



BUILDING HEALTH EQUITY: THE ROLE OF THE PROPERTY SECTOR IN IMPROVING HEALTH



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FOREWORD

Home represents security, safety and belonging. Having a home is about more than just having a roof over one's head, it is also about meeting the need for what the sociologist Anthony Giddens called 'ontological security': being able to trust in the certainty and protection that home provides. When we fail to provide houses and neighbourhoods that are safe, that support good health, we betray that trust. Unfortunately, we have seen that happen again and again in recent years: in the 150,000 children in England living in temporary accommodation due to a lack of homes; in the death of two-year-old Awaab Ishak from a respiratory condition brought on by mould in his home; and in the deaths of seventy-two people in the fire at Grenfell Tower.

Everyone needs a good quality, safe, secure, affordable home, in neighbourhoods and communities that support good physical and mental health. Without these, we will see a worsening of physical and mental health, higher mortality rates and greater strain on our National Health Service.

Improving housing is about fairness and equity. The greater the deprivation of an area, the less likely are people to have good homes and healthy infrastructure. This lack is particularly striking among people in poverty, people with disabilities, and ethnic minorities.

When my colleagues and I published the report of the WHO Commission on Social Determinants of Health, we asked the question, "why treat people and then send them back to the conditions that made them sick in the first place?" If your home does not provide you with healthy conditions, security, safety and belonging, but is instead insecure, unsafe or entirely absent, then good health is not possible. The prevention of health inequalities must begin at home.

In this report, we call for new healthy homes and places, in partnership with the property sector, to solve our housing crisis and to improve health. There is an urgent need to address the housing shortage, but this does not mean giving free rein to the property sector without guidance and oversight. If we build poor quality homes now, we are storing up problems for health in the future. We also need to fix the homes we have and ensure that all homes and neighbourhoods are healthy places to grow, live and age.

I hope this report will be the beginning of a productive collaboration with the property sector, who have so much influence over our health through the homes and neighbourhoods in which we live, and that together we will be able to build equity into the foundations of the next generation of homes.



Michael Marmot
Director, UCL Institute of Health Equity

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Interviews:

The Housing Quality Network; Savills; Vistry Group; The Duchy of Cornwall; Impact Investing Institute; Landsec; Office for Place; Arup; Home Builders Federation; Housing Association Charitable Trust; Prior + Partners.

Roundtable:

Savills; Housing Association Charitable Trust; Barratt Developments; Clarion Housing Group; Lendlease; L&Q; Office for Health Improvement and Disparities; Lovell Partnerships; Urban & Civic; Housing Ombudsman; Homes England; Public Practice; The Earls Court Development Company; Prior + Partners; Legal & General.

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1. INTRODUCTION

The United Kingdom is in the midst of multiple crises. Our health is in crisis. Life expectancy is stalling and we are spending longer in ill health (1) (2) (3). Inequalities in health have widened, and the National Health Service is under strain. The UK also faces a housing crisis. For many years, not enough homes, particularly social and affordable homes, have been built where they are needed most. The effects of this crisis also fall hardest on already disadvantaged groups. The social and economic inequalities which lie behind both the health and housing crises have deepened, and it is imperative, and urgent, that we act now to prevent them deepening further.

This report then reflects our understanding that these two crises are inseparable. The homes, neighbourhoods and communities in which we live shape our health in many ways, for good and, increasingly, for ill. While this report focusses on the housing situation in England, we believe the principles and recommendations within are applicable across the UK. In view of the climate crisis, healthy homes and places must also be sustainable homes and places. When we build quality homes to high environmental standards, or refurbish our existing housing stock, benefits accrue to health, the economy and the environment.

Health is largely shaped by factors outside of the healthcare system. It is shaped by the conditions in which people are born, grow, work, live, and age, and by the distribution of power, money and resources which shape these. These building blocks of health, the social determinants of health, include education, income, employment, housing and the neighbourhoods in which we live. Inequalities in these social determinants of health, as well as access to healthcare, translate into inequalities in health. Health equity is the reduction, and eventually the elimination, of these unfair and avoidable inequalities.

The property sector - investors, developers and operators - have an indispensable role to play in improving health and health equity, yet they have rarely been involved in plans to improve health and reduce inequalities. This report focusses on what the property sector can do to support health and health equity. The property sector needs to work alongside communities, and with local government in more productive collaborations, to ensure that the right type of development is happening in the right places.

