

IMPROVING HOUSING QUALITY AND SUITABILITY TO INCREASE OLDER PEOPLE'S INDEPENDENCE AND IMPROVE ACCESS TO CARE

Nicola Brimblecombe, Javiera Cartagena-Farias, Bo Hu, Madeleine Stevens,
Jayeeta Rajagopalan, Care Policy and Evaluation Centre, London School of
Economics and Political Science

Martin Hodges, independent housing consultant

HousingLIN 15.7.25

CAPE PROJECT

- Housing characteristics = important part of delivery of care e.g. Care Act, 2014
- People at the Heart of Care 2021: *'make every decision about care a decision about housing'*
- Supported housing key part of this but vast majority of older people live and will live in non-specialised housing
- Adaptations also important part of this
- Our study focused on the wider home environment – quality and suitability - context and possibility for adaptations

CAPE PROJECT

CAPE project aimed to

- investigate the relationship between characteristics and conditions of non-specialist housing and older people's care needs, care use (formal and unpaid), and care costs
- understand how to improve housing to reduce care needs, optimise care use and costs, and enable older people to have more choice over their current and future housing and care situation

Analysis of representative longitudinal data in England (2012/2013 to 2018/2019); N=8,000

In-depth interviews with 72 people aged 65+ with care needs/carers in five localities in England

Simulation modelling

NUMBER OF HOUSING PROBLEMS

	PROBABILITY OF HAVING CARE NEEDS	AGE OF ONSET OF CARE NEEDS	CHANGES IN THE LEVEL OF CARE NEEDS OVER TIME
Higher number of problems in accommodation: care needs	More likely to care needs	At earlier age	Increase in care needs over time

Higher number of problems in accommodation: care use

- higher care use for some people
- lower care use for others

ASPECTS OF HOUSING ASSOCIATED WITH INCREASED CARE NEEDS

Cold, damp,
condensation;
fuel poverty

Cleanliness
and repair

Familiarity

Space

Access into
and around
the home

Housing
tenure

ASPECTS OF HOUSING ASSOCIATED WITH CARE USE

Cleanliness and
repair

Access into the
home

Space

Internal
adaptability and
accessibility

Housing tenure

LACK OF SPACE AS A BARRIER TO CARE USE

Size of rooms as a barrier to receiving care:

'The bathroom is too small, so my mum has to have strip washes but not a shower because if you're disabled on one side of your body, a careworker is not going to do any manual handling, so that means that I have to get my friend, who's a physio, to help me and it'll be only every few months' (P63)

Conversely, sufficient internal space facilitated having formal care:

It meets my needs and it's nice because you can go round and you don't have to worry about knocking into anything, it's really big...[The carers] have loads of room to do it now (P37: has reduced mobility and physical health conditions, lives in social rented flat)

HOUSING TENURE AS A BARRIER TO CARE USE

- Private or council or housing association rented (compared to home-owners) is associated with: earlier onset of care needs, greater likelihood of having care needs, and increase over time in level of some care needs so may lead to **increase in care use**
- On the other hand, housing tenure can be a **barrier to care use**
 - Affects ability to stay in home and ability to stay in a home that is familiar and that may be near unpaid care or formal care
 - Private rented: greater difficulties in making adaptations

HOUSING TENURE

‘When the Social Services came around to assess me...they said, “You actually need another handle in the hall to hold on to get down the kitchen steps, and you also need another one in the en-suite...We can do that for you...but you’ve got to give me written permission from your landlord.” And I thought... I’d rather [not] ask him for these things...’ (P20)

CONCLUSIONS

- Housing problems increase likelihood of having care needs, higher number, and earlier onset
- Housing problems and unsuitability can increase care use via increasing care need, or decrease it through being a barrier to receipt of support, including adaptations, leading to unmet need
- Improving housing including security of tenure would:
 - Increase independence, prevent or reduce need for avoidable formal care and/or unpaid care, and potentially reduce costs
 - Increase care use for those that need it and reduce unmet need and inequalities in unmet need
 - Reduce pressure on unpaid carers
 - Reduce formal care costs by £1 billion+ a year by 2027 and nearly £3 billion by 2042*
 - Other benefits to individuals, government and the environment

DISCLAIMER

This work presents independent research funded by the NIHR School for Social Care Research.

The views expressed are those of the authors and not necessarily those of the NIHR School for Social Care Research or the Department of Health and Social Care, NIHR or NHS

n.s.brimblecombe@lse.ac.uk

<https://sscr.nihr.ac.uk/research/care-settings/housing-social-care-older-adults/>