23 June 2016

Submission to the Government Administration Committee:

Healthy Homes Guarantee Bill (No 2)

The New Zealand College of Public Health Medicine (NZCPHM) would like to thank the Government Administration Committee for the opportunity to make a public submission on the Healthy Homes Guarantee Bill (No 2) (the Bill). The College does wish to make an oral submission to the Committee.

The NZCPHM is the professional body representing the medical specialty of public health medicine in New Zealand. We have 223 members, all of whom are medical doctors, including 184 fully qualified Public Health Medicine Specialists with the majority of the remainder being registrars training in the specialty of public health medicine.

Public Health Medicine is the branch of medicine concerned with the assessment of population health and health care needs, the development of policy and strategy, health promotion, the control and prevention of disease, and the organisation of services. The NZCPHM strives to achieve health gain and equity for our population, reducing inequalities across socioeconomic and cultural groups, and promoting environments in which everyone can be healthy.

The NZCPHM recognises housing as a key determinant of health. The NZCPHM is concerned that many New Zealanders do not have access to the adequate, safe, warm, dry houses which are essential for health and wellbeing, and calls for action to improve housing quality and heating. The NZCPHM also recognises these initiatives as cost-effective measures to improve population health and reduce avoidable hospital admissions.

The Bill proposes to amend the standards in the Residential Tenancies Act (RTA) 1986 by empowering the Ministry of Business, Innovation and Employment (MBIE) to set standards regarding heating, ventilation, minimum indoor temperature, drainage, draught-stopping, and insulation in rental housing. The NZCPHM strongly supports the establishment of standards to ensure New Zealand rental housing is healthy and safe for the occupants. The NZCPHM submits that minimum safety requirements for rental housing should also be included in the standards set by MBIE.

1. Background

Shelter is a fundamental need. New Zealand has too few houses, many poor quality houses and issues with housing affordability. A disproportionate number of people on low incomes live in older housing stock, with Māori and Pacific peoples over-represented in low-income households in areas with poorer quality housing. Many New Zealand families share accommodation with other families to save money because they cannot afford adequate housing, which leads to overcrowding. Statistics indicate that 10% of New Zealand households are overcrowded; with overcrowding being
more common for Māori (23%) and Pacific people (43%). Overcrowding is associated with an increased risk of crowding-related serious infectious diseases, and this is contributing to the relatively poor health of New Zealand children.

Unaffordable fuel and unsafe heating are also significant issues for many families. These factors contribute to families living in substandard housing and to overcrowding. New Zealand houses are considerably colder than the World Health Organization recommends (houses should be maintained above 18 degrees) and there is evidence that more than a third of New Zealanders live in houses with visible mould. The cost of heating poor quality housing falls unequally on low-income households, contributing to the increasingly recognised issues of fuel poverty and housing affordability. Fuel poverty arises from a combination of three factors: household income, fuel or energy costs and the energy efficiency of the house. This means that many people are unable to heat their house, or only able to heat a small portion of it. It has been estimated that in New Zealand 34% of households use unflued gas heaters, and 5% use them as the sole heating source. Unflued gas heaters add moisture and by-products of combustion such as nitrogen dioxide and carbon monoxide to the indoor environment which can affect health.

2. Housing and Health

NZCPHM recognises housing is a key determinant of health and an important mediating factor in health inequalities and poverty. There is evidence linking:

- Overcrowding with communicable diseases such as meningococcal disease, acute rheumatic fever and tuberculosis.
- Home hazards and lack of safety devices with falls and injuries in both children and adults.
- Temperature extremes and air pollution with respiratory and coronary events.
- Damp and mould with respiratory illness (such as exacerbations of asthma).
- Unflued gas heaters with respiratory illness (such as exacerbations of asthma).
- Exposure to fuel-burning smoke and hazardous indoor gases with cancer.
- Stressors related to cold, damp and unaffordable housing with mental health.
- Housing type with the quality of interactions within neighbourhoods, social cohesion, trust and a sense of community.

World-leading research undertaken in New Zealand has found that improved health outcomes (including: fewer exacerbations of respiratory illness, fewer general practitioner visits, less time off work/school, improved self-rated health and a trend towards reduced hospitalisations for respiratory and coronary conditions) can be achieved through housing interventions such as retrofitting insulation and providing improved heat sources. Housing improvement intervention programmes such as the Healthy Housing Programme (a collaboration between Housing New Zealand Corporation and District Health Boards) have also demonstrated that housing interventions can reduce potentially avoidable hospital admissions.

Hence, the NZCPHM supports the establishment of clear standards regarding heating, ventilation, drainage, draught-stopping, and insulation in rental housing.
3. Minimum standards for rental housing should include safety requirements

The NZCPHM is concerned that the Bill fails to address pressing safety issues in New Zealand rental housing.

There is a link between home hazards and a lack of safety devices with falls and injuries in both children and adults\textsuperscript{17} therefore the benefits of including safety provisions in the Bill are clear. A randomised controlled trial conducted in around 800 houses in Taranaki found that a set of simple and inexpensive measures including hand rails on stairs and grab rails in bathrooms resulted in a 26\% reduction in injuries caused at home\textsuperscript{23}. The social costs of injuries in the home in 2008 were estimated to be around $13 billion, 3.5 times more than road injuries\textsuperscript{24}. Economic modelling suggests that a nationwide programme of home safety assessment and modification would be extremely cost-effective\textsuperscript{25}. An MBIE commissioned cost benefit analysis of a rental housing standard also found almost half of benefits came from safety measures; reducing hazards in the home would save $456.5 million in ACC and other medical costs over twenty years\textsuperscript{26}. Therefore failing to empower MBIE to set standards regarding safety limits the potential impact of the Bill in improving health outcomes and achieving cost savings. The NZCPHM recommends MBIE’s responsibilities for ensuring healthy homes be amended to include measures aimed at improving safety.

4. Establishing a minimum indoor temperature

There is minimal risk to the health of people in housing in which the ambient air temperature is above 18 degrees\textsuperscript{27,28}. However, a minimum indoor temperature for housing is difficult to monitor and enforce; tenants choose whether to use heating, and may avoid its use because of fuel poverty\textsuperscript{29}. Therefore, MBIE should be responsible for setting standards that look at the overall thermal efficiency of a dwelling, including insulation, draught stopping, and heating. These standards would aim to ensure that it is possible and affordable to heat the dwelling to a healthy minimum indoor temperature.

5. Urgency for compliance of minimum rental housing standards

The NZCPHM recommends that the date for compliance is brought forward. Tenancies in existence at the time the regulations are published will have to comply with the regulations five years from that date. This would mean that the standards would not be introduced for five years for some dwellings. However the Bill does not justify why renters in long term tenancies will have to wait at least five years for their dwelling to be made compliant with the regulations.

Thank you for the opportunity for the NZCPHM to submit on Healthy Homes Guarantee Bill (No 2). We hope our input is helpful and please do not hesitate to contact the NZCPHM if we can be of further assistance.

Yours faithfully,

Dr Caroline McElnay, President, NZCPHM
References:


29. Kimberley O’Sullivan, Lucy Telfar Barnard, Helen Viggers, Child and Youth Fuel Poverty : Assessing the Known and Unknown. People, Place and Policy;, 2016. 77-87