VOLUNTARY SECTOR ACTION ON THE SOCIAL DETERMINANTS OF HEALTH

Housing
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Throughout this document boxes are used to highlight specific information.

**Key messages:**
In the Executive Summary and at the beginning of each section on the social determinants of health these boxes are used to highlight key points from the research.

**Strength of evidence:**
At the beginning of Sections 2–9 these boxes are used to highlight the most recent research that examines the strength of evidence relating to links between the specific social determinants and health outcomes.

**Example interventions:**
A variety of case studies demonstrating action on the social determinants of health are presented in these boxes at the end of each section.

**Key terms** are identified and explained in these boxes throughout the document.

Each section is followed by a number of evaluations and evidence reviews of interventions that address specific determinants of health.
7. HOUSING

Housing – key messages:

Good quality, secure homes are beneficial to their occupiers, the wider community and to society. They can reduce the risk of poor physical and mental health and mortality, reduce the number of trips and falls, reduce lost school days and improve educational attainment, and reduce visits to the GP and other health and social care services.

There are clear inequalities in exposure to poor housing. Approximately three in 10 people in England live in poor-quality housing. This includes 3.6 million children, 9.2 million working-age adults and 2 million pensioners.

Poor housing and homelessness pose significant risks to health, including poor mental health, respiratory disease, long-term health and disability and the delayed physical and cognitive development of children.

Cold housing is particularly damaging for health and caused an estimated 20 per cent of the 24,300 extra winter deaths that happen during the cold winter months in 2015/16.

Poor-quality housing such as damp, cold, overcrowded, insecure and short-term tenure housing, is damaging for physical and mental health. Most of the poor-quality housing in England is in the private rental sector.

Emerging evidence shows that exposure to multiple poor housing conditions is particularly damaging, comparable to the health risks posed by smoking, and greater than the health risk posed by excessive alcohol consumption.

Strength of evidence: strong

A report published by the Institute of Health Equity in 2011 examined the direct and indirect impacts of cold homes and fuel poverty on health. The report reviewed the latest evidence (77 papers identified for in-depth analysis) and found that:

- There is a strong relationship between cold temperatures and cardiovascular and respiratory disease.
- Children living in cold homes are more than twice as likely to suffer from a variety of respiratory problems than children living in adequately warm homes.
- There is a relationship between the number of excess winter deaths, low thermal efficiency of housing and low indoor temperature.
- The number of excess winter deaths is almost three times higher in the coldest quarter of housing than in the warmest quarter.

A wide range of evidence has found strong associations between substandard housing and mental health, socio-emotional development, psychological distress, behavioural problems, and educational outcomes of children and young people. Some evidence also suggests a greater impact on women and older people than on men and younger people.

7.1 Housing and health

‘Decent homes’ have been recognised as being beneficial to their occupiers, to the wider community and to society. Good-quality housing can reduce levels of physical injury associated with trips and falls, levels of depression associated with burglary, the amount of lost school days and visits to GPs, and the likelihood of developing circulatory conditions.

7.2 Poor-quality housing and health

Poor housing conditions include issues such as damp and general poor physical conditions, overcrowding, insecure and short-term-tenure housing, homelessness, and temporary accommodation. Poor-quality housing poses significant risks to health and can increase the risk of contracting meningitis and TB, the transmission of infectious diseases, respiratory problems, long-term ill health, disability, and delayed physical growth and cognitive development in children.
Emerging evidence shows that exposure to multiple poor housing conditions is particularly damaging, comparable to the health risks posed by smoking and greater than the health risk posed by excessive alcohol consumption. The longer the exposure to poor conditions, the greater the impact on mental and physical health.

Mental health is also affected by poor-quality housing. It is estimated that 19 per cent of adults living in non-decent homes have poor mental health, including anxiety and depression. Aspects of housing such as condensation, damp and mould, noise and pests, living in flats, draughts and the age of homes have all been shown to be connected to poor mental health.

7.3 Cold housing and physical health

Cold housing in particular poses a significant risk to health, including contributing to the excess winter deaths that are experienced each year in the UK. 24,300 excess winter deaths were recorded for 2015/16 of which an estimated 6,000 deaths were the result of living in cold homes. Indoor temperature is influenced by the energy efficiency of the home; in 2015 only 28 per cent of dwellings in England had an energy efficiency rating of A-C, with A being the most efficient. This not only has a direct impact on physical and mental health, but also adversely influences health through impact on the environment and climate change.

7.4 Inequalities in exposure to poor-quality housing

There are clear inequalities in exposure to poor housing. Approximately three in 10 people in England live in poor-quality housing – either non-decent or overcrowded. This includes 3.6 million children, 9.2 million working-age adults and 2 million pensioners.