National government also plays a crucial role in planning and development. However, the current approach fails to hold property developers to account for their impacts on health and equity. This is further compounded by lack of capacity within local authorities, largely due to financial cuts, which has led to an imbalance in 'power and clout' between local areas and developers. To support the delivery of healthy homes and places, this imbalance must be reversed.

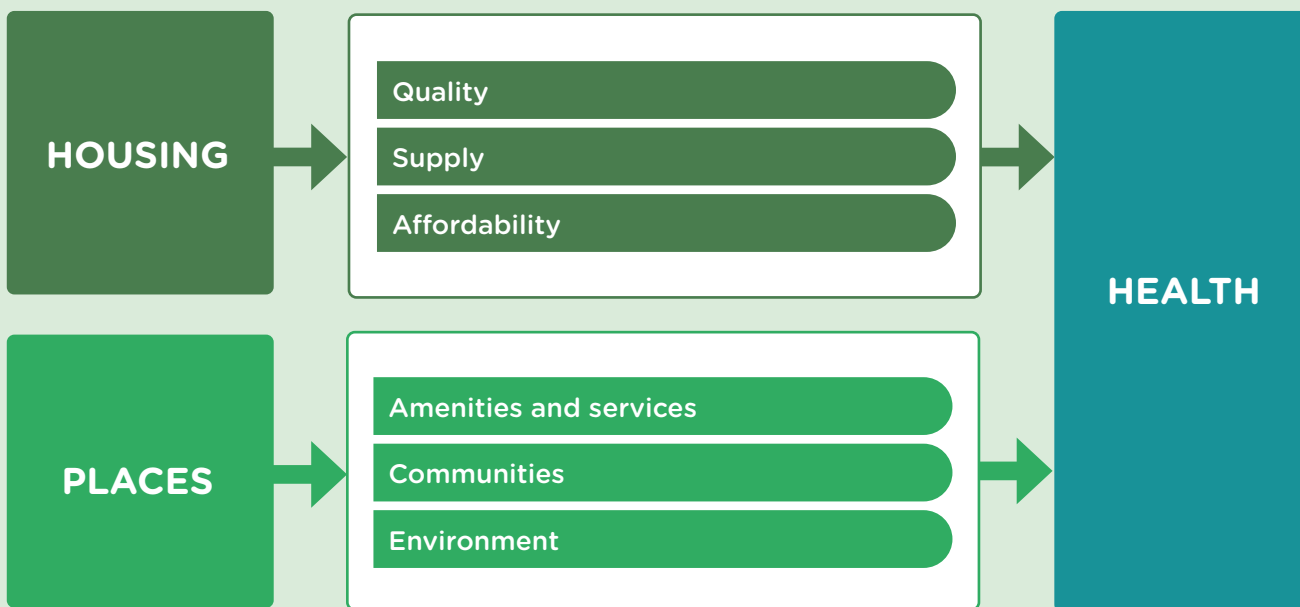
The property sector also stands to gain from this agenda: through improving the desirability of their homes and neighbourhoods; clearer routes to planning permission; protection from future regulation, legislation and reputational damage; better recruitment and retention; and improved environmental, social and governance (ESG) impacts. Our economy is dependent on our health, and all businesses stand to benefit from the increased productivity, reduced sickness absences and presenteeism, and the overall economic benefit that could come from improved health and health equity.

This report assesses the health and health equity impacts of housing and places and sets out the key elements that contribute to healthy homes and places. It sets out an agenda for all investors, developers and operators to enhance their positive health impacts across the UK.

Housing affects health in three key ways, through quality, supply and affordability. Health is best supported when people have access to a sufficient supply of good quality, affordable housing.

In addition to the effects of housing on health, health is also shaped by the places and neighbourhoods in which we live. Developers, investors and operators have important roles in place-shaping: through provision of, and making space for, local amenities and services, including green and blue spaces, transport links, community spaces and shops; through encouraging and facilitating mixed communities, accessible to all; and by protecting the local and global environment.

