



GOOD HOUSING BETTER HEALTH

The Academic - Practitioner Partnership
July 2016



GOOD HOUSING BETTER HEALTH

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For the Academic-Practitioner Partnership

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GOOD HOUSING: BETTER HEALTH

EXECUTIVE SUMMARY

1. There is widespread reference to a housing crisis in the United Kingdom and quite properly, an emphasis on the need to build more homes. However most housing need, demand and movement is in the existing housing stock and it is essential that public policy addresses the condition, affordability, suitability, appropriateness and security of this housing. Too little attention is given to how the existing housing stock facilitates labour mobility and recruitment; is a key resource for economic and social development; and often, a major cost to public services (*paragraph 39*).
2. One fifth of the housing stock in England does not meet the Decent Home Standard and one third of households renting privately are in housing below this standard. Many funds for housing renewal have been withdrawn, with profound and damaging implications for the nation's health (*paragraph 40*).
3. The paper argues for a more comprehensive, less one-sided approach to housing policy. It puts forward an action plan to get housing quality back on the policy agenda. And it calls for a wider recognition of housing-related issues such as health, energy efficiency, poverty and social inclusion (*paragraphs 42 – 46*).



The housing stock is a
NATIONAL ASSET
of the HIGHEST
social and economic
importance ”

4. In the 1980s, the housing stock was seen by government as a national asset of the highest social and economic importance. Today, the United Kingdom has the oldest stock and the highest medical costs associated with inadequate housing of any of the EU member states. Future action to improve existing housing would generate savings in expenditure elsewhere and contribute to wider policy effectiveness (*paragraphs 48 – 49*).
5. Building new housing will not address problems in the existing stock related to: inadequate housing, including disrepair and cold homes; unsuitable housing, including overcrowding and the needs of older people; unaffordable housing, including high maintenance and running costs; and insecure housing, including fear of eviction and loss of homes (*paragraph 50*).
6. The 10-year Decent Homes Programme to 2010 was successful in tackling many problems of house condition in the social rented sector but similar progress has not been made in the owner-occupied and private rented sectors (*paragraphs 53 – 55*).
7. If inadequate conditions are not addressed, costs are incurred elsewhere. Authoritative estimates for 2011 showed that leaving people in the poorest housing in England costs the NHS £1.4 billion in first year treatment costs alone (*Box 4*).
8. The £10 billion cost of improving all the 'poor' housing in England would pay for itself in just over 7 years – and then accrue further benefits (*Box 4*).
9. In England, 656,000 privately rented dwellings are associated with excess cold. The cost to the NHS of not improving these cold homes has been estimated at £145m a year (*Box 4*).
10. There is a clear relationship between excess winter deaths, low indoor temperature and low energy efficiency (*Box 6*). The Public Health White Paper 2010 said 'we could prevent many of the yearly excess winter deaths – 35,000 in 2008/09 – through warmer housing...' (*paragraph 57*).
11. Cold housing negatively affects children's educational attainment, emotional wellbeing and resilience. The long-term solution to reduce the likelihood of exposure to low indoor temperatures is to improve the energy efficiency of the national housing stock (*paragraph 58*).
12. Twelve per cent of the UK's carbon emissions come from housing, and improvements in thermal efficiency are essential if carbon emissions targets are to be met. Even relatively minor health outcomes can result in days off work affecting productivity, household budgets and the economy. Such outcomes also affect school attendance resulting in lower educational achievement and ultimately, economic performance (*paragraph 59*).
13. Exposure to extreme heat, leading to overheated housing, even in a cool summer (*paragraph 60*) and failure by people to ventilate their homes (*paragraph 61*) are other problems detrimental to health, especially for older people.
14. Even where housing is well designed, built and maintained, it may be unsuitable where there is a mismatch between what the property provides and the occupier needs (*paragraph 63*).
15. For example, 3 per cent of English households experience overcrowding which is authoritatively linked with: impaired educational attainment; child health and development issues, including meningitis, respiratory conditions and slow growth rate; accidents in the home; stress, anxiety and depression; and poor adult health (*paragraph 64*).
16. Adequate and appropriate housing may be unaffordable because of high mortgage/rental costs; and high running costs including maintenance, energy, water/drainage and local taxes. These issues can arise in all tenures but private tenants pay the highest proportion of their household incomes on housing costs (*paragraph 65*).
17. Housing and poverty are strongly connected and the likelihood of living in inappropriate or poor housing conditions is greater among those experiencing poverty, including fuel poverty (*Box 9*).
18. Unaffordable housing affects household budgets, health, education and the ability to gain and sustain employment. Although households with low incomes find high energy costs more difficult to afford, problems with the costs of heating homes stem from their design and poor energy efficiency (*Box 10*).
19. Private renters and older households are more likely to live in homes with the worst energy efficiency, for example, in 2013, around 1.5 million dwellings (6%) were in the worst SAP bands (F or G) and of these 28% (419,000) were privately rented (*Box 10*).

20. Housing that is adequate, suitable and affordable may be insecure where there are no rights to continuing use, and where occupiers need to move home frequently, experience homelessness or are living in temporary accommodation. Recurrent insecurity can affect health, education, the ability to obtain and sustain employment, and community cohesion (*paragraph 67*).
21. In recent years, homelessness has been increasing in England, especially because of issues associated with shorthold tenancies. Between 2009/10 and 2014/15 homelessness arising from the ending of such a tenancy more than tripled (*to 16,040 or 29% of cases*) while the numbers becoming homeless for other reasons hardly changed (*paragraph 68*).
22. Of all the problems in the private rented sector, insecurity is said to have the greatest impact on health and wellbeing. Six- or twelve-month tenancies, even in succession, do not provide stability for those seeking to establish a home (*paragraph 69*).
23. Government sees housing as a national priority and considers that the failure to build enough homes harms productivity, restricts labour market flexibility, and frustrates the ambitions of people who would like to own their own home. The economic argument that an effective land and housing market promotes productivity is, however, relevant to the housing stock as a whole. If significant parts of the existing stock fail to meet modern standards and fall short of what households require, or remain empty for long periods, the impact is the same as where there is insufficient housing supply. A balanced approach to developing housing that will maximise productivity, mobility and choice involves giving attention to the contributions of both new and existing housing (*paragraph 70*).
24. Compared with new building, different policy actions are needed to ensure that existing housing contributes fully to economic and other objectives. Lessons can be applied from past experience of regeneration, gradual renewal and neighbourhood renewal; and are relevant to needs in both urban and rural areas (*paragraphs 71 – 72*).
25. The UK has a rich tradition of policies and experience to improve inadequate and modernise older housing and in the past, pioneering approaches were developed to housing and urban renewal. But in recent years funding and activity to address the problems associated with older housing has declined (*paragraph 73*).
26. In spite of the evidence of increasing house condition problems, the level of enforcement of the Housing, Health and Safety Rating System remains low. Some local authorities rarely use the statutory provisions, though this may partly reflect lack of resources. The cost of poor housing will continue to be considerable until there is a change in strategy (*paragraphs 74 – 76*).
27. We need effective approaches to ensure that the huge national asset of the existing housing stock is properly maintained; used to meet housing needs; and to sustain health, education, employment and the economy (*paragraph 77*).

