UK COLLABORATIVE CENTRE FOR HOUSING EVIDENCE

Health and wellbeing in the private rented sector

Part 1: Literature review and policy analysis

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Executive Summary

This report is the first output of a project that explores how living in the UK private rented sector (PRS) affects wellbeing. It features a review of key themes from the literature and interviews with key expert professional participants from across the UK. The second output will feature findings from in-depth interviews with 53 tenants.

Impact of tenure on wellbeing

- Some evidence suggests that tenure has a differential impact on wellbeing and that people living in social and privately rented housing have poorer wellbeing than homeowners.
- Some PRS tenants are experiencing increased financial insecurity and deterioration in wellbeing as a result of the COVID-19 pandemic.

Housing factors that affect wellbeing

- Although there is significant diversity in stock condition, poor property conditions in the PRS are common across the four nations of the UK and are generally worse than in other tenures.
- Affordability is a substantial driver of poor health and wellbeing. Some households experience significant financial stress in maintaining PRS tenancies.
- Security of tenure and the perceived risk of eviction contribute to feelings of anxiety, stress and the inability to feel settled and at home, even if the event does not actually occur.

Factors that mediate the relationship between housing and wellbeing

- Relational aspects, connections and belonging: Evidence indicates that some PRS tenants are unable to engage in meaningful relationships because of their housing situation.
- Safety and security: Research suggest that feelings of insecurity and fear are not confined to those renting in the "shadow PRS",[1] but are rather widespread and pervasive.
- Feelings of autonomy and control: Difficulties in trying to establish a sense of home while lacking the necessary autonomy can negatively impact wellbeing by causing stress, anxiety, depression and alienation.
- Stigma and status anxiety: The normalising discourse of home ownership and the stigma attached to certain types of housing can negatively affect wellbeing.

[1]Spencer, R., Reeve-Lewis, B., Rugg, J. and Barata, E. (Safer Renting) (2020) Journeys in the shadow private rented sector (Accessed: 18/12/20).

Key policy issues

Although straightforward comparisons are not possible, there are several key themes playing out across the different countries of the UK.

- Representation of the PRS in local health and wellbeing partnerships is patchy. Information on the extent to which tenure-based differences are considered is currently lacking.
- Targeted health and wellbeing initiatives are less widely available in the PRS than in other tenures.
- There is a lack of support for tenants who may be vulnerable. This can act as a deterrent for landlords in accommodating certain households.
- Some local authorities are adopting a more "creative" approach to regulation on a local level that incorporates a "tenant-focused" approach to help improve the wellbeing of PRS tenants.
- This report demonstrates that improving conditions in the UK PRS and creating safe and healthy homes entails more than the elimination of physical or environmental hazards.

1. Introduction

Aims and research questions

This report is the first output of a project that aims to increase the understanding of how living in the private rented sector affects wellbeing.[2] It is already well-established that housing is a key social determinant of health that may reduce or reinforce health inequalities.[3] Our recent study, *Improving Compliance with Private Rented Sector Legislation*, provides an outline of measures that local authorities, the UK and devolved governments can apply to address issues of disrepair and poor standards in the sector.[4] Effective regulation and enforcement to improve the characteristics of the physical stock is key to ensuring that tenants can occupy a safe and healthy home.

However, evidence on the importance of 'housing as home' demonstrates that housing affects human welfare and wellbeing beyond providing a mere shelter against the elements.[5] Good housing not only safeguards health but also provides a base from where people can thrive within other aspects of their lives. Research on homelessness has demonstrated that housing plays a fundamental role in helping people obtain the needed capabilities to live life well.[6] In order to explore this dynamic within the context of the PRS, we posed these research questions:

- What is the relationship between living in the PRS and subjective wellbeing?
- How does living in the PRS either enable or constrain the capabilities needed to promote wellbeing?

This study adopts the capability approach as a means of exploring the multi-dimensional and inter-dependent nature of wellbeing. At its core the capability approach asks: what are people able to do and be and what freedoms and opportunities do they have? This will be addressed in the second report featuring findings from in-depth interviews carried out with 53 tenants.

Wider context and background

In recent years the PRS has experienced significant growth and currently accommodates approximately 20% of British households. The sector is characterised by significant diversity in household types, characteristics and needs as well as in the stock condition, affordability, and quality of management. There is also substantial regional and national variation in the size of the sector and the amount of growth it has seen. Of particular concern, however, is that across the UK the sector houses an increasing number of households that are at particular risk of housing-related harms such as poverty, overcrowding and poor standards. These groups include families with dependent children, people living with disabilities or illnesses, low-income households, people in receipt of means-tested benefits, and people over 65 years old.[7] The evidence shows that tenancy lengths are increasing, and that families with children are remaining in the sector for longer periods of time.[8]

[2] The second report will cover the findings from in-depth interviews carried out with tenants from across the UK.

[3] Marmot, M., Allen, J., Boyce, T., Goldblatt, P. and Morrison, J. (2020) Health Equity in England: The Marmot Review 10 Years On (Accessed: 8/3/21).

[4] Harris, J., Cowan, D. and Marsh, A. (2020) Improving compliance and enforcement in the private rented sector (Accessed: 11/1/21).

[5] Hiscock, R., Kearns, A., MacIntyre, S. and Ellaway, A. (2001) 'Ontological Security and Psycho-Social Benefits from the Home: Qualitative Evidence on Issues of 'Tenure', Housing, Theory and Society, 18(1-2); Padgett, D. (2007) 'There's No Place like (A) Home: Ontological Security among Persons with Serious Mental Illness in the United States', Social Science & Medicine, 64(9).

[6] O' Shaughnessy, B., Manning, R., Greenwood, R., Vargas-Moniz, M., Loubière, S., Spinnewijn, F., Gaboardi, M., Wolf, J., Bokszczanin, A., Bernad, R.,Blid, M., and Ornelas, J. (The HOME-EU Consortium Study Group) (2020): 'Home as a Base for a Well-Lived Life: Comparing the Capabilities of Homeless Service Users in Housing First and the Staircase of Transition in Europe', Housing, Theory and Society.

[7] Rhodes, D. and Rugg, J. (2018) Vulnerability in the UK Private Rented Sector (Accessed: 25/2/21).

[8] Rugg, J. and Rhodes, D. (2018) The Evolving Private Rented Sector: Its Contribution and Potential. Research Report Centre for Housing Policy, York. (Accessed: 11/6/21).

Constraints in the general housing supply, the inaccessibility of home ownership and reductions in the supply of social rented housing is likely to drive increasingly high levels of demand for private rented housing in many parts of the UK.[9]

The effect of housing on health and wellbeing has been brought into stark relief by the unequal impact of the COVID-19 pandemic. Overcrowded and poor-quality housing is linked to a higher risk of infection and mortality from the virus and people living on low incomes and/or in deprived areas, recent immigrants as well as BAME communities have been particularly impacted.[10] The pandemic raises important issues on how the experience of living in the PRS varies between different groups of people. Those living in poor-quality PRS accommodation have reported worsening housing conditions, this alongside an increased exposure to housing-related harms because of spending more time in their homes over the lockdowns.[11]

Research by the MHCLG in England suggests that the financial impact of COVID-19 has been acutely felt by many PRS tenants: 35% of private renters reported that their monthly household income decreased by at least £100 due to the pandemic.[12] Private renters spend a higher proportion of their income on rent compared to those in other tenures and are disproportionately likely to work in sectors that have been hit hard by the pandemic such as hospitality, the arts and entertainment. A YouGov poll in August 2020 suggested that approximately 6% of PRS tenants in England are facing rent arrears and that half of these arrears were a result of COVID-19.[13] A further 9% of private renters said they were very or fairly likely to fall behind with rent payments in the next three months, representing approximately 290,000 households.

Despite the success of the furlough scheme the UK's unemployment rate has risen; evidence from the Resolution Foundation suggests that 8% of private renters have lost their jobs due to the pandemic, compared to 7% of social renters and 3% of mortgaged home owners.[14] This increasing financial insecurity has taken place against a backdrop of rising rates of poverty, increasingly unaffordable housing and reductions of benefit entitlements, thereby exacerbating an already precarious housing situation for many lower income renters.[15] Long-term rent arrears and the associated loss of income and confidence among private landlords will have lasting effects on the PRS and its residents.[16]

A significant amount of research has demonstrated that poor energy efficiency, fuel poverty, excess cold or heat, damp, overcrowding and other home conditions (e.g., fall hazards) are associated with poorer physical health outcomes such as respiratory illnesses.[17] Clear correlations between housing disadvantage and mental ill-health have also been demonstrated.[18]

[9] Mid-market rent housing is a form of affordable housing that 'provides an alternative to the private rented sector but with high quality, grant-funded units with rents at or around the same level as the Local Housing Allowance' (Serin, B., Kintrea, K., & Gibb, K. (2018). Social housing in Scotland. UK Collaborative Centre for Housing Evidence (CaCHE)). Within the context of this study it is considered as a separate group of housing, and tenants from living within MMR housing were not including in the sampling framework.

