

Your details

Please complete the following details below. It is essential that we have a name and the name of any organisation if you are responding on their behalf. Contact details would be helpful if we need to follow up on any points.

Name:	Dr Carol Davidson
Organisation:	NHS Ayrshire & Arran
Email address:	carol.davidson@aapct.scot.nhs.uk
Phone number:	01292 885873
Would you like us to keep your response confidential:	No

Consultation questions

Below you will find response boxes for each of our consultation questions. If possible, please base your response on answers to these questions.

Some questions may be somewhat irrelevant to your interests, in which case please feel free to answer as many or as few as you like. And please feel free to offer other comments if you think they are relevant to our remit. There is space at the end for you to do so.

You can skip to the section(s) that you wish to respond to through the links below:

1. [Wellbeing](#)
2. [Housing and investment](#)
3. [Housing and the economy](#)
4. [Housing and welfare policy](#)
5. [Housing and the environment](#)
6. [Housing and health and education](#)
7. [Housing and community regeneration](#)
8. [The Private Rented Sector \(PRS\)](#)

Section 1: Our assessment of the importance of housing for wellbeing in Scotland

Q.1. Has our assessment of housing and wellbeing missed any important benefits and, if so, which benefits and what is the evidence for this?

Overall we would agree with the eight types of wellbeing outlined and the links with housing which have been identified. The following benefits are offered as potential gaps in the report:

Links between greenspace, health and sustainability

It is important to consider the built environment and specifically housing in the context of surrounding greenspace, which could include gardens and neighbourhood greenspace e.g. community gardens, outdoor sports facilities, civic spaces etc. In terms of the links between greenspace and health these include*:

- direct protection from threats to health e.g. flooding, pollution, extremes of temperature and noise;
- physical activity;
- mental health and wellbeing; and
- health inequalities
- active travel

In terms of the links between greenspace and sustainability these might include:

- Promoting/ increasing biodiversity through meadow planting etc;
- Use of Sustainable Urban Drainage Systems to protect against flooding, contamination etc;
- Active travel

Evidence can be found at <http://www.hutton.ac.uk/research/projects/green-health>
<https://www.instituteofhealthequity.org/projects/improving-access-to-green-spaces/evidence-review-8-improving-access-to-green-spaces>

Links between housing, health and employment (cold damp homes)

It might be helpful to cite evidence demonstrating the impact that living in a cold home has on absence from work. This is a cross link between health and employment domains.

Links between housing, health and mortality (fuel poverty)

There is some evidence suggesting that 10% of excess winter deaths are due to fuel poverty.

Evidence can be found at: <https://www.instituteofhealthequity.org/projects/fuel-poverty-and-cold-home-related-health-problems>

Links between housing and health (air pollutants, lead exposure etc)

There is some evidence that lead exposure even in small amounts (though lead pipes, lead paint) can lead to mental, intellectual and developmental effects, especially in young children

Evidence can be found at

http://www.scotphn.net/pdf/2013_02_26_HIA_of_Housing_Improvements_Guide1.pdf

*Note benefits may differ across different societal groups



Good quality housing, safety and health

Environment is a key element of injury prevention in children (along with education and enforcement). There are fundamental safety strategies such as thermostatic water regulation, window safety, smoke CO2 monitors. It may also be of interest to consider the barriers to home safety experienced by those families in rented accommodation. (See Kendrick, D. et al Home safety education and provision of safety equipment for injury prevention The Cochrane Collaboration; NHS Health Scotland (2012))

Q.2. Has our assessment exaggerated any of the benefits of housing for wellbeing and, if so, in what respects and what are your reasons for saying this?

No evidence of exaggerating benefits

Section 2: Does Scotland invest enough in housing?

Q.3. Do you agree with our assessment of the current position on investment in housing?

No comment

Q.4. Do you agree with our brief assessment of current policy on investment in housing?

No comment



Q.5. Do you agree with our suggestions for further action in the area of investment in housing?

We agree in principle, given the clear links between housing, health and health inequalities that more of the overall Scottish budget should be invested in affordable housing, however recognise that this is within the context of other competing priorities which also have an impact on health and health inequalities e.g. NHS spend, education, transport and active travel infrastructure.