“ Both existing and new housing must contribute to a balanced policy that will **maximise productivity, mobility and choice** ”

28. A significant part of the housing stock is inadequate, unsuitable or unaffordable for its current users or offers them insufficient security. This stock generates costs for health and other services and damages individual wellbeing, productivity and the economy. Some of the worst conditions associated with existing housing are remarkably unresponsive to market mechanisms, especially in regions and parts of the economy where productivity and demand are relatively low and housing shortages are less (*paragraph 78*).
29. The importance of addressing issues associated with the existing housing stock alongside strategies for new housing supply and of recognising the interaction between housing, health, education and the economy merits a new leadership to champion better housing and better health and wellbeing. A new Ministerial position is needed with explicit responsibility for coordinating and animating a new approach to housing and how it interacts with other policy areas and policy objectives (*paragraph 80 (1)*).
30. Plans and policies for existing and new housing should be integral parts of local and regional strategies for economic and social development and also be developed by new combined authorities. Investment to upgrade older housing will generate substantial and continuing savings in the costs of health care and will contribute to better education and employment outcomes. Increased capacity and action to respond to vulnerable households and take the action possible under existing law to deal with unhealthy housing and unlawful landlord actions is also essential (*paragraph 80 (4)*).
31. Both existing and new housing should be treated as part of the infrastructure crucial to strengthening economic development and, through its impacts on health and education, improving productivity (*paragraph 80 (5)*).
32. Space standards in new housing are the lowest in Europe and in other respects we no longer adopt the standards that were required in the past. A review is needed of the regulation of health and safety standards for new and refurbished housing, and to improve coordination with fitness and health and safety standards (*paragraph 80 (6)*).
33. Local authorities must continue to keep housing conditions under regular review and to develop strategies to address the worst, most difficult and most persistent problems (*paragraph 80 (7) and (8)*).
34. It is reasonable in most cases to expect owners to maintain and improve their properties but some do not do so. This generates persistent and costly hazards. There is a need to identify where policy interventions can encourage and enable owners to carry out work to mitigate hazards and to protect the residents of these properties. Where there is no reasonable expectation that owners can or will address outstanding problems, local action and resources of staff and funding are required to deal with them (*paragraphs 80 (9) and (10)*). In the private rented sector, working locally with landlords to mitigate problems and take appropriate enforcement action is essential to respond to the existing and projected scale of poorly managed private renting (*paragraph 80 (11)*).
35. Resources are required to sustain local approaches to health and safety problems in the existing housing stock, in particular the needs of older owners who cannot afford or require assistance with necessary repairs; and the needs of households with members with a disability. The role of Home Improvement Agencies and Disabled Facilities Grants are critical for these groups and continuing the funding of these programmes is essential (*paragraph 80 (12)*).
36. Better enforcement is needed of regulations affecting the different dimensions of housing referred to in this paper: those related to standards for new construction, energy efficiency, health and safety, overcrowding and sharing, and security from eviction (*paragraph 80 (13)*).
37. A comprehensive approach that identifies and takes into account all sectors should recognise all those involved in ensuring better housing and neighbourhoods: industry, including the building and building materials industries, architects, designers and surveyors, the building, health and planning professions, financial institutions, housing providers, owners, residents and tenants (*paragraph 80 (14)*).
38. A comprehensive policy framework ideally requires a complete revision of the legal, economic, fiscal and administrative environment that applies to all aspects of housing, to ensure it is co-ordinated, and recognises that promoting and encouraging better housing underpins the health and wellbeing of society. Good housing equals better health and wellbeing (*paragraph 81*).

GOOD HOUSING: BETTER HEALTH

FOREWORD

39. There is widespread reference to a housing crisis in the United Kingdom. In response to this there is, quite properly, an emphasis on the need to build more homes. However most housing need, demand and movement is in the existing housing stock and it is essential that policy addresses the condition, affordability, suitability, appropriateness and security of this housing. In the past, governments have recognised the importance of maintaining and making the best use of older housing in strategies to ensure that the housing stock supports economic and social objectives and meets both housing demand and need. Currently, government emphasises the importance of housing for the economy but is preoccupied with policies for building new housing and gives insufficient resources and attention to how the existing housing stock facilitates labour mobility and recruitment; is a key resource for economic and social development; and often, a major cost to public services.
40. Our concern about present-day housing and the starting point for this paper is exemplified as follows:
- In 2011, around 20 per cent of housing in England was below the decent home standard and more than 33 per cent of households renting privately were in housing below this standard;
 - In 2011/12, just 6,000 dwellings were demolished. At this rate of replacement, a new dwelling will have to last more than 3,500 years;
 - In 1984/85, expenditure on housing renewal in England was £1.1 billion, or more than £3 billion at current construction costs;
 - Under the Comprehensive Spending Review 2010, the housing renewal budget for 2011/16 was zero. This compares with about £1.08 billion in each of the preceding three years 2007/08 to 2009/10;
 - Add to this loss the effective loss per annum of £1 billion for housing-related support (*Supporting People*);
 - The health implications of this are profound: around one million poor/vulnerable/elderly households per annum have lost financial support through housing renewal capital grant.
41. These facts are familiar to housing, environmental health and public health practitioners, and to some housing academics, yet seldom feature in contemporary political debate, which sees the housing problem as one of housing shortage, insufficient land supply and 'planning constraints'.
42. This paper argues for a more comprehensive, less one-sided approach to housing policy. It puts forward an action plan to get housing quality back on the policy agenda. And it adds our voice to those calling for a more balanced assessment of the country's housing requirements and a wider recognition of housing-related issues such as health, energy efficiency, poverty and social inclusion.
43. The paper draws on the professional experience of partnership members and is supported by research and analysis from many sources. We publish it as a contribution to discussion and debate. The aim is to improve the understanding of and commitment to the part played by good housing in contributing to better health.
44. The paper sets out the case for increasing the focus in current policy on the quality and use made of the existing housing stock.
- We need effective approaches to ensure that the huge national asset of the existing housing stock is properly maintained; used to meet housing needs; and to sustain health, education, employment and the economy;
 - Increasing the amount of new house-building can improve the overall housing situation but we need a more balanced approach to housing: a new holistic strategy is required to secure the improvement of the poorest existing housing and ensure that it plays its part in meeting effective demand;
 - Both existing and new housing should be treated as part of the infrastructure crucial to strengthening economic development and, through its impacts on health and education, improving productivity;
 - Plans and policies for existing as well as new housing should be integral parts of local and regional strategies for economic and social development and also be developed by new combined authorities;
 - Investment to upgrade unhealthy older housing will generate substantial and continuing savings in the costs of health care and contribute to better education and employment outcomes;
 - While in most cases it is reasonable to expect the owners of existing housing to maintain and improve properties, it is evident that some do not do so and this generates persistent and costly hazards. There is a need to identify where policy interventions are necessary to encourage and enable owners to carry out work to mitigate hazards and to protect the residents of these properties;
 - Increased capacity is also essential to respond to vulnerable households and take the action possible under existing law to deal with unhealthy housing and unlawful landlord actions.

45. Approaches to housing policies and strategies that focus on one individual aspect of housing without considering the effects they may have on other aspects have left major problems – the losers being households, society and the economy. What is needed is a comprehensive framework that identifies and takes into account all sectors, and incorporates a means to assess the impact of any one policy/strategy on other sectors of housing. Such a comprehensive framework should recognise all those involved in ensuring better housing and neighbourhoods.
46. There should be a common goal for all parts of the housing sector: good housing equals better health and wellbeing.

