

# ***THE HEALTH IMPACTS OF HOUSING – AN OVERVIEW***

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***Care & Repair England***



# Who?

- **Care & Repair England**; national housing charity aims to address poor and unsuitable housing conditions amongst the older population, esp. low income home owners (est. 1986)
- **Pioneers initiatives over 30+yrs**; Local Care & Repair services, Minor Works Grants, Handyperson, Housing Options Info & Advice, Healthy Homes, Older People's "Housing Activism" etc
- **Policy shaping**: Older people's housing – Chair of Housing & Ageing Alliance and of Home Adaptations Consortium; member of MHCLG & DHSC Integration Partnership Board, NHS England Task Group; LGA Adviser etc...

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# Context

- **All our futures** - *why creating a healthy built environment for older people is good for all of us*
  - ▣ Our 'older selves' – you never know when change is going to happen
  - ▣ Friends & Family
  - ▣ Wider social benefits for all – inclusive world, healthier population (NHS & social care impacts)
- **Flexible design to accommodate life changes**
- **Reverse the trend of building poor homes – future slums?**

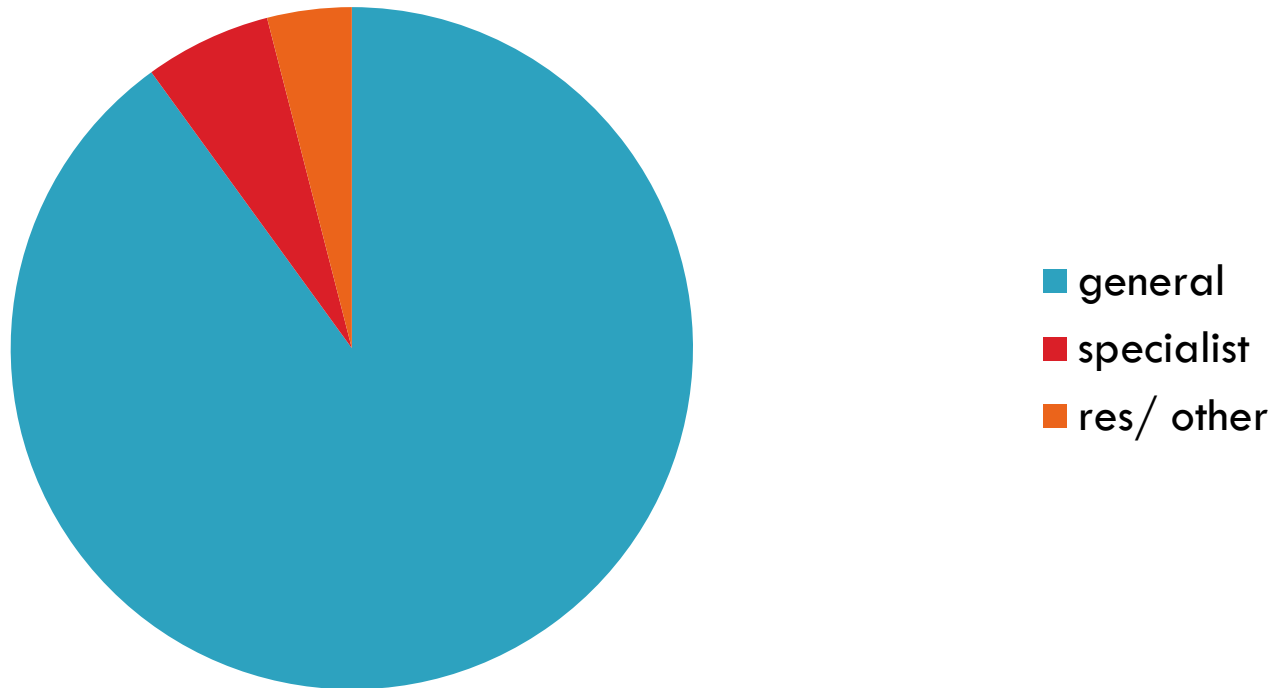
# Ingredients for success

~~Creating homes~~  
~~where older~~  
~~people can~~  
~~thrive~~

***Creating homes  
where people  
can thrive at all  
ages***



90% of older people live in mainstream housing  
(6% specialist/ 4% res care/ other)



