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Housing, Health and Inequalities - the Environmental Health Perspective



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Dr Stephen Battersby
President, CIEH

Number of people killed or injured by location

Per year	UK		France	
	Killed	Injured	Killed	Injured
At work	380	1,500,000	700	1,150,000
On the road	3,600	317,000	7,600	170,000
At home	4,100	2,700,000	9,000	3,000,000

Social determinants & health inequalities or inequities



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“..so powerful is the operation of social determinants that they can reduce survival in pockets of a rich country to less than the average in a country where 80 per cent of the population live on \$2 a day or less”
– *Michael Marmot*

Social gradient



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“Health inequities are not confined to differences between the bottom and everybody else, but there is a social gradient: the worse the socioeconomic position, the worse the health”. *WHO Commission on Social Determinants of Health (CSDH)*

WHO CSDH

- Contained three overarching recommendations:
 - Improve daily living conditions
 - Tackle the inequitable distribution of power, money and resources
 - Measure and understand the problem as assess the impact of action

Social determinants of health



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- The conditions in which people are born, grow, live, work and age, including the health system
(environmental health is part of the health system)
- These circumstances are shaped by the distribution of money, power and resources at global, national and local levels, which are themselves influenced by policy choices.

Social determinants of health

- The social determinants of health are mostly responsible for health inequities - the unfair and avoidable differences in health status seen within and between countries

DH “Marmot Review”



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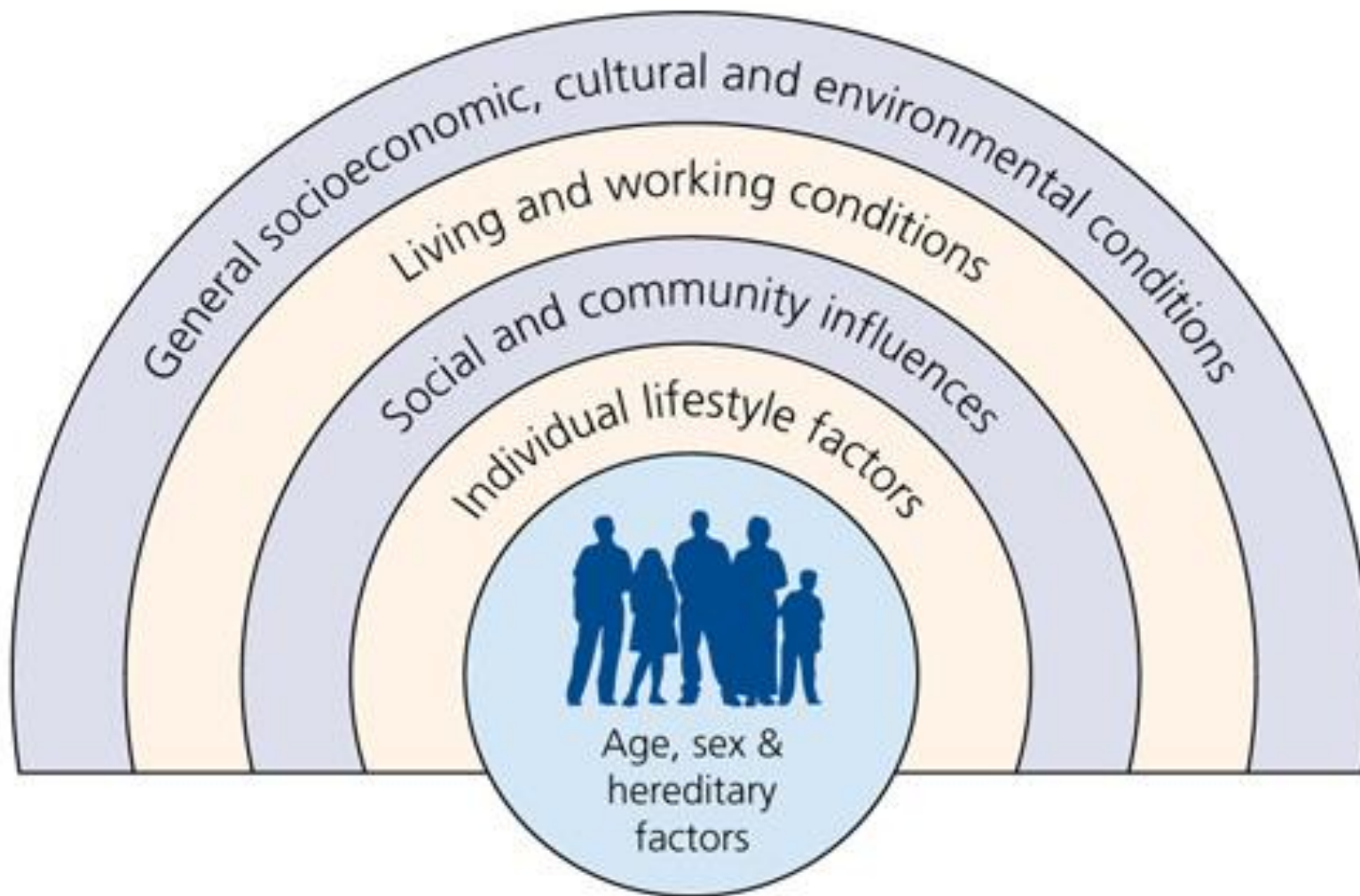
- The Review follows the publication of the global CSDH and is also chaired by Sir Michael Marmot
- CSDH advocated national governments develop and implement national strategies and policies aimed at improving health equity.
- Review is response & part of commitment to reducing health inequalities in England.