[10] Marmot, M., Allen, J., Goldblatt, P., Herd, E. and Morrison, J. (2020) Build Back Fairer: The COVID-19 Marmot Review (Accessed: 8/3/21).

[11] Brown, P., Newton, D., Armitage, R. and Monchuk, L. (2020) Lockdown. Rundown. Breakdown: The COVID-19 lockdown and the impact of poor-quality housing on occupants in the North of England. The Northern Housing Consortium (Accessed: 25/2/21).

[12] MHCLG (2020) English Housing Survey. Household Resilience Study, Wave 1 June-July 2020. (Accessed: 24/3/21)

[13] Whitehead, C., Holman, N., Crankshaw, B. and Rotolo, M. (2020) Where now for the Private Rented Sector? November 2020 (Accessed: 19/5/21).

[14] https://www.theguardian.com/money/2020/oct/31/uk-renters-housing-costs-covid-resolution-foundation

[15] McKee, K., Soaita, A.M. and Hoolachan, J. (2019) 'Generation rent' and the emotions of private renting: self-worth, status and insecurity amongst low-income renters', Housing Studies, 35(8).

[16] Whitehead et al, Where now for the private rented sector?

[17] Peat J, Dickerson J & Li J (1998). Effects of damp and mould in the home on respiratory health: a review of the literature. Allergy, 53(2), 120–128; Sauni, R. et al. (2015). Remediating buildings damaged by dampness and mould for preventing or reducing respiratory tract symptoms, infections and asthma. Cochrane Database of Systematic Reviews, 2; Mendell M, Mirer A, Cheung K, Tong M & Douwes J (2011). Respiratory and allergic health effects of dampness, mold and dampness-related agents: A review of the epidemiologic evidence. Environmental Health Perspectives, 119(6), 748–756; Nicol, S., Roys, M. & Garrett, H. (2015). The cost of poor housing to the NHS. Watford: The Building Research Establishment.

[18] Singh, L., Daniel, L., Baker, E. and Bentley, R. (2019) 'Housing Disadvantage and Poor Mental Health: A Systematic Review', American Journal of Preventive Medicine, 57(2). Preece, J. and Bimpson, D. (2019) Housing Insecurity and mental health in Wales: An evidence review (Accessed: 8/3/21); Diggle, J., Butler, H., Musgrove, M. and Ward, R. (2017) Brick by brick: A review of mental health and housing. London: Mind. Available at: mind.org.uk/housing; L. Bond, A. Kearns, P. Mason, D. Tannahill, M. Egan & E. Whitely (2012) 'Exploring the relationship between housing, neighbourhoods and mental wellbeing for residents of deprived areas', BMC Public Health 12(48); Liddell C & Guiney C (2015) Living in a cold and damp home: Frameworks for understanding impacts on mental well-being. Public Health 129(3).

Research has also increasingly focused on the way in which psycho-social and non-physical attributes of housing impact people's health and wellbeing, addressing factors such as affordability, security of tenure, tenancy support, responsiveness of landlords, relationships within shared housing environments and the situation and capacity of tenants.[19]

These lines of enquiry divert attention from a sole focus on "bricks and mortar" towards the subjective and interpersonal factors that help make a house a home and allow people to flourish in various aspects of their lives. Academics have increasingly argued that in order to create safe and healthy homes, policy and practice should look beyond the structural conditions of housing as health drivers. Yet policy generally focuses on eliminating physical health hazards.

Most of the research exploring the mental health impacts of housing uses specific outcomes that relate to depression, anxiety or mental stress. However, health cannot simply be defined by an absence of illness. The World Health Organisation (WHO) defines mental health as 'a state of wellbeing in which every individual realises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community.' Wellbeing is a complex phenomenon which is often poorly defined but can broadly be understood as state of mind and functioning, which is stable when individuals have adequate resources to meet life's challenges.[20] Whilst only a minority of people are actually ill, wellbeing is something everyone experiences.[21] We all experience mental wellbeing, which closely relates to our psychosocial environments that include our housing and neighbourhoods.

Wellbeing is an area where some parts of the UK have recently seen some encouraging progress. The 'Measuring National Wellbeing' programme established by the UK Office for National Statistics (ONS) in 2010 publishes an annual report on personal wellbeing across the UK. In addition, the National Performance Framework is a tool used by the Scottish Government to identify and monitor its purposes, objectives and outcomes and represents an attempt to take a more rounded approach to public policy. The Wellbeing of Future Generations Act (Wales) 2015 outlines seven key wellbeing goals that public bodies in Wales must work towards. In Northern Ireland, in early 2021 the Executive held a public consultation on its Programme for Government Draft Outcomes Framework, comprising 'a shared and strategic vision for the future which aims to improve wellbeing for all.'[22] However, the Outcomes Framework in Northern Ireland does not cover a specific housing outcome.

Even prior to the pandemic, research painted an alarming picture of the role of housing in widening health inequalities.[23] The UK Government has paid insufficient attention to the social determinants of health in achieving greater equality in health outcomes, including across tenures. The social and economic recovery from the pandemic provides an opportunity to not only 'build back better' but to 'build back fairer' and to put the 'achievement of health and wellbeing at the heart of Government strategy'.[24] This in turn raises questions about the effect of living in the PRS on wellbeing and the measures that policy and practice can implement to enhance wellbeing, rather than tenants being adversely affected by living in the sector. These matters are the particular focus of this study.

[19] McKee, K., Rolfe, S., Feather, J., Simcock, T. and Hoolachan, J. (2021) Making a home in the private rented sector. An evidence review (Accessed: 26/3/21); Baker, E., Pham, N.T.A., Daniel, L. and Bentley, R. (2020) New evidence on mental health and housing affordability in cities: A quantile regression approach, Cities, 96; Park, G.R. and Seo, B.K. (2020) 'Revisiting the relationship among housing tenure, affordability and mental health: Do dwelling conditions matter?' Health Soc Care Community; Wilkinson, E. and Ortega-Alcazar, I. (2019) Stranger danger? The intersectional impacts of shared housing on young people's health and wellbeing, Health & Place, 60; Rolfe, S., Garnham, L., Godwin, J., Anderson, I., Seaman, P. and Donaldson, C. (2020) 'Housing as a social determinant of health and wellbeing: developing an empirically informed realist theoretical framework', BMC Public Health, 20(1138).

[20] Dodge, R., Daly, A., Huyton, J. and Sanders, L. (2012) 'The challenge of defining wellbeing', Int J Wellbeing, 2(3).

[21] Bond et al, Exploring the relationship

[22] https://www.northernireland.gov.uk/programme-government-pfg

[23] Marmot, M., Allen, J., Boyce, T., Goldblatt, P. and Morrison, J. (2020) Health Equity in England: The Marmot Review 10 Years On (Accessed: 8/3/2021).

[24] Marmot et al, Build Back Fairer.

Methodology

Data collection for this report involved a review of key themes from inter-disciplinary literature on housing, health and wellbeing and from interviews with ten key expert professional participants from across Scotland (x4), Wales (x3), England (x2) and Northern Ireland (x1) carried out in February 2021.[25] Participants were sampled from across public health, academia, local authorities, the voluntary sector and relevant Government departments. Participants were invited to comment on the relationship between housing, health and wellbeing, relevant policy or practice developments, and key recommendations or suggestions for change. Material from these interviews is incorporated throughout the following chapters of this report and was also used to inform the design of the second stage of the project, featuring in-depth interviews with 53 tenants from across the UK.

The qualitative methodology adopted within this report does not intend to produce generalisable findings for the entire PRS but to rather provide a deeper understanding of the key ways in which living in PRS housing affects wellbeing. Qualitative analysis can reveal layers of complexity that are rarely captured by statistical analysis. An understanding of the situated and contextually bound nature of people's experiences may provide richer insights than large scale statistical data.[26] This will be explored in more depth in the second report.

[25] This report is slightly more focused on GB. Where relevant, key differences across the nations of the UK are highlighted.

[26] Mason, J. (2002) Qualitative Researching. London: SAGE.

2. Wellbeing in the PRS

Drawing on findings from existing research and stakeholder interviews, this chapter explores the aspects of PRS housing that impact wellbeing, as well as the way in which these effects are mediated. The second part of the chapter examines the characteristics of households that are most affected.

Does tenure impact on health and wellbeing?