# All homes matter

A third of homes lived in by older people



75% owner occupiers



# Content

- ❑ **Elements** of the domestic dwelling that can enable occupants to be healthier, independent [and have better life quality]
- ❑ **Specific** health condition/ housing condition/ disability links
- ❑ **Evidence & impacts**
- ❑ **Research & implementation** challenges

# Making the connection

*“You don’t need to be a medical professional, carer or social worker to know that badly maintained or inappropriate domestic environments can have a long term, detrimental impact on the mental and physical health of the occupants.”*

Jon Rouse, former Director General at Department of Health, now GMHSC Chief Officer





# Health Impacts of Housing Overview

- Main source informing session is Housing, Health & Safety Rating System
- Underpins the national ‘**non-decent homes**’ definition, plus
- Based on analysis of evidence and quantified impact eg Building Research Establishment’s Research into NHS Costs

# NHS costs if homes poor standard

**Poor housing  
costs the NHS  
£1.4billion pa\***

*\*Building Research  
Establishment*



# Health impact of housing on health

*“The distribution of health and well-being needs to be understood in relation to a range of factors that interact in complex ways. These factors include whether you live in a decent house”.*

- Sir Michael Marmot (2010) *Fair Society, Healthy Lives: the Marmot Strategic Review of health inequalities in England post 2010*

# Housing Health & Safety Rating System

## Physiological Requirements

Damp and mould growth etc  
Excessive cold  
Excessive heat  
Asbestos etc  
Biocides  
CO and fuel combustion productions  
Lead  
Radiation  
Uncombusted fuel gas  
Volatile organic compounds

## Psychological Requirements

Crowding and Space  
Entry by intruders  
Lighting  
Noise

## Protection Against Infection

Domestic hygiene, pests and refuse  
Food safety  
Personal hygiene, sanitation and drainage  
Water supply

## Protection Against Accidents

Falls associated with baths etc  
Falling on level surfaces  
Falling on stairs etc  
Falling between levels  
Electrical hazards  
Fire  
Flames, hot surfaces etc  
Collision and entrapment  
Explosions  
Position and operability of amenities etc  
Structural collapse and falling elements

# Poor Housing – Simplified list

## ***Physical Risks***

- ☐ Accidents
- ☐ Falls
- ☐ Electrocution
- ☐ Carbon monoxide poisoning
- ☐ Hypothermia
- ☐ Increased risk of infection

## ***Exacerbate LT Conditions***

- ☐ Respiratory
- ☐ Rheumatism and Arthritis
- ☐ Cardiovascular

## ***Emotional***

- ☐ Stress
- ☐ Isolation
- ☐ Depression

# Injury and Accidents

Health Risk	Housing Link	Action
Falls	Most falls take place on stairs/ steps [bathrooms] Most involve people 75yrs+	Fewer steps Stairs good design Lighting Hand/grab rails etc
Other Home Accidents	Burns, scalds, electrocution , CO etc	Safety design features/ alarms etc

# Common Health Conditions [LTC]

Health Risk	Housing Link	Action
Rheumatism and Arthritis	Cold Damp	Energy efficient / insulated to prevent damp/ mould Affordable heating
Circulatory/ Heart/ Stroke/ Respiratory Conditions		Low maintenance (gutters/ windows/ roof Ventilation



# Mental Health Conditions

Health Risk	Housing Link	Action
Stress	Security (physical)	Safe, secure design
Depression	Security (tenure)	Low running costs (heating again)
Isolation	Housing costs	Space
	Poor quality/ small space standards	Quality of design
	Inaccessible	Accessible design

# Common conditions affecting people 65yrs +

Common conditions	Incidence	Adaptation enabling independence
Arthritis	50 %	Grab rails/ bathroom / stairlift/ equipment eg kitchen
Cataracts and other visual degeneration	26 %	Better lighting, colour contrast decoration etc
Mobility problems / daily living tasks difficult	35 %	Grab rails/ bathroom / stairlift/ equipment eg kitchen

