HOUSING AND HEALTH IN AUCKLAND

Auckland Regional Public Health Service

Working with the people of Auckland, Counties Manukau and Waitemata
“Everyone has the right 
to a standard of living 
adequate for the health and wellbeing 
of themselves and their family ... 
including housing”

Universal Declaration of Human Rights, Article 25

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ARPHS sees this as a useful resource for informing people and 
assisting with discussion on housing and health issues. 
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HOUSING AND HEALTH IN AUCKLAND

A SUMMARY OF SELECTED RESEARCH

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EXECUTIVE SUMMARY

This report summarises selected recent research into housing and health in the Auckland urban region. It was commissioned by Auckland Regional Public Health Services, which has a housing brief. It is written for public health and health promotion workers, local government, Housing New Zealand Corporation (HNZC) and non-governmental organisations with an interest in housing issues.

Policy and rights
- Changes in government housing policy have had a negative impact on the supply and quality of housing in Auckland, especially for households on low incomes. Policy has swung from a high level of state provision, to reliance on the market, sale of state housing stock, and subsidy of market rents for people on low incomes. It swung back to income-related rents for state houses and an attempt to build state housing levels, while maintaining rent subsidies in the private market.
- There is no right to adequate housing under New Zealand law.
- One group of non-government organisations (NGOs) considers that the government is in breach of the clauses on discrimination in the UN International Covenant on Economic, Social and Political Rights, which it has ratified, because of the concentration of housing deprivation among Maori and Pacific people.

Affordability
- Affordability is commonly defined as a percentage of housing cost, usually 25%, to income, rather than by whether there is enough money left over for basic living after paying housing costs.
- In 2001, 23% of Auckland households were paying 40% or more of their net income on housing.
- Families in unaffordable housing often do not have money for food, especially nutritious food, or health services.
- Unaffordable rents force families into substandard, overcrowded or unhealthy housing, where they cannot afford heating in winter and which may force them to move often or endure periods of homelessness.

Crowding
- Crowding is a persistent and increasing problem in deprived areas of Auckland.
- Crowding is strongly associated with a range of infectious diseases, including meningococcal disease, tuberculosis, acute rheumatic fever, respiratory infections and illness, and Helicobacter pylori (bacteria that cause stomach ulcers).
- Crowding is stressful for children and adults, and in children also increases emotional problems and bed-wetting, delays development and reduces school achievement.
- Census figures for small area units of around 90 households give the closest official indication of the extent of crowding, although official statistics underestimate crowding.
- Crowding in Auckland is getting worse for Pacific children, and for what Statistics New Zealand calls the ‘Other’ ethnic group - mostly recent African and Middle East migrants - while it is improving for Maori and Pakeha.

Substandard housing
- There is no single set of agreed criteria for assessing housing quality.
- The poorest people, facing the most discrimination, are more likely to be forced into substandard housing.
- The number of Auckland people living in garages and caravans is likely to be severely underestimated.
- Living in a substandard house is an independent and additional source of stress; it also affects physical health through allergens, pest infestation, poorly functioning heaters or stoves and toxic chemical exposure.
- Long periods in poor housing during childhood has a negative effect on adult health.

Cold, damp and mould
- One in four New Zealand houses (300,000) are uninsulated.
- New Zealand houses are cold by international standards, and people on low incomes are more likely to live in uninsulated and cold houses.
- People living in damp and mouldy houses are more likely to have respiratory conditions and a wide range of other medical symptoms than those in dry homes, regardless of other factors.
- Fitting insulation to older New Zealand houses improves residents’ health, reduces GP visits, absenteeism at work and school, and saves more than it costs.

Hazards and injury
- Poor housing increases the risk of injury from lack of fencing, unflued gas heaters and exposed heating sources, unprotected high windows, balconies and stairs, faulty wiring or appliances, poor storage, breakable window glass, flammable materials and lack of functioning smoke alarms.
- The longer people live in poor housing, the more it affects their mental and physical health; children are particularly vulnerable.

Beyond monocultural housing
- Housing policy, regulation and design have assumed Pakeha cultural norms, and have consistently been viewed as discriminatory by Maori.
- Housing and health initiatives for Maori should be based on rights guaranteed by the Treaty of Waitangi.
- Existing state housing stock is particularly poorly suited to housing large Pacific families.
- Maori and Pacific people have identified design alternatives to existing monocultural housing.
## Table 1 - Relationships between housing conditions and health

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<th>Other Chronic Conditions +</th>
<th>Injuries Poisoning</th>
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+ Includes heart and circulatory conditions; gastric and nutrition problems; headaches and skeletal problems.

# Includes stoves and unflued gas heaters

**Source:** Chiefly from Ministry of Pacific Island Affairs, *Scoping Report on Status of Housing for Pacific Peoples.*

**Note:** Throughout this report, decimal points have been rounded to the nearest whole number.
1 INTRODUCTION

The Auckland Regional Public Health Service is undertaking work on housing as a determinant of health in the Auckland region.

The Auckland Regional Public Health Service commissioned this summary of existing research about the relationship between housing and health in the region to contribute to this work. This report has been written for public health and health promotion workers, local government and organisations interested or involved in housing issues. It aims to summarise current knowledge, identify gaps and list interventions which have been suggested, tried elsewhere or trialled in the region.

Much of the research assumes a common understanding of key concepts, including families, households, houses, homes and health. However, this is not the case. Different cultures in Aotearoa understand and live these concepts in different ways. These meanings are explored in Appendix 1.

Several sources identified government housing policy as a major influence on housing-related health and social problems. The report starts by describing changes in this policy over the last 14 years.

The affordability of housing is identified as a direct influence on health, summarised in section three. It is also an indirect influence, as unaffordable housing prices force households into substandard, crowded, cold, damp, mouldy and hazardous accommodation, which poses additional health risks. These factors overlap, but for clarity have been separated and are summarised in sections four to seven.

Many sources identified a public housing stock designed for Pakeha norms and small families as a problem for large families, Maori and Pacific households. The report describes the results of recent consultations with these communities about their housing needs in section eight.

At the end of each section, the report lists existing housing initiatives and other possible actions suggested in the research.

This report is not an exhaustive summary - it draws from only those sources listed in the references.