



HOUSING STANDARDS AND NHS COSTS

**UNHEALTHY HOUSING: PROMOTING GOOD HEALTH
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Origins Of Research

- **UK Government Housing Reform Advisory Team in Bulgaria 1992-94**
- **a multi-skilled team (practitioners, academics, lawyers, planners, etc.)**
- **Bulgarian experience prompted a re-think of problems back home**

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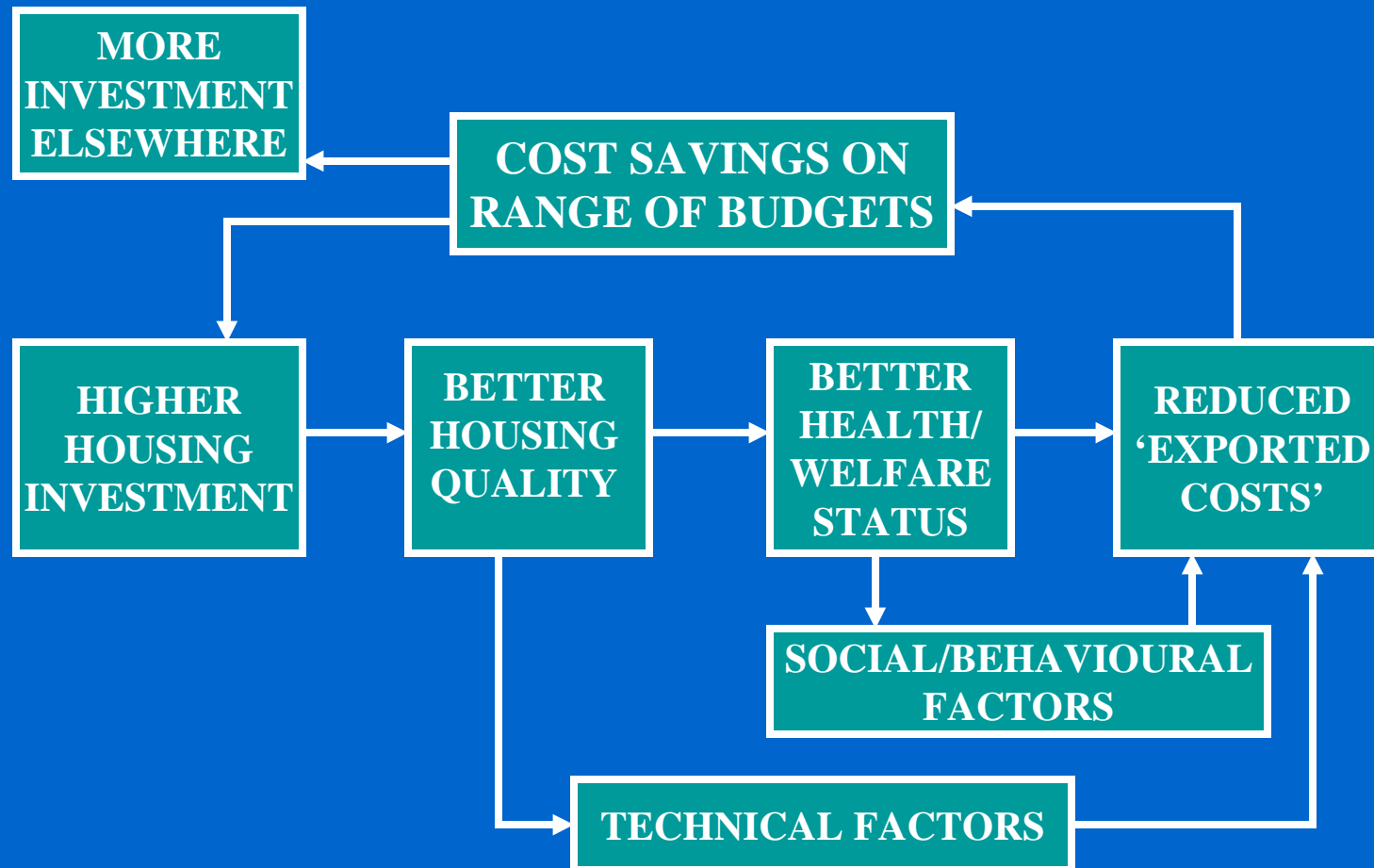
Decisions On Return

- **to continue co-operation on policy-relevant research in UK context**
- **all team members saw poor housing as a ‘lead variable’ affecting other budgets**
- **‘Cost-effectiveness in Housing Investment’ (CEHI) Programme set up**

