

## Housing improvements should be targeted at those in poorest health

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Improving housing can improve health, particularly when interventions are targeted at those in the poorest health, according to a systematic review published in The *Cochrane Library*. The authors say their review underscores the importance of targeting those most in need when devising programmes for housing improvement.

Despite a wealth of research linking housing to health, it remains difficult to separate the effects of poor housing from the effects of other <u>socioeconomic factors</u> that influence health, such as poverty. The link could be made more strongly by showing that improvements in housing lead to improvements in health, but these types of studies are rare for several reasons. For example, high quality studies require controls, or houses that are left unimproved for comparison's sake. This would mean withholding benefits that residents are entitled to and would therefore be considered unethical.

The authors included 39 studies from around the world in their review. In studies carried out in high income countries, housing improvements included refurbishment, rehousing, relocation, installation of central heating and insulation. In studies carried out in <u>low income countries</u>, improvements included providing <u>toilet facilities</u> and, in older studies, rehousing from slums. Overall, the results suggest that improvements to housing conditions can lead to <u>improved health</u>. Improvements in space and warmth were especially important to achieving better health, and in particular for people with respiratory disease.



"The best available evidence suggests that housing that promotes good health needs to be of an appropriate size to meet household needs, and be affordable for residents to maintain a comfortable indoor temperature," said lead researcher Hilary Thomson of the Medical Research Council/Chief Scientist Office Social and Public Health Sciences Unit in Glasgow, UK.

Housing improvements resulted in greater health benefits when they were targeted at those living in the poorest housing, with the poorest health. The benefits were less clear in housing improvement programmes delivered across whole neighbourhoods, rather than targeted to those individual households in greatest need. "This finding further underlines the need to target households in the greatest need if we are to fully realise the potential for health improvement following housing improvement," said Thomson.

**More information:** Thomson H, Thomas S, Sellstrom E, Petticrew M. Housing improvements for health and associated socio-economic outcomes. Cochrane Database of Systematic Reviews 2013, Issue 2. Art. No.: CD008657. <u>DOI: 10.1002/14651858.CD008657.pub2</u>

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