Some evidence suggests that tenure has a differential impact on health and wellbeing and that people living in social and privately rented housing have worse wellbeing than homeowners. A number of reports show lower mortality rates among homeowners compared to those living in social or privately rented housing.[27] Recent research drawing on the UK Household Longitudinal Survey found that compared to homeowners, people living in the PRS demonstrate higher levels of CRP (a biomarker related to inflammation and stress).[28] The authors suggest that issues relating to affordability and the sense of insecurity associated with renting privately may result in increased stress. Some studies also report an association between tenure and mental health.[29] For example, analysis of the Understanding Society data found that people living in rented housing were more likely to experience poor mental health than homeowners.[30]

Some evidence from the UK suggests tenure to also have a differential impact on wellbeing, including evidence related to the pandemic. The MHCLG Household Resilience study shows that since the onset of COVID-19 a greater percentage of people report feeling lonely with their personal wellbeing having declined; this especially among private renters. The *Understanding Society* study is a UK-wide longitudinal study covering questions on housing, health, and wellbeing. This data shows that when compared to social renters and private renters,[31] owner occupiers experience higher life satisfaction.[32] Earlier research by the MHCLG reported - after controlling for the impact of personal characteristics - that the experience of rent arrears and tenure were the most significant housing factors affecting life satisfaction. A recent review of evidence from the Understanding Society dataset provides further indications of a statistically significant causal relationship between tenure and subjective wellbeing.[33] An updated analysis of this data by the Resolution Foundation suggests that whilst deteriorations in wellbeing have taken place across tenures during COVID-19, this has been most pronounced for social and private renters.[34]

However, the evidence linking tenure to health and wellbeing outcomes is uncertain because the relationship between housing and health is mediated by a vast array of different factors. Some studies found no significant effect of tenure after controlling for these different variables.[35] One study demonstrated that depressive symptoms were more likely to found among renters than owner-occupiers, but this effect was overwhelmingly suppressed by the

[27] Chandola, T. (2000) 'Social class differences in mortality using the new UK National Statistics Socio-Economic Classification', Soc Sci Med, 50(5):641-9; Huisman, M., Kunst, A.E., Andersen, O., Bopp, M., Borgan, J. and Borrell, C. (2004) 'Socioeconomic inequalities in mortality among elderly people in 11 European populations. J Epidemiol Community Health', 58(6); Laaksonen, M., Martikainen, P., Nihtilä, E., Rahkonen, O. and Lahelma, E. (2008) 'Home ownership and mortality: A register-based follow-up study of 300 000 Finns. J Epidemiol Community Health', (4); Laaksonen. M., Tarkiainen, L., Martikainen, P. (2009) Housing wealth and mortality: A register linkage study of the Finnish population. Soc Sci Med

[28] Clair, A. and Hughes, A. (2019) 'Housing and health: new evidence using biomarker data', J Epidemiol Community Health, 73.

[29] Macintyre, S., Ellaway, A., Hiscock, R., Kearns, A., Der, G. and McKay, L. (2003) 'What features of the home and the area might help to explain observed relationships between housing tenure and health? Evidence from the west of Scotland', Health Place, 9(3); Ellaway, A., Macdonald, L. and Kearns, A. (2016) 'Are housing tenure and car access still associated with health? A repeat cross-sectional study of UK adults over a 13-year period', BMJ Open, 6(11).

[30] MIND (2019) 'Understanding Society - housing research summary' cited in Preece and Bimpson, Housing insecurity and mental health in Wales

[31] This report presents Official Statistics from Wave 1 of a follow-up to the 2019-20 English Household Survey investigating household resilience in light of COVID-19. MHCLG (2020) English Housing Survey. Household Resilience Study, Wave 1 June-July 2020. (Accessed: 24/3/21)

[32] MHCLG (2014) English Housing Survey. Housing and wellbeing report 2014 (Accessed: 9/3/21).

[33] Clapham et al, The concept of subjective wellbeing.

[34] Judge, L. And Rahman, F. (2020) Lockdown living. Housing quality across the generations. Resolution Foundation Briefing (Accessed: 24/3/21).

[35] Baker, E., Bentley, R., and Mason, K. (2013) 'The mental health effects of housing tenure: Causal or compositional?', Urban Studies, 50(2); Howden-Chapman, P.L., Chandola. T., Stafford, M. and Marmot, M. (2011) The effect of housing on the mental health of older people: The impact of lifetime housing history in Whitehall II. BMC Public Health,11:682; F. Popham, L. Williamson, and E. Whitley (2015) 'Is Changing Status through Housing Tenure Associated with Changes in Mental Health? Results from the British Household Panel Survey', Journal of Epidemiology and Community Health 69(1).

effect of housing conditions.[36] Poor housing conditions will affect mental health regardless of tenure. Other research studies also paint a mixed picture of the relationship between tenure and wellbeing. For example, Herbers and Mulder found variable relationships between tenure and subjective wellbeing in 16 European countries.[37] These findings are likely to stem from the differences between countries in relation to the housing market (e.g., availability and quality of housing stock) and public policy (e.g., welfare arrangements).

Context plays a crucial role in mediating the relationship between housing and health and wellbeing.[38] The legal, economic, social and cultural dynamics of tenure associated with different housing markets form the framework in which people's experiences of housing and exposure to housing-related stressors are situated.[39] The impact of living in the PRS on people's wellbeing may therefore vary significantly within different local and national contexts. However, only a limited number of studies have explored how social and policy context shapes the various dimensions of individual wellbeing.[40] Academics have highlighted the importance of not assuming that one form of tenure is inherently superior to another,[41] as also emphasised by our research participants:

> *The distribution of the problems that affect wellbeing are very much different across tenures I think. The sorts of issues you'll have will vary depending on what tenure you're in, but I think that there's a risk of us thinking that's inherent to tenure where it's not necessarily. It's just inherent to the way we practice or have tenure in the UK, and particularly England. (Stakeholder, England)*

Housing factors that affect wellbeing

The studies discussed above which show a statistical correlation between housing tenure and wellbeing have their limitations in not exploring the various factors that mediate the relationship. Based on a review of existing evidence, this section explores the key housing-related factors shown to impact wellbeing and outlines certain relevant aspects of the broader institutional context.

Dwelling characteristics and neighbourhood

One explanation for the statistical association observed between tenure and wellbeing relates to the unequal distribution of housing stressors that are damaging to health.[42] Tenure may expose people to various levels of hazards that detrimentally impact health and wellbeing, such as poor conditions, damp and disrepair.

Despite improvements, poor property conditions in the PRS are common across the four nations of the UK and are generally worse than in other tenures. One quarter (25% or 1.2 million) of PRS properties in England fail to meet the Government's Decent Homes Standards.[43] When compared to owner-occupied and social rented homes, PRS homes in England are more likely to have problems with damp or disrepair and to pose a higher threat to health from excessive cold. In Scotland 49% of all PRS dwellings have some disrepair to critical elements,[44] and damp and mould are one of the main reasons why disputes arise between landlords and tenants.[45] The Welsh Housing Conditions Survey 2017-18 shows that compared to other tenures, the PRS has the oldest housing stock and a higher proportion of poor-quality properties. Initiatives to incentivise and encourage landlords to make the needed changes have often

[36] Park and Seo, Revisiting the relationship

[37] Herbers, D.J. & Mulder, C.H. (2017) 'Housing and subjective wellbeing of older adults in Europe', J Hous Built Environ, 32(3).

[38] Bentley, R.J., Pevalinb, D., Baker, E., Masona, K., Reeves, K. and Beerc, A. (2016) 'Housing affordability, tenure and mental health in Australia and the United Kingdom: a comparative panel analysis', Housing Studies, 31:2.

[39] Preece, J. and Bimpson, D. (2019) Housing Insecurity and mental health in Wales: An evidence review (Accessed: 8/3/21).

[40] Bentley, R.J., Pevalinb, D., Baker, E., Masona, K., Reevesd, A. , and Beerc,A., (2016) 'Housing affordability, tenure and mental health in Australia and the United Kingdom: a comparative panel analysis', Housing Studies, 31:2.

[41] Preece and Bimpson, housing insecurity [42] Ellaway, A. and Macintyre, S. (1998) 'Does housing tenure predict health in the UK because it exposes people to different levels of housing related hazards in the home or its surrounding', Health & Place, 4(2).

[43] MHCLG (2017) English Housing Survey, Private rented sector, 2017-18 (Accessed: 17/7/19)

[44] These are often the traditional tenement apartment blocks in cities. Scottish Government (2018) Scottish house condition survey: 2017 key findings (Accessed: 22/7/19)

[45] As reported by the Tenancy Deposit Scheme

failed to attract large numbers of households. In Northern Ireland advice providers have argued that the Fitness Standard is outdated and fails to represent the actual living conditions of PRS tenants.

