



Reducing Inequities through Housing Interventions

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Pre 2006 ~ Standard of Fitness

Problems included ~

- Building focused, so severity of defect judged in terms of extent and cost of remedial works
- Simple pass/fail model did not grade severity of condition
- Did not include all potential hazards





2006 ~ New Approach

Housing Health & Safety Rating System ~

- Focuses on threats to health and/or safety from the condition (the effect of defects)
- Does not set a 'standard' but grades the severity of the potential harm
- Can include all potential housing hazards





HHSRS ~ Underlying Principle

A dwelling should provide a safe and healthy environment for the occupants and any visitors.

This includes the structure, the fixtures, fittings, facilities, outbuildings, garden/yard, and the means of access.





Potential Housing Hazards

A. Physiological Requirements

Damp and mould growth etc
Excess cold
Excess heat
Asbestos (and MMF)
Biocides
CO & fuel combustion products
Lead
Radiation
Uncombusted fuel gas
VOCs

B. Psychological Requirements

Crowding and space
Entry by intruders
Lighting
Noise

C. Protection Against Infection

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

D. 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





Stages in Assessment

1. Dwelling surveyed and any defects recorded
2. Once survey completed, surveyor determines what Hazard (or Hazards) result from the defects





Stages in Assessment

3. Then, the surveyor ~

- a) Assesses the likelihood of a harmful occurrence (event); and
- b) The spread of outcomes from such an occurrence for each Hazard





HHSRS Averages

For each of 29 Hazards, **national averages** have been calculated for ~

- Likelihood of an occurrence
- The most probable, and other possible health outcomes from such an occurrence





Assessments under HHSRS

Once all Hazards have been assessed, the result is a
'Hazard Profile' for that dwelling



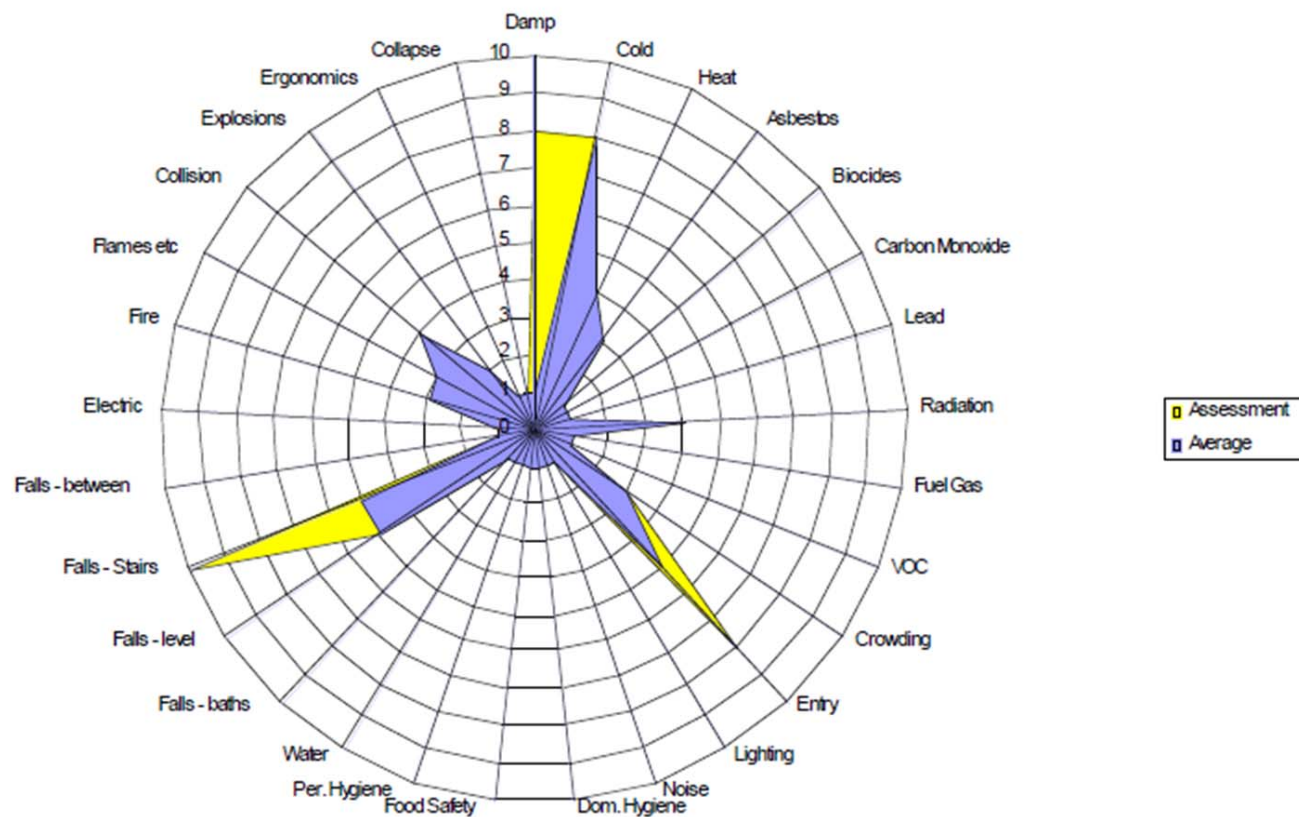
LES ENTRETIENS DE L'HABITAT



JEUDI 9 DÉCEMBRE 2010
DE 9H30 À 18H
MAISON DE LA CHIMIE-PARIS

L'AMÉLIORATION DE L'HABITAT,
UNE DIMENSION DES POLITIQUES SOCIALES

■ Regards croisés européens : habitat indigne, vieillissement, précarité énergétique



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Unsatisfactory Housing

- Responsibility for action lies with 270 local authorities
- Options ~
 - Require remedial works
 - Prohibit use
 - Provide financial assistance ~ grants; loans;
release money by purchasing share in property





Reducing Inequities

- Local authorities use information from ~
 - Sample house condition surveys
 - Deprivation data (including vulnerability)

to identify areas of unsatisfactory housing and deprivation

- Then target their resources in those areas





Unsatisfactory Housing

Of the 22.2 million dwellings in England ~

- **7.7 million** (35%) considered unsatisfactory
- **7.2 million** (94%) of these are occupied by vulnerable households (those in receipt of a state benefit)
- **2.7 million** (35%) of these in the most deprived areas.

(English House Condition Survey 2007)



Energy Inefficient Dwellings

HHSRS Hazard of Excess Cold ~

- About **2.3 million** in England (10.4%)
- **1.7 million** owner-occupied (10.9%)
- **0.4 million** private rented (14.8%)
- **0.2 million** public sector rented (5.1%)

(English House Condition Survey 2007)





Cost of Energy Precariousness

- The health outcomes attributable to energy inefficient housing in England is estimated to cost the Health Service **£750 million every year (886 million €)**
- This **annual cost** to the Health Service should be compared with the **one-off (single) cost** of improving energy inefficient housing

(BRE, 2010, Quantifying Cost of Poor Housing)





Housing and Health

- HHSRS has put 'health' at the centre of housing policies
- Housing interventions can reduce threats to health
- By reducing threats to health, there will be a reduction in the demands on the health sector





Cost of Poor Housing

- Money invested in housing is money invested in health
- If money is not spent on unsatisfactory housing, society will pay, again, and again, and

