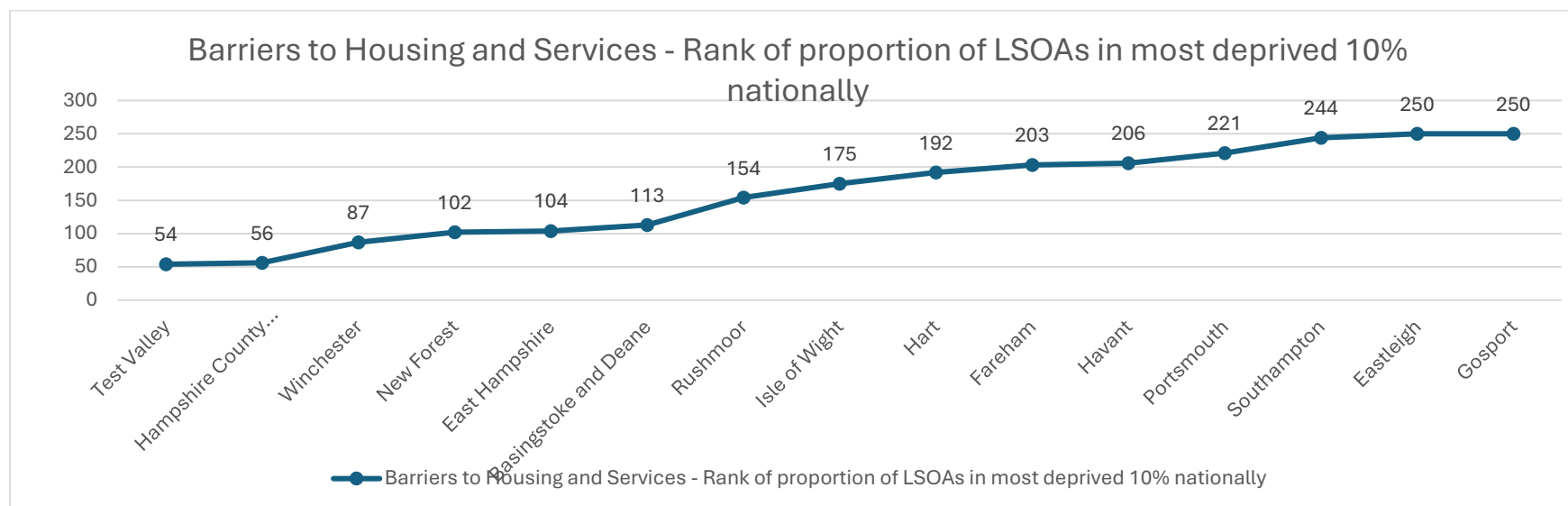
Hampshire and Isle of Wight Districts



Area	Rural/ Urban Classification
Portsmouth	Urban: Majority nearer to a major town or city
Southampton	Urban: Majority nearer to a major town or city
Isle of Wight	Intermediate rural: Majority further from a major town or city
Basingstoke and Deane	Intermediate urban: Majority nearer to a major town or city
East Hampshire	Intermediate rural: Majority nearer to a major town or city
Fareham	Urban: Majority nearer to a major town or city
Gosport	Urban: Majority nearer to a major town or city
Hart	Intermediate urban: Majority nearer to a major town or city
Havant	Urban: Majority nearer to a major town or city
New Forest	Intermediate urban: Majority nearer to a major town or city
Rushmoor	Urban: Majority nearer to a major town or city

Test Valley	Intermediate urban: Majority nearer to a major town or city
Winchester	Intermediate rural: Majority nearer to a major town or city
Eastleigh	Urban: Majority nearer to a major town or city