Aesthetic aspects of a home and neighbourhood (e.g., external appearance of the home; attractiveness of the local environment) have been found to have a significant association with mental wellbeing.[46] Poor lighting, not having a garden, wet or dry rot and local vandalism, all negatively impact life satisfaction.[47] Dwelling characteristics refer to both the physical adequacy of the house and the extent to which it meets the needs of the household, e.g., whether or not it is accessible for any member of the household living with a disability or physical impairment.[48] The location of housing and its accessibility to services, amenities and social networks are further key factors that impact wellbeing:

> *When you think about housing, you think of the immediacy of housing, but housing and community and that choice that someone has for a home within a community where they've got the social support, the social connections, that access to consistent relationships with health services, schools, all of that has a role to play. (Stakeholder, Scotland)*

Physical housing characteristics, including structural conditions, smoke ventilation or warmth (things that have measurable physical outcomes such as respiratory disease) tend to be prioritised in policy as health drivers. The regulation of the PRS across UK and devolved nations has seen significant developments in recent years. The different approaches to addressing poor standards and management practices have been explored in a number of recent reports.[49]

In addition to housing quality, factors such as location can impact on wellbeing through the availability of social connections, public amenities, schools or public transport which all impact on people's ability to engage in activities that promote wellbeing. For example, if newly built houses are situated too far from places of employment opportunities and so require a long commute, tenants may have less opportunities than others to invest time in skill development and resultantly less chances of finding a better or secure job.[50] Housing fundamentally enables people to engage in a variety of social, economic and physical functions that can in turn be constrained by housing that is inappropriate for that individual:

> *If you don't feel safe and secure in your own home, it doesn't matter, it could be the most beautiful home on the planet, if it doesn't feel right for you then it won't work. We do have some clients who are actually very wealthy but their housing isn't right for them. All the money in the world doesn't make that so. That is usually, in that situation, about geography. People have located somewhere and they have found themselves really unhappy, really isolated. (Stakeholder, Scotland)*

The material dimensions of housing are a major aspect of the way in which housing relates to wellbeing, but an exclusive focus on these may easily present a distorted picture. The extensive literature on housing as 'home' allows us to reconceptualise housing from simply a material space that people inhabit to a force that can enable or constrain the needed factors to live life well.[51]

[46] Bond, L. and Kearns, A., Mason, P., Tannahill, D., Egan, M. and Whitely, E. (2012) 'Exploring the relationship between housing, neighbourhoods and mental wellbeing for residents of deprived areas', BMC Public Health 12(48).

[47] Fujiwara, D. (2013) The Social Impact of Housing Providers. HACT.

[48] Batterham, D. (2019) 'Homelessness as Capability Deprivation: A Conceptual Model', Housing, Theory and Society, 36(3). [49] Marsh, A. and Gibb, K. (2019) The private rented sector in the UK: An overview of the policy and regulatory landscape (Accessed: 2/6/21); Harris, J., Cowan, D. and Marsh, A. (2020) Improving compliance and enforcement in the private rented sector (Accessed: 11/1/21).

[50] B. Kimhur (2020) How to Apply the Capability Approach to Housing Policy? Concepts, Theories and Challenges, Housing, Theory and Society, 37:3; Soaita, A.M. and McKee, K. (2019) Assembling a 'kind of' home in the UK Private Rented Sector, Geoforum, 103.

[51] Mallett, S. (2004) 'Understanding Home: A Critical Review of the Literature', The Sociological Review, 52; Depuis, A. & Thorns, D.C. (1998) Home, Home Ownership and the Search for Ontological Security, The Sociological Review , 46; Clarke, A., Hamilton, C., Jones, M. and Muir, K. (2017) Property, evictions and forced moves (Accessed: 26/3/21); Preece and Bimpson, Housing insecurity and mental health; Bowlby, S., Gregory, S., & McKie, L. (1997). "Doing home": Patriarchy, caring, and space. Women's Studies International Forum, 20(3); Hiscock, R., Kearns, A., MacIntyre, S., & Ellaway, A. (2001). Ontological security and psycho-social benefits from the home: Qualitative evidence on issues of tenure. Housing, Theory and Society, 18 (1–2); Parsell, C. (2012). Home is where the house is: The meaning of home for people sleeping rough. Housing Studies, 27(2),

Affordability

As the physical aspects of housing have become better understood, there has been increased interest in the exploration of other dynamics such as unaffordability. Whilst the relationship can be difficult to measure, research suggests unaffordability to be a substantial driver of poor health and wellbeing.[52] For example, an analysis of the UK Population Survey showed an increase in the prevalence of depressive symptoms among private tenants receiving housing benefit after the 2011 amendments in the Local Housing Allowance (LHA) rate.[53] The 2011 changes to the LHA rate was a key aspect of a significant overhaul to the welfare state after the financial crisis of 2008, entailing reduced housing benefit entitlements[54] and a significant shortfall between average market rents and benefit entitlements.

PRS tenants in receipt of benefits are being channelled to the "bottom end" of the PRS which comprises cheaper but lower quality or overcrowded accommodation where they face a higher risk of exploitation from criminal landlords:[55]

> *Affordability causes so much anxiety, so much grief, so much deprivation. I've just done a survey of our private tenants in [place in Wales]. The average shortfall of rent for those that are in rent arrears, of which there's a high proportion at the moment because of covid is £30 a week. (Stakeholder, Wales)*

The financial stress that some tenants experience in maintaining PRS tenancies forms a common theme in several UK-based and international qualitative research studies.[56] Research by the MHCLG also indicates mental wellbeing to be lowest among PRS tenants in rent arrears.[57] There are also wider implications of housing affordability on wellbeing, e.g., the potential impact of spending a large percentage of income on housing and little remaining for food, healthcare and other activities.[58] Affordability problems are reinforced by the high incidence of fuel poverty and poorly heated and insulated homes.

Unaffordability is a dynamic process, with those living with continuing affordability problems likely to have different experiences than those under temporary or short-lived affordability pressures. [59] Affordability is also 'intersected by place,' as rental prices vary regionally across the UK and are often closely tied to local labour markets, with greater demand for housing in hotspots of employment. Additional contextual factors associated with housing affordability include rent levels, income levels, wider benefit changes and landlord responsiveness to circumstantial changes (such as under COVID-19).

[52] Morris, A. (2018) Housing tenure and the health of older Australians dependent on the age pension for their income, Housing Studies; Park and Seo, Revisiting the relationship; Singh et al, Housing Disadvantage and Poor Mental Health; Baker et al, New evidence on mental health; M.P. Taylor, D.J. Pevalin & J. Todd, J. (2007) 'The psychological costs of unsustainable housing commitments', Psychological Medicine, 37(7).

[53] Reeves, A. (2017) 'Reductions in housing benefit increases depression risk in low-income UK households', European Journal of Public Health, 27(3).

[54] Particularly in London this has led to displacement and marginalization of tenants who are forced to relocate to accommodation away from their work and social connections as well as an increase in evictions, homelessness and the use of unsuitable temporary accommodation. See Powell, R. (2015) 'Housing Benefit Reform and the Private Rented Sector in the UK: On the Deleterious Effects of Short-term, Ideological "Knowledge"', Housing, Theory and Society, 32(3).[55] Powell, Housing Benefit Reform; Faith, D. (2020) Discrimination in Housing – 'No DSS', Guest Blog for Shelter Scotland (Accessed: 2/6/21).

[56] Morris (2018) Housing tenure and the health of older Australians dependent on the age pension for their income, Housing Studies; Bentley, R.J., Pevalinb, D., Baker, K., Masona, K., Reevesd, A. and Beerc, A. (2016) 'Housing affordability, tenure and mental health in Australia and the United Kingdom: a comparative panel analysis', Housing Studies, 31:2; Preece and Bimpson, Housing insecurity and mental health; Park and Seo, Revisiting the relationship; Singh et al, Housing Disadvantage and Poor Mental Health; Baker et al, New evidence on mental health; Taylor, M.P., Pevalin, D.J. and Todd, J. (2007) 'The psychological costs of unsustainable housing commitments', Psychological Medicine, 37(7).

[57] MHCLG (2020) English Housing Survey. Household Resilience Study, Wave 1 June-July 2020. (Accessed: 24/3/21)

[58] E. Baker, N.T.A. Pham, L. Daniel, R. Bentley (2020) New evidence on mental health and housing affordability in cities: A quantile regression approach, Cities, 96

[59] Baker et al, New evidence on mental health

Security of tenure

Several studies cite insecurity of tenure as a primary driver of poor mental health and wellbeing for people living in the UK PRS.[60] This is usually associated with short tenancy agreements and the risk of "no fault" eviction.

> *If I had to pick one [driver] it would be insecurity, I think, because it just undermines everything. With tenancy agreements being so short, how are you meant to feel secure? How are you meant to feel at home? That's if you're going through a system that's acting properly and you've not found yourself in the hands of a rogue landlord or something similar. You know, you're not a lodger, you're actually a tenant with a tenancy agreement rather than a lodger agreement. Even the basic more secure option, within the private rented sector, is not secure. (Stakeholder, England)*

At present many landlords in England and Wales can evict tenants from their home without reason (by means of Section 21). However, in Scotland, The Private Housing (Tenancies) (Scotland) Act 2016 created a new private residential tenancy which largely ended no-fault grounds for possession. Whilst it is too early to determine the outcome of this development, it is expected to significantly impact landlords and tenants as well as the sector. The Welsh government has recently taken steps to improve security of tenure for PRS tenants. Across the UK, moratoriums on evictions were introduced during the pandemic and tenancies could not be ended during this time save in a few exceptions. There have been widespread concerns expressed regarding the long-term consequences for evictions and homelessness when these bans are lifted.

