



5 SUBSTANDARD HOUSING

“It is the poorest populations, most prone to forms of discrimination, who have least control over their housing circumstances and thus are most afflicted by housing-related health problems.”¹²⁰

SUBSTANDARD housing includes those which are cold, damp and mouldy. These issues are described in the next section. This section deals with other aspects of poor housing.

Substandard housing and health

The National Health Committee said in 1998: “The poor physical condition of some rental properties, including some owned and administered by local and central government, are compounding [the problem of disease associated with overcrowding].”¹²¹

Estimates of the proportion of people with chronic mental illness living in substandard or inappropriate housing in New Zealand range from 20 to 35%.¹²²

Kearns et al in 1993 found that the mental wellbeing of people with psychiatric conditions was correlated with the quality of their housing. Poor housing, lack of money and limited social contact contributes to depression and anxiety in this population, and made them more likely to be re-hospitalised. A study of the mental health of people on the edge of homelessness found a significant improvement when they were re-housed in state houses.¹²³

Kearns also found that living in a substandard house is an independent and additional source of stress for people on low incomes, and said “...the despair among these populations cannot be adequately described in a series of statistical tables and conceptual diagrams”.¹²⁴ Substandard housing conditions may lead to social isolation because occupants are reluctant to invite guests into their homes.

UK research has found an association between mental disorders and structural problems in rented housing.¹²⁵



“The longer people live in poor housing, the more it affects their mental and physical health.”

Physical health is affected by old, dirty carpet, which contains dust, allergens and toxic chemicals and is often found in substandard housing. This can result in allergic, respiratory, nerve and blood-related illnesses.

Pest infestations are associated with asthma. Cockroaches can cause allergies and have become an important trigger for asthma in inner-city America.¹²⁶ Children with asthma who are exposed to cockroaches are more likely to be admitted to hospital. Mice are also an important cause of allergy and asthma.

Poorly functioning heaters or stoves can expose residents to nitrogen dioxide, which is associated with asthma. They also result in increased levels of carbon monoxide, which causes headaches and fatigue, and poisoning from oxygen starvation at higher levels.

Portable gas heaters have produced up to five times the acceptable outdoor levels of nitrogen dioxide inside homes in an Australian study. This toxic gas worsens respiratory and asthmatic conditions.¹²⁷

Leaded paint has been found in state houses during the Healthy Housing Programme.¹²⁸ Lead exposure can cause permanent damage in children’s brains and is associated with high blood pressure.¹²⁹

Noise contributes to irritability, sleeplessness and feelings of helplessness.

Several local and overseas studies have found that moving to better quality housing improved the mental and physical health of people living in substandard accommodation.^{130, 131, 132, 133}

Poor housing over a lifetime

The congregation of poor people in areas of poor housing creates a neighbourhood effect. For example, primary health care is less available in areas with high Pacific and Maori populations.¹³⁴

However, one recent study of North Shore City and Waitakere City found that, while neighbourhoods on the more affluent North Shore had better overall access to community resources than Waitakere neighbourhoods, within each city deprived areas had on average better access to community facilities as a whole than more affluent areas.¹³⁵ More research is needed to establish how this positive feature can be replicated.

The longer people live in poor housing, the more it affects their mental and physical health, and children are particularly vulnerable. Housing conditions in childhood have a long-term health effect independent of socio-economic conditions



and even if housing conditions later improve.¹³⁶ A number of adult conditions including *Helicobacter pylori* (bacteria that cause stomach ulcers), disability, stomach cancer and severe ill-health have been linked to recurrent crowding or poor housing in childhood.¹³⁷ There is an association between poor housing conditions as a child and death from common adult diseases that is independent from other social and economic deprivation.¹³⁸

The scope of the problem

There are few reliable statistics about substandard housing. For example, the government ICESCR report to the UN uses a 1993 figure of 3,000 substandard dwellings nationally, with a high incidence in the East Coast and Northland. However, in 2003 the Co-operative Housing Association of Aotearoa NZ, with extensive hands-on experience in Northland communities, cited the number as 5,000 in Northland alone.¹³⁹

Compared to housing in other OECD countries, New Zealand housing is more often built of wood, which requires frequent maintenance to keep up to standard.

The Building Research Association of New Zealand (BRANZ) carried out two national house condition surveys in 1993/4 and 1999/2000. In the more recent survey, it found that one in four buildings was in poor condition and the cost of repairing the more serious defects averaged \$4,000 per house. Auckland houses were generally in the worst condition in both surveys.