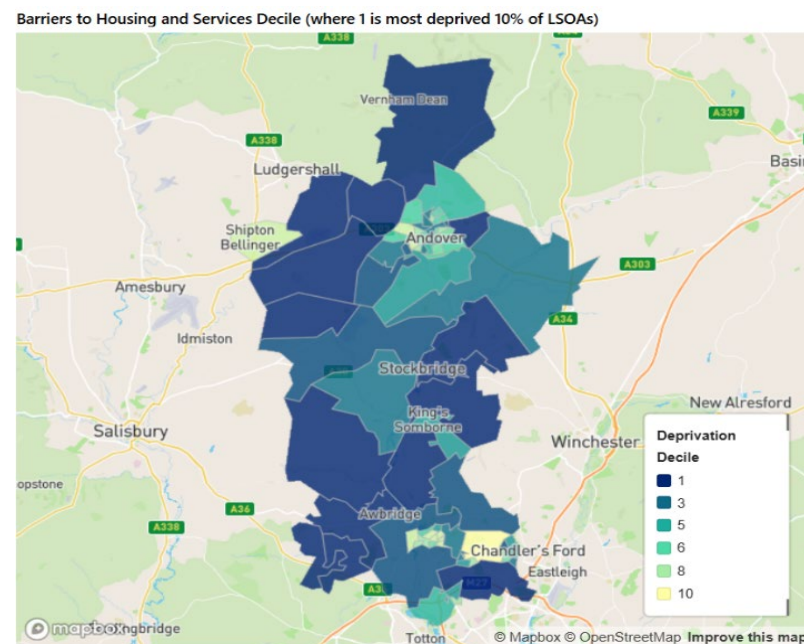
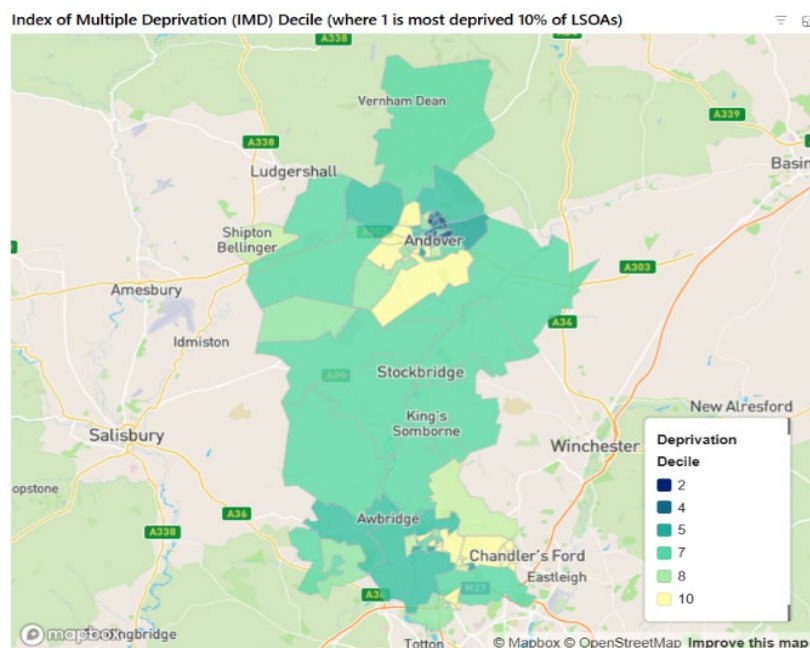
Whilst this data is beneficial in providing an overview of the Hampshire and the Isle of Wight population it does not identify for rural communities within districts classified as Urban. Alternatively, rurality can be viewed through the lens of deprivation. The Barriers to Housing and Services domain of the Index of Multiple Deprivation (IMD) 2019³ measures the physical and financial accessibility of services, looking at geographical barriers, which relate to the physical proximity of local services, and 'wider barriers' which includes access to housing such as affordability.



For example, Test Valley despite being classified as an urban district encompasses many rural towns and villages where access to services may be limited. Among all the Hampshire and the Isle of Wight Districts- where rank 1 is the most deprived - Test Valley ranks as the most deprived district when considering the Barriers to Housing and Services decile. The maps below illustrate both the overall IMD and the specific decile for Barriers to Housing and Services within Test Valley.

³ More information about the Index of Multiple Deprivation can be found here - [The English Indices of Deprivation 2019](#)

When assessing the IMD, Test Valley appears relatively less deprived, ranking 262. However, urban areas such as Andover show higher levels of deprivation. Conversely, when looking at Barriers to Housing and Services, rural areas located away from the main towns of Andover and Romsey exhibit higher levels of deprivation. The trend can be identified in other districts such as Basingstoke and Dean and East Hampshire.



Source: Hampshire JSNA

This example highlights that by assessing areas at a more localised level—as would be possible under a four new mainland and Isle of Wight unitary model—the distinct needs of communities, particularly in rural areas, can be more effectively identified and addressed.

11.2 Community Impact- Rurality

Rural communities across Hampshire and the Isle of Wight face a distinct set of challenges that shape how residents engage with local authorities. In the current two-tier system, key touchpoints include access to transport, health and social care, housing, digital connectivity, and community safety. Geographic isolation limited public transport, and reduced service coverage can create barriers to accessing support—particularly for older adults, young people, and those with additional needs.

Our four new mainland and Isle of Wight unitary model offers a more responsive and locally connected approach. By aligning governance with local geographies and maintaining strong community links, this model enables rural-focused decision-making and service design. This is particularly key in rural areas where local knowledge and resilience is key, supporting more equitable access to services which address specific rural pressures such as social inclusion, digital access and affordable housing.

This model enables decision making that ensures voices of rural residents are heard and reflected in local priorities. It also supports a total place approach, allowing councils to work with communities and partners to design services that are rooted in local assets, needs and opportunities, which may be lost in larger more centralised models.

A model with three or fewer mainland authorities in Hampshire may risk diluting the visibility of rural issues within broader strategic planning. Larger authorities covering more diverse geographies may struggle to prioritise rural needs, leading to less responsive service design. This could exacerbate existing inequalities and weaken relationships with rural communities.

Positive Impacts
Balancing urban and rural needs: Our four new mainland and Isle of Wight unitary model enables proportionate, tailored and effective service delivery across different population densities and types of communities. Grouping rural areas together (e.g. Mid Hampshire) ensures services reflect the needs of smaller towns and dispersed populations. While creating urban focused authorities around major centres like Southampton, Portsmouth and Basingstoke allows targeted responses to urban deprivation and need.
Locally responsive decision making: Where governance is aligned with geographies it enables authorities to prioritise rural specific needs. Supporting tailored service design for transport, housing, health and social care.
Opportunity to build on existing good practice: Local authorities with strong rural engagement and service models are better enabled to scale up successful approaches. As such, our four new mainland and Isle of Wight unitary model promotes continuity and innovation in areas of particular importance for rural communities in areas like transport, digital inclusion and preventative health.
Negative Impacts
Digital exclusion risks: Despite ambitions for digital transformation, rural areas may continue to face connectivity challenges. If digital-first service models are not carefully designed, they could inadvertently exclude residents with limited access to reliable broadband or digital skills.