Estimates suggest that in England there could be at least three times the numbers of formal evictions than before COVID-19, leading to an additional 30,000 more households in temporary accommodation.[61]

Qualitative research with tenants has demonstrated that the knowledge of possibly having to leave at short notice will contribute to feelings of anxiety, stress, and an inability to feel settled and at home.[62]

> *I think something that can't really be underestimated would be the stress. I always say there's not a nicer feeling than coming home from work on a Friday evening when you've had a really crappy, busy week and you close your front door. You might be coming into a whole load of problems within your own domestic set up, but sometimes it's your refuge. It's where you go to close the door and spend time with your family, with your friends. It's where you unwind. To be somewhere where at any point someone can knock the door and tell you that you have to leave must constantly be a niggle at the back of your mind, you know? (Stakeholder, N. Ireland)*

Within the literature and the interviews with key experts as part of this study, tenancy law is generally assumed to be the primary factor affecting the experience of housing insecurity. This in turn induces behaviours among tenants. For example, research has shown that tenants may be unwilling to complain out of fear of retaliatory eviction.[63] However, the law is only one of the many frames of reference that people use to make sense of their experiences. A range of cultural, relational and social factors pattern individual experiences, understandings and responses to rental experiences, including legal housing problems which may arise. This will be explored more fully in the second report which will build upon existing evidence discussed below that illustrates the central importance of relational factors in structuring rental experiences.

[60] Rolf et al (2020) Housing as a social determinant of health and wellbeing; Easthorpe, H (2014) Making a Rental Property Home. Housing Studies, 29(5)5; Hoolachan, J., McKee K., Moore, T. and Soaita, AM. (2017) 'Generation rent' and the ability to 'settle down': economic and geographical variation in young people's housing transitions. Journal of Youth Studies, 20(1); McKee, K., Soaita, A.M. (2018) The 'frustrated' housing aspirations of generation rent (Accessed: 24/3/21). [61] Whitehead et al, Where now for the private rented sector?

[62] Mckee et al, 'Generation Rent'

[63] Citizens Advice (2017) It's Broke, lets fix it (Accessed: 16/1/21).

How these effects are mediated

Issues relating to the condition of housing, affordability and tenancy law do not in themselves explain how housing impacts on wellbeing. The impact of physical environment and regulatory context is mediated by perceptions, experiences and needs of different individuals and households.[64] The literature provides a number of indications of the various factors or mechanisms that mediate the relationship between housing and subjective wellbeing which are explored below.

Relational aspects, connections and belonging

Social relationships are key to wellbeing. Existing evidence on the association between housing and wellbeing demonstrates a strong relational aspect, with homes shown to be fundamentally associated with feelings of belonging and connecting with others.[65]

Evidence suggests that some PRS tenants are unable to engage in meaningful relationships because of their housing situation. For example, tenants in houses of multiple occupancy (HMO) report experiences of isolation and loneliness as a result of having housemates who are not of their choosing, a lack of communal spaces or rules which prohibit overnight guests.[66] Tenants living in poor quality housing may lack the ability to live without shame and meet friends without losing self-respect because of the poor conditions.

People living on low incomes may be forced to move because of affordability issues and become disconnected from existing social networks.[67] Unaffordable housing can also contribute to social isolation, where people after paying rent have no financial resources left for recreational activities. [68]

> *I think that the pandemic has obviously brought everyone's attention to issues to do with loneliness and domestic abuse. Where you've got relationships in the home but they're pretty damaging or you have a lack of companionship at home, whether that is to do with people you live with or visitors or you visiting others. I think that's a whole health and housing domain in its own right really, in the same way that the physical condition of people's homes is a domain. (Stakeholder, England)*

Feeling part of a community or local area forms another key relational aspect of home. Research on neighbourhood effects suggests that networks with shared norms and values may provide both a sense of belonging and a stress-buffering effect. The social rented sector is regulated to encourage tenant participation and empowerment, which has in turn been linked to positive psychological cognitive outcomes such as improved self-efficacy and self-esteem, greater sense of control, and increased knowledge and awareness of housing rights and options.[70] However, the PRS lacks distinct community engagement and participation-based activities. [71]

[64] Clapham et al, the concept of subjective wellbeing

[65] Rolfe, S., Garnham, L., Godwin, J., Anderson, I., Seaman, P. and Donaldson, C. (2020) 'Housing as a social determinant of health and wellbeing: developing an empirically informed realist theoretical framework', BMC Public Health, 20(1138); Wilkinson, E. and Ortega-Alcazar, I. (2019) Stranger danger? The intersectional impacts of shared housing on young people's health and wellbeing, Health & Place, 60; Arthur, A. (2020) 'Owning vs. Renting: the benefits of residential stability?', Housing Studies; Bond, L. and Kearns, A., Mason, P., Tannahill, D., Egan, M. and Whitely, E. (2012) 'Exploring the relationship between housing, neighbourhoods and mental wellbeing for residents of deprived areas', BMC Public Health 12(48) [66] Ortega-Alcázar, I & Wilkinson, E (2020): 'I felt trapped': young women's experiences of shared housing in austerity Britain, Social & Cultural Geography; Soaita and McKee, Assembling a 'kind of home'.

[67] Wilkinson and Ortega-Alcazar, Stranger Danger

[68] Morris, A. (2018) Housing tenure and the health of older Australians dependent on the age pension for their income, Housing Studies

[69] Rolfe, S. & Garnham, L. (2020) Neighbourhood impacts on wellbeing: Investigating the role of housing among low income tenants. Social Inclusion (special issue), 8 (3); Kearns, A. and Whitley, E. (2020) 'Are housing and neighbourhood empowerment beneficial for mental health and wellbeing. Evidence from disadvantaged communities experiencing regeneration', SSM – Population Health, 12; Lambourne, T. and Jenkins, S. (2018) 'Enhancing social values, identity and wellbeing the impact of participatory working with housing association tenants', Community Development Journal.

[70] Woodall, J., Raine, G., South, J., & Warwick-Booth, L. (2010) Empowerment and health & well-being: Evidence review. Leeds: Centre for Health Promotion Research, Leeds Metropolitan University (Accessed: 26/3/21).

[71] There a few limited exceptions. For example, the Nationwide Foundation opened a dedicated stream of funding to strengthen, support and champion the growth of tenants' voice work.

I suppose maybe another way to look at it would be tenants becoming more empowered. If there was a system whereby tenants in the PRS could join tenants' organisations, could get access to participation advice and access to - not just about their individual rights, but the rights of people in the sector, could develop agendas for improvement, could go to conferences and things. That doesn't really exist. (Stakeholder, Wales)

Research also suggests that positive relationships with housing providers impact wellbeing, for example, if they respond promptly when receiving requests for repairs.[72]

Safety and security

To feel safe and secure in one's home is an essential starting point in obtaining basic human needs, and it is on this basis that other capabilities such as resilience can be nurtured.[73] A home can however also be experienced as a 'prison where people are trapped in isolation or in violent relationships, afraid of losing the basic security they have if they leave'.[74] Vulnerable tenants who are purposefully targeted by criminal landlords face personal threats or (more commonly) the theft or damage of personal belongings.[75]

Additionally, besides the more obvious impact of poor property conditions or anti-social behaviour in the neighbourhood, tenants living in HMOs can also feel unsafe when sharing with strangers.[76]

Qualitative literature does however suggest that feelings of insecurity and fear are not confined to those renting in the "shadow PRS",[77] but are rather widespread and pervasive.[78] This is generally associated with short tenancy contracts and the inequality of power between landlords and tenants:

That pattern of ownership is still hankered after. There's still an aspiration for it, most often because people feel so insecure in their private tenancy. They might actually be fairly secure but they feel insecure. (Stakeholder, Wales)

The threat of retaliatory eviction may not be grounded in local housing reports or national statistics. However, fear of the event can still be a very real experience that detrimentally affects wellbeing, influences behaviours and can in turn have a range of knock-on effects (e.g., unwillingness to ask landlords to complete repairs or report problems to the local council).

Autonomy and control

Having control over our experiences and the freedom to be ourselves are key in achieving the state of wellbeing associated with feeling at home. A number of qualitative studies exploring the experience of home among PRS tenants have highlighted issues of autonomy and control in relation to the duration of tenancy in the property, who the house is shared with and freedom to use spaces for one's preferred everyday activities (such as receiving visitors).[79] UK and international literature have also shown the negative impact of constraints on decorating or furnishing properties according to personal taste.[80] Additionally, tenants may feel unable to resolve a housing problem or issue when lacking the necessary legal capability: 'the knowledge, skills and attitudes to deal effectively with a law-related

[72] McKee et al, Making a home in the private rented sector.