With regards the recommendation to give greater priority to investment in new social housing rather than subsidies for low cost home ownership to enable targeting of those with greatest need it may be of interest to note research which indicates that financially secure home ownership (compared to socially rented housing) has been linked to improved health, which may be due to better housing quality and feelings of security. http://www.scotphn.net/pdf/2013_02_26_HIA_of_Housing_Improvements_Guide1.pdf

In addition it may also be worth the Commission considering evidence and thinking around tackling inequalities which suggests that targeting the worst off may not ultimately be the most effective measure in levelling the inequality gradient. Offering universal support which is of a level and intensity proportionate to need may be more effective. Therefore perhaps a range of measures are required.

6. Do you have any other suggestions that we have not mentioned in relation to investment in housing?

No comment



Section 3: Getting a better fit between housing and the economy

Q.7. Do you agree with our assessment of the current position regarding housing and the economy? What more would you add?

No comment

Q.8. Do you agree with our assessment of the current situation of UK Government policy with regards to the housing market and the economy?

No comment

Q.9. What are your views about the five areas of policy reforms suggested here?

The links between poverty, financial strain, debt and health inequalities are well documented. We would therefore support measures which reduce high value and disproportionate lending.

In addition, there is clear evidence linking internal locus of control, social connectedness and community empowerment with mental health and wellbeing. Therefore the principles underpinning community land trusts should, in theory, positively impact on mental health.

In addition, housing satisfaction may be linked to life satisfaction and mental health; therefore, measures which increase influence and ownership over housing design, development or improvement are likely to positively impact on health.



Section 4: Getting a better fit between housing and welfare policy

Q.10. Do you agree with our assessment of the current position regarding housing and welfare benefits? What more would you add?

No comment

Q.11. Do you agree with our assessment of the current situation of government policy at UK levels and the possible outcomes post-referendum? What more would you add?

No comment

Q.12. What are your views about the medium term policy options presented here? What other ideas and issues strike you over this time frame?

We would support, in principle, any measures which help to mitigate against or reverse the effects of welfare reform measures, including changes to housing benefit. Evidence suggest that the cumulative impact of changes to the welfare benefit system will have a negative effect on health and are likely to widen inequalities. Changes are likely to disproportionately affect those with disabilities or long term health conditions as they are likely to be directly affected by changes.

It is difficult to assess at this stage the potential impact, positively or negatively that the proposals in the report would have on health and health inequalities, therefore we would suggest that a Health Inequalities Impact Assessment is carried out on draft proposals. This is perhaps something that the Scottish Health Impact Assessment Network could help with.



Q.13. Do you agree that we have a unique opportunity to consider longer term policy options over the next key period in Scotland's history? How do you respond to the options proposed here? Are there other options that should be considered?

See above

Section 5: Getting a better fit between housing and the environment

Q.14. Do you agree with our assessment of the importance of housing to the environment?

Overall we would agree with the Commission's assessment of the importance of housing to the environment. We would offer the following evidence as potential additions to the assessment which may be worthy of consideration:

- There may be a link between certain elements of housing design and health and wellbeing e.g. there is a potential link between depression and adequacy of natural indoor light. Poor lighting may also increase the risk of accident and injury in the home.
- Locally accessible neighbourhood greenspace may mediate socioeconomic health inequalities (lower risk of mortality -particularly in Scotland's poorest men) and therefore should be a key consideration in planning.

Q.15. Do you agree with our brief assessment of current policy on housing in relation to the environment?

No comment-



Q.16. Do you agree with our suggestions for further action in the area of housing and the environment?

As suggested above one potential omission may be the reference to neighbourhood greenspace as a contributor to health and wellbeing.

It would also be helpful to explicitly consider inequalities in these proposals and how they might be delivered with a scale and intensity which is proportionate to need, e.g. what additional support will be built in to ensure that those at risk of fuel poverty will be identified and supported to benefit from energy efficiency works? What are the links and potential impacts of other policy domains such as economic development, tackling in work poverty, welfare reform on these proposals?

Similarly it may be useful to consider environmental justice in the proposals. For example some studies have demonstrated that people living in deprivation are more likely to live near derelict or brownfield land and people who live near derelict or brownfield land are more likely to experience poor health.

As stated in Q12 it may be worthwhile to carry out a Health Inequalities Impact Assessment of the draft proposals.

Q.17. Do you have other suggestions that we have not mentioned in relation to housing and the environment?

See above

Section 6: Housing and Health and Education

Q.18. Do you agree with our on our assessment of the importance of housing to health and education?