Box 1. Pathways through which the built environment influences health



*“It starts from **an assumption of responsibility**. It’s no good anymore to be a property developer, particularly when you’re delivering homes, and just assume that all your job to do is to put four nice walls and a roof together, because it’s somebody else’s job to programme the life in that place and allow people to live good, healthy lives... So we consider air quality, water quality, we consider waste management, consider green space and its contribution to air quality, biodiversity, the neighbourhood around the buildings. Those things are stuck in everyday conversations, they’re not extra special bits that get added if we can afford it, they are central to our thinking. People’s interest in having happy healthy lives is huge... so it’s not all about being bleeding heart liberal, it’s about saying that that also delivers something that’s commercially attractive.”*

Urban Regeneration Developer

2. HOUSING

Access to quality, affordable, and secure housing is a foundation that everybody needs to lead a healthy life, yet the UK faces a chronic shortage that worsens health inequalities and strains the healthcare system, other services, and the economy.

The housing crisis not only harms health and exacerbates poverty but also strains public resources, with the housing benefit bill expected to exceed £36.5 billion by 2028/29 and an additional £1.7 billion spent on temporary accommodation. This spending matches levels from the 1970s, yet there is minimal new construction of social rental homes (4). Addressing the crisis will incur costs, but these are necessary investments in the infrastructure vital for the nation's health and economic stability.

The failure of housing supply to keep up with demand has resulted in a distorted housing market characterised by the widespread presence of unaffordable homes and deteriorating quality, which fails to support good health. However, building poor-quality homes in the hopes of fixing supply quickly may harm health in the short-term and store up problems for the future. We must also improve the quality of our existing housing stock.

HOUSING QUALITY

Housing and health

- Good housing quality and its maintenance are foundational to health.
- Poor-quality housing costs the NHS £1.4 billion annually, with a broader societal cost of £18.5 billion per year. Investing £9 billion in remedial work could generate £135.5 billion in societal benefits over 30 years, including £13 billion in NHS savings (5).

Extent of poor quality housing

- 3.5 million households in England lived in a home classified as non-decent in 2022-23, disproportionately impacting those in the private rented sector, particularly those with long-term illnesses or disabilities (6).



Cold and damp homes

- Cold and damp homes contribute to poor mental health, chronic respiratory conditions, increased susceptibility to infections and increased risk of death.
- Up to 6.5 million UK households are impacted by damp and mould, with private and social renters disproportionately affected (7) (6). Cold homes were responsible for nearly 5,000 excess deaths in the UK in 2022/23 (8).
- Poor insulation and ventilation also raise risks of heat-related illness and death, with 4,507 heat-related deaths in England in 2022 (9). Increasingly rising temperatures particularly impact flats, small or overcrowded properties, and urban locations prone to the Urban Heat Island effect.

Housing and safety

- Inadequate safety in housing – lacking fire protection, quality materials, proper environmental safeguards, overcrowding, exposure to health hazards and environmental threats – critically undermines both physical and mental health, particularly for vulnerable populations, as highlighted in the Grenfell Inquiry (10) (11).

The property sector and housing quality

- Quality issues are also identified in new builds, with 51 percent of homeowners reporting major problems like construction flaws, unfinished fittings, and utility faults in England (12). The New Homes Quality Board (NHQB) aims to uphold standards and protect buyers, but developer registration remains voluntary, limiting its reach.
- Refurbishment work, especially that which improves thermal comfort in the home such as retrofitting, can lead to improvements in health for residents (13).
- Currently, investment in refurbishment over demolition and new construction is disincentivised by taxation with VAT charged on refurbishment.
- Safety must be a cornerstone of every home and building. This responsibility must not be evaded, and falls on the property sector, as well as legislators, regulators and inspectors.

HOUSING SUPPLY

Supply and health

- Housing supply has not kept up with demand, resulting in a housing market that does not support health. However, this cannot be fixed by increasing supply at all costs. Buildings have long lifespans, and building the wrong type of homes may harm health in the short-term and store up problems for the future.
- A lack of adequate supply of appropriate housing can be detrimental to health, leading to insecurity, unaffordability, overcrowding and financial strain, and contributing to homelessness and rough sleeping.

Homelessness

- Homelessness is increasing in England up 12.3 percent in 2023-24 from the previous year, leading to more people living in temporary accommodations or sleeping rough (14).
- People experiencing homelessness have a mortality rate six times higher than of comparison groups, and temporary accommodation is often poor quality and overcrowded, which adversely affects health (15) (16) (17).

Overcrowding

- Overcrowding is associated with negative physical and mental health outcomes and disproportionately impacts ethnic minority households and those in the social rented sector (18) (19) (20).