[73] King, P. (2003) A Social Philosophy of Housing, Aldershot: Ashgate.

[74] Nicholls, C. (2010) Housing, Homelessness and Capabilities, Housing, Theory and Society, 27:1,

[75] Spencer, R., Reeve-Lewis, B., Rugg, J. and Barata, E. (Safer Renting) (2020) Journeys in the shadow private rented sector (Accessed: 18/12/20).

[76] Wilkinson and Ortega-Alcazar (2019) Stranger danger?

[77] Spencer et al, Journeys in the shadow private rented sector

[78] In the data collection for the second report, we purposefully sampled participants from across different income brackets.

problem'.[81]

A lack of control may also be associated with a landlord wanting to sell the property or increasing the rent beyond what a tenant can afford. This asymmetry in landlord-tenants' relationships may also play out in a tenant's inability to convince a landlord to carry out needed repairs (as reported in a longitudinal qualitative study with 128 people who had been rehoused following experiences of homelessness[82]). Choice in housing may be particularly restricted among people in receipt of housing benefit who face affordability issues and discrimination from landlords.

It has been suggested that 'owning rather than renting a home confers ontological security—a sense of control and mastery.'[83] Ontological security has been defined as a psychological sense of stability that is derived from 'a sense of constancy in one's social and material environment which, in turn, provides a secure platform for identity development and self-actualization'.[84]

Qualitative research suggests that difficulties experienced by tenants in trying to establish and re-establish a sense of home while lacking the necessary control and autonomy will negatively impact their wellbeing by causing stress, anxiety, depression and alienation.[85]

Stigma and status anxiety

Positive self-esteem and identity are associated with a sense of efficacy and an ability to cope. Research employing the Warwick-Edinburgh Mental Wellbeing Scale has shown that a sense of personal progress derived from one's home and neighbourhood has a significant impact on mental wellbeing.[86] The literature suggests that the normalising discourse of homeownership and the stigma attached to certain types of housing can negatively affect wellbeing.[87] Despite the significant structural barriers to home ownership, aspirations for this type of tenure persists in the UK.[88] Home ownership is regarded as a sign of a leading a "successful" life, and the messages that renting coveys to others may contribute to negative feelings such as anxiety or low self-esteem.[89] Analysis of the *Understanding Society* data also suggests a positive statistical correlation between a higher importance assigned to home ownership and a decreased life satisfaction among renters.[90] This lends support to the notion that housing is a psycho-social environment which operates partly through prevailing housing norms and people's assessment of their situation relative to others.

Tenants living with mental health problems, those in receipt of benefits and those on a low income also face stigma and discrimination in accessing PRS properties.

Who is most effected?

[79] Barrat, C. and Green, G. (2017) 'Making a House in Multiple Occupation a Home. Using Visual Ethnography to Explore Issues of Identity and Well-Being in the Experience of Creating a Home Amongst HMO Tenants', Sociological Research Online, 22(1); Wilkinson, E. and Ortega-Alcazar, I. (2019) Stranger danger?

[80] Easthope, Making a rental property home; Hulse, K., Morris, A. & Pawson, H. (2019) Private renting in a home-owning society: Disaster, diversity or deviance? Housing, Theory and Society,

[81] S. Collard, C. Deeming, L. Wintersteiger, M. Jones and J. Seargeant (2011) Public legal education evaluation framework. Bristol: University of Bristol Personal Finance Research Centre (Accessed: 11/1/21).

[82] Smith, M., Albanese, F. and Truder, J. (Shelter and Crisis) (2014) A Roof Over My Head: The final report of the Sustain project (Accessed: 29/3/21)

[83] Marcuse, P. and Madden, D. (2016) In Defence of Housing: The Politics of Crisis, Verso: London/New York; M.Shaw (2004) 'Housing and public health', Annual Review of Public Health, 25; Saunders, P. (1989) 'The meaning of 'home' in contemporary English culture', Housing Studies 4(3););

[84] Padgett, D.K." (2007) 'There's No Place like (A) Home: Ontological Security among Persons with Serious Mental Illness in the United States', Social Science & Medicine 64(9).[85] Soaita, A.M. and McKee, K. (2019) Assembling a 'kind of' home in the UK Private Rented Sector, Geoforum, 103.

[86] Bond et al, Exploring the relationship between housing, neighbourhoods and mental wellbeing.

[87] Gurney, C. (1999) Pride and prejudice: discourses of normalization in public and private accounts of home ownership. Housing Studies, 14(2).

[88] Preece, J., Crawford, J., McKee, K., Flint, J. and Robinson, D. (2020) 'Understanding changing housing aspirations: a review of the evidence', Housing Studies, 35(1).

[89] Preece and Bimpson, Housing insecurity and mental health

[90] Clapham et al, the concept of subjective wellbeing

Adequate housing is likely to mean different things to different people and there are key differences in the way in which various groups of people can access and sustain adequate housing. In order to achieve a sense of safety and security, requirements may differ in relation to space, physical adaptations, neighbourhood, geography or household needs. The experience of home is also mediated by previous housing experiences: one qualitative study found that for some people a move into an HMO was symptomatic of challenging life circumstances (such as relationship breakdown), whilst for others it symbolised a more positive change or stage in their lives. [91]

Whilst housing inequalities exist across all groups and tenures, the risk of exposure to poor quality housing and other housing stressors is not shared equally across society. Tenants with protected characteristics such as ethnic minority groups; people who are LGBTQ+; women; the older population; and those living with disabilities are likely to have different experiences of housing precarity.[92] Multiple disadvantages can also interact in complex ways to exacerbate the impact of inadequate housing.[93]

Recent research among young people living in the UK PRS shows that those with low incomes are likely to experience acute housing pressures.[94] Those living in deprived areas or on lower incomes are more likely to experience housing conditions that adversely impact health and wellbeing such as overcrowding, dampness, and fuel poverty. This is in turn linked to feelings of powerlessness, insecurity, alienation, financial stress, stigma and status anxiety.

A recent review of the literature also reported that the mental health impact of poor housing affordability is more prevalent among lower income groups.[95] Limited financial resources will also pose a barrier to finding better and alternative accommodation.

Living in shared housing may also bring about certain threats. A recent qualitative exploration of the experience of sharing in the PRS among groups with equality characteristics found that sharing had a negative impact on people's mental health and wellbeing.[96] People with pre-existing mental health problems reported these to be exacerbated and/or that their mental health had deteriorated as a result of living with strangers. People with low mental health have been found to be particularly vulnerable to the negative mental health effects of unaffordable housing.[97] Whilst the lack of a place where one feels at home may detrimentally impact anyone's mental wellbeing, this effect is likely to be amplified for those facing mental health problems. Research demonstrates that long-term exposure to unaffordable housing costs will – depending on people's initial mental health – have a differential impact.[98]

Poor and exploitative housing conditions are prevalent among poor and minority communities and may exacerbate existing inequalities and vulnerabilities.[99] The most extreme type of criminal activities are reported from London in the so-called "shadow private rented sector", where criminal landlords and letting agents target vulnerable tenants in order to maximise rental profits.[100] One way in which this is manifested is through high-density overcrowding. Language barriers, poverty, a lack of awareness of council services, low housing aspirations and dependence on an employer or agent for accommodation are all key factors that make this group especially vulnerable to exploitation. Changes to immigration law in England have further heightened the disadvantage and exclusion faced by migrants and minority communities.[101] Migrant tenants' whose citizenship is under scrutiny may be at risk of homelessness, forced to access poor quality housing at the bottom end of the PRS market and be subject to threats from criminal landlords exploiting people's fears in regard to their migration status.

[91] Barrat and Green, Making a House in Multiple Occupation a Home

[92] Wallace, A. (2015) Housing and communities' inequalities in Northern Ireland (Accessed: 16/3/21).

[93] Wilkinson and Ortega-Alcazar, Stranger Danger?

[94] McKee et al, 'Generation Rent'[95] Preece and Bimpson, Housing insecurity and mental health

[96] E. Wilkinson and I. Ortega-Alcazar (2019) Stranger danger? The intersectional impacts of shared housing on young people's health and wellbeing, Health & Place, 60

[97] Baker et al, New evidence on mental health

[98] Baker et al, New evidence on mental health

[99] J. Perry (2012) UK migrants and the private rented sector. A policy and practice report from the Housing and Migration Network (Accessed: 16/3/21)

[100] Spencer et al, Journeys in the shadow private rented sector

Older people living in the PRS may also be particularly vulnerable to the negative health and wellbeing impacts of renting because of a reluctance on the part of landlords to allow adaptations to enable them to 'age in place'.[102] Around 750,000 older tenants live in the PRS in England, with this figure predicted to increase as a significant number of younger and middle-aged tenants are unable to access home ownership or social rented housing.[103] The experiences of older tenants are under-explored in research.

