POSTNOTE

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Housing and Health



The Decent Homes Programme aimed to refurbish all social sector homes to a minimum standard between 2000 and 2010. The government will invest a further £1.6 billion to improve housing in the public sector. However, housing quality is poorest in the private rented sector; homes in this sector housing people on benefits are not supported under the new initiative. This briefing looks at the impact of poor housing on health and examines the implications for housing policy.

Background

Links Between Housing and Health

The quality of the home has a substantial impact on health; a warm, dry and secure home is associated with better health. In addition to basic housing requirements, other factors that help to improve well-being include the neighbourhood, security of tenure and modifications for those with disabilities. Overall the Building Research Establishment (BRE) has calculated that poor housing costs the NHS at least £600 million per year¹.

The exact relationship between poor housing and health is complex and difficult to assess. However, research based on the various sources of housing and health data suggests that poor housing is associated with increased risk of cardiovascular diseases, respiratory diseases and depression and anxiety² (Box 1). Housing-related hazards that increase the risk of illness are discussed later but include damp, mould, excess cold and structural defects that increase the risk of an accident (such as poor lighting, or lack of stair handrails). The strength of the evidence linking such factors to ill health varies. Studies using population data suggest that the strongest links are for:

Overview

- Poor housing conditions have a detrimental impact on health, costing the NHS at least £600 million per year.
- Social sector housing has improved, but less than 50% of private rented homes housing people on benefits were considered decent in 2008.
- Councils that have successfully improved private sector housing stock employed multiple local departments/funding sources.
- There are concerns about the future condition of private housing stock as it is not included in the new initiative. This could have adverse health implications.
- A wide range of central and local agencies is involved in housing. There is a need for co-ordination between these groups and comprehensive guidance to help local authorities to improve housing stock.

Box 1. Evidence for Health Problems Relating to Housing

Sources of Data

- Housing: English House Condition Survey
- Health: Fire and Rescue Service Returns; British Crime Survey; Home Accident Surveillance System; Hospital Episode Statistics; General Practice Research Database; Morbidity Survey in General Practice; Statutory Notification of Diseases; Office for National Statistics

Conditions Associated with Non-decent Housing

Cardiovascular diseases; respiratory diseases; rheumatoid arthritis; depression and anxiety; nausea and diarrhoea; infections; allergic symptoms; hypothermia; physical injury from accidents; food poisoning.

- Accidents 45% of accidents occur in the home and accidents are in the top 10 causes of death for all ages.
- Cold cold homes are linked to increased risk of cardio-vascular, respiratory and rheumatoid diseases, as well as hypothermia and poorer mental health. There were an estimated 36,450 excess winter deaths attributable to all causes in England and Wales in 2008/09³.

The elderly are particularly at risk of health problems relating to accidents and excess cold in the home. Elderly people who have retired may also be financially vulnerable.

- The elderly are more likely to suffer injuries during an accident. As outlined in Box 2, adaptations play a role in preventing accidents and maintaining independent living.
- The elderly are also more likely to suffer ill health in a cold home. Some may have a cold home because of the expense of heating, but fuel poverty is closely related to the energy efficiency of a house, as well as to income and fuel prices. The Department of Energy and Climate Change (DECC) announced proposals for energy efficiency in the December 2010 Energy Bill (Box 5).

In addition to evidence from population studies, other research approaches include:

- case studies that show an increase in quality of life after improvements to the home⁴;
- lab studies to test the safest layouts and materials⁵.

Many academics and professional bodies see a need for more long-term research to explore systematically the relationship between housing conditions and health. They emphasise the importance of monitoring the social impact of housing renovations. While some local authorities (LAs) and Primary Care Trusts (PCTs) currently do this – Liverpool is one example - this is the exception rather than the norm.

Housing Stock

There are four main housing sectors (Table 1). In England, in the private sector, 15% of owner occupiers (2.2 million) and 29% (890,000) of private renters are financially vulnerable⁶.