Housing accessibility

- Much of the UK's housing stock is inaccessible for people with disabilities and older adults, with a majority living in homes inadequate to their needs.
- A wheelchair user joining a local authority waiting list could be required to wait up to 47 years to be offered a suitable new-build property (21).

Housing delivery

- There are not enough homes being built where they are needed most, resulting in people being separated from their wider families, their communities and employment opportunities. When key workers cannot find appropriate housing, there are damaging effects on essential services and the local economy as well as on families and communities.
- Adaptive reuse of non-residential buildings into housing can increase housing supply, but reforms are needed to ensure these homes meet standards of quality, affordability, and local need, unlike many developments under Permitted Development Rights (22) (23) (24).
- Meeting the need for housing delivery will also require an increase in public sector, small and medium enterprise, community and self-build housebuilding. This will have the additional benefit of reducing structural dependence on a few large developers.

The property sector and housing supply

- It is essential that the supply of good quality, affordable housing is increased for health and wellbeing as well as for the economy, community resilience, and social cohesion.
- The largest housebuilders have a business model that does not always prioritise housing delivery, slowing new home releases to avoid reducing local market prices, maximising profit at the expense of delivery (25).
- Small and medium enterprises (SMEs) could boost housing supply if given clearer local plans and a predictable approval process.
- SMEs provided only 10 percent of new homes in 2020, down from 39 percent in 1988, and the number of SME housebuilders has approximately halved since 2007 (26).
- In many communities, there is a mismatch between the housing needed and what and where it is being supplied. In particular, there is a shortage of affordable family homes, and one or two bed units are being built in order to meet development targets (27).
- Further incentivisation from local and national government could support the property sector to redevelop deprived and 'left-behind' areas. Transforming these areas not only addresses regional social, economic and health inequalities, but can also create significant long-term commercial opportunities.

AFFORDABILITY

Affordability and health

- Affordable housing is a critical social determinant of health because it directly impacts individuals' and families' ability to secure decent quality, secure housing and meet other basic needs for health and wellbeing, leading to poor health and, at worst, homelessness and poverty.
- In the UK, 11 million people are in poverty before housing costs in 2021-22, rising to 14.4 million after housing costs, including 2.9 million children before housing costs and 4.2 million after (28).
- Rental costs are at an all-time high, with up to 20 percent of renters reporting mental health impacts from their housing situation, and nearly 40 percent experiencing stress and anxiety over housing concerns (29) (30).
- England's 4.2 million social rented homes provide at least £77.7 billion annually to the national economy in savings for the NHS, councils, police and government, and in the economic opportunities created for residents (31).

Availability of affordable housing

- England faces a shortage of affordable housing across all types, with housing affordability worsening in every Local Authority between 1997 and 2023 (32). The proportion that is social housing, the most affordable form of housing, has fallen to only 15 percent of new 'affordable' homes for social rent in 2022/23, compared with 65 percent in 2011/12 (33).
- Not all forms of 'affordable housing' are truly affordable and in 2020, the Affordable Housing Commission confirmed that the majority are in fact unaffordable to those on middle to low incomes (34).
- Homeownership is becoming increasingly unaffordable for first-time buyers. Only households in the top 10 percent of income can afford an average home with fewer than five years of income (35).

- Housing Associations are also not always seeing affordable homes on the market that they want to buy, resulting in some affordable homes being approved or built but not being purchased, leaving developments paused as developers are unable to meet their affordable housing commitments (36) (37) (38).
- Lack of affordable housing can lead to the fracturing of communities, weakening of support networks, and skill and job shortages.

The property sector and housing affordability

- Since the 1970s, the withdrawal of local and national governments from housebuilding has made affordable housing supply increasingly reliant on a few large volume developers.
- The property sector have a key role in the provision of affordable housing, through negotiated planning obligations, as well as the emerging build-to-rent sector and other housing models. Unfortunately, private sector housebuilding has fallen short of the demand for affordable homes.
- While half of affordable homes in England come from Section 106 contributions, developers often use financial viability assessments (FVAs) to reduce or avoid these commitments (39).
- The estimated total value of developer contributions in 2018/19 was £7 billion, including £4.7 billion in the form of affordable housing. There is significant regional disparity within this figure: London accounted for 28 percent of the total, the North East only 3 percent (40).
- While financial viability is crucial for development, examples of avoidance, non-compliance, and an overall lack of trust in the process from the public and other partners highlight the need for greater accountability and transparency.