Summary

Housing gives us the possibility and the capability to achieve the state of wellbeing of feeling "at home". Unaffordability, short tenancies and poor-quality housing form key structural problems which contribute to tenure-based inequalities in health and wellbeing. Existing evidence is clear in showing that housing exerts a considerable influence on health and wellbeing through these different inter-related factors. Housing also has a much broader impact on the wider determinants of wellbeing; on the relationships that people can form; on people's sense of autonomy, security and status; and on the meanings, feelings and aspirations that people assign to their experiences. Whilst rarely considered within policy or practice, these psycho-social factors are shaped within specific economic, social, cultural and political housing contexts that fundamentally impact wellbeing. However, wellbeing is often not well-defined or understood within this context and often narrowly construed in terms of satisfaction. The second report introduces and applies the capability approach as a means of improving our understanding of the various ways in which living in the PRS impacts the functions and activities that are needed to live life well.

[101] McKee, K., Leahy, S., Tokarczyk, T and Crawford, J. (2020) 'Redrawing the border through the 'Right to Rent': Exclusion, discrimination and hostility in the English housing market', Critical Social Policy, 41(1).

[102] Pleger et al (2019) The health of older New Zealanders in relation to housing tenure: analysis of pooled data from three consecutive, annual New Zealand Health Surveys Aust NZ J Public Health. 2019; 43:182-9 – based in New Zealand but similar conclusions could be drawn here in the UK.

[103] AgeUK (2019) Older private tenants (England): Policy Position Paper (Accessed: 16/3/21).

3. Prioritising private rented housing as route to wellbeing

The development of national wellbeing frameworks, public health and wellbeing agendas, as well as the unequal impact of the COVID-19 pandemic, serve to refocus our attention on the importance of housing in achieving greater equity in wellbeing outcomes. Drawing on findings from the key expert interviews, this chapter focuses on the challenges and opportunities in prioritising private rented housing as a route to wellbeing. Although straightforward comparisons across the UK and devolved governments cannot be made, certain key themes do emerge such as cross-departmental and cross-sectoral collaboration, the role of local authority/environmental health bodies, addressing the needs of vulnerable groups and the availability of landlord support.

Joint working at a local level

In England, Wales and Scotland the importance of integrating housing into health and social care has been acknowledged on a ministerial level with regulatory structures having been developed to enable and encourage collaboration.

Established by the Health and Social Care Act 2012, Health and Wellbeing Boards (HWB) which operate in upper-tier and unitary English local authorities, aim to advance the health and wellbeing of an area's residents by creating partnerships and Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies. In Scotland the Public Bodies (Joint Working) (Scotland) Act 2014 requires Health Boards and local authority partners to enter into partnership arrangements with the aim of improving the quality and consistency of health and social care services. These partnerships must incorporate a housing contribution statement in the development of their Strategic Commissioning Plans which sets out arrangements for delivery of integration functions and how it will meet the national health and wellbeing outcomes. In Wales the Social Service and Wellbeing (Wales) Act 2014 requires partnership arrangements between Health Boards and local authorities to be established in the form of Regional Partnership Boards with a view to improve the well-being of people. These Partnership Boards must include at least one senior local authority officer responsible for housing.

Environmental health and other local authority PRS housing teams could in principle become involved in these partnerships and provide evidence of the role and importance of the PRS in regard to local health and wellbeing. Evidence of local needs or the lack of support for landlords and tenants (see below) could be used to back the development and resource allocation of effective evidence-based health and wellbeing interventions targeting the sector (case studies that focus in particular on the role of environmental health officers in the PRS can be obtained via the CIEH).[104]

However, interviewees from across the UK reported that the integration of housing into health and social care varies between local areas. In some areas housing plays a major role in both local partnerships and the development of strategic commissioning plans, while other partnerships have not yet included environmental health or housing. Another key issue is that in some of these partnerships and associated documentation only scant mention is made of the PRS. Popular assumptions on social housing as the primary means of housing those in need (in an ever-reducing housing stock), tends to distract from the significant number of vulnerable households now living in the PRS. Whilst housing may be recognised as a key social determinant of health and wellbeing, it may not get connected to the function of environmental health and so cause the role and importance of the PRS to be overlooked:

. [104] Stewart, J. (2013) Effective Strategies and Interventions: Environmental health and the private housing sector. Complied for the CIEH. (Accessed: 29/3/21)

> *Health and social work are pretty well integrated. I think the challenge has been to include housing in that … there'd be some plans that will pretty much just take a social landlord view of housing. All we'll talk about really are local authority housing and RSL (registered social landlord) housing and that'll be the extent to which housing is taken into account … again, it's partly because when you say, "Housing," the assumption is social housing. Whereas most people don't live in social housing … I'd say that's definitely somewhere where health and social care partnerships need to improve, is how do they take a whole tenure approach to housing? I'd say that the ones that do take a whole tenure approach are probably the minority. (Health professional, Scotland)*

Whilst our findings suggest a mixed picture, there is little information on the nature and level of involvement of housing in local health partnerships or sub-structures, nor on the extent to which tenure-based differences are considered.[105] If available, information on the scale and nature of integration at a local level could provide valuable evidence of the impact and effectiveness of PRS-focused interventions in impacting the health and wellbeing of local populations. This information may also help identify key gaps and solutions to local challenges and ultimately help achieve equity across tenure in the design and delivery of targeted health and wellbeing interventions (see below).

Improving PRS representation in local wellbeing partnerships is however challenging due to the large number of single landlords operating in the sector and the absence of data on a low-level geographical basis. The lack of disaggregated data and granular geographical information means - particularly in England where no national system of registration or licensing currently exists - that there is a limited knowledge of the sector at a local level. Whilst several data sets currently exist, these generally do not include information on the experiences of landlords or tenants. These data gaps have significant implications in regard to the ability of local authorities to analyse their local housing markets and develop an evidence-based approach in managing the sector and meeting the wellbeing needs of its residents. Information on the private rented market in a particular area could be explored through landlord forums and innovative data mapping exercises (see below). However, professional landlord organisations currently have limited membership and the data sets currently used by local authorities in England have limitations.

The role of local authorities

When queried on how to improve the wellbeing of people living in the PRS, some key experts felt that a well-functioning system for regulating standards and management practices should suffice. However, there is little evidence to suggest a current consensus on best practice in managing the sector. Our recent in-depth study of local authority compliance and enforcement practices reported on the significant variation in the interpretation and application of the law by councils across the UK. Whilst an array of concepts, approaches and regulatory instruments are key in designing effective regulatory structures - for example, the motivations of social actors, the potential of responsive regulation and the range of factors driving compliance – these ideas have for the most part not been applied to the PRS. In addition, there is very little consideration given to engaging with tenants in any kind of systematic or structured way.

Our study showed that some councils are however adopting alternative regulatory techniques in managing the sector. These "creative" approaches are underpinned by a holistic and coherent approach which focuses not only on physical property conditions and the behaviour of landlords, but also on the needs of renters. Innovative data mapping, multi-agency teams, wider partnership building and improved signposting and referral pathways, are some of the ways in which these councils aim to reach and provide support for vulnerable tenants.

All these authorities are proactive in delivering tenant-focused support alongside more formal enforcement activities. Poor standards are seen as a part of a wider picture where issues of tenant wellbeing, vulnerability, poverty and deprivation play a key part. In improving the PRS these approaches emphasise the need to rethink the actual end goal of housing strategies in order to also focus on issues beyond the physical dimensions of housing that relate to the wellbeing needs of renters.

[105] This research is currently being carried out by Public Health Scotland.

Stakeholders from across the UK reported a lack of knowledge on the needs of people living in the sector at a local level. The "creative" local authorities used data and evidence in an innovative way in order to target their wellbeing/tenant-focused regulatory activities in the PRS. For example, one of the local authorities integrated the NHS hospital admission data and Indices of Multiple Deprivation data with the Housing Conditions Survey in order to get a general idea of the locations of the best and worst quality housing and the tenants most needing support. This data subsequently helped target enforcement activities and wellbeing support for tenants.

There was a feeling among the participants in this study that more work could be done in exploring how existing data sets can be better interrogated and combined. Some of the example data sets mentioned were the Index of Multiple Deprivation data, Housing Health and Safety Rating Systems (HHSRS) data, Rent Smart Wales data and housing conditions survey data. Some health and wellbeing-focused initiatives in the PRS draw on other datasets to better understand the needs of people living in the sector, such as Healthy Homes, Healthy People:

> *In order to identify the most appropriate people for Healthy Homes Healthy People, it's looking at data in relation to deprivation. So which area do they live in. Also, looking at the health data. So if you have got somebody that is registered with a health condition or a chronic condition which is exacerbated by housing conditions, they live in a deprived area, they can be targeted to see what services they require. (Key Stakeholder, Wales)*

Participants said that more could be done to utilise these existing datasets in a way that would benefit PRS tenants specifically. One suggestion was to improve the understanding of people's lived experience in the PRS by making better use of the information that has been compiled by organisations supporting the wellbeing of PRS tenants. A significant part of the voluntary sector is active at the intersection of housing, health and wellbeing and therefore witnesses first-hand the impact of inappropriate housing; services such as those providing information and advice or local community organisations. Their knowledge and insight may allow partners (e.g., local authority housing teams) to identify and target those most in need.

