



EXECUTIVE  
SUMMARY

# GOOD HOUSING BETTER HEALTH

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**The Academic - Practitioner Partnership**  
July 2016



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# GOOD HOUSING: BETTER HEALTH

## EXECUTIVE SUMMARY

### Foreword

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 Many funds for housing renewal have been withdrawn, with profound and damaging implications for the nation's health (*paragraph 40*).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 ”

# INTRODUCTION

## Rebalancing the housing debate

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*).

## Inadequate housing

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.

## Unsuitable housing

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*).

## Unaffordable housing costs

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*).

## Insecure Housing

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*).

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

## A WIDER PERSPECTIVE:

### housing and the economy

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*).

## WHAT ACTION IS BEING TAKEN?

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*).

# IMPLICATIONS AND RECOMMENDATIONS:

## rebalancing housing policy

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*).
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. 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)*).
30. 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)*).
31. 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)*).
32. 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)*).
33. 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)*).
34. 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*).

## what can be done?

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)*).

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## THE ACADEMIC – PRACTITIONER PARTNERSHIP

This paper has been prepared by an informal partnership of academics, housing and regeneration practitioners and housing and health researchers concerned with improving the United Kingdom's housing.

Members of the partnership met on five occasions from August 2015 to April 2016, during which time successive drafts of this paper were developed. Meeting papers, contextual materials and drafts were shared with a small group of corresponding members from professional bodies and charitable organisations.

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