The Decent Homes Programme Funding

The Decent Homes Programme has been led and funded by the Department of Communities and Local Government (DCLG). By 2010, total funding was around £40 billion, £38 billion of which was for the social sector and £2 billion to the private. DCLG also allocates limited funding to LAs for adaptations if these are required⁷.

Box 2. Adaptations

Home adaptations (ramps, lifts, hand-rails, etc.) are used to restore normal use of their home to disabled people, enabling them to access it and use its facilities in safety and with less pain. Benefits include:

- reducing (or completely removing) the cost of care;
- preventing outlay on treating accidents (e.g. hip fracture);
- improving well-being by enabling a person to remain in their own home.

Definition of a Decent Home

Homes are inspected by surveyors or environmental health officers following the Decent Homes Standard. Since 2006, the assessment has used the Housing Health and Safety Rating System (HHSRS, Box 3). A home is assessed as being decent if it meets all of the following criteria:

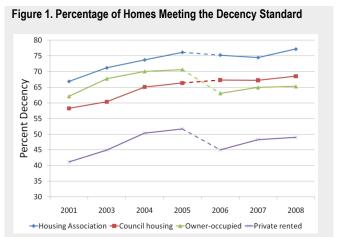
- is free from category 1 hazards (Box 3) as assessed by the HHSRS;
- is in a reasonable state of repair;
- has reasonably modern facilities and services;
- provides a reasonable degree of thermal comfort.

Sector	Households	Percentage
Social		
ocal authority	1,987,000	9
lousing association	1,904,000	9
rivate		
Owner-occupied	15,560,000	70
Rented	2,738,000	12

After rating the dwelling, the assessment also considers the needs of the current occupier. This means that the required changes may differ depending on the current resident. For instance, improvements may be necessary for less mobile individuals to reduce accident risk. If mobility is a problem then further adaptations (Box 2) may be required.

Proportion of Decent Homes

Figure 1 shows trends in the proportion of homes meeting the Decency Standard in each sector between 2001 and 2008. It shows all homes in the public sector (housing association and council housing) and homes in the private sector (rented and owner-occupied) housing people on benefits. The proportion of decent homes increased in all tenures during the programme. The proportion of vulnerable people (those on benefits) living in non-decent homes is greater in the private rented sector than in other tenures⁶.



Data from 2006 onwards are not comparable with data before due to changes in the Decent Home criteria

Social Housing Policy

In 2000 the target was set to make all social housing decent by 2010. To achieve this many LAs set up Arms Length Management Organisations (ALMOs) for their housing. ALMOs could apply for extra funding towards the repairs required to meet the Decent Homes Standard. LAs could also fund Decent Homes work through private finance initiatives or state supported stock transfer. Housing associations were expected to meet the Decent Homes target without extra government funding.

Overall, the government projects that 92% of homes in the public sector will be of decent standard by the end of 2010.

Box 3. The Housing Health and Safety Rating System (HHSRS)

This is a tool used to grade the danger from 29 housing hazards based on the likelihood of harm and probable consequences. It uses hazard scores to allow long-term exposure risks to be compared with hazards with potential immediate consequences. Each hazard score is allocated to a hazard category of which Category 1 is the most serious.

Physiological hazards Accident hazards Damp or mould Falls associated with bathrooms Excessive cold Falls on the level Excessive heat Falls associated with stairs and steps Asbestos and MMF Falls between levels **Biocides** Poor electrical wiring Carbon monoxide and Fire risks fuel combustion products Hot surfaces and materials I ead Collision and entrapment risks Radiation (e.g. radon) Explosion risk Poor position and operability of amenities Uncombusted fuel gas Volatile organic Risk of structural collapse and falling compounds Psychological hazards Infection hazards Overcrowding Poor domestic hygiene and/or pests Entry by intruders Poor facilities for food safety Poor lighting Poor sanitation and drainage Excess noise Poor water supply for domestic purposes

However, the BRE puts the number lower, at 70-80%, suggesting that the Government projection fails to include homes where the tenants refused renovations or those that became non-decent after 2001⁸.