Marmot Review

- The aim to propose an evidence based strategy for reducing health inequalities from 2010 including policies and interventions that address the social determinants of health inequalities.

Marmot Review

- The Review has four tasks:
 - identify, the most relevant evidence to underpinning future policy and action
 - show how evidence could be translated into practice
 - advise on possible objectives and measures, building on the experience of the PSA target on infant mortality and life expectancy
 - publish a report to contribute to the development of a post-2010 health inequalities strategy



Source: Dahlgren G and Whitehead M (1991) Policies and strategies to promote social equity in health. Stockholm, Institute for Futures Studies

Housing and health inequity

- In 2007, 3.1 million 'vulnerable' households lived in the private sector and 1.2 million (39%) occupied non-decent homes
- Private rented sector most difficult to reach and deal with on cold homes & fuel poverty
- 94% LAA areas prioritised new and/or affordable housing targets but $< \frac{1}{3}$ prioritised targets for the existing stock (Audit Commission, 2009)

Health Inequalities & Housing Act 2004

- Part 1 introduced the notion of health and safety hazards in the home as the basis of interventions – identified by using the HHSRS
- HHSRS addresses 29 potential health and safety hazards in the home arising from deficiencies (health includes mental health)
- In general greatest risk– Excess Cold hazard
- LHAs have a duty to review housing conditions to identify actions they may need to take using a range of powers (s.3) – many fail to do so

Housing Act 2004 – Part 1

courses of action

- Category 1 hazards- duty to take one of the courses of action & Category 2 hazards- power to take action
- Possible actions -
 - Improvement Notice (can be suspended)
 - Prohibition Order (can be suspended)
 - Hazard Awareness Notice
 - Emergency remedial action (where imminent risk of serious harm)
 - Emergency Prohibition Order (where imminent risk of serious harm)
 - Demolition Order
 - Clearance Area

Other powers for dealing with inadequate housing in PRS



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- Financial assistance
 - Grants
 - Loans
- Management Orders
- Renewal areas
- Licensing of HMOs

Context - English House Condition Survey 2006 & 2007



Vulnerable households in non-decent and decent homes (HHSRS as statutory component)

	2006		2007	
(000s)	Non-decent	Decent	Non-decent	Decent
Owner occupied	905	1,543	851	1,575
Private rented	408	334	380	354

Context - English House Condition Survey 2007

Homes not meeting the HHSRS criterion of the decent home standard (any Category 1 hazard)

	(000s)	%
Owner occupied	3,458	22.2
Private rented	834 (797)	30.5
Total	4,292	23.5

Figures in brackets for 2006

Context - English House Condition Survey 2006

Incidence of Category 1 hazards in all homes

Hazards	Numbers (000s)
Excess cold	2,430
All falling hazards	2,352
Fire	210
Damp & mould	50-100