Addressing the needs of vulnerable groups

With the PRS now accommodating a higher number of vulnerable communities, participants highlighted the need for holistic and joined-up partnership as well as multi-agency responses. The lack of support for vulnerable tenants living in the sector and inequity in the availability of targeted health and wellbeing initiatives emerged as a further key theme across the UK and devolved nations.

Targeted housing interventions may positively impact population health outcomes in a major way.[106] These interventions can take a number of different forms. For example, in the social housing sector staff may receive training on signs of dementia and actions to take when a diagnosis is confirmed; initiatives to combat isolation or loneliness; commissioning of certain housing associations by health and social care partnerships to carry out wellbeing work and; programmes to combat fuel poverty or cold homes by improving the quality and condition of housing. Whilst most of these initiatives are focused on social housing, some specifically target the PRS such as the Healthy Homes Healthy People Scheme in Wales, which was described by this stakeholder:

> *Essentially, there are members of the team which go into the private rented sector mainly and they will not just do energy efficiency, they will do a holistic approach to seeing what that person needs, what the person says that they need. So, it comes from the person, not from the services, and how can they best be supported. They come through a route of referrals and one of those is through health as well. (Stakeholder, Wales)*

[106] Gibb, K., Lawson, L., Williams, J. and McLaughlin, M. (2020) The Impact of Social Housing: Economic, Social, Health and Wellbeing (Accessed: 29/3/21).

Whilst many targeted initiatives to improve the health and wellbeing of communities will work across tenures, several participants reported that these approaches are less widely available in the PRS than in other tenures. This was attributed to the nature of the sector which to a large extent comprises a multitude of small-scale landlords and/or 'reluctant landlords' who may be engaged in other employment. This can make engaging with these landlords to take forward initiatives more challenging:

> *I think my overarching view is that action is needed all areas but it can be private rented tenants who lose out through the current system … with the PRS it's just much more complicated, logistically, to deal with a private landlord, who may be just an individual with a portfolio of one, serving the absolute bottom end of the PRS market. Yes, all of the difficulties that go with that, tenant landlord relationships and so on. (Stakeholder, England)*

Despite these challenges, participants argued that it is vital that connections are made with PRS landlords to support the rollout of initiatives. As in the social sector, private sector landlords can be key gatekeepers in terms of signposting and referring tenants to other agencies and services. There was a suggestion that more needs to be done to educate landlords on the potential contributions they can make to their tenants' wellbeing and to incentivise them to do so.[107]

The feedback received suggests that policy developments to address wellbeing issues do not routinely consider how these initiatives can target people living in the PRS. For example, the National Loneliness Strategy is the first dedicated UK Government strategy to tackle loneliness and is based on a cross-departmental and intergeneration approach. Government departments (including the MHCLG) have had their portfolios extended to include loneliness. One of the main proposals for a solution is increased NHS funding for Social Prescribing which connects people to community groups or services; this often with the support of a link worker. These link workers take referrals (e.g., from GPs) and help create tailored plans to meet people's wellbeing needs. The services will often be provided by housing associations. However, the report does not specifically address the needs or circumstances of PRS tenants, and the extent to which tenure and the needs of PRS tenants are routinely understood by link workers is currently unknown.

Participants highlighted the in-depth pre-tenancy work as provided by a number of PRS access schemes as playing a key role in providing vulnerable tenants with the needed support. However, despite achieving numerous positive outcomes – e.g., high levels of tenancy sustainment and financial savings for governments - there is a shortage of funding for PRS access schemes in England.[108] In Scotland, the Housing to 2040 actions and supporting policies includes a commitment to rolling out a national programme to facilitate access to the PRS for homeless households. In Northern Ireland, no access schemes are in operation at all. Not all existing schemes provide ongoing support after a tenancy has been secured,[109] whereas help for tenants who may fall into arrears and/or experience other needs is more commonly available for social housing tenants.

> *When we are talking about private landlords and, I suppose, the private rented sector, it's very hard to see what support people get, because it's not difficult to access, but it's quite a hard thing to try and find out really, if they are getting the support that they want. (Key stakeholder, Wales)*

The actual level of need within the PRS is a key gap in our current knowledge, making it difficult to gauge the needed level of central Government funding to support vulnerable households. However, what we do know is that the number of low-income and vulnerable groups being housed in the sector is growing as accessing other tenures has become more challenging.

[107] McKee et al (2021) Making a home in the private rented sector. An evidence review.

[108] Reeve, K., Cole, I., Batty, E., Foden, M., Green, S., and Pattison, B. (2016) Home - No Less Will Do: Homeless people's access to the Private Rented Sector. London: Crisis. (Accessed: 15/1/21).

[109] As discussed in our recent report on advice provision the UK PRS, households in the private rented sector who face severe and multiple disadvantages may require ongoing support.

The lack of Government support of vulnerable tenants is a significant deterrent for landlords in accommodating households that could be considered to fall into a higher risk category, e.g., people with experiences of homelessness or benefit claimants:

> *We had landlords who came along to the events who said that they felt that they were picking up the slack for Government. That they were giving tenancies out to people and then finding out that people were particularly vulnerable, and then they didn't know how to deal with them. (Stakeholder, Northern Ireland)*

> *So, the big issue that landlords said is that they wanted more training, they wanted more understanding of what to do. It's not really in their favour to have people moving in and out all the time, they want people to stay … we surveyed the landlords and the landlords said what they wanted was more help, what they wanted was more support, they wanted more knowledge. (Stakeholder, Wales)*

Stakeholders also reported that landlords are often unaware of available support. For example, in Wales the Supporting People budget is still in operation but one stakeholder told us that most landlords fail to connect this to the PRS. Research from the NRLA showed that 79% of participating landlords had no knowledge about the grants that are available from local authorities to support people with disabilities who live in the PRS but that they would be willing to use financial assistance as appropriate.[110] Excluding vulnerable groups from accessing housing not only reduces their ability to secure suitable accommodation and leaves them at risk of homelessness, but there are also implications for the business models of landlords. Supporting landlords in housing vulnerable groups of people therefore benefits both parties. Whilst stakeholders emphasised that the provision of support falls outside the role of landlords, there was a feeling that they should be able to signpost to the appropriate services.

Summary

The previous chapter demonstrated that living in the PRS can significantly impact some people's wellbeing. However, questions remain on the adequacy of current policy and institutional structures to address these issues. Whilst limited evidence is available, interviews with key experts suggest that only minor consideration has been given to cross-tenure differences and that the specific needs of PRS tenants are not adequately represented in local health and wellbeing partnerships.

[110] Reeve et al, Home – no less will do

4. Conclusion

There are well established links between housing, health and wellbeing, and the impact of the PRS on people's quality of life is evident. The physical dimensions of housing clearly relate to the capability of protecting health and avoiding excess mortality. The adequacy of housing does however also affect other capabilities, such as being able to live without shame and meet friends without losing self-respect. Home forms a context where we become able to form an identity and find a place of privacy, refuge and haven from outside pressures and which gives us a lens to see and understand the world around us.[111] The discussion in this report illustrates that improving conditions in the UK PRS and creating safe and healthy homes entails more than the mere elimination of physical or environmental hazards. Simply fixing issues of disrepair will not solve the problems that the UK PRS is facing.

Interviews with key experts suggest that the role of environmental health officers in contributing to positive health and wellbeing outcomes may have been under-explored. These activities do however require regulators to adopt a broader range of tools and approaches that includes considering the wellbeing needs of tenants and the support that is made available to landlords.

The findings of this report also highlight several key gaps in our knowledge. Whilst a significant number of datasets provide a wealth of information on the PRS, very little is available on those living in the sector, nor on their needs. Information on the extent to which the PRS is represented and considered in local health and wellbeing partnerships is at present also lacking.

The PRS remains woefully understudied compared to other housing tenures, but given that it is a growing sector that houses an increasing number of low-income and vulnerable populations, it is of vital importance that the PRS is not neglected in policy debates on housing and wellbeing. This report has sought to emphasise this particular point and to encourage further research on this critical dimension of housing. A second follow up report featuring in-depth interviews with tenants will explore the multiple ways in which living in the PRS either enhances, or negatively impacts, the various activities and functions that are essential in achieving people's wellbeing.

[111] Housing, Happiness and Capabilities: A Summary of the International Evidence and Models