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INTRODUCTION

rebalancing the housing debate

47. This paper makes the case for increasing the attention and resources given to ensuring that existing housing is managed and maintained in a way that protects occupiers and contributes fully to economic development, health, education and wellbeing. We believe this applies in all the countries of the United Kingdom although the case made below draws mainly on evidence for England.
48. Existing as well as new housing plays a vital role in the economy, in health and wellbeing and in supporting educational attainment, employment and social interaction. Recent changes making local authorities responsible for public health and establishing local Health and Wellbeing Boards provide opportunities to build more integrated approaches to improvements in prevention and reductions in the need for costly health care. The contribution that housing makes to productivity as part of the economic infrastructure also highlights the need for policies to focus on the whole housing sector. The 1985 Green Paper *Home Improvement – a new approach* expressed the view that ‘our housing is a national asset of the highest social and economic importance’ (DoE, 1985: 1) and this remains true today.
49. The United Kingdom has the oldest housing stock and the highest medical costs associated with inadequate housing of any of the EU member states (BRE, 2016). Problems in the existing housing stock include those associated with poor design, construction and disrepair, cold homes, affordability, unsuitable use, overcrowding and insecurity of occupancy. While some problems are particularly evident in the private rented sector and older owner-occupied dwellings, previous programmes designed to address them no longer exist and local capacity to enforce existing laws has declined. The implications of poor housing for health, health expenditure and other policy areas including energy efficiency and fuel poverty suggest this is a serious weakness. Inadequate and unattractive housing affects the prospects of individual households but also affects plans to attract employment and employers and through that, productivity. Adopting policies to address problems in the existing housing stock is an urgent priority across all tenures, but especially in the private rented sector. Policy action to improve older housing will generate savings in expenditure elsewhere and contribute to wider policy effectiveness.
50. Building new housing will not address inadequacies in the existing housing stock related to:
- Inadequate housing: poor design, construction, modernisation and maintenance;
 - Unsuitable housing: inappropriate use or mismatch between property and occupiers’ needs;
 - Unaffordable housing: including rents/service charges, mortgages, energy and other running costs;
 - Insecure housing: fear of eviction or loss of home.
51. These issues, discussed in more detail below, all relate to the appropriate standards for new house building as well as for existing housing. All housing that falls short in terms of design, construction and maintenance generates costs for the economy and society and should be a matter of concern for policy. There is a risk that some new housing does not provide sustainable, safe and healthy housing. Building regulations are not designed to ensure this and unsurprisingly fail to do so. For example, new properties and older properties where work has been completed that is subject to building regulations may have trip hazards and fall short in terms of safety, ceiling heights, room sizes and other matters that are important for health and safety. Furthermore, in the legislation relating to new housing, there should be greater consistency across the different standards such as building regulations, fitness standards and health and safety standards, as well as more effective enforcement in each case.

Inadequate housing

52. Where dwellings are inadequate in design, construction or maintenance they are often unattractive to households with choice and can present serious risks for their occupiers. These may involve:
- Inadequate protection against local climate and conditions (*cold, heat, damp*);
 - Potentially dangerous design features (*stairs, windows, collision hazards*);
 - Structural instability;
 - Lack of essential facilities (*sanitation, personal and domestic hygiene, food safety*), maintenance and modernisation.

If these conditions are not addressed, opportunities for improvement are missed and costs are incurred elsewhere.

DEFINITIONS

Housing

The World Health Organisation **WHO** defines housing as a broad concept involving four interrelated elements: the home, the dwelling, the community, and the neighbourhood (*Ormandy, 2009: 3 – 4*).

The **home** is the social, cultural and economic structure created by the household.

The **dwelling** (house or flat) is the physical structure providing shelter and the necessary space, facilities and amenities for the household. Any unsatisfactory condition of the dwelling may lead to one or more physical and/or mental health effects and interfere with the creation of the home.

The **community** is the social, cultural and economic structure built by those living, working and serving within the neighbourhood.

The **neighbourhood** is the physical infrastructure, including the public services, shops, places of worship, greenery, playgrounds and walking areas.

Health

The definition used in *Housing, Health and Safety Rating System: Operating Guidance (ODPM, 2006)* is based on the definition adopted by **WHO** and referred to in the preamble to the **WHO** Constitution, 1952: 'an individual's state of physical, mental and social wellbeing...is not limited to the presence or absence of disease, infirmity or physical injury, but includes psychological injuries and distress'.

CHANGING HOUSING TENURE

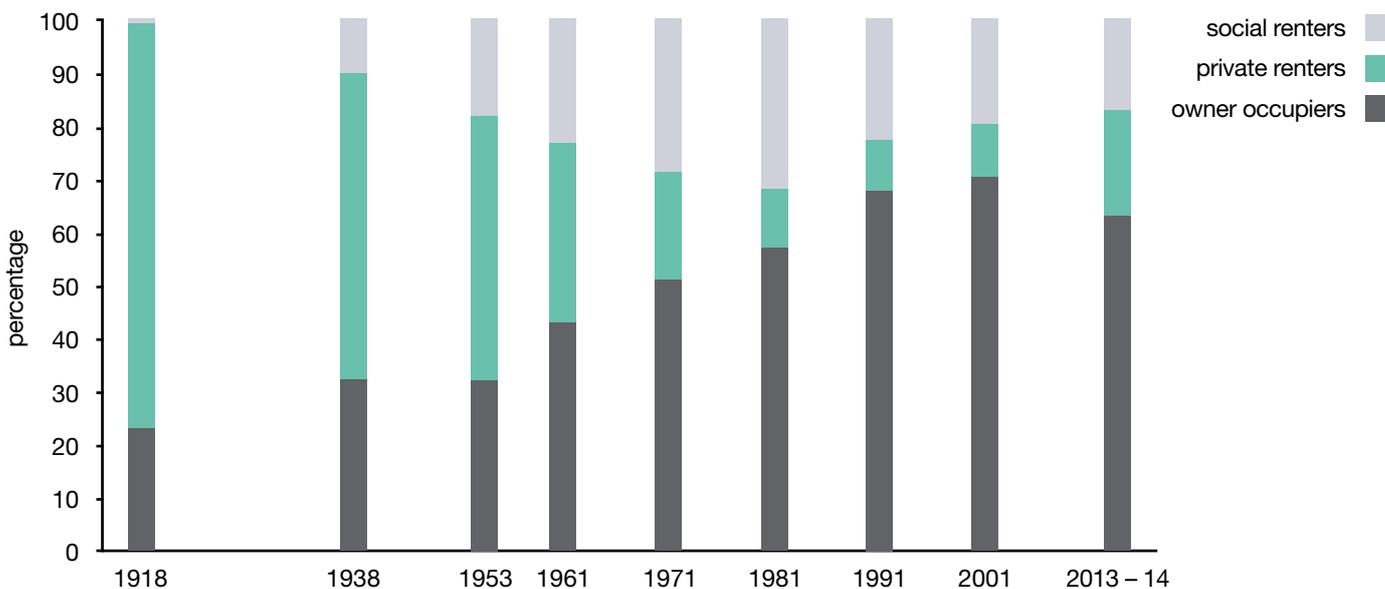
- 53. The growth of the private rented sector in recent years and the increasing concentration of lower income households in private renting increases the risks that the poorest households are exposed to inadequate housing for lengthy periods with impacts on health and education.
- 54. A higher proportion of properties in the private rented sector are in poor condition on a number of measures, including the Decent Home Standard. This was applied relatively successfully in tackling house condition problems in the social rented sector but there has been no equivalent success in the private rented and owner occupied sectors.