# Physical capacity and ageing

**Table S11a. Receives help with mobility\* (%), by age and sex: ELSA wave 6**

**Age in 2012–13**

	<b>50–54</b>	<b>55–59</b>	<b>60–64</b>	<b>65–69</b>	<b>70–74</b>	<b>75–79</b>	<b>80+</b>	<b>All</b>
<b>Men</b>	22.2	23.9	27.7	27.2	32.4	35.8	55.1	32.8
<b>Women</b>	28.8	32.9	31.2	34.0	37.2	46.0	71.0	42.3

- *Note –just those who receive help with activities of daily living (washing, dressing, medication, making a meal etc)*

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***52% of older households (HoHH 65+) includes person with activity limiting long term health condition or disability***

# Top Cat1 Hazards: Falls & cold

## ***Quantifiable link - falls and housing characteristics***

- ❑ **Falls** are reason for over half of hospital admissions for accidental injury & 10-25% of ambulance call-outs for this age group.
- ❑ **Hip fractures** cost £2b+ pa/ £6m+ each day; most are due to falls
- ❑ **Current trends:** *Within two years nearly 1,000 older people a day will be taken into hospital after a fall*

# Falls Risk: Steps.... Stairs



# Bathrooms





# Top Cat1 Hazards: Falls & cold

- ❑ **Cold homes**  
exacerbate a range  
of health problems  
eg **COPD, arthritis**  
etc and increase risk  
of acute episode eg  
**stroke, heart attack**