The target for social housing remains at 100% of homes to meet a decent standard. Policy has changed however, so that council housing no longer has to be managed by an ALMO to receive extra funding. Changes to the LA housing finance system will provide LAs with more independence and the freedom to spend more on housing if they judge it to be a priority. The Decent Homes Programme has been allocated £1.6 billion over the next 4 years. £150 million was allocated to Disabled Facilities Grants in 2008/9 and this was protected in the October 2010 Spending Review.

Social Housing Policy Issues

While most homes in the public sector meet the decency standard, the estimated cost to reach 100% decency in this sector is £3.2billion, double the allocated funding. Apart from funding, the other main issues in this sector are the level at which the standard is set, and how well it is monitored and enforced. For instance, within the public sector, some property managers meet only the minimum standards, whereas others aim much higher.

Private Housing Policy

In 2002, the target was extended to include private sector housing. It aimed to ensure that 70% of private homes in which financially vulnerable people live meet the decent homes standard. The Housing Act 2004 expects LAs to keep all housing under review. It also expects them to take action on dwellings with category 1 hazards and gives them powers to act on category 2 hazards and to work with private landlords to improve their properties. Tools to reach this target included⁹:

permission to provide grants and loans;

Box 4. Rochdale

In 2003, only 30% of private dwellings in Rochdale with vulnerable tenants were decent. As a result, Rochdale Council made private housing a major target. It commissioned a survey to assess the quality of housing stock, and used Home Improvement Agencies to advise occupiers on the options available to them, with funding from multiple sources:

- DCLG's New Deal for Communities and Homelessness Prevention initiatives:
- regional funding from central government under the Private Sector Renewal and Local Public Sector Agreement Reward schemes;
- other sources of local authority funding, including pooling resources with the local fire department;
- public private finance initiatives;.

As a result, Rochdale Council increased the proportion of homes in the private sector meeting the Decency Standard to 50% by 2007.

- equity release loan schemes for owner-occupiers;
- provision of labour, such as a council 'handyman';
- referral to the Home Improvement Agency;
- information on tools, accredited builders and temporary accommodation.

LAs could apply for extra funding from sources such as the New Deal for Communities, Neighbourhood Renewal Funds and Disabled Facilities Grant (Box 4). They could also channel money towards housing through Local Strategic Partnerships. The national target was downgraded to an optional local target in 2007. There is now no central target for improving private sector housing, except for encouraging landlord accreditation schemes. No funding has been specifically allocated to Decent Homes work in the private sector. However, the lack of ring fencing on other funding means LAs may use that for improving private sector housing.

Private Sector Issues

Decent Homes work for the private sector received little designated funding, although some LAs were able to improve their private sector housing stock by using other funding streams (Box 4). However, not all LAs qualified for such a range of funding, so such examples are the exception rather than the norm. Where achieved, such success usually involved collaboration between local departments, PCTs and regional bodies. It is not clear what funding options will be available in the future and how easy it will be for LAs to work with the health sector.

There is a lack of literature advising LAs on the rights and responsibilities of parties involved in the private housing sector and on the funding sources available to improve private housing. The Sustainable Housing Action Partnership has published guidance on using private sector aid to improve housing in that sector. However, this does not include other (non-private) funding streams and was published before the new powers for LAs and communities proposed in the Localism Bill. Other issues facing LAs seeking to improve private sector housing are:

- difficulties in communicating/engaging with occupants in the private sector;
- the diverse nature of the private sector, which makes it difficult to target those most in need of assistance and to implement improvements in a systematic fashion.

Overall, the BRE estimates that it would cost £17.6 billion to achieve 100% decency in the private sector. While such long-term investments would be challenging in the current economic climate, lack of investment in homes now may result in increased costs in the future. 80% of current housing will still be in use in 2050¹⁰.

Private Rented Sector

The private rented sector contains the highest proportion of non-decent homes (Figure 1)⁶. Property maintenance and energy efficiency in this sector are at the discretion of the landlord. Key issues here are the short duration of tenancy agreements (typically 6 months) and lack of security of tenure. There are concerns that these may contribute to mental health problems and discourage tenants from:

- taking up home improvement initiatives;
- reporting problems to a landlord, for fear of being evicted;
- investing in rented homes.