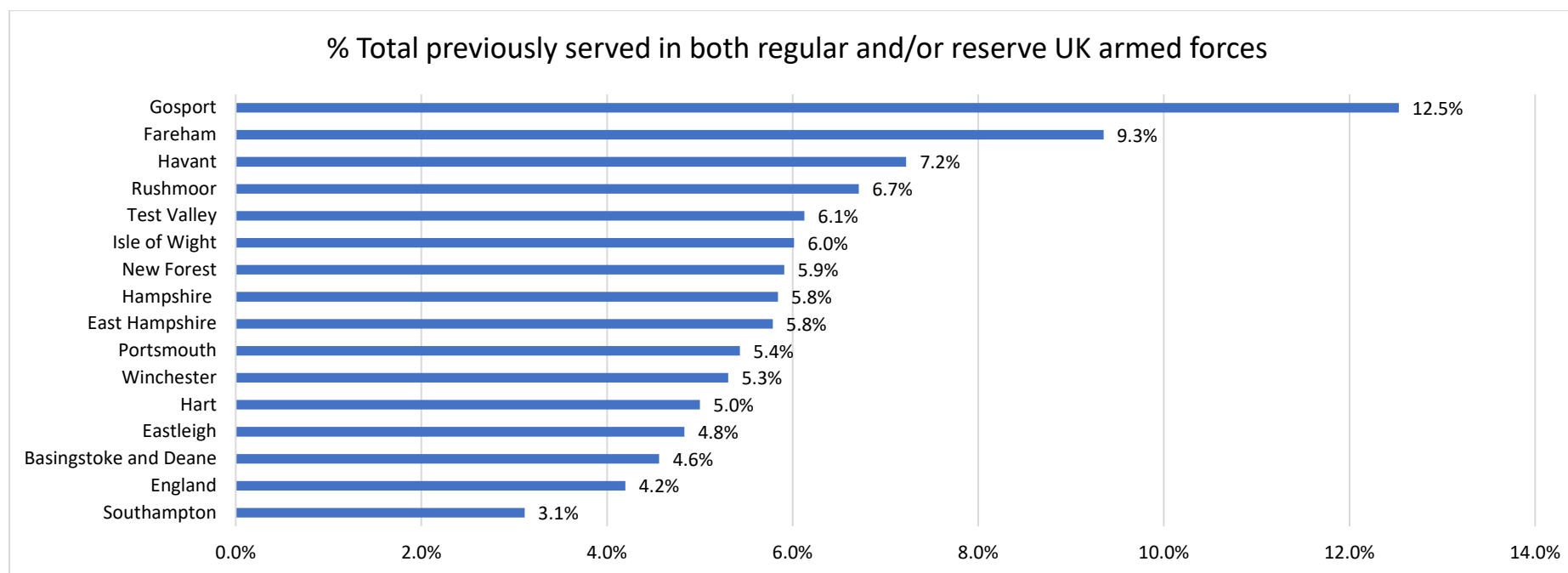
12. Armed forces

12.1 Data Analysis

As a county, Hampshire and the Isle of Wight is unique in that it is home to all three branches of the Armed Forces – the Army, the Royal Air Force, and the Royal Navy. Notable military establishments include HMNB Portsmouth, RAF Odiham, and Army Headquarters in Andover. Out of the fourteen districts and unitaries all but Eastleigh and East Hampshire are home to a military base and/or reserves.

Due to the large military presence in Hampshire and the Isle of Wight, it is unsurprising that many service leavers decide to settle in the county. Out of all Hampshire and the Isle of Wight residents, in both unitary and district councils, 5.8% have previously served in both regular and/or reserve UK Armed Forces, totalling 96,139 individuals. Thirteen of the fourteen districts and unitaries have a higher proportion for service leavers than the English average of 4.2%, Southampton is the only district that falls below this average with 3.1% of the population previously serving.

Notably with 12.5% of their population previously serving in both regular and/or reserve UK Armed Forces, Gosport has the highest proportion of Veterans out of all Local authorities in England and Wales (Census 2021).



12.2 Community Impact- Armed Forces

With there being many military bases with current serving personnel, veterans and military families across Hampshire and the Isle of Wight it is important that this community is considered when moving to new local authorities.

Armed Forces communities, including serving personnel, veterans, and their families, engage with local authorities through a range of services such as housing, health and wellbeing, education, employment support, and community integration. These communities often face distinct challenges, including frequent relocation, access to specialist support, and the need for continuity in services like schooling and healthcare.

For example, according to the Hampshire Joint Strategic Needs Assessment (JSNA⁴) (2019), veterans aged 16- 64 are more likely to have long term health problems with their arms, hands, legs, feet back or necks than the general population. Additionally, common mental health issues for both veterans include depression, anxiety, and alcohol misuse, with working age veterans more likely to report suffering with depression than the public.

Our four new mainland and Isle of Wight unitary model offers an opportunity to strengthen support for Armed Forces communities by enabling more locally responsive and coordinated service delivery. By aligning governance with established community and economic geographies, this model allows councils to build on existing relationships with military bases, garrisons, and veteran networks. It ensures services are tailored, accessible, and reflective of local needs. Crucially, it helps maintain visibility and continuity for Armed Forces families. Factors that could be diluted in larger, less locally connected structures.