Context - English House Condition Survey 2007

Incidence of certain Category 1 hazards in homes

	Numbers (000s)	
Hazards	Owner – occupied	Private rented
Excess cold	1,654	416
All falling hazards	1,823	416

CIEH Survey:– activity by LA type 06/07

	District (n=67)	Wales (n=10)	London (n=12)	Met Boroughs (n=17)	Unitary (n=24)
Improvement Notice	486	143	230	250	392
Emergency Remedial Action	44	0	1	5	26
Prohibition Order	74	14	15	18	51
Hazard Awareness Notice	90	58	11	237	101
Work in default	80	1	2	26	24
Informal action	2891	636	1113	1786	1340
Demolition Order	1	0	1	3	1

Other finding - top five factors influencing activity

1. Number of complaints from or on behalf of residents (*score 329*)
 2. Number of staff available to deal with private sector housing conditions (*score 293*)
 3. Addressing risks to health and safety in housing (*score 199*)
 4. HHSRS and the Regulations (*score 197*)
 5. Priority given to HMO licensing (*score 139*)
- (*cf. "Risk of retaliatory eviction" & "Council's renewal policy" scored 58 & 55 respectively*)

Activity in perspective



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- Excluding HMO licensing – on average about **77** dwellings improved per LHA per year using the 2004 Act in 2006/08
- A comparator - the mean number of *vulnerable households* in non-decent PRS homes per LHA in England is **1,073** in 2007

Activity in perspective



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- The mean number of PRS homes per LHA in England with at least one Category 1 hazard is **2,356** per LHA
- The mean number of PRS homes per LHA in England classified as non-decent on “Thermal Comfort” is **1,766**

LHAs and cold homes - implications

- Some LHAs are not using the powers available
- Resources not the new legislation greatest influence on activity levels
- Do private sector housing strategies truly reflect conditions and needs? Use of Part 1 of the 2004 Act appears to indicate not.
- National indicator set – NI 187 – ‘Tackling fuel poverty’ (energy precariousness) (also NI 186 ‘per capital CO₂ emissions’)

CLG Letter – November 2008

- Joint strategic needs assessments (JSNAs) should identify areas for priority action
- Housing and health could figure more prominently in JSNAs and inform joint commissioning and LAAs (and help with resources)
- Currently no indication that worst conditions or greatest risks are being addressed – has the case been made for allocation from the Regional Housing Pot?

CLG Letter – November 2008

- Housing is a determinant of health and HHSRS associated powers not being used to address inequalities
- EEPH reported Eaga referred a total of 433 cases to local authorities between Jan and Oct 2007 and by Nov 2007, only 38 dealt with.
- Duty under s.4 of Act to inspect? How is this being met?

Concerns for the EH Profession

- Lack of a publicly available enforcement policy is not “better regulation”
- Interpretation and use of “Enforcement guidance” – extent of justifiable remedial works.
- Use of “informal action” – why? Is it necessary now with the Hazard Awareness Notice?
- Excess cold not being addressed as a priority. Are LHS providing advice or assistance to landlords e.g. advice on Landlords Energy Saving Allowance?

Concerns for EH Profession

- Cold homes and cold related ill-health – the greatest risk in the housing stock
- Unintentional injuries more likely in cold homes and also those in noisy environments (sleep disturbance)
- Educational attainment is lower for children brought up in housing that is overcrowded or in poor condition – reinforcing inequalities
- Yet how well have EHPs advocated for better use of the available tools?

Concerns for EH Profession

- Private sector housing needs to be a higher priority in LHAs – proportionally the greatest problem, particularly on cold homes is in the PRS but a low priority in LHAs
- Provisions on renewal assistance should be targeted at PRS problems and those whose health status is compromised

Action to help reduce health inequalities

- Better collection and analysis of data required to develop more effective housing and health strategies
- Part 1 of the 2004 Act should be used more strategically to reduce risks to health and safety from housing conditions - so far a missed opportunity
- Closer working with other health professionals (who could also advocate for those living in poor accommodation) needed

Conclusion

- Health inequalities reflect the degree of personal control over circumstances – including the home environment
- EHPs can intervene more effectively to reduce the negative impact of poor housing and reduce one of the stressors that leads to health inequalities