Everyone has the right to secure housing as well as the right to good health.

The housing system in the UK is broken. Currently, 1.6 million households are on social housing waiting lists\(^1\) and millions more are struggling to meet unaffordable rents in the private sector. In England, the number of people experiencing core homelessness reached just under 220,000 at the end of 2019.\(^2\) Though these numbers dropped in 2020, mainly due to the effects of the government’s emergency measures in response to the COVID-19 pandemic, homelessness is predicted to rise significantly in the economic aftermath.

Quality of housing is another serious concern for public health. As highlighted by the Grenfell Tower fire, one in five dwellings in England fail to meet decent standards for living,\(^3\) with disregard for basic health and safety measures all too common.

Housing is not equitably distributed in the UK: poorer households, ethnic minority groups, the elderly and adults with disabilities are all more likely to live in low-quality, unsafe, insecure housing.\(^4\)\(^5\)

Despite all of this, social and private rents are growing faster than the cost of living. Social housing stock is dwindling, yet there are around five times more empty homes in the country than households in need of housing. What’s the health impact? As we’ve seen throughout the COVID-19 pandemic, severe shortages in affordable homes and deepening inequality in housing have serious
consequences for physical and mental health for us all. Secure housing means housing that is accessible to all, meets good living standards, and where tenants are not forced to live under precarious conditions.

Our economy is making us sick: the economic and political systems we live and work in generate unstable, unaffordable, unfit housing, and homelessness, which are harmful to our health

Health and wellbeing throughout our lives are not just about individual bodies, diseases, and conditions. Rather, they are shaped by the social, economic and physical conditions we are born into, and those in which we grow, live, work and age. Together, these factors create unequal exposure to health risks, and result in widespread health inequities, both in our local communities and globally. We know these social determinants of health are underpinned by political and economic systems that dictate how power, wealth and resources are distributed. As health workers, our work is as much about caring for those in immediate need as it is about advocating for and building new societal systems in which all are able to live well and thrive.

Across three booklets, we are going to explore the public health case for livable incomes, secure housing and tax justice, and how you can get involved to organise for economic justice.
How does housing affect health?

Housing is a public health issue. Poor quality, insecure, and unaffordable housing is known to worsen physical and mental health, even if experienced only in childhood.

The home and neighborhood we live in affects our experience of the COVID-19 pandemic – and not everyone has experienced it equally. Health workers are direct witnesses to the health impacts of our unjust housing system. Here are just some of them...

- **Heart attack, stroke and winter death:** poorly insulated, cold homes have been linked with raised blood pressure, and increased risk of heart attacks and strokes as well as excess winter deaths.

- **Higher markers of inflammation (CRP):** private renters and those living in terraced housing have higher markers of inflammation (CRP) than owners with a mortgage and those living in detached housing.

- **Asthma:** damp, and associated mould, are linked with higher levels of dust mites within the home – a key cause of asthma.
Mental illness: inability to afford private rent is associated with increased risk of mental illness – reduction of housing allowance during austerity was found to increase the prevalence of depression\textsuperscript{9 10 11}

Child health and wellbeing: the UK has increasingly overcrowded homes where children are more likely to have anxiety, depression and poorer physical health, and attain less well at school\textsuperscript{12}

COVID-19 death rates: overcrowded homes also may have contributed to higher COVID-19 death rates in poorer areas across the UK; going into the COVID-19 pandemic, one in three households (7.6 million) in England had at least one major housing problem relating to overcrowding, affordability or quality – COVID-19 has been an intensifier of all three\textsuperscript{13 14}
Those living in insecure housing and on low incomes are most at risk from both COVID-19 and other illnesses, which in turn amplify the risks of eviction and even poorer health. We can support people’s health through risk communication. However, to end housing-related health problems, we need structural and systemic changes such as secure renters’ rights, energy guarantees, and ultimately, access to high quality, secure and affordable housing.
Housing problems are complex, often overlapping with one another. To better understand these problems, and to help us in assessing and developing effective solutions, we have to consider housing through three frames: quality, security, and affordability.

**Quality**

Damp, cold, or overcrowded housing has huge impacts on both physical and mental health. Poor housing results in worsening lung health, and a greater risk of heart attacks and strokes in the elderly. Poor housing is also associated with depression and increased stress, as well as children’s ability to attain well at school. Overcrowded housing increases the transmission of respiratory disease. Homes in the UK are becoming increasingly overcrowded, and are amongst the poorest insulated in Europe.16

The NHS spends £1.4 billion each year treating people affected by poor housing.17 Investing in housing support for those who need it helps keep people healthy. For every £1 invested, £2 is saved through costs avoided to public services including healthcare.
Security

Having a safe and secure place to live is a human right. We have a private rental model that does not meet the needs of tenants. Many renters, including an increasing number of families with children, do not have control over how long they live in their homes – housing instability acts as a stressor, harming health. Laws like Section 21 allows most private landlords to evict tenants at short-notice for reasons beyond their control – this has been shown to be a contributing factor to rising homelessness, which is linked to increased hospital admissions and reduced life expectancy.