Positive Impacts
Stronger local coordination with military infrastructure: Aligning governance with established community and economic geographies allows councils to build on existing relationships with military bases, garrisons and networks. Supporting more joined up service delivery and better integration of Armed Forces families into local communities.
Improved continuity of services: Frequent relocation is a common challenge for Armed Forces families. Our four new mainland and Isle of Wight unitary model will offer more consistent and locally responsive services across Hampshire and the Isle of Wight. Authorities can better coordinate across neighbouring areas to support transitions and maintain continuity.
Enhanced visibility and representation: Place-based authorities will be able to build on existing local partnerships and connections to be more aware of the needs of Armed Forces communities. Ensuring they are considered in local decision making and service design. This includes recognising the unique needs of veterans, reservists and families.
Negative Impacts
Disruption to established support networks: Reorganisation may affect existing partnerships and service pathways, particularly if staff roles or commissioning arrangements change. This could impact access to specialist support or areas of work such as Armed Forces Covenant delivery.

⁴ More information about the Hampshire Joint Strategic Needs assessment can be found here - [Joint Strategic Needs Assessment \(JSNA\) | Health and social care | Hampshire County Council](#)

13. Socio-economic / Deprivation

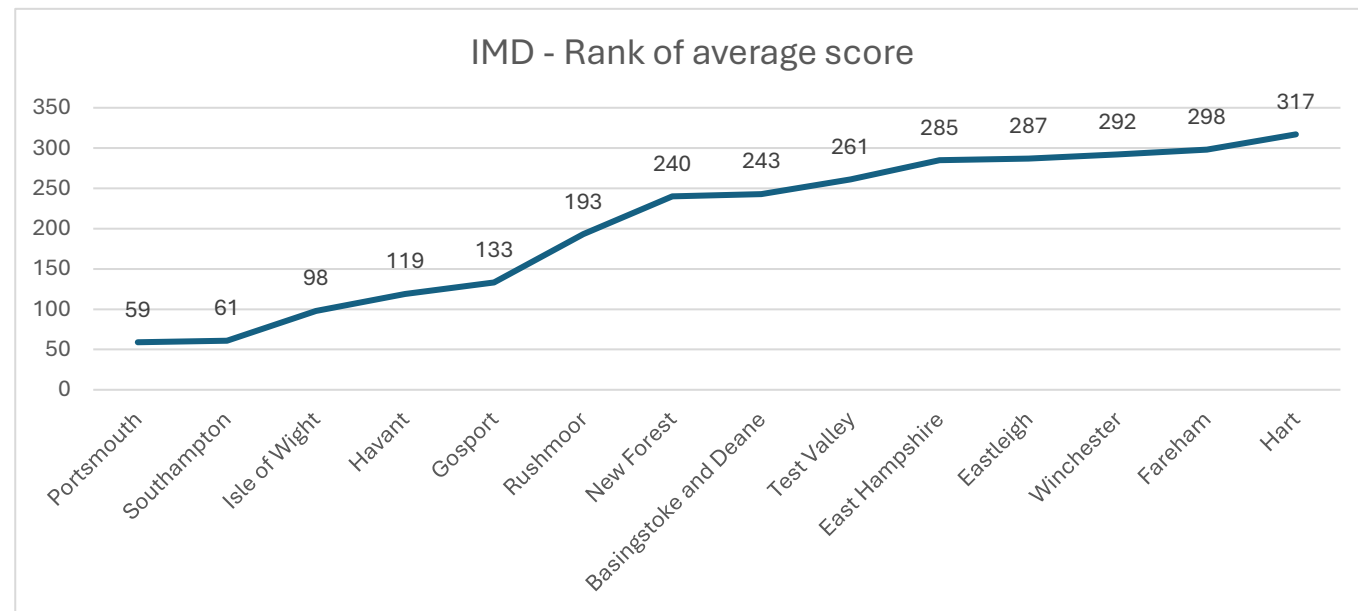
13.1 Data Analysis

Deprivation can be measured by the Index of Multiple Deprivation (IMD) which is the official measure of relative deprivation in England. It ranks all local authorities from least deprived to most deprived – 1 being the most deprived. The 7 domains of deprivation, which combine to create the Index of Multiple Deprivation involve income, employment, education, health, crime, barriers to housing & services and living environment.

In Hampshire and the Isle of Wight deprivation varies widely across the county. Portsmouth is the most deprived Local Authority in Hampshire and the Isle of Wight ranking 59th out of 319 Local Authorities according to the IMD rank of average score. This is closely followed by Southampton which ranks as 61st. Comparatively at a district level Hart ranks as the least deprived area in England as the 317th deprived Local Authority.

The data demonstrates the range of deprivation across the county.

However, within each Local Authority deprivation varies even further. For example, despite Havant and Gosport being ranked as 119th and 133rd most deprived local authorities they both have communities ranked in the most deprived 10% of LSOAs. Similarly, despite being ranked 193rd most deprived and above, Basingstoke and Deane, Rushmoor, Test Valley, Eastleigh and Rushmoor all have communities in the top 20% most deprived LSOA's.



What is evidenced here is the value of a localised focus, offering deeper insight into specific community challenges. Given the wide variation in deprivation levels across existing local authorities, it is essential that the creation of new authorities reflects and responds to these local needs. Our four new mainland and Isle of Wight unitary model provides the necessary scope to achieve this.

13.2 Community Impact- Socio-economic/ Deprivation

Individuals living in areas of deprivation may engage with local authorities through a wide range of services aimed at addressing social and economic disadvantage. These touchpoints include housing and homelessness support, employment and skills programmes, public health services, early intervention and family support, and access to benefits and financial assistance. Deprivation is often linked to poorer health outcomes, lower educational attainment, and reduced access to opportunities and intergenerational poverty, making coordinated and targeted service delivery essential.