BOX 2

Changing housing tenure:

Figure 1: Housing tenure of all households in England and Wales: 1918 to 2014



Source: 1939 – 1981 based on Holmans, A (1987: 169-70)

FITNESS FOR HABITATION, THE HHSRS AND THE DECENT HOME STANDARD

55. The Decent Home Standard applies to housing in both public and private sectors but there has been no centrally planned programme to bring all private housing up to the standard. Reviewing progress towards the Labour government's target of 'a decent home for all', the House of Commons Communities and Local Government Committee report on the future of the Decent Homes Programme (*House of Commons, 2010: 14*) concluded that 'the ... programme has had a dramatic, positive effect on the living conditions of almost all social housing tenants by putting very significant resources into tangible improvements to social housing.' By contrast, the Committee commented on the relative lack of progress in the private sector: '... [It is] a huge missed opportunity that the considerable political will demonstrated by the Government in raising social sector housing to the decent homes standard has not been matched by similar energies with respect to the private sector; and that the policy in the private sector appears to have failed' (*Turkington and Watson, 2015: 78*).

BOX 3

Fitness for habitation, the Housing, Health and Safety Rating System, and the Decent Home Standard

Until 2006, the standard of 'fitness for human habitation' was the minimum standard for housing in England and Wales. First introduced into legislation in the Housing Repairs and Rents Act 1954 and modified occasionally since then, it applied throughout England and Wales to all housing in all tenures but was used mainly to assess conditions in the private sector (*Ormandy and Burridge, 1988: 59 – 72*).

In 2006, the 'fitness' standard was replaced by the **Housing, Health and Safety Rating System** (HHSRS) under the Housing Act 2004. This new system of assessing the condition of the housing stock had been developed over a number of years and was designed to evaluate the effects of twenty-nine potential hazards on the inhabitants of a property. The HHSRS is not a minimum standard but a means of avoiding or at least minimising potential hazards (*DCLG, 2006: 5; ODPM, 2006*); it uses a risk assessment approach to enable risks from hazards to health and safety in dwellings to be minimised.

The Housing Health and Safety Rating System since 2006 has contributed to the Decent Home Standard. This is an administrative standard. For a dwelling to be considered 'decent' it must

- meet the statutory minimum standard for housing. Dwellings posing a Category 1 hazard* under the HHSRS are considered 'non-decent';
- be in a reasonable state of repair;
- have reasonably modern facilities and services;
- provide a reasonable degree of thermal comfort.

* If the HHSRS assessment of a hazards produces an unacceptably high score (Category 1), the local authority has a duty to take appropriate action. For example, by requiring an owner to carry out improvements to the property, such as installing central heating and insulation to deal with cold, fixing a rail to a steep stair to deal with the risk of falls, or mending a leaking roof. In appropriate cases, the authority may serve an enforcement notice, such as requiring the dwelling to be improved, declaring a clearance area, prohibiting the use of the dwelling or restricting the number of people allowed to live there (*Turkington and Watson, 2015: 55 – 6*).

THE COSTS OF POOR HOUSING AND THE COSTS OF COLD HOUSING

56. Thermal comfort is influenced by a range of environmental and individual factors (*Ormandy and Ezratty, 2012*) but as many of these do not remain stable, it is ambient temperature that is generally referred to in guidance. While excess winter deaths (EWDs) are used as the headline consequence of severe exposure to low temperatures in the home, there are other health outcomes. As the temperature falls, hypothermia (a drop in the body's core temperature) becomes a possibility. Also, low indoor temperatures often result in other threats to health such as dampness and mould associated with respiratory conditions (*Ormandy and Ezratty, 2015*). So behind EWD headlines there is also increased morbidity due to cold homes. While improved medical treatment and response might reduce EWDs, morbidity will increase, with increased demands on the NHS, if the problem of cold homes is not addressed.

BOX 4

The costs of poor housing:

An estimate for 2011 indicated that leaving people in the poorest housing in England costs the NHS £1.4 billion per annum in first year treatment costs (*Nicol et al., 2015; Roys et al, 2016*). Without action, these costs recur in subsequent years.

- The implication is that finding £10 billion to improve all of the 'poor' housing in England would save the NHS £1.4 billion per annum in first year treatment costs alone. Such investment would pay for itself in just over 7 years – and then accrue further benefits.
- In 2013, 2.8 million dwellings in England (12%) had at least one Category 1 hazard and 460,000 (2% of the stock) had two or more of these hazards (*DCLG, 2015a; Garrett and Burris, 2015*). The most common Category 1 hazards (affecting around 1.6 million, or 7 per cent of dwellings) were associated with falls especially on stairs, between levels and in bathrooms. The next most common hazard, excess cold, affected 1 million dwellings (4%).

The costs of cold housing:

In 2013, 1.7 million dwellings in England (7.5%) failed to meet the Decent Home Standard Thermal Comfort criterion (*DCLG, 2015a*). These energy inefficient dwellings represent an environmental problem by wasting heat. When such dwellings are occupied by low income households, there is the probability of severe health and social outcomes including fatalities. This energy vulnerability (fuel poverty) involves the inability to afford sufficient energy to avoid thermal discomfort. Some 656,000 privately rented dwellings in England are associated with excess cold. The cost to the NHS of not improving these dwellings and caring for people made ill by cold homes has been estimated at £145m a year (*BRE, 2011: 16*)

THE WORLD HEALTH ORGANISATION AND THERMAL COMFORT

57. The Public Health White Paper 2010 stated 'We could prevent many of the yearly excess winter deaths – 35,000 in 2008/09 – through warmer housing...' (*HM Government, 2010: 5*). In the winter of 2014/15 an estimated 43,900 EWDs occurred in England and Wales, the highest number since 1999/00, with 27 per cent more people dying in the winter months compared with the non-winter months. Furthermore:

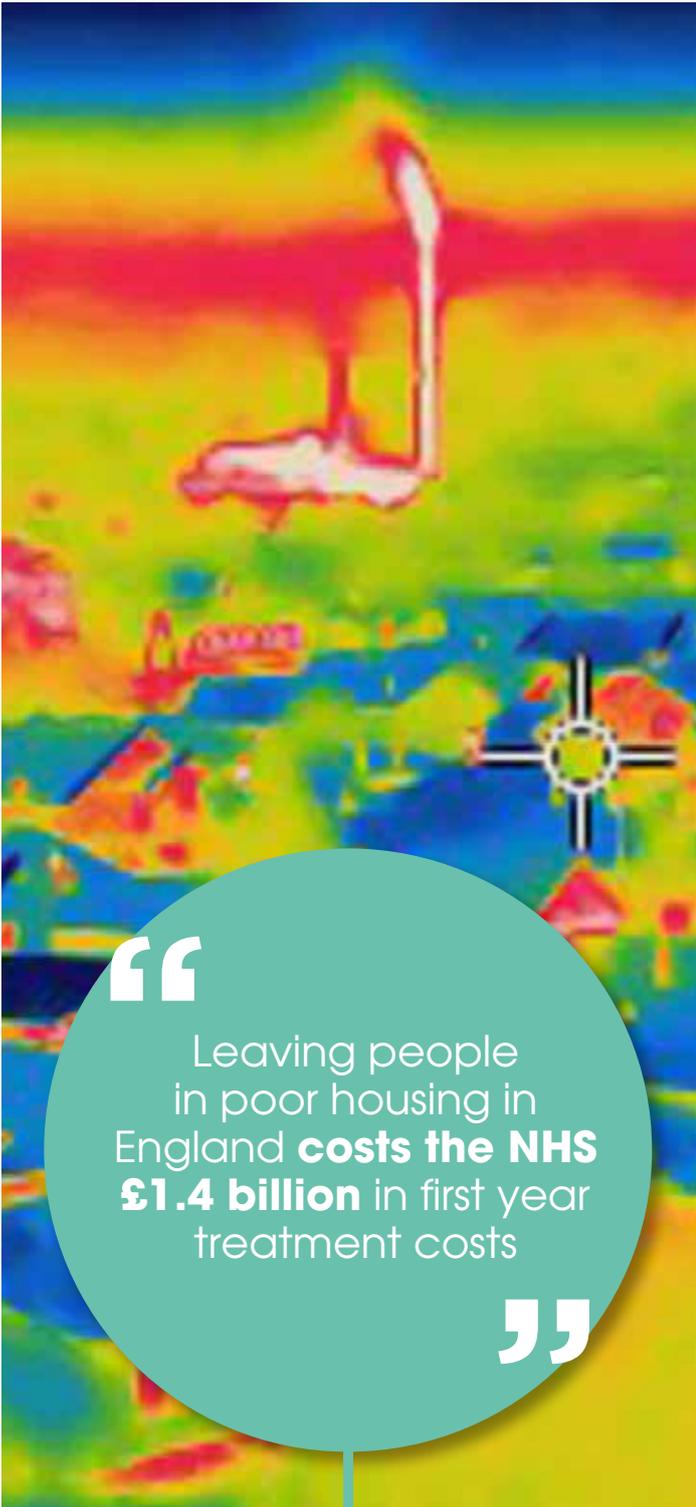
- Children living in cold homes are more than twice as likely to suffer from respiratory problems as children living in warm homes;
- More than 1 in 4 adolescents living in cold housing are at risk of multiple mental health problems, compared to 1 in 20 adolescents in warm housing;
- Colds and flu exacerbate existing conditions such as arthritis and rheumatism.

BOX 5

The World Health Organization and thermal comfort:

The World Health Organization (**WHO**) recommended that a dwelling should provide protection against the local climate, including protection from excess cold and there should be a thermal comfort range of 18°C to 24°C. Thermal comfort in the home environment is not just about satisfaction with the ambient temperatures, but is inextricably linked to health, particularly the health of those susceptible to cold, including elderly, very young and disabled people, and those with functional limitations.

As temperatures fall below 18°C, the potential impact on health increases in severity. The body's reaction to low temperatures includes thickening of the blood, hypertension, and an increased risk of cardiovascular or cerebrovascular events such as heart attacks and strokes. Respiratory stress starts at around 16°C and cardiovascular stress when the temperature falls below 12°C (*Ormandy and Ezratty, 2012*).



“

Leaving people in poor housing in England **costs the NHS £1.4 billion** in first year treatment costs

”

EXCESS WINTER DEATHS

58. Cold housing negatively affects children's educational attainment, emotional wellbeing and resilience; family dietary opportunities and choices; and dexterity. It also increases the risk of accidents and injuries in the home. The long-term solution to reduce the likelihood of exposure to low indoor temperatures is to improve the energy efficiency of the national housing stock.
59. There are additional social, economic, environmental and health costs associated with inadequate housing. Some 12 per cent of all carbon emissions in the UK are judged to come from housing (DECC, 2014) and it is essential that improvements are made in the thermal efficiency of housing if targets related to the reduction of carbon emissions are to be met. Even relatively minor health outcomes can result in days off work with consequential impacts on productivity, household budgets and the local and national economy. Such outcomes can also affect school attendance, contributing to educational under-achievement, and potential future economic performance.
60. It is not only cold homes that can be detrimental to health. Exposure to extreme heat is already a health issue. Currently, one-fifth of homes in England could experience overheating even in a cool summer. Flats, which are generally more at risk of overheating than houses, now make up 40 per cent of new dwellings compared to 15 per cent in 1996. Urban green space, which helps to mitigate the urban heat island effect, has declined by 7 per cent since 2001. In the UK, excess deaths from high temperatures are projected to triple to 7,000 per year on average by the 2050s as a result of climate change and a growing and

ageing population (Committee on Climate Change, 2014: 12). The Environmental Audit Committee believes that air pollution is nearing a 'public health crisis', causing nearly as many deaths as smoking. There are an estimated 29,000 deaths annually in the UK from air pollution (House of Commons Environmental Audit Committee, 2014: 5).

61. Failure by people to ventilate their homes can lead to the development of more respiratory problems. Adults living in energy-efficient social housing may have an increased risk of asthma. Modern efficiency measures are vital to prevent heat loss and reduce energy use, yet some people, particularly those living in fuel poverty, are unlikely to heat a building enough, or ventilate it sufficiently, to prevent the presence of damp and mould, factors that can contribute to asthma (Sharpe et al, 2015).
62. Various psychological effects, including depression, have been linked to a lack of natural light and/or the lack of windows with a view (DCLG, 2008). The shape, position and size of windows and the layout of rooms can all affect the amount of daylight penetrating into a dwelling.

Unsuitable housing

63. Even where housing is well designed, built and maintained, it may be unsuitable if there is a mismatch between what the property provides and the occupier needs, for example, through:
- overcrowding (insufficient space/rooms);
 - excess space/rooms (affecting affordability and the costs of heating);
 - children living in accommodation without appropriate play space and with other risks to health and safety. This includes children living in flats above the ground floor;
 - being otherwise unsuitable (elderly; functional limitations; children).

BOX 6

Excess winter deaths:

There is a clear relationship between excess winter deaths, low indoor temperature and low energy efficiency: excess winter deaths are almost three times higher in the coldest 25% of housing than in the warmest 25%; 40% of excess winter deaths are attributable to cardiovascular diseases; and 33% to respiratory diseases. Most excess winter deaths were among people aged 75 and over with an estimated 36,300 in this age group in 2014/15, compared with 7,700 among people aged under 75 (ONS, 2015).

A person wearing a white knitted hat and a white sweater is sitting in front of a radiator. They are warming their hands on the radiator. The scene is dimly lit, suggesting a cold environment. A green circular graphic contains a quote.

“ There is a clear relationship between excess **winter deaths**, especially of **older people**, **cold housing** and **low energy efficiency** ”

OLDER PEOPLE

64. Marmot (2014) has referred to the link between living in overcrowded circumstances and impaired educational attainment, child health and development (meningitis, respiratory conditions, slow growth rate), accidents in the home, stress, anxiety and depression and poor adult health. For many families with a disabled member, lack of adequate space is known to be a central problem, affecting the physical and mental health of all those in the household (Oldman and Beresford, 2000; Heywood 2001: 14 – 15; EDCM 2008: 10).