Affordability

The UK’s dwindling social housing stock, cuts to housing benefits and policies like the bedroom tax have had a knock-on impact on the health and wellbeing of millions, for example the reduction in housing allowance in 2011 left too many struggling to pay rent and was linked to increased prevalence of depression and likely contributed to homelessness. Home ownership is becoming a distant reality for many frontline key workers, with many faced with ever-rising rent payments and financial stress.
Transforming housing to transform health

We need homes that are warm, dry, safe and fit for a range of living situations. Houses must be both economically and environmentally sustainable: they must be sustainable to maintain and sustainable for the environment. With housing instability rising and millions of renters at risk of indebtedness or evictions in the UK there is an urgent need for change.

Short-term solutions

- Write off rental arrears accumulated during the pandemic
- End Section 21 no-fault evictions
- Reverse the freeze on Local Housing Allowance (LHA) so that it is recoupled with the real cost of renting
- Introduce a National Housing First policy, offering permanent housing to those experiencing homelessness
Long-term solutions

- Improve the quality of existing council-owned homes and social housing
- Expand development of good quality and truly affordable housing
- Implement a nationwide retrofitting scheme for warmer homes
- Advance towards community ownership of housing
- Increase national living wage and improve public sector pay – see our booklet on liveable incomes!

How will these changes transform our health?

Retrofitting and renovation can transform existing low-quality housing into brighter, higher-quality homes. Improving the quality of housing to ensure all are provided with warm, dry, comfortable, energy efficient homes will have a huge impact on health, reducing risks and preventing onset of a wide range of health impacts mentioned here.²⁵

Strengthening housing security in the short term by ending no-fault evictions will greatly reduce and prevent the mental health problems associated with the stresses of precarious tenancy.²⁶

In the long term, working towards community ownership will lead to more effective, community-led housing management,²⁷ providing a strong foundation to integrate
and strengthen community services, improve tenancy agreements, and improve community wellbeing through empowerment, particularly for poorer neighbourhoods.

Improving housing affordability by rectifying local housing allowances, writing off rental arrears and providing homes for those experiencing homelessness are urgent and immediate responses that will provide basic access to secure housing for many, reducing hospitalisations and improving wellbeing, and reducing COVID-19 spread.\textsuperscript{28,29} Alongside these initiatives, advocating for truly livable incomes for all will only improve the ability for people to access good-quality housing, care and support.
What can you do?

As part of the health community, we see and care for the symptoms of an unjust economic system. We are united in struggle with friends and colleagues within and beyond the NHS in organising to end housing-related health inequalities. We all play a crucial part in advocating for the systemic change needed to win high quality, secure and affordable housing for all.

So, how can you take action?

Health workers see and treat the symptoms of poor, unstable housing, and can play a crucial part in advocating for secure housing. Quality, fit-for-needs housing is essential for health and economic justice.

The Medact Economic Justice & Health Group is organising to improve policies for better access to secure and sustainable housing. This includes working alongside local groups to support local campaigns (including housing-first approaches), as well as demanding policy change on a national level for better support for social housing, community-owned housing stock and protections for renters.

Join the Medact Economic Justice & Health Group:
link.medact.org/joinEJgroup
Further actions and reading

- Talk to your colleagues about housing as a public health issue
- Join a local renters union like London Renters Union, Acorn or Living Rent
- Follow Health for a Green New Deal’s work for more info on taking action for a national retrofitting taskforce @health4gnd on Twitter
- Support local groups campaigning for safe, good quality social housing like Grenfell United and Manchester Cladiators
- Follow local groups supporting communities to retrofit their homes, like Carbon Coop in Manchester
- Read *Better housing is crucial for our health and the COVID-19 recovery* from The Health Foundation (https://www.health.org.uk/publications/long-reads/better-housing-is-crucial-for-our-health-and-the-covid-19-recovery)
- Check out the other booklets in this series on the public health case for liveable incomes (link.medact.org/liveableincome) and tax justice (link.medact.org/taxjustice)
About us

This was produced by members of Medact’s Economic Justice & Health Group and the Medact Research Network.

We are a growing network of health workers, public health professionals and civil society calling for action to address widening inequalities in health through economic system change, with a focus on welfare, work, housing and taxation policies for better population health at both local and national levels.

Medact is a global health charity that uses evidence-based campaigns to support health workers to take action on structural barriers to health equity and justice, in an effort to bring about a world in which everyone can truly access and exercise their human right to health.


16. “1.5 million people crammed into England’s overcrowded social homes”.