Our four new mainland and Isle of Wight unitary model offers a unique opportunity to address entrenched deprivation by aligning governance with lived economic geographies. By aligning governance with lived economic geographies, councils can better understand local challenges and build on existing partnerships and good practice. This enables more targeted investment, integrated prevention strategies, and locally tailored services that respond to the specific challenges faced by communities.

Through strong local leadership, tailored to distinct opportunities and challenges of each area, councils can develop bespoke strategies to drive inclusive economic growth, improve health outcomes and raise living standards. The model also supports enhanced neighbourhood working, enabling decision making at the lowest effective level and fostering meaningful engagement with communities experiencing deprivation. This is particularly important for ensuring services are accessible, trusted and responsive to local need.

In contrast, a model with three or fewer mainland authorities' risks creating larger, less connected structures that may dilute the visibility of deprived communities. Broader geographies could lead to standardised service delivery, reducing ability to tailor services and interventions to specific local contexts. Large authorities may also risk uneven resource allocation when balancing urban and rural needs, reducing responsiveness to complex socio-economic challenges.

Our four new mainland and Isle of Wight unitary model's emphasis on collaborative working, community engagement and local representation helps mitigate these risks by embedding services within communities and ensuring they are shaped by lived experience.

Positive Impacts
Targeted investment and integrated prevention: Aligning governance with lived economic and social footprints can enable more precise targeting of investment in areas of deprivation. Supporting coordinated service delivery and integrated prevention strategies which are rooted in communities to begin to address some of the root causes of socio-economic deprivation. Building on existing partnerships and good practice: Our four new mainland and Isle of Wight unitary model builds on established local partnership, including those that address inequalities and deprivation. Enabling the scaling of successful local initiatives ensuring good practice is not lost and local challenges are understood and addressed. Strengthening local economic leadership: Our four new mainland and Isle of Wight unitary model enables bespoke economic strategies to be tailored to the unique challenges and opportunities of each area. Underpinned by local knowledge, context and insight to enhance the ability to coordinate strategies that address the systemic causes of socio-economic exclusion.
Negative Impacts
Potential disruption to existing support networks: Reorganisation may temporarily affect partnerships and programmes that support deprived communities, especially if funding, commissioning, or staffing structures change. This could impact continuity of support for vulnerable residents during transition.

14. Workforce

The implementation of LGR will bring substantial changes for staff with the potential of new working practices, team structures and working environments. Such large-scale transformation has the potential to affect staff wellbeing, service delivery and collaborative working. As the details of the transition become clearer, subsequent EIAs will be undertaken to explore these impacts for staff in greater depth, including detailed analysis of staff demographics. As implementation plans and EIAs are developed, we will ensure that appropriate mitigations are identified and implemented to prevent any disproportionate or detrimental impact on staff with protected characteristics.

The impact on staff terms and conditions arising from LGR implementation will be significant and harmonisation of such will require extensive engagement with recognised trades unions and staff representatives. Central to that engagement will be a focus on ensuring equity, especially in respect of pay, and ensuring that there are no detrimental effects on staff with protected characteristics. Pay equity will be an area where specific EIAs will be undertaken throughout the implementation process. In addition, all of the local authorities in Hampshire and Isle of Wight already have a legislative obligation to publish pay policies, including gender pay gaps and this will soon include ethnicity and disability pay gaps. These data sets

will continue to be produced, and the accompanying analysis will act as a barometer of equitable practice. This will enable each of the four new mainland and Isle of Wight unitaries to monitor both pay and total reward equity, making changes and adjustments as required in the process of harmonisation, as well as taking account of the issues arising from the specific EIA.

From a workforce perspective, our proposed four new mainland and Isle of Wight unitary model offers the opportunity for a more inclusive approach. Smaller, more locally focused organisations are better positioned to understand and respond to the specific needs of their employees. Our four new mainland and Isle of Wight unitary model will offer a more manageable and consistent approach to embedding inclusive practices whereas larger organisations, with multiple locations, teams and services, could have difficulties in maintaining uniformity in how equality, diversity and inclusion is understood and applied. For example, preserving and maintaining a consistent and inclusive approach to reasonable adjustments for staff is more achievable in smaller, more locally focused organisations.

In recognition of the recruitment and retention challenges being faced within the sector, the changes that LGR will bring will have both challenges and opportunities from a change management perspective. Supporting staff through change will be paramount to ensure retention of staff and continuity of service delivery throughout the implementation phase and beyond. In addition to more specific EIAs, change impact assessments will also be used identify and to mitigate the impact of change on the workforce. Our proposed four new mainland and Isle of Wight unitary model will ensure that leadership of the change (a critical success factor) and its impact on the workforce can be more effectively delivered through smaller organisations and a closer and more direct relationship between leaders, managers and staff. A model of three or fewer mainland unitary authorities would create much larger organisations and therefore a greater distance (physically, figuratively and culturally) and lesser connection between leadership and the workforce, making it more challenging to effectively lead and implement change, thus adding risk to service delivery and business continuity.

Our proposed four new mainland and Isle of Wight unitary model will support the development of agile, responsive HR policies that are reflective of workforce profiles and needs, enabling more tailored approaches to aspects such as staff wellbeing, recruitment and retention. This approach will also enable more effective engagement with staff, through staff networks and support groups, ensuring diverse voices from across the organisations are heard and reflected in decision making. With fewer, larger organisations, there is the potential for a lack of connection between leadership and staff which can impact how valued, engaged and supported staff feel.