# Non- decent homes



2 million older households are living in non-decent\* homes

\*home has a serious (Cat 1) hazard which puts the occupant at risk

- **78% of non-decent homes lived in by older people are owner occupied**



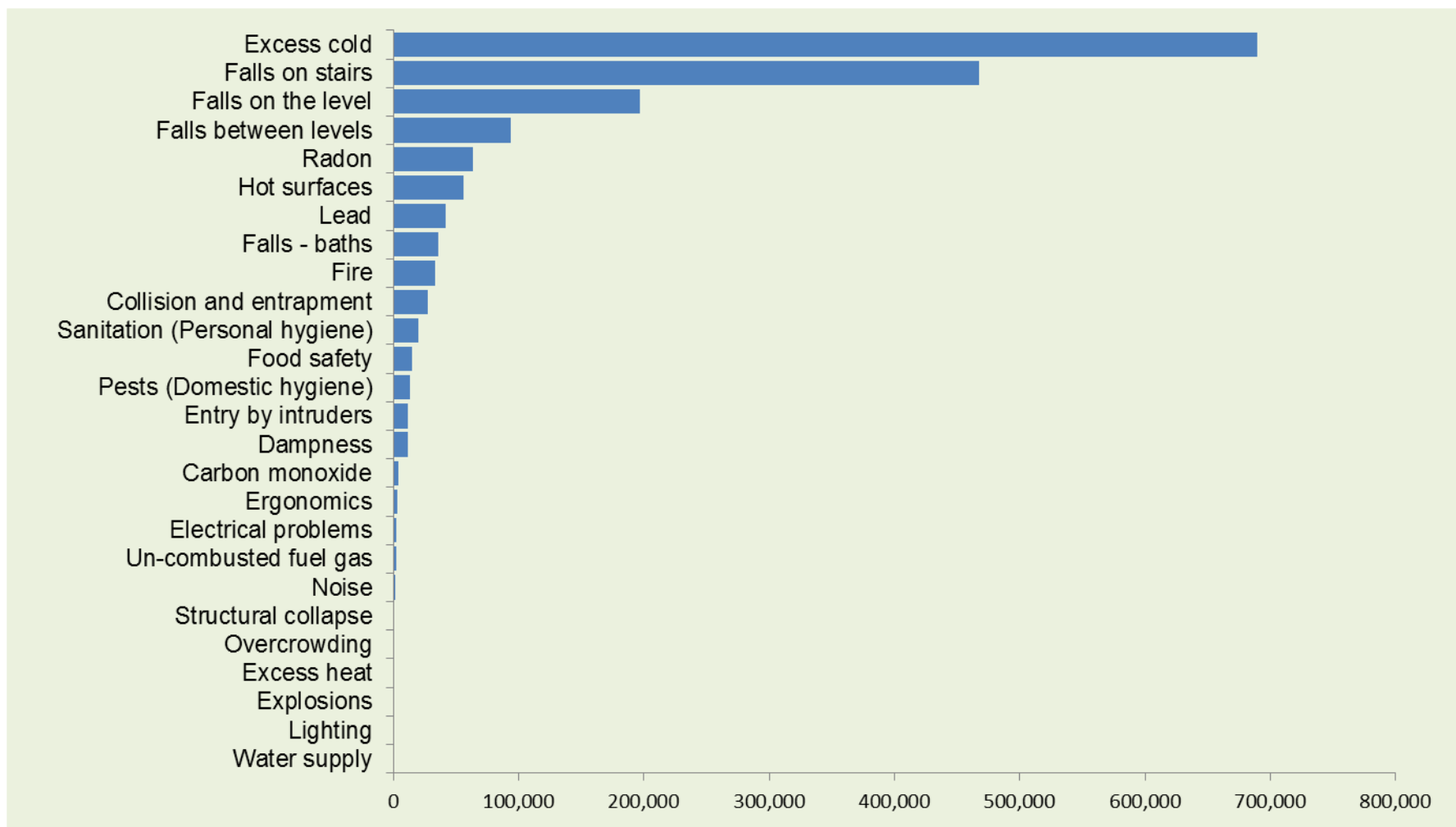


# Health costs

- \*England data from Building Research Establishment Analysis

# HHSRS Cat 1 Hazards

1.4 million (15%) of English homes with older households have a Cat 1 HHSRS hazard



# Typical HHSRS outcomes and 1st year treatment

	HHSRS Outcome			
Hazard	Class 1	Class 2	Class 3	Class 4
Damp and mould growth	Not applicable -	Type 1 allergy (£2,034)	Severe asthma (£1,027)	Mild asthma (£242)
Excess cold	Heart attack, care, death (£19,851)	Heart attack (£22,295)*	Respiratory condition (£519)	Mild pneumonia (£84)
Radon (radiation)	Lung cancer, then death (£13,247)	Lung cancer, survival (£13,247)*	Not applicable -	Not applicable -
Falls on the level	Quadraplegic (£92,490)*	Femur fracture (£39,906)*	Wrist fracture (£1,545)	Treated cut or bruise (£115)
Falls on stairs and steps	Quadraplegic (£92,490)*	Femur fracture (£39,906)*	Wrist fracture (£1,545)	Treated cut or bruise (£115)
Falls between levels	Quadraplegic (£92,490)*	Head injury (£6,464)*	Serious hand wound (£2,476)	Treated cut or bruise (£115)
Fire	Burn ,smoke, care, death (£14,662)*	Burn, smoke, Care (£7,435)*	Serious burn to hand (£1,879)	Burn to hand (£123)
Hot surfaces and materials	Not applicable -	Serious burns (£7,378)	Minor burn (£1,822)	Treated very minor burn (£123)
Collision and entrapment	Not applicable -	Punctured lung £5,152	Loss of finger £1,698	Treated cut or bruise £115

Not applicable = HHSRS class very rare or non existent

\* = Costs after 1 year are likely to occur, these are not modelled

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## Homes in later life

**What do most people want?**



I Want to  
grow old at home



**older &  
bolder**

Tel: 01 8783623

Support equality for older people  
Find out how [www.olderandbolder.ie](http://www.olderandbolder.ie)

ink Art  
photos/ink55

# Inclusive Homes?

- **7% of homes** are now 'visitable' ie have level ground floor access, flush threshold, downstairs toilet, widened doorways and turning space
- **Estimated that 72%** of the housing stock could be adapted to visitability standards
- Urgent need to build new homes to higher standard, but also Retrofit opportunity

# Most people happy where they are



***Some want to move***

***Some can't move***

***Some have to move***





# Evidence

- ❑ **International review of evidence** by Centre for Ageing Better concerning impacts of adapting homes found no UK studies up to required standard-drew on studies from Sweden, NZ, USA, Australia
- ❑ *Need for more research in the UK*
- ❑ Note current inclusion of population ageing in the new Industrial Strategy Challenge Fund proposals



# We need you all.....



- ❑ **Designers, Planners, Architects** - pioneers of creating better places for all ages
- ❑ **Academics** – *create robust evidence of impact*
- ❑ **Policy makers/ providers** – build better homes



Thank you for listening

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