ADDRESSING HOUSING & HEALTH INEQUALITIES





What we'll cover

- 1. The scale of the problem
- 2. What poor housing means for health
- 3. Making the case for change

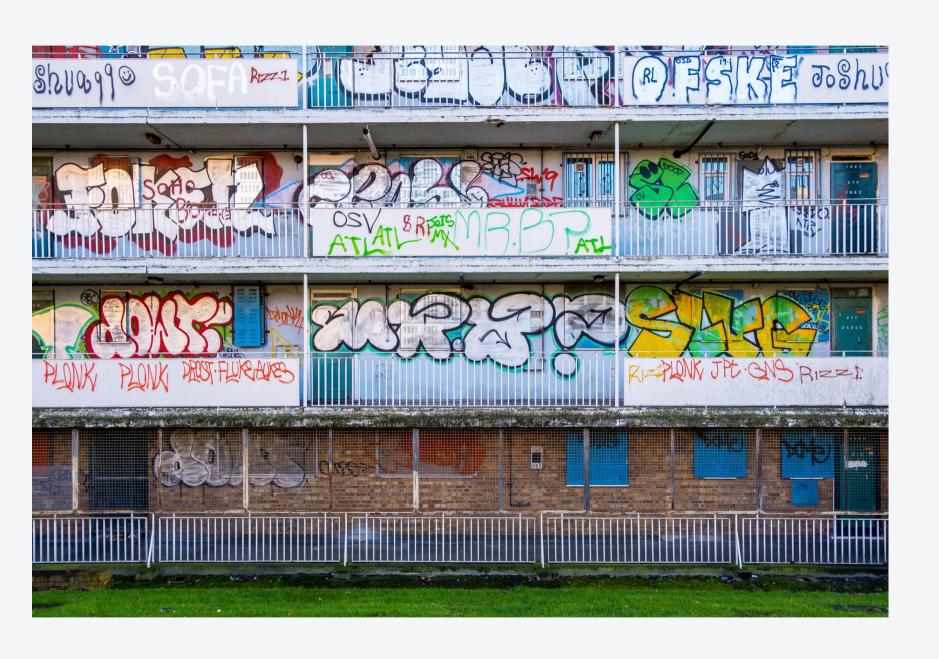


Source: Dahlgren, G. and Whitehead, M. (1993) Tackling inequalities in health: what can we learn from what has been tried?

1. The scale of the problem

People living in the least deprived areas of the country live around 20 years longer in good health than people in the most deprived areas.

In England, almost a 1 in 5 - 4.5 million homes -fail to meet the Decent Homes Standard.



We have some of the oldest building stock of developed countries and 80% of the homes we'll be living in in 2050 have already been built.

In England, poor housing is est. to cost the NHS £1.4bn each year in first-year treatment costs, and wider society £18.6bn each year.

In England, 1.36 million children live in overcrowded homes. In overcrowded homes, 26% of adults sleep in hallways, bathrooms or kitchens due to a lack of space.

2. What poor housing means for health ...

- Risk of illness cardiovascular diseases, respiratory diseases, arthritic and rheumatic conditions.
- Risk of depression and anxiety.
- Risk of death in homes with poor thermal regulation
- * Falls and serious injury

During lockdown, 31% of adults in Britain had mental or physical health problems as a result of the condition of or lack of space in their homes.

- Poor ventilation & air quality
- Damp
- Hazards fire and falls
- Poor thermal regulation
- Overcrowding/social isolation
- 'Poverty Premium'
- Accessibility
- Access to green space

there were 2,000-entra-deaths ac-

More than 200 health journals call for urgent action on climate crisis

Editorial in publications worldwide urges leaders to take measures to stop 'greatest threat to public health'



A woman reacts as a wildfire approaches her house in Evia, Greece. Photograph: Bloombery-Getty Images

More than 200 health journals worldwide are publishing an editorial calling on leaders to take emergency action on climate change and to protect health.

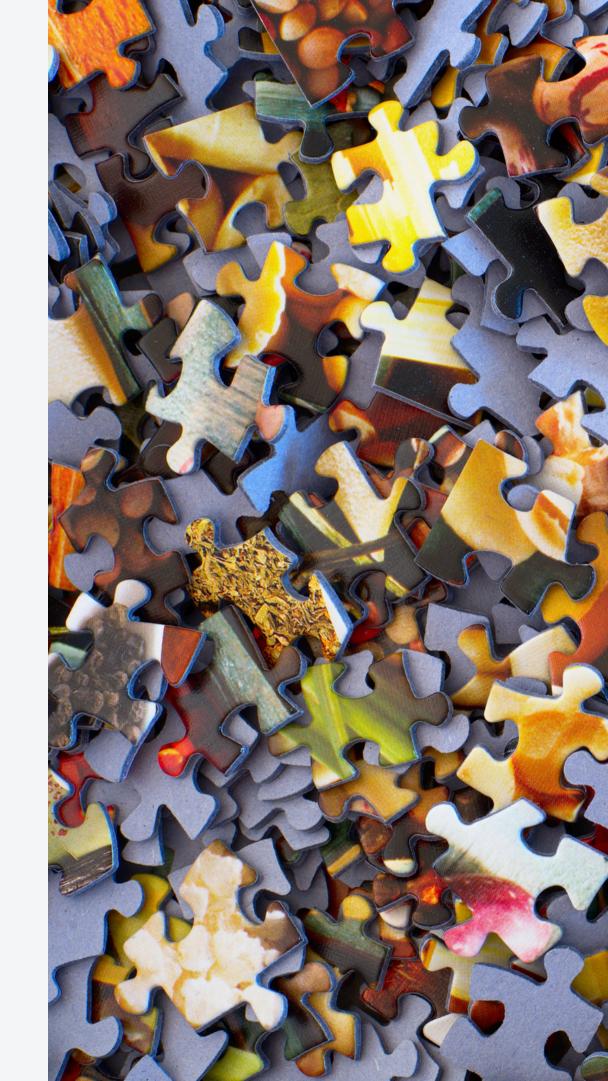
3. Making the case for change...

A few headline figures

- Upgrading houses can give us 39% fewer hospital admissions for cardiorespiratory conditions
- £1 spent on improving warmth in vulnerable households can result in £4 of health benefits.
- Home adaptations can generate £7.50 of health and social care cost savings for every £1 spent.

EMERGING TRENDS

- Growing calls for a 'retrofit revolution' from the building sector and financial institutions
- Rapid growth in sustainability linked loans, impact investing esp in social housing sector
- Greater recognition of the role the built environment in public health
- Greater acknowledgement of the impact of climate change on health



Health has to be at the heart of decisions about the built environment.



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