A higher proportion of the privately rented sector is in a poor condition than any other: 30 per cent of homes in the private rented sector failed to meet the decent homes standard in 2013. This is in comparison to 19 per cent of owner-occupied homes and 15 per cent in the social rented sector. There is also evidence of worse energy efficiency, condensation, damp and mould in the private rented sector compared with the owner-occupied and socially-rented sectors. In the most deprived areas 26 per cent of houses fail to meet the decent homes standard, compared with 17 per cent in the most affluent areas.

Figure 1 below demonstrates the increased risk of poor housing conditions for those living in deprived areas.

**Figure 1. Housing condition problems by level of area deprivation, 2010**

Source: 24
Unsurprisingly, residents living in poverty are more likely than others to be exposed to poor housing conditions, particularly if they live in the private rented sector. Poor residents may also have a lower likelihood of reporting a problem to a private sector landlord, due to fears of retaliatory eviction.

Inequalities are also evident according to ethnicity – black and minority ethnic households are more likely to experience overcrowding and damp, for example, than the white majority.

7.5 Housing – interventions

**Case study: Islington – Seasonal Health Interventions Network (SHINE), 2010 – present**

In Islington, around 20 per cent of people living in private housing are unable to heat their homes adequately; within the private rented sector that rises to 31 per cent. The SHINE programme provides a single point of contact for referrals from frontline workers such as housing officers, children’s services, local charities and health professionals. Once people are referred, they are offered a package of interventions in order to improve energy efficiency within the home and reduce fuel poverty. Interventions include free home visits, installation of energy-saving measures, benefits checks, financial advice, befriending services to combat social isolation and fire safety checks.

SHINE targets vulnerable households, 8,200 of which have been referred to date.

**Citizens Advice – housing advice services**

In total 4.9 million homes in England failed to meet the Government’s minimum decent home standard. Of those, the highest proportion are in the private rented sector, which constitute a third of total non-decent homes. Citizens Advice provides independent and confidential advice on housing. In 2013–14, 275,000 clients were provided with housing advice, 422,000 housing problems were dealt with, and the organisation’s housing webpages received 2.6 million views. The services are free and offered either in person, or over the phone/online. The advice provided by Citizens Advice covers a broad range of housing topics, from buying and selling a home to helping clients understand their rights and responsibilities as tenants of both private and social housing. The advice helps to prevent homelessness, resolve disputes, secure accommodation and recover deposits and repair costs. Over 80,000 people with private rental problems went to Citizens Advice in 2016 and research and evaluations of its housing advice service shows that two-thirds of clients resolve their housing issues within three months of contacting the service. This outcome has an estimated worth of £750 million annually to society.
7.6 Housing – further reading and resources

There are a number of papers covering evidence reviews, recommendations for stabilising the private rental sector, and specific interventions for improving housing for older people.

The health impacts of cold homes and fuel poverty (2011), a review published by the Institute of Health Equity on behalf of Friends of the Earth, provides evidence of the direct and indirect health impacts of cold homes and fuel poverty, and the communities and individuals that are disproportionately affected. It also provides various case studies and example interventions that take action on fuel poverty and cold homes.

A better deal. Towards more stable private renting (2012), by Shelter, sets out the case for change in the private rental sector and practical recommendations to improve landlords’ returns and give renters the chance of a real home.

Housing, prevention and early intervention at work: a summary of the evidence base (2011), a short overview from the Housing Learning and Improvement Network, provides evidence for the health and economic benefits of housing interventions to improve the safety and conditions of homes.

Housing and public health: a review of reviews of interventions for improving health. Evidence briefing (2011), by NICE, is aimed at policy- and decision-makers, housing officials and public health professionals and provides a systematic review, syntheses and meta-analyses of evidence relating to public health housing interventions. It includes cost-effectiveness data for housing-related interventions to promote health.

Living well in old age. The value of UK housing interventions in supporting mental health and wellbeing in later life (2016), a literature review by King’s College London, examines what is known about UK housing interventions aimed at promoting mental health and wellbeing among older people. The paper identifies and evaluates such interventions in UK housing associations and explores issues of integration and how health, housing and social care agencies work together to support older people’s mental health and independence at home. It also outlines some of the barriers to effective collaboration, and strategies to address barriers.

Off the radar: Housing disrepair and health impact in later life (2016), by Care and Repair England, provides information on the scale of poor housing conditions among older people in the UK, and the impact that poor housing conditions have on health and wellbeing. It sets out the scale of action needed to address housing disrepair for older households, and the benefits of taking action.


