WHAT'S GOOD in the (NEIGHBOUR)HOOD?

RESEARCH QUESTION: What is the impact of Kāinga Ora’s urban development ("urban regeneration") on area-level wellbeing?

REGENERATING TĀMAKI MAKARAU

The physical environment in which people live can affect their health and wellbeing. Aotearoa faces substantial housing challenges with a housing crisis brought on by a housing shortage, rising housing costs, poor quality stock and overcrowding issues. Kāinga Ora (KO) have made significant investments towards increasing the housing supply ($2bn allocated in 2022/23; $1.3bn spent 2019/22) with plans to increase supply by 40,000 homes in the next 15 years. Over 50% of Kāinga Ora developments are in Auckland - 90% of those dwellings are social housing.

WHAT IS URBAN REGENERATION?

By developing, or regenerating, urban areas, there is the potential to improve health and wider social outcomes. Most urban regeneration (UR) in NZ is housing intensification - increasing the housing supply by redeveloping large blocks of land (usually one dwelling) into multiple dwellings such as units, townhouses and apartments.

DATA

HOUSING INTENSIFICATION DATA
Kāinga Ora monthly “pipeline” data identifying new housing developments from January 2018 - December 2021. Data available at meshblock-level, aggregated to SA2 to capture potential spillover effects. Individuals living in these meshblocks linked via Address Notification table in the Integrated Data Infrastructure (IDI).

METHOD
Difference-in-differences (DiD) comparing treated areas (undergoing KO UR) and control areas (no KO UR). Control areas matched to treated areas using area-level demographic characteristics. Treatment begins when planning phase for SA2 begins - certainty of urban regeneration going ahead.

MEASURING WELLBEING
Outcomes adapted from Treasury’s Living Standards Framework - can be measured by population-level administrative data from Stats NZ’s IDI.

SO, WHAT’S GOOD IN THESE NEIGHBOURHOODS?

When we measure area-level wellbeing between control and treated groups, we observe...
Not much going on at all, really.

We find no statistically significant difference between treated and control areas in the post-treatment period for most wellbeing outcomes. It seems like there are no observable short-term impacts of urban regeneration on area-level wellbeing.

WHY DON’T WE SEE ANY CHANGES?
- Construction may be ongoing - treatment hasn’t been completed
- Can only capture short- to medium-term wellbeing impacts of urban regeneration at this stage - perhaps wellbeing benefits have not yet accrued
- Compositional changes in the population lost at aggregated-level data. i.e. social housing tenants tend to have poorer employment and benefit outcomes
- Limits to the extent to which we can measure wellbeing with administrative data (e.g. can’t measure subjective wellbeing)

WHAT’S NEXT?

YOUR IDEAS?