The LGA Equality Framework emphasises the importance of providing equality of opportunity for all staff and employing a workforce that reflects the diversity of the local population. Our four new mainland and Isle of Wight unitary model would allow for more focused implementation of EDI strategies and initiatives, ensuring that equality considerations are embedded in aspects such as workforce planning and development, enabling more equitable outcomes for staff. Our four new mainland and Isle of Wight unitary model would also provide the opportunity for new authorities to take a more targeted approach to recruitment from the local population. Through a greater understanding of the make-up of the local population,

strong links to local communities and targeted positive action initiatives, authorities could ensure their workforce is representative of the local community and is reflective of their needs in inclusive service delivery.

Positive Impacts
Consistency in implementing EDI: Our four new mainland and Isle of Wight unitary model gives the opportunity to embed inclusive practices and policies across locations and teams with greater consistency, meaning more equitable outcomes for staff cross the organisations. Representative workforce: There is the potential for the workforce to more closely reflect the local population with our four new mainland and Isle of Wight unitary model. This model would provide clearer understanding of local demographics so that organisations can tailor approaches to recruitment to address underrepresentation. The workforce would be reflective of the communities they serve and have greater understanding of their needs. Enhanced staff engagement: Our four new mainland and Isle of Wight unitary model offers the opportunity for greater staff engagement, enabling organisations to better understand the experiences of staff and create closer connections between leadership and staff. This offers the opportunity to be more responsive to staff needs and create a culture where staff feel valued and heard.
Negative Impacts
Disruption to staff support: Current support in place, such as individual reasonable adjustments or staff networks and support groups, could be impacted during the transition period of reorganisation which could affect staff morale and wellbeing. Risk of fragmentation: Our four new mainland and Isle of Wight unitary model aims to reduce fragmentation but in the transition period, without strong co-ordination, there is a risk that policies and practices differ between organisations.

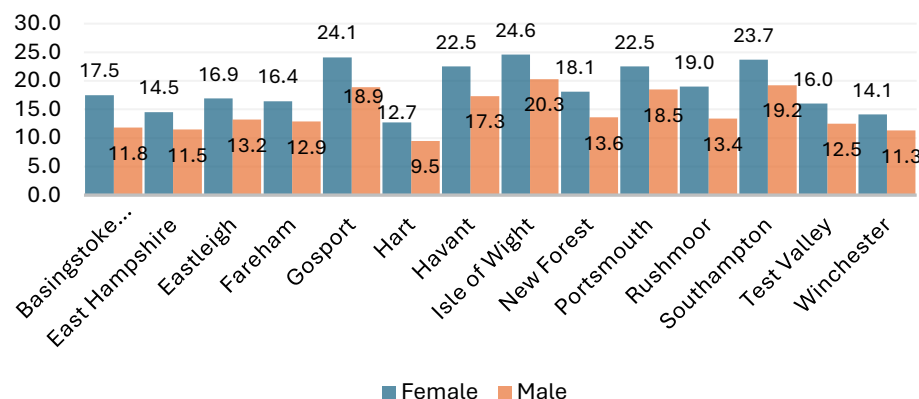
15. Intersectionality

While each of the characteristics provide a lens through which to assess potential impacts of LGR and how our four new mainland and Isle of Wight unitary model may affect individuals and communities, it is essential to recognise that individuals do not experience these characteristics in isolation.

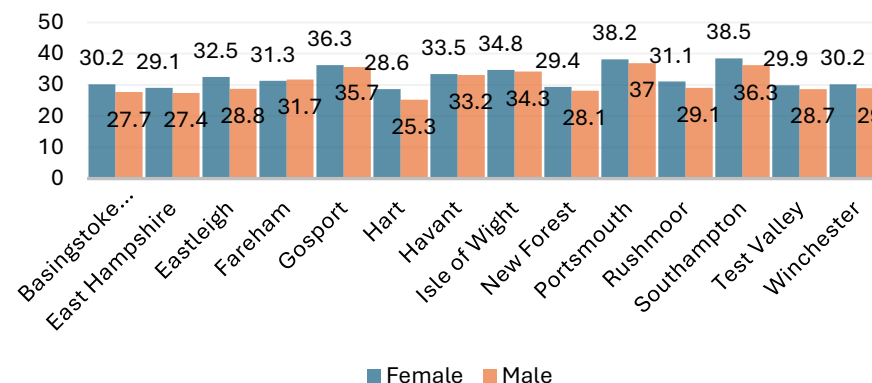
Many residents live at the intersection of multiple identities, for example an older disabled woman living in a rural area may experience the compounded impacts of these overlapping characteristics and this can shape how people engage with local authority services.

This example is supported by existing data. Demographic factors such as age and sex significantly influence individuals lived experiences. The data below, taken from the 2021 Census, highlights a correlation between age, sex, and disability. For example, both the 50–54 and 75–79 age groups, women are more likely to report a disability than men. Furthermore, disability prevalence increases with age across all sexes, meaning older adults—particularly older women—are disproportionately affected. When this is considered alongside the deprivation faced by rural communities, especially in terms of barriers to housing and services (as outlined in section 11.1), it becomes evident that an older disabled woman living in a rural area may face compounded challenges. These intersecting characteristics can create significant barriers to accessing services—barriers that may be overlooked if protected characteristics are considered in isolation.

Percentage of Residents Aged 50-54 and Disabled



Percentage of Residents Aged 75-79 and Disabled



Across Hampshire and the Isle of Wight, intersectionality is particularly relevant given the region's diverse population and varied geography. Urban centres, coastal communities and rural areas each present distinct challenges and opportunities, and the way services are accessed and experienced can vary significantly depending on a person's combined characteristics and circumstances.