Structural problems found in the survey included -

- Leaks from roofs and around windows causing major structural damage.
- Rotting floors.
- Disintegration of interior cladding; exterior cladding flapping in the wind because it was not properly connected to the frames.
- Clearance not maintained around stoves.

Other reports suggest a low standard in rental housing. In 1988, HNZC said that low income housing in Auckland is of poorer quality than in most other parts of New Zealand. In 1998 Parliament's Social Services Committee criticised delayed maintenance in state rental houses. The 2001 *Our Home Our Place* hui agreed that neglected maintenance of Otago state housing in the 1990s had resulted in falling housing standards.

The economic recession in the 1990s also delayed maintenance in private rental houses. Local councils have deferred

“In a scarce housing market, few tenants want to risk their accommodation by [complaining about substandard housing].”

maintenance and modernisation of their housing;¹⁴⁰ in 2000 a national summary found that local council housing for older people, much of it older bedsitting rooms, was inadequate.¹⁴¹

Older people on fixed low incomes do not want their rent to go up, so may be forced to accept lower standards at a cost to their health.¹⁴²

Qualitative studies also support this picture. People in Auckland emergency housing said in a 1998 survey that they commonly found new tenancies in a poor state of hygiene and repair, with broken windows, cracked hand-basins and leaking toilet pipes.¹⁴³ Four out of five state tenants in the 1999 Mercy House Glen Innes survey were dissatisfied with the poor condition of their houses and the lack of response to maintenance calls.¹⁴⁴

“My house always has something to be fixed. When I report it to Housing most of the time they never come and I live with things broken. They come when I keep reporting four or five times.”¹⁴⁵

“I rang up HNZ for their help when it's heavy rain, plus any rainy day it's leaking in my living room.”¹⁴⁶

Otago households reported rat and cockroach infestations in 1999¹⁴⁷ and in 'Alatini's 2004 survey of Tongan households. Six out of ten state house tenants in that survey, nearly half the home owners and one third of private tenants, had problems with pest infestations.

Four out of five of Glen Innes households reported pest infestations such as cockroaches, rats, mice or fleas in 1999.¹⁴⁸

In 2004, the Otago tenants also reported a major difference in the response of private landlords and HNZC to structural problems.¹⁴⁹ Three-quarters of private landlords responded efficiently and reliably to problems, whereas more than half the HNZC tenants expressed some dissatisfaction with its response time. Almost one in five had been waiting two years or more for resolution of complaints including phone lines, carpeting and insulation.

“I have a leak in the ceiling for over two years and reported it to Housing NZ and still no-one has come.”¹⁵⁰

While much New Zealand research has focussed on state housing, overseas studies suggest that the private rental sector may have more substandard housing.¹⁵¹ New Zealand landlords are required under the Residential Tenancies Act 1986 to maintain their houses to an acceptable standard, but enforcement relies on tenant complaints. In a scarce housing market, few tenants want to risk their accommodation by doing this.



The 2001 census reported the number of people living in tents, caravans, sheds and boats in Manukau City as 204, with 198 in Auckland City, 168 in Waitakere City, and 33 in North Shore City.¹⁵²

This is likely to be a severe underestimate. Otara residents reported “typically” sleeping in uninsulated garages and caravans in a 1999 report.¹⁵³ One in five Tongan households in ‘Alatini’s 2004 Otara survey used garages for accommodation, and said this was common among other Pacific households.

The census counts this temporary housing only on residential sites, when householders declare it, but does not include people who have been living for some time in licensed camping grounds. There are indications that people in housing difficulty live in caravan parks despite regulations against this.¹⁵⁴

New Zealand initiatives about housing standards

→ In 2000, a local initiative involved mature Otara residents visiting door-to-door to distribute information about dealing with pests, moisture, mould, health and safety, tenancy issues and benefit entitlements. This Otara Ambassadors’ Programme was repeated in 2002. Manukau City Council has since funded two community health workers to continue this work.

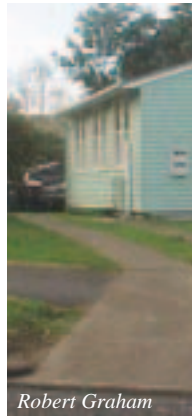
→ The Healthy Housing Programme partnership between DHBs and the HNZC has upgraded insulation and ventilation, carried out maintenance and acted on families’ health and social needs in state houses in six Auckland suburbs (see Crowding, page 20).

