



UCL Institute of Health Equity

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Poor quality housing is harming our health

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The UK is not a good place to be poor. It is not even a very good place if you are middle income or below. Over the past 14 years, life expectancy has not improved, health inequalities have increased, and reported health has not improved for the poorer half of the population.¹ Housing has played an important role in this crisis.

A new report from the UCL Institute of Health Equity, *Building Health Equity: the Role of the Property Sector in Improving Health*, outlines the consequences of housing problems for health equity and details what needs to be done to tackle these.²

The report draws attention to three aspects of housing that are important for health: affordability, quality, and supply. Affordability implies some relation between price and ability to pay the price. In the past 15 years income growth in the UK has fallen behind that of other European countries, and income in the UK is more unequally distributed. People at the 10th centile of income in the UK have income 27% lower than that in France, 37% below the Netherlands, and 26% below Germany, adjusting for purchasing power. Not only are the poor poorer in the UK, the median is lower.³ Median income in the UK is 9% lower than in France, 17% lower than in the Netherlands, and 20% lower than in Germany. The UK median is a whopping 64% lower than in the USA.

At the same time house prices have soared. In 2001, the average house price was five times median income; in 2023 it was eight times.² Because of unaffordability, home ownership fell, and the proportion of people renting in the private sector increased. People on low to middle incomes, renting privately, spend 40% of their income on rent. Poverty is a cause of poor housing. Housing is a cause of poverty. Estimates from the Food Foundation find that in order to follow healthy eating guidance, households in the poorest quintile would have to spend half their budget on food.⁴ So if households are spending 40% or more of their income on rent, and 50% on food, maintaining a healthy life is not possible.

Quality of housing is crucial for health. With a focus on housebuilders, there is a need to tackle both existing housing stock and quality of new build. One third of households in the UK are below the minimum income threshold and have dwellings that do not meet basic energy conservation standards.⁵ The result is cold homes with the consequent impact on mental and physical health. Children and young people growing up in cold homes have worse mental health than those in warm homes. In Britain, respiratory conditions show a bigger gap in mortality rate between rich and poor than any other major condition and are the leading drivers of winter pressures on the NHS.⁶ In addition to the health effects of cold housing, damp mouldy homes are part of the reason

for these health inequalities. Estimates of the prevalence of damp and mould vary widely from 4% to 27%. In general, the quality of housing is worse in the private rental sector than in the social rental sector, and regulation is weak.²

Social renters are not immune. We write in our report: “The dangers of damp housing gained national attention in 2020 following the tragic death of two year-old Awaab Ishak, who died of a severe respiratory condition linked to prolonged exposure to black mould in his home. His parents, both immigrants from Sudan, had complained to their social landlord and had been told simply to paint over the mould. This tragedy garnered national headlines and led to change in the law around the responsibilities of social landlords to remedy hazards in their properties. It also shows that housing is an equality and social justice issue.”

The third issue is supply of housing. In 2023, 150 000 children were living in temporary accommodation. Living in temporary accommodation and rough sleeping are not conducive to health. The government has the ambition to build 1.5 million new housing units over the next five years. As well as increasing the supply of new dwellings it must also focus on existing housing, and bring together both affordability and quality and concerns about “place.” Environments matter for health alongside the effects of housing. The property sector has a vital role to play in protecting our natural environment as well as improving our urban environment.

National action has to support local action. In Leeds, for example, the local council has overseen the building of 17 000 new homes in five years. Fifteen per cent of these will be affordable. Leeds is a Marmot City and has set up a health and housing steering group to improve the quality of housing.⁷

Our central recommendation is to put equity of health and wellbeing at the heart of housing policy. There have to be local and national plans that take in all of the issues we highlight: affordability, quality, supply, and the environment. As well as government and local action, housebuilders will be crucial in this endeavour.

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1 Institute of Health Equity. England's widening health gap: Local places falling behind. 2024. <https://www.instituteofhealthequity.org/resources-reports/englands-widening-health-gap-local-places-falling-behind>

2 Marmot M, Noferini J, Allen J, Alexander M, Whitewood-Neal J. *Building health equity: the role of the property sector in improving health*. Institute of Health Equity, 2024.

3 Brewer M, Broome M, Cominetti N, et al. *Unsung Britain: The changing economic circumstances of the poorer half of Britain*. Resolution Foundation, 2024.

- 4 Goudie S. *The broken plate 2023. The state of the nation's food system*. Food Foundation, 2023.
- 5 Donkin A, Marmot M. *Left out in the cold. The hidden health costs of cold homes*. Institute of Health Equity, 2024.
- 6 Asthma + Lung UK. *A mission for lung health*. London. 2024.
- 7 Institute of Health Equity. *Fairer, healthier Leeds: Reducing health inequalities*. 2024. <https://www.instituteofhealthequity.org/resources-reports/fairer-healthier-leeds-reducing-health-inequalities>