Our four new mainland and Isle of Wight unitary model offers a more responsive framework for recognising and addressing these complexities. By aligning governance with real economic and social geographies, the model supports place-based service design that is informed by lived experience. This enables councils to better understand how overlapping factors (such as age, disability, ethnicity and socio-economic status) interact to affect access to housing, education, health, transport and cultural opportunities.

The proposal's emphasis on enhanced neighbourhood working, local representation and community engagement creates space for more inclusive decision making and co-design. It also supports the development of targeted interventions that reflect the realities of residents' lives.

In contrast, a model with three or fewer mainland authorities' risks creating larger, less connected structures that may dilute the visibility of marginalised groups and reduce the ability to respond to nuanced, intersectional needs. Standardised service delivery across broader geographies could result in poorer outcomes for those facing multiple barriers, particularly in areas with distinct cultural, demographic, or geographic profiles.

By recognising and responding to intersectionality within communities as well as the workforce, our four new mainland and Isle of Wight unitary model can help create a more inclusive, equitable, and resilient local government system. One that reflects the full diversity of Hampshire and the Isle of Wight and delivers better outcomes for all.

16. Mitigations

We recognise that delivering Local Government Reorganisation (LGR) at this scale brings complexity and risk, particularly in ensuring continuity, equity, and responsiveness during transition. That is why we are taking a proactive and structured approach to mitigation—embedding safeguards across every stage. From planning and ICT integration to workforce engagement and community co-design, our approach is grounded in collaboration, learning from previous LGR programmes, and a shared commitment to protecting and enhancing outcomes for all.

To ensure continuous monitoring, regular reviews and analysis of workforce and community data, and feedback from staff, communities and service users, will take place throughout transition planning and implementation with regular reporting to new authority leadership and community stakeholders to ensure transparency and accountability. A monitoring framework, with key indicators, as well as subsequent EIAs will be used to identify any emerging risks and where negative impacts are identified, mitigating actions will be taken to ensure that equality considerations remain central to decision making.

These mitigations are not standalone measures, they are woven into the fabric of our programme to ensure that the new unitary authorities are not only safe and legal, but also inclusive, resilient, and rooted in the communities they serve. Mitigations taken in developing the Hampshire and the Isle of Wight case for change includes:

Community Engagement

Residents have played a crucial role in shaping the future design of local government across Hampshire and the Isle of Wight. Ensuring that our four new mainland and Isle of Wight unitary model effectively serves communities and delivers improved outcomes is our top priority. To gather public perspectives, a region-wide engagement survey was conducted throughout July, capturing feedback on the proposed options.

Alongside this, workshops were held with key partner organisations, including police, fire and health services, Coastal Partners, National Parks, businesses, town and parish councils and the voluntary and community sector, to explore opportunities and challenges linked to reorganisation.

Further engagement has also taken place within the proposed new unitary areas, involving residents, members of parliament, higher and further education providers, businesses, town and parish councils, and voluntary and community groups to gather more localised views. This comprehensive engagement process helps ensure that the new authorities are shaped by those they serve, mitigating risks of reduced visibility and promoting inclusive, place-based governance.

Community engagement plays a vital role in mitigating the risk of reduced visibility and weakened relationships during any transition. By involving communities' voices from the onset of proposal development it ensures the voices and needs of those most directly affected are recognised. This also builds trust within different community demographics and the feeling of continuity. Which is particularly important for groups such as LGBTQ+ communities, ethnically diverse communities, faith groups and rural residents who rely on local networks and informal support. Engagement activities ensure that services remain responsive to lived experiences and are designed with these views in mind so as not to be lost in structural changes.

Across Hampshire and the Isle of Wight authorities have a strong, proven track record for meaningful engagement with residents and involving communities in decision making. For example, in Portsmouth a community-centred approach is being taken to digital inclusion with audience groups including Local Authority housing tenants, people with disabilities, low-income households and people who are unemployed and seeking work. This demographic profile for community-centred approaches has been identified via Government's digital inclusion action plan and through research conducted in Portsmouth by the local authority in conjunction with the VCS. Providing strong foundations to build on throughout the next phases of LGR. Community engagement will remain a central pillar throughout LGR implementation. With a key principle of the proposal being that service delivery should align with distinct communities, engaging them upfront in the shaping of future service.

Stakeholder Engagement and Workshops

We have embedded extensive stakeholder engagement into the LGR process, including focused workshops with service leads, external advisers, and key partners such as police, fire, health, and coastal authorities. These sessions have helped shape service models in high-demand areas and ensure that future delivery is informed by operational expertise and strategic insight. This collaborative approach strengthens the resilience and inclusivity of new service structures.

Focused workshops with service leads, external advisers, and key partners help mitigate risks of fragmentation and service disruption, especially in high-demand areas like adult social care, children's services, and housing. These sessions support continuity for older adults, disabled residents, pregnant people, and those experiencing socio-economic deprivation by embedding operational expertise into future service models. They also strengthen relationships with specialist providers and advocacy groups, reducing the risk of losing local knowledge and trusted contacts.

Transition Planning

Transition planning for LGR in Hampshire and the Isle of Wight is informed by prior experience of unitarisation within the region, including the establishment of unitary councils in Portsmouth, Southampton and the Solent. The expansion of Portsmouth and Southampton unitaries will make LGR transition easier as both councils already deliver a full range of services with established systems, staff, governance and partnerships in place. Expanding existing unitaries will allow for service continuity, lower transition costs and faster implementation. While also building on proven delivery models and local knowledge.