→ The HNZC Energy Efficiency Project is upgrading damp and uninsulated housing (see Cold, damp and mould, page 26).

→ HNZC’s Local Government Housing Fund provides 50:50 matching funds for local councils to modernise or buy social housing.

→ Housing New Zealand’s Community Renewal Programme aims to reduce social exclusion, foster communities, and improve the physical assets and appearance of neighbourhoods. It started in 2001 and is under way in Clendon, Talbot Park and Northcote Central.

→ The Building Research Association of New Zealand and Wellington School of Medicine researchers are developing a Healthy House Index, using a



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combination of existing research, health data from the BRANZ House Condition Survey, surveys of resident’s views of their own health, general practice and hospital data. It aims to provide a common language for inter-agency communication.

→ The Building Act gives the Building Industry Authority more power and will require local councils and private housing inspectors to be certified.

→ Statistics New Zealand is developing a database of the incidence of substandard housing and is surveying housing quality across the country.

→ Standards New Zealand is developing building industry standards.

→ The HNZC Development Guide includes universal design features, making new properties suitable for a wider range of tenants.

→ The Government has started a whole-of-government initiative on substandard housing. The NGO submission criticised its approach and the lack of progress beyond talks within government agencies.¹⁵⁵

Overseas initiatives about housing standards

→ The Housing for Health programme is an Australian initiative with Aboriginal communities. It involves home visits to assess the impact of housing on health, fixing safety faults and providing health-related items the same day as the visit, or training community members to provide them.¹⁵⁶

→ The UK and the USA have several useful approaches to improve substandard housing. The UK Government has adopted an aim to make all public housing up to standard by 2010. It has introduced a Housing Health and Safety Rating System, where trained building professionals identify health hazards and rate them using tables of probable health effects. The system requires local authorities to repair any house rating over 1,000 points.

→ The USA Residential Lead-Based Paint Hazard Reduction Act 1992 provides federal funds to state and local health departments to determine the extent of childhood lead poisoning, screen children, develop neighbourhood-based prevention projects and remove lead from houses.¹⁵⁷



- ➔ One USA project is repairing private houses with public health funding. Public Health Seattle is replacing mould and water damage, installing exhaust ventilation, repairing leaks and replacing carpet in 70 houses. It has negotiated an agreement with private landlords that the rent will not increase and tenants can remain for at least two years afterwards.¹⁵⁸
- ➔ Some countries have introduced compulsory inspection schemes that require owners to disclose outstanding repairs when they sell their houses.¹⁵⁹
- ➔ The Lifetime Homes checklist of 16 design features, developed in 1991, is required in all new social housing in Northern Ireland and Wales and is being considered in UK legislation. It includes provision for wheelchairs and other accessibility features, and is proven to save money in later adaptations and by reducing the need for older people to move to residential care.¹⁶⁰
- ➔ The Netherlands adopted the Senior Citizen Label as a consumer quality certificate for older people's housing. Housing has to satisfy 31 basic requirements based on flexibility, cost, neighbourhood and local needs.¹⁶¹
- ➔ Smart homes are being trialled in a UK support programme for older people. These houses use electronic and computer-controlled technology to operate doors, windows, heating, lighting, taps, security devices, phones and surveillance. They also save money by helping older people stay in their homes despite increasing disability. Without subsidies, however, this technology is not affordable for older people on low incomes.¹⁶²

POSSIBLE ACTIONS

- ➔ Introduce uniform national codes which cover housing ventilation, moisture, carpeting, mould, injury hazards, exposure to toxic substances, privacy, noise, lighting, energy efficiency, accessibility and other factors affecting health.^{163, 164}
- ➔ Introduce licensing, quality marks and energy-efficiency ratings for private rental properties which depend on meeting minimum standards for health.^{165, 166}
- ➔ Introduce renewal grants, loans, tax relief and other incentive schemes to encourage private landlords to rectify structural problems and maintain their rental houses.^{167, 168}
- ➔ HNZC ensure that its housing stock is up to a set standard by 2015.
- ➔ Increase housing inspections by local councils.¹⁶⁹
- ➔ Use Health Impact Assessments by local council public health workers to evaluate the health implications of new zoning decisions and housing developments. Permission could be denied to developments that do not include necessary infrastructure such as shops, schools, recreation space, parking and transport systems.¹⁷⁰
- ➔ Adequately fund home improvement assistance for older people.¹⁷¹
- ➔ Strengthen the Residential Tenancies Act to provide more proactive and effective monitoring and enforcement of housing standards.