Accreditation may help improve housing quality and tenant choice. However, if accreditation schemes are not implemented nationally then neglectful landlords could move to neighbouring boroughs offering more favourable conditions.

Overarching Issues

The Decent Homes Standard

Professional bodies have expressed concerns about the Decent Homes Standard. For instance, there is a general consensus that the standard is low, and that it offers little differentiation between non-decent housing and exceptionally poor housing. The standard for energy efficiency is also regarded as low. This reflects funding restrictions and variation in the costs of renovating different types of properties. The BRE and DECC have both suggested that increasing standards could result in greater savings and help to meet carbon reduction targets. There are also concerns that the standard does not include an accessibility measure. The housing charity Care & Repair England suggests that such measures could save money by reducing subsequent expenditure on disability adaptations.

Decent Homes Enforcement

Despite the systematic nature of the HHSRS, it still requires individual judgement and no formal accreditation is required to carry out the HHSRS survey. Moreover, there are concerns that the consistency of judgements made by assessors is not monitored once their training is complete. Thus, it is not known how reliable the system is.

Changes to Housing Benefits

Bodies such as the National Housing Federation are concerned that the recently-announced reductions in Housing Benefit may result in more social tenants struggling to maintain their tenancies. Proposals to stop providing social tenancies for life may also decrease security of tenure which could lead to an increase in mental health problems².

Box 5. Housing Funding Options:

- DCLG-allocated funding for Decent Homes as well as New Deal for Communities, Homelessness Prevention initiative, Private Sector Renewal and Local Public Sector Agreement Reward schemes
- DECC-allocated money to improve the energy efficiency of private homes for those on benefits through Warm Front. Warm Front is proposed to be phased out by 2013 and be replaced by the Green Deal, a pay as you save initiative involving energy companies that will be open to tenants from all housing sectors.
- The Department of Health (DH) allocated £150 million to projects to prevent hospital admission or to facilitate discharge; some of this could be used for housing adaptations. DH has also allocated £650 million to support social care, allowing LAs to work with the Primary Care Trusts to decide on priority areas.

The Chartered Institute of Environmental Health and Shelter have also expressed concerns that cuts in the Local Housing Allowance (the equivalent of housing benefit for private sector tenants) may lead to an increase in the proportion of economically vulnerable people seeking lowrent accommodation in the private rented sector. This could lead to more overcrowding (through down-sizing to smaller accommodation) which is known to be associated with poorer health. It could also increase the number of economically vulnerable people living in poorly maintained rented housing, at a time when LAs have less money to police the private rented sector or provide support services.

The DCLG-commissioned Rugg Review¹¹ considered a number of options including changing the benefit system to increase competition between landlords in the lower end of the private rented sector. For instance, providing assistance with deposits and rent in advance might encourage more landlords to accept tenants on housing benefit. However, a balance needs to be struck between improving standards while not deterring landlords from letting to vulnerable people.

Coordination

The cross-department interest in housing (Box 5) suggests that there should be close co-ordination between these parties, although currently no formal mechanism for this exists. Equally, it is important that there is sufficient communication between central and local government to aid local co-ordination (Box 4), particularly given the trend towards increasing devolution of authority to local providers.

Endnotes

- ¹ Nicol, S. et al., Quantifying the cost of poor housing, BRE press, 2010
- ² Marmot Review, London, 2010
- ³ Excess Winter Mortality by Age Group, Office National Statistics, 2010
- 4Good housing leads to good health, BRE, CIEH London, 2010
- ⁵ Review of Health and Safety Risk Drivers, DCLG, 2008
- ⁶ English House Condition Survey Annual Report, DCLG, 2008
- ⁷ Reviewing the DFG programme, Office of the Deputy Prime Minister, 2008
- 8 Beyond Decent Homes, DCLG Select Committee, 2010
- Housing Renewal, Office of the Deputy Prime Minister Circular, 05/2003
 Boardman, B., Home Truths. Environmental Change Institute, Oxford, 2007
- ¹¹ Rugg, J. and Rhodes, D, *The Rugg Review*, Centre for Housing Policy, 2008