Yes overall we agree with the Commissions assessment of the links between housing and health, however the Commission may also wish to consider other links highlighted in previous responses above and in other sections of the consultation document. These include links between:

- neighbourhood greenspace and health and health inequalities;
- indoor air pollutants, lead exposure and poor health in older people, asthmatics and children;
- health inequalities and living near derelict/brownfield land;
- natural indoor light and depression;
- homes safety and children.

It may also be worth highlighting that fuel poverty does not only affect older people; children and families are increasingly affected.

We agree with the links between education and housing



Commission on Housing & Wellbeing

Q.19. Do you agree with our brief assessment of current policy on housing and health and education?

It may be helpful in the Commission's assessment to consider the potential impact of other policy domains and environmental conditions on the issues highlighted and how cross government (and UK Government) action may be effective in addressing these issues e.g.:

- The potential impact of welfare reforms, in work poverty and food prices on fuel poverty;
- The impact of welfare reforms, in work poverty and socioeconomic inequalities on homelessness

Q.20. Do you agree with our suggestions for further action in the area of housing and health and education?

We agree with the proposals relating to homelessness and in particular the need to focus on prevention with greater support to those most at risk combined with universal policies which support better more accessible housing for all.

We agree also with the proposals around older people and in particular would be a supportive of greater alignment of housing with Health and Social Care partnerships. However, it may be useful to outline that this would not only be in the interests of older people but would also benefit other vulnerable population such as people with disabilities, people with mental health problems etc and in tackling health inequalities. e.g Housing adaptations to promote independent living and rehousing to meet medical or mobility needs can have health benefits for residents

Q.21. Do you have other suggestions which we have not mentioned in relation to housing and health and education?

Cross referencing is perhaps required to other housing related issues impacting on health and health inequalities stated above or in other aspects of the consultation.

Section 7: Housing and Community Regeneration

Q.22. Do you agree with our on our assessment of the importance of community regeneration?

Overall we would agree but perhaps more information on the limitations of focusing on housing improvement alone would be helpful here. Despite programmes of housing-led renewal delivering major improvements to housing and the outdoor housing environment, it would appear that there is little evidence of associated improvements in health (also no evidence of negative effects). One possible explanation for this is that investment and interventions are area based and therefore it is difficult to assess impacts on individual health improvement. Therefore, perhaps a recommendation of the Commission should be to explore other methods of evaluation for such interventions.

Q.23. Do you agree with our brief assessment of current policy on community regeneration?

It may be worth reflecting here some of the work of the Scottish Governments Good Places, Better Health Programme and current work underway to develop a Place Standard

Q.24. Do you agree with our suggestions for further action in the area of community regeneration?

Regeneration requires a cross cutting policy response and action, therefore it seems perhaps limiting to consider housing proposals in isolation in this section.

A number of the proposals, if implemented, are likely to contribute positively to addressing health inequities e.g. community budgeting.

In addition studies have shown that regeneration can have a number of positive effects which may have positive associations with improved health e.g. reduced sense of isolation, reduced fear of crime, increased sense of belonging and feelings of safety, increased involvement in community affairs, greater recognition of neighbours and improved view of the area as a place to live.

There are, however, also a number of potentially negative impacts which research has demonstrated can be associated with housing improvement and associated regeneration e.g.

- Rent increases
- Stress of relocating and uprooting social networks
- Displacement of working class populations (gentrification)



.25. Do you have other suggestions which we have not mentioned in relation to community regeneration?

No comment

Section 8: Do we need a more robust private rented sector?

Q.26. Do you agree with our views on the need for a more effective private rented sector which can make a greater contribution to meeting housing needs?

No comment

Q.27. Do you agree with our brief assessment of current policy on the private rented sector?

No comment



Commission on Housing & Wellbeing

Q.28. Do you agree with our suggestions for further action in the private rented sector?

No comment

Q.29. Do you have other suggestions which we have not mentioned in relation to the private rented sector?

No comment

Do you have any further comments in relation to the Commission on Housing and Wellbeing's consultation paper?

In general we are supportive of the paper and in particular its attempt to consider housing in the wider context of other contributory factors to wellbeing.

There is perhaps a risk, however that it may be limited in its impact by the very fact that it is focused on housing and therefore may perhaps be unable to consider the cumulative effect of combining its proposals with those in other policy domains.