Our four new mainland and Isle of Wight unitary model aligns with existing economic geographies and patterns of movement, reflecting the way people live, work and travel. Early transformation work has already commenced, with collaboration across 11 councils and key partners. A set of shared implementation principles focused on collaboration continuity, local design, financial sustainability and workforce wellbeing, will guide the transition process and help ensure the new structures are inclusive, resilient and responsive to community need.

Transition planning is essential to managing risks of disruption, fragmentation, and workforce instability. By building on existing unitary structures and aligning with economic and social geographies, this mitigation supports continuity in services that are critical for older adults, disabled people, trans residents, and families. It also helps maintain stability in gender-specific services, Armed Forces support networks, and programmes addressing deprivation. The use of shared implementation principles ensures that transition is guided by collaboration, local design, and workforce wellbeing while building on existing proven delivery models and local knowledge.

Inclusive Service Design

Our four new mainland and Isle of Wight unitary model places emphasis on designing services that are inclusive, locally responsive and informed by evidence. To support this, the 11 councils in the proposal prioritised high-cost, high demand and strategically significant service areas. Including adult social care, children's services, waste, highways and transport, strategic planning, economic development and regeneration, education, housing and homelessness and customer and digital.

A series of focused workshops were held with council leads and external advisers to examine current service provision, identify challenge, good practice and existing collaboration and explore transformation opportunities.

These sessions contributed to shaping future service models that reflect the distinct needs of communities across Hampshire and the Isle of Wight. This inclusive design approach aims to mitigate risks of exclusion or inequity by embedding local insight, collaboration and innovation into the development of new service structures.

Inclusive service design directly addresses risks of exclusion, digital barriers and loss of specialist expertise. By embedding local insight and evidence into service transformation, this approach ensures services are culturally competent, accessible and tailored to diverse needs. This could include residents with disabilities being supported to share their views on accessibility planning, diverse communities inputting on culturally sensitive design, and LGBTQ+ communities on respectful and inclusive service delivery.

Staff engagement and communications

Keeping staff well-informed and engaged has been a focus throughout the initial stages of LGR to ensure transparency and understanding of the process. Regular updates have been communicated with staff via internal communications, including messages from Chief Execs and dedicated intranet pages. Staff have been encouraged to participate in surveys on the shaping of LGR and have been invited to attend staff briefing sessions to ensure their views are heard and questions are answered, reducing staff anxieties around potential changes as much as possible. This transparent and inclusive approach will continue to build understanding of proposed changes and foster a sense of involvement in LGR.

Transparent and inclusive staff engagement mitigates risks related to workforce disruption, loss of specialist knowledge and reduced service quality. By keeping staff informed and involved this mitigation supports continuity in services for vulnerable groups. It also helps preserve trusted relationships between service providers and communities, which is especially important for the groups discussed throughout this EIA during periods of change.

17. Reflections

Any decision about the future of local government will have real and lasting impacts on the communities it serves. This EIA has explored how our four new mainland and Isle of Wight unitary model may affect individuals and groups across Hampshire and the Isle of Wight, recognising both the opportunities and the risks. What emerges clearly is that our proposed model of the creation of four new mainland unitary authorities with the Isle of Wight remaining independent offers a transformative opportunity to reshape local government in a way that is more responsive, inclusive, and rooted in place.

By aligning governance with real economic and social geographies, our four new mainland and Isle of Wight unitary model enables councils to better understand and respond to the diverse needs of their communities. It supports tailored service design, stronger local leadership, and more meaningful engagement, particularly for groups whose needs may be overlooked in larger, more centralised structures.

The assessment also acknowledges that change brings complexity. Transitioning to new authorities may disrupt existing relationships, services, and systems. However, the mitigations embedded throughout the proposal, including inclusive service design, community and stakeholder engagement, and robust transition planning, are designed to address these risks directly. These measures are not generic; they are targeted responses to the specific challenges faced by different groups, ensuring that equity and inclusion are central to the transformation process.

Importantly, this assessment recognises that individuals do not experience their identities in isolation. Intersectionality shapes how people engage with services and experience public life. Our four new mainland and Isle of Wight unitary model provides a framework for recognising and responding to these complexities, enabling councils to design services that reflect the realities of residents' lives.

A model with three or fewer mainland authorities presents a risk of reducing the visibility and influence of certain communities, particularly those with distinct geographic, demographic, or socio-economic profiles. Larger administrative areas may struggle to reflect the nuanced needs of smaller towns, rural communities, or marginalised groups, leading to more standardised service delivery that overlooks local variation. This could result in under-resourcing of services in areas with complex or less prominent needs, weakening the ability to deliver targeted interventions and diminishing opportunities for community-led design. In turn, this risks exacerbating existing inequalities and undermining the responsiveness, trust, and inclusivity that are central to effective local governance.

As Local Government Reorganisation progresses, future Equality Impact Assessments will be developed to provide more detailed and targeted analysis. These will incorporate updated data, community insights, and feedback from service users to ensure a deeper understanding of evolving impacts. Monitoring and implementation of this and subsequent EIAs will be embedded into transition planning from day one, with regular reporting to new unitary authority leadership and community stakeholders. This will help ensure accountability, transparency, and that equality, diversity and inclusion remain central to decision-making throughout and beyond the reorganisation process.

The proposal put forward aims to build a future where every community thrives. Where services are designed with and for the people they serve. Where councils are close enough to understand local needs, but strong enough to deliver lasting change. By embracing this opportunity, we can create a modern, resilient, and inclusive local government system that reflects the full diversity of Hampshire and the Isle of Wight and delivers better outcomes for all.

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