CEHI 1995 Aims and Tasks

- to identify ‘exported costs’ associated with poor housing conditions
- to develop means of measuring them
- to re-focus the rationale for more housing investment on grounds of *economic efficiency* as much as social justice

The CEHI Logic



Case Study Work from 1995

- **Single Regeneration Budget renewal of estates in Tower Hamlets (east London)**
- **project commissioned to assess the ‘health gain’ associated with the renewal**
- **intensive household surveys before and after the intervention (1996 and 2000)**

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Nature Of The Area

- **mostly 1950s/1960s low rise flatted stock**
- **very poor construction/maintenance**
- **long-established 70-80% Bangladeshi population**
- **huge job losses since 1970s (docks closed)**

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Survey Methodology

- c.10% random sample (107 households and 525 people)
- interviewing by bi-lingual pairs, repeat visits over five month period
- 95% response rate

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Methodology - continued

- **self-defined Illness Episodes and Illness Days logged for all household members**
- **action taken for each Episode noted**
- **parallel survey of 50+ local service providers to complement household survey**

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1996 'Before' Findings

- **shocking and unhealthy conditions**
- **47% rooms damp, 69% people too cold**
- **one third of households infested (cockroaches, ants, vermin)**
- **room density well above legal limit**

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‘Before’ Ill-health

- **37% of Person Days were Illness Days**
- **main ailments were coughs, colds, aches, asthmatic, bronchial, digestive and ‘depression’ (understated)**
- **75% of Episodes led to GP visit, 65% medicine prescribed, 20% outpatient visit**

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Four 'Indirect Effects'

- long exposure to poor conditions lowers resistance, lengthens recovery times
- people may adopt health threatening habits (e.g. smoking) to reduce stress
- reduced self-organising capacity
- professionals' expertise diverted to other tasks (teachers doing 'social work', etc.)

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2000 'After' Findings

- cold and damp much reduced in new homes
- infestation much reduced
- room density down from 1.43ppr to 1.00
- better management and repairs response

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Related Improvements

- **fear of crime much reduced**
- **children's progress at school improved**
- **stronger informal community networks**
- **all these contribute to improved health**

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‘After’ Ill-health

- *pattern* of ill-health much the same
- but only 5% of Person Days were Illness Days (cf 37%) = seven-fold improvement
- far fewer GP visits, medication, etc.
- reduced impact on health service costs

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Downside Effects

- no 'spread effects' outside SRB area (which is only 10% of Tower Hamlets)
- household costs up 27% following re-housing in new/improved homes
- 75% of this due to higher rents, 19% due to higher Council Tax bandings

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Effects of Higher Costs

- deepens ‘benefits trap’ and complicates move from benefits to work
- in some cases extra costs lead to:
 - family tensions about economising, etc.
 - increased debt and financial stress
 - reduced spending on food, clothes, leisure
- all these may work to reverse some health gain

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Broadening The Case

- paper lists 40+ costs affected by housing
- costs can be categorised in five ways:
 - capital v revenue
 - costs to residents v externalised
 - systemic v formalised
 - ease/difficulty of measurement
 - short/medium/long term effects

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Broadening Still Further 2003

- **poor housing is a surrogate for poverty**
- **POVERTY ITSELF generates 'exported costs' in a variety of ways**
- **current project for UNISON to produce evidence for Local Government Pay Commission**

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UNISON Brighton/Hove Work

- **establish 'Low Cost but Acceptable' wage level for Brighton and Hove**
- **survey sample of low paid workers and compare incomes with LCA**
- **identify broader effects on life of low pay in high cost area**

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‘Exported Costs’ of Poverty

Identify and review other work on poverty-related costs in Netherlands, Australia, USA, etc.

Attempt to identify lifetime NHS costs of:

- Pre-term low birth weight babies**
 - Obesity (from poor diets)**
 - Low indoor winter temperatures**
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Conclusions – About Housing

- **housing of appropriate quantity and quality is a key item of infrastructure**
- **under-investment in housing produces short, medium, and long term costs**
- **research now needed to evaluate and model the ‘exported costs’ effects**

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Conclusions – More Holism

- a ‘whole system’ approach is required
- analysis of inter-sectoral cost effects are crucial to cost-effective policy formation
- policies intersect at the household level
- so intensive survey methods are required



End Of Presentation



Thanks for listening