BOX 7

Older people:

Many aspects of unsuitable housing and inadequate housing particularly affect older people (Garrett and Burris, 2015). In 2012 some two million older people lived in homes that failed to meet the Decent Home Standard, with 1.3 million in a home with a serious hazard, resulting in high costs to the NHS, particularly due to cold related health problems and falls. There were 9.5 million households aged 55 and over (43% of all households) and 1.3 million of these older households lived in dwellings with at least one Category 1 hazard. The older households living in non-decent homes in 2012 included:

- 815,000 households aged 55 – 64;
- 652,000 households aged 65 – 74; and
- 533,000 households aged 75 and over.

In 2012 there were 2.3 million households in fuel poverty in England and 34% of them were aged 55 years or over. The first year treatment cost of poor housing to the NHS, for households aged 55 years or more, was estimated to be £624 million in 2011 (Garrett and Burris, 2015: 12)

The proportion of older households living in a home with level access, flush threshold, WC at entrance level and sufficiently wide doors and circulation space, was similar for all older age groups, ranging from 4% (aged 55 – 64 years) to 7% (aged 80 years or over) but around a fifth of dwellings occupied by people aged 65 years and over had none of these key features; and this proportion was higher for households aged 55 – 64 years (24%).

OVERCROWDING

Unaffordable housing costs

65. Adequate and appropriate housing may be unaffordable because rents or mortgages are high or because of high running costs associated with maintenance, energy, water and drainage and local taxes; or both. These issues can arise in all tenures but private tenants pay the highest proportion of their household incomes on housing costs. The growth of the private rented sector, at the expense of both social renting and owner-occupation, has had implications for housing affordability.

BOX 8

Overcrowding:

The reduction in overcrowding was significant between the 1950s and 1970s but some overcrowding remained and, in recent years, it has increased slightly. Some 3% of households in England experienced overcrowding in 2013/14 compared with 2.7% in 1995/96. Overcrowding remains highest in the social rented sector (6.2% in 2013/14) but has increased strikingly in private renting (from 3.2% in 1995/96 to 5.4% in 2013/14) (DCLG, various). As private renting has expanded and housed more of the poorest households, so overcrowding has become a greater problem within the tenure. If this trend is sustained there are implications for health and educational attainment.

FUEL POVERTY

66. In the UK the private rented sector is not an affordable or secure option for many households. While affordable and stable rents and a secure tenancy for lower income households can help to provide routes out of poverty, expensive and insecure tenancies can actually induce or exacerbate poverty. As private renting has grown it has housed more of those on the lowest incomes after housing costs. Between 2002/3 and 2012/13 the number of people living in poverty in the private rented sector, measured as the proportion of people in households with an after housing costs income below 60 per cent of the contemporary median, almost doubled to 4.2 million and increased as a proportion of households in poverty from 15 to 32 per cent (*DWP, various*). Housing and poverty are strongly interconnected: the likelihood of living in inappropriate or poor housing conditions is greater among those experiencing poverty while inadequate housing has detrimental effects on household budgets, health, education and ability to gain and sustain employment.



BOX 9

Fuel poverty

The UK Fuel Policy Strategy (*DTI, 2001*) defined a household as being in fuel poverty if it needed to spend more than 10 per cent of its income on fuel to heat its home to a satisfactory standard: 21 degrees Celsius for the main living area and 18 degrees for other occupied rooms. Fluctuating trends in the number of fuel poor households in England caused the definition to be questioned, as well as suggesting that the 2001 target of eliminating fuel poverty within fifteen years was unlikely to be met.

Scotland, Wales and Northern Ireland still use the '10% definition', but a new 'low income high costs' definition was adopted in England in 2013: this considers a household to be fuel poor if its income is below the poverty line (taking into account energy costs) and its energy costs are higher than is typical for their household type. The 'fuel poverty gap' measures the severity of fuel poverty by assessing the reduction in fuel bill required to lift the household out of fuel poverty. A consequence of this definition, and one of the reasons for adopting it, is that it enables fuel poverty to be seen as a matter that requires an ongoing effort to mitigate, rather than one to be eliminated by a specific date (*DECC, 2013: 11 – 13*).

The key factors contributing to fuel poverty are: (a) the energy efficiency of the property, and therefore, the energy required to heat and power the home; (b) the cost of energy; and (c) household income.

While energy inefficient dwellings (cold homes) are a potential threat to health and waste energy, it is when such dwellings are occupied by low-income households that the threat becomes more than just a threat, it becomes a reality.

Households that can afford to heat such dwellings to a 'safe' temperature (*i.e. above the WHO threshold of 18°C*) waste energy, but are not at risk.



“

Insecure housing affects **health, education, employment** and **community cohesion**

”

ENERGY EFFICIENCY AND AFFORDABILITY

Insecure housing

67. Housing that is adequate, suitable and affordable may not provide rights to continuing use of the property and occupiers may as a consequence be forced to move home or may become homeless. Such insecurity, especially where it is recurrent, can affect health, education, ability to obtain and sustain employment, and community cohesion.
68. Following a fall in homelessness acceptances in the late 2000s, homelessness has been increasing in England especially because of issues associated with shorthold tenancies. In 2009/10, the main cause of homelessness was losing accommodation provided by family or friends: the ending of a shorthold tenancy (4,580) accounted for 11 per cent of the total. Between 2009/10 and 2014/15 homelessness arising from the ending of a shorthold tenancy more than tripled (*to 16,040 or 29 per cent of cases*) while the numbers becoming homeless for other reasons hardly changed. In the third quarter of 2015 (DCLG, 2015b):
- 63 per cent of homeless people were placed in temporary accommodation;
 - 68,560 households were living in temporary accommodation;
 - 3,000 families with children were living in bed and breakfast accommodation, with one in three of them having been there for more than six weeks, an annual increase of 105 per cent;
 - There were 3,370 households in London living in bed and breakfast accommodation (*57 per cent of the total for England*).
69. Insecure housing is a growing issue for private tenants in receipt of benefits. Welfare reform and benefit caps have affected tenants' capacity to pay the rent; increasing numbers of enquiries to Citizens Advice Bureaux relate to this and to rent arrears, and could provide grounds for landlords to seek possession (*Pro-Housing Alliance, 2012*). The number of private tenants seeking assistance from CABs over insecurity rose by 167% in the four years up to 2012. Of all the problems in the private rented sector, insecurity was said by advice agencies and tenants alike to have the greatest impact on health and wellbeing. Six- or twelve-month tenancies, even in succession, do not provide stability for those seeking to establish a home. Tenants in poor housing are less likely to complain to the local authority or even the landlord directly for fear of retaliatory eviction. While some steps have been taken to address this problem, it is not yet clear that they are sufficient.

⁴ The Standard Assessment Procedure (SAP) is the methodology used by the Government to assess and compare the energy and environmental performance of dwellings. SAP works by assessing how much energy a dwelling will consume, when delivering a defined level of comfort and service provision: <https://www.gov.uk/guidance/standard-assessment-procedure>

BOX 10

Energy efficiency and affordability:

Although households with low incomes find high energy costs more difficult to afford, problems associated with the costs of heating homes largely stem from their design and energy efficiency rather than household poverty. Private renters and older households are more likely to live in homes with the worst energy efficiency (DCLG, 2014):

- In 2013, around 1.5 million dwellings (6%) were in the worst energy efficiency SAP bands⁴ (F or G). Of these 28% (419,000) were private rented. Only 19% of dwellings with better energy efficiency (SAP bands A to E) were private rented.
- Nearly half (45%) of the households in energy inefficient dwellings had a household reference person over 60 years of age compared with 35% in housing with better energy efficiency.
- Almost three quarters of the 419,000 private rented dwellings in SAP bands F or G in 2013 had been built before 1919 (73%).
- Only half (50%) of private rented dwellings with the poorest energy efficiency were centrally heated, and 27% relied on room heaters for primary heating, the large majority of which was fuelled by electricity, a more expensive option for direct heating.
- Some 84% of these energy inefficient private rented dwellings fail to meet the Decent Home Standard and many have other shortcomings. Over one third, for example, had serious levels of disrepair (35%); while the proportions for the whole private rented stock for non-decency and serious disrepair were 30% and 18% respectively.



A WIDER PERSPECTIVE:

housing and the economy

70. Government rightly regards housing as a national priority and considers that the failure to build enough homes harms productivity, restricts labour market flexibility, and frustrates the ambitions of people who would like to own their own home (*HM Treasury, 2015*). The economic argument that an effective land and housing market promotes productivity is, however, relevant to all parts of the housing stock. Because it plays the dominant role in housing the population and in mobility and choice it may be argued that, in this respect, the role of the existing stock is more important than new building; and that the costs of neglecting this asset are more critical in the long term. If significant parts of the existing housing stock remain empty for long periods, fail to meet modern standards and fall short of what households require, the impact is the same as where there is insufficient housing supply. A balanced approach to developing housing that will maximise productivity, mobility and choice involves giving attention to the contributions of both new and existing housing.
71. Government's view of how to achieve higher rates of new building emphasises planning policy and deregulation of house-building but different policy actions are needed to ensure that existing housing contributes fully to economic and other objectives. In view of the severe and persistent shortcomings in parts of the older housing stock, it is evident that not all owners carry out repairs and improvements within a reasonable time scale: in some cases, policy intervention is needed to remedy this. In the UK it is relevant to draw on past experience of regeneration, gradual renewal and neighbourhood renewal where improvement of the existing stock, alongside new construction, enhanced the attractiveness and potential of areas and their contribution to economic and other objectives. There is experience of house improvement and urban renewal that is relevant if the intention is to improve how the existing housing stock contributes to productivity, mobility and choice as well as to health, educational and energy efficiency objectives. There is also valuable experience from initiatives to bring empty properties into use. In the past, strategies for existing housing have also been linked with increasing opportunities for low cost home ownership for first time buyers, as well as improving housing conditions and the supply of affordable housing. All of these are ambitions of current government policy but are expressed as being met through new building. Government plans to devolve new powers to drive forward complex, brownfield developments, proposals to allow new Development Corporations, and promote Compulsory Purchase Orders are all more relevant if they are conceived as enabling new initiatives to be taken in respect of empty homes and management, maintenance, use and security in the existing stock as well as new housing.
72. These issues are also not just matters for urban areas. The Department for Environment, Food and Rural Affairs (*DEFRA, 2015*) has emphasised that lack of housing is a national challenge but in rural areas it is a particular constraint to labour and entrepreneurial mobility. Improving the conditions for people to live and work in rural areas can be more effectively achieved through strategies related to both existing and new housing.

WHAT ACTION IS BEING TAKEN?

- 73.** The countries of the United Kingdom have a rich tradition of policies to improve inadequate and modernise older housing. Pioneering approaches were developed to housing and urban renewal: for example, General Improvement Areas, Housing Action Areas, enveloping, Care and Repair, Home Improvement Agencies and other innovative policies did much to raise standards in older housing. Investment by individual owners, local authorities and housing associations was encouraged by local and national policies and strategies. But funding and activity to address the manifest problems associated with older housing has declined. Some of this reduces the potential for owners to improve and maintain their properties. From 1949 until 2011, local housing authorities received capital grant to support home improvement and towards the end of this period, although much less than in previous years, the capital allocated in England averaged £350 million per annum. In 2011 this ‘private sector renewal’ allocation was reduced to zero, removing financial support for around 200,000 households annually. Under the comprehensive spending review CSR10 another annual grant of £20 million to help older people was reduced to £10.5 million by 2014/15. This grant to upper tier authorities was mainly passed to Home Improvement Agencies (HIAs) to provide low levels of repairs and improvement principally to assist older and disabled owner occupiers. The removal, in 2009, of the ring-fenced ‘Supporting People’ revenue budget, which funded all kinds of housing support for vulnerable people, and the loss of grants from which agencies could charge a small fee (including Disabled Facilities Grants (DFGs), for disabled people), further affected HIAs. Between 2010/11 and 2014/15 the number of Home Improvement Agencies declined by 20 per cent (from 210 to 167 agencies). In 2004 there were 30 districts in England with no Home Improvement Agency but this had risen to 62 by 2016 (*Foundations, 2011: 5; 2015: 15*). These trends reduce the likelihood of some older home owners taking action to tackle homes which are inefficient and hazardous if they remain unimproved. Even with Disabled Facilities Grants there is a problem. In 2016, recognising the savings to health and social care budgets resulting from timely adaptations, Government increased the national allocation of funding for Disabled Facilities Grants to almost double, from £220m in 2015/16 to £394m in 2016/17. (*DH/DCLG 2016: 7*). But early signs are that it will be difficult for local authorities to make full use of this capital allocation because of cuts to their revenue budgets which have meant the loss of professional and technical staff to assess, specify and supervise the necessary adaptations.
- 74.** In spite of the evidence of increasing house condition problems, the level of enforcement of the Housing, Health and Safety Rating System (HHSRS) has remained low (DCLG ‘survey’ in 2011 of local authorities’ statutory duties, (*Battersby, 2011; 2015*)). Local authorities in England take widely different approaches to using the provisions of Part 1 of the Housing Act 2004 to deal with poor housing conditions. Some local authorities rarely use the statutory provisions, though this may partly reflect lack of resources. The picture did not change significantly between 2007 and 2014. Although there have been problems of retaliatory tenant eviction, it appears that local authorities are predominantly ‘complaint-led’ when it comes to dealing with housing conditions. The rate at which totally unacceptable hazards (*HHSRS Category 1*) are identified means that most of these hazards are not being identified and no action is being taken to address them. Some other hazards also pose significant risks to health and safety. The costs of poor housing will continue to be considerable unless there is a change in strategy.
- 75.** Some local authorities have been active in prosecuting private landlords as the result of breaches of planning or HMO licensing provisions, but there has been less activity to deal with conditions that impact on the health and safety of occupiers¹. ‘Informal action’ perhaps involving a letter to the landlord is, strictly, in breach of the law and fails to provide the protection for tenants that would apply if other actions were taken.
- 76.** With the demise in 2011 of the Housing Inspectorate there is no regulatory body checking local authority enforcement in this area and the All Party Parliamentary Group for the Private Rented Sector in its report *Improving the Energy Efficiency of Private Rented Housing* called for better enforcement of the HHSRS: ‘Evidence received demonstrates that there is a clear need for better enforcement of the HHSRS on the part of local authorities’ (*APPG for the Private Rented Sector, 2016: 4*). While their call for a review to ensure that the HHSRS, as the standard by which conditions in private rented housing are measured, is easy to understand, the case for better enforcement is more apparent and urgent.

¹ There appears to have been increased use of Hazard Awareness Notices issued under Part 1 of the Housing Act 2004. Under the Deregulation Act 2015, these notices do not come within the scope of provisions dealing with retaliatory eviction and preventing a landlord from evicting the tenant for 6 months once a local authority has served an improvement notice or a notice of emergency remedial action using the ‘no fault’ eviction procedure (a Section 21 Notice of Possession under the Housing Act 1988).

IMPLICATIONS AND RECOMMENDATIONS:

rebalancing housing policy

77. This paper has highlighted the need to adopt a more balanced approach to housing and, in addition to addressing issues of new housing supply, to acknowledge the importance, for health, education and the economy, of how existing housing is used and maintained. Increasing the amount of new house-building can improve the overall housing situation but a new holistic and balanced strategy is needed to address the problems and secure the improvement of the poorest existing housing. We need effective approaches to ensure that the huge national asset of the existing housing stock is properly maintained, used to meet housing needs, and to sustain health, education, employment and the economy. Investment to upgrade older housing will generate substantial and continuing savings in the costs of health care and contribute to better education and employment outcomes.
78. A significant part of the existing housing stock is inadequate, unsuitable or unaffordable for its current users, or offers them insufficient security. This stock generates costs for health and other services and damages individual wellbeing, productivity and the economy. Market processes do not eliminate these problems. Some of the worst conditions associated with existing housing are remarkably unresponsive to market mechanisms, especially in regions and parts of the economy where productivity and demand are relatively low and housing shortages are less. Some older and lower income home owners are unsure about maintenance and repair or unable to meet the costs, and some private landlords choose to minimise repair, maintenance and improvement expenditures. Problems are more evident where older owners are concentrated, or where private renting has expanded and plays an increasing role in housing vulnerable and low income households. In the past various grant schemes, urban renewal and regeneration policies have addressed these issues with mixed success but now, without active intervention, the problems associated with parts of the existing stock are likely to continue.
79. Approaches that focus on one individual aspect of housing and neglect consideration of the effects on other aspects have left major problems for households, society and the economy. What is needed is an approach that identifies and takes into account all sectors, considers interactions between policies and strategies, and recognises the contributions of all those involved in ensuring better housing and neighbourhoods.

what can be done?

80. A balanced approach to housing will involve actions tailored to fit the needs and traditions of the different parts of the UK. There are some general considerations and starting points, however, that in our view are likely to be relevant in all cases. In this final section of the paper we identify a series of actions that should be considered.
- (1) The importance of addressing issues associated with the existing housing stock alongside strategies for new housing supply and of recognising the interaction between housing, health, education and the economy merits a new leadership to champion better housing and better health and wellbeing. A new Ministerial position is needed with explicit responsibility for coordinating and animating a new approach to housing and how it interacts with other policy areas and policy objectives. This also is likely to suggest changes in Departmental responsibilities to match this agenda.
 - (2) Public Health England (and its equivalents elsewhere) and the Royal Society for Public Health should recognise explicitly the importance of housing for health and actively address the best ways of securing improved health and wellbeing through housing.
 - (3) Local housing strategies and their resourcing should address how both the existing housing stock and new housing supply can contribute to achieving better health and wellbeing, increased productivity and labour mobility, and wider access to home ownership.
 - (4) Plans and policies for existing as well as new housing should be integral parts of local, regional and combined authorities' strategies for economic and social development. Investment to upgrade older housing will generate substantial and continuing savings in the costs of health care and will contribute to better education and employment outcomes. Increased capacity and activity are required to respond to the needs of vulnerable households by taking action under existing law to deal with unhealthy housing, empty housing and unlawful landlord behaviour.
 - (5) Both existing and new housing should be treated as part of the infrastructure crucial to strengthening economic development and, through its impacts on health and education, improving productivity.

- (6) New building standards are not as good as they could be: space standards in housing are the lowest in Europe and in other respects (e.g. ceiling heights) we no longer adopt the standards that were required in the past. Standards for new building should be based on achieving maximum health and safety. Building regulations do not ensure this. There is a need to review the regulation of health and safety standards for new and refurbished housing and to improve coordination with fitness and health and safety standards.
- (7) Every local housing authority has a duty (in England, under Section 8 of the Housing Act 1985), to ‘...consider housing conditions in their district and the needs of the district with respect to the provision of further housing accommodation’. In this context key problems associated with existing housing should be identified on a regular basis and policies should be developed and resourced to address these problems. The pattern of problems and the appropriate balance of interventions will differ between places, reflecting variations in housing and economic situations. Due emphasis should be given to local solutions for local needs (*Northern Consortium, 2016: 11*).
- (8) There would be short and long term savings for other services and wider social and economic benefits if local authorities were required to identify the scale and nature of housing disadvantage and the costs associated with poor housing conditions, unsuitable use, empty housing and insecure housing, and to develop strategies to address the worst, most difficult and most persistent problems.
- (9) While in most cases it is reasonable to expect the owners of existing housing to maintain and improve properties, it is evident that some do not do so and this generates persistent and costly hazards. There is a need to identify where policy interventions can encourage and enable owners to carry out work to mitigate hazards and to protect the residents of these properties. Where there is no reasonable expectation that owners can or will address outstanding problems, local action and resources are required to deal with them.
- (10) Increased capacity to respond to vulnerable households and take the action possible under existing law to deal with unhealthy housing and unlawful landlord actions is also essential.
- (11) In some areas the growth of the private rented sector has contributed to a decline in health and safety standards in housing and more instability and insecurity for residents. The households most affected by this often include the most vulnerable groups and those most needing secure and healthy housing. Working locally with landlords to mitigate problems and to take appropriate enforcement action is essential; and revenue funding is needed to ensure that there is local capacity to respond to the existing and projected scale of poorly managed private renting.
- (12) Resources are required to sustain local approaches to health and safety problems in the existing housing stock and in particular the needs of older owners who cannot afford necessary repairs or need assistance with these; and the needs of households with members with a disability. The role of Home Improvement Agencies and Disabled Facilities Grants are critical for these groups and continuing the funding of these programmes is essential. In some cases, more active urban renewal interventions should be funded in response to locally developed proposals. These measures might focus particularly on actions that would reduce the future costs of poor housing and cold homes and address the needs of vulnerable home owners and others living in older housing.
- (13) There is a need for better enforcement of regulations affecting the different dimensions of housing referred to in this paper: those related to standards for new construction, energy efficiency, health and safety, overcrowding and sharing, and security from eviction.
- (14) A comprehensive approach that identifies and takes into account all sectors, should recognise all those involved in ensuring better housing and neighbourhoods, including:
- Industry, including those developing and providing construction components, facilities, services and appliances (e.g. insulation, heating systems), developers and house-builders, those involved in retro-fitting and upgrading;
 - Architects, designers and surveyors;
 - Regulators, including planners, building control officers, those dealing with housing conditions (environmental health professionals);
 - Finance, including banks and other mortgage lenders;
 - Managers, including housing associations, letting agents;
 - Owners, including owner-occupiers, landlords (of all types);
 - Occupiers, including tenants and owner-occupiers.
81. A comprehensive policy framework ideally requires a complete revision of the legal, economic, fiscal and administrative environment that applies to all aspects of housing, to ensure it is co-ordinated, and recognises that promoting and encouraging better housing underpins the health and wellbeing of society.

Put simply, there should be a common goal for all parts of the housing sector:
good housing equals better health and wellbeing.

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