3. PLACES

The physical, economic and social characteristics of places and communities have an important influence over people’s physical and mental health beyond the provision of good quality and affordable housing. Places can support good mental and physical health by providing safe, inclusive and accessible environments with access to amenities and services, a sense of community, and a health-supporting environment (41).

The property sector has a pivotal role in delivering developments that enhance local infrastructure, facilitate access to education and healthcare services and employment, and foster community cohesion, inclusivity and wellbeing.

Engagement with existing communities and neighbourhood-level consultation are key to achieve this. These efforts not only have a significant impact on the effectiveness of the planning application system but also serve as a positive tool to shape development. Participation is found to positively impact on health (41).

To improve healthy place-shaping, local planners and public health should work together to ensure that local plans reflect local health needs and include specific provisions for social, public, environmental, and health infrastructure.



AMENITIES AND SERVICES

- Healthy places are characterised by equitable access to green and blue spaces; education; healthcare services; employment opportunities; retail; good public transport and active travel opportunities; and community spaces, including public spaces and cultural, leisure and recreational facilities (42).

Transport

- Good quality, sustainable, affordable and reliable public transport networks promote social cohesion, access to education, services and employment, reduce social isolation and particulate emission, benefitting health and health equity (43).

- Inadequate provision of accessible transportation for those with disabilities contributes to wide ranging socio-economic disadvantage, including higher levels of unemployment (44).
- Building for health equity requires the facilitation of active travel options, including walking, wheeling and cycling. Encouraging hybrid travel - journeys with an active component - is an important health equity intervention that can improve fitness, increase affordability and reduce air and noise pollution (45) (46).

Green and blue spaces

- Green space provision near new developments in England and Wales has declined since 2000 (47). Equitable access to quality green space could save the UK £2.1 billion in health costs every year, however low-income individuals, ethnic minorities, older adults, and people with disabilities face significant barriers to accessing these spaces (48) (49).
- The benefits of blue spaces are not equally accessible; ethnic minorities are less likely to visit, and individuals with physical or sensory disabilities have limited opportunities for safe access (50).

Community spaces and assets

- Community spaces serve as vital assets within local communities, facilitating community connectedness and reducing isolation and loneliness and contributing to improvements in mental health (51) (52) (53). Yet, these spaces often experience funding shortages and degradation, limiting their availability and potential benefits.

The property sector and amenities and services

- It is essential that developers engage early with local authorities to support assessment of current and future community needs, and assist in the delivery of all key elements of healthy place-shaping.
- By embedding comprehensive and equity-based impact assessments into development – taking account of all stages of design, construction, and operation - developers can ensure that developments are responsive to local needs. This approach not only aligns with environmental, social, and governance (ESG) principles but also enhances the overall effectiveness of property developments in contributing to healthier and more equitable communities.
- Stewardship plans beyond the construction phase are essential to ensure that developments provide lasting benefits, covering the maintenance and enhancement of green and blue spaces, community spaces, social infrastructure, and long-term governance structures, without hidden or exorbitant costs for residents.
- Incorporating the place-shaping elements that promote better health and health equity also enhances the attractiveness and value of developments, while increasing the likelihood of quicker planning approval with fewer objections (54).

COMMUNITIES

Mixed communities

- Supplying diversity in housing size, type and tenure caters to different household needs and promotes mixed communities, supporting health equity and preventing stigmatisation and ghettoisation (27).

Intergenerational living

- Britain is one of the most age segregated countries in the world, leading to reduced connectedness within communities and contributing to increasing social isolation and loneliness among those over age 65 (55).
- Beyond intergenerational housing, it is essential to ensure that public spaces are designed to age friendly standards to allow for active movement and promote interaction.

Accessibility

- The physical design of the built environment significantly impacts the experiences people with disabilities have in accessing private sector activities, goods, and services and contribute to social isolation and loneliness (56).

The property sector and communities

- A greater variety of housing types, designs, and tenures, along with more attractive neighbourhoods, can broaden market appeal, meet diverse needs, and boost absorption rates, supporting increased building without compromising financial viability (57).

- Community consultation and resident involvement is conducive to culturally sensitive and inclusive redevelopment and benefits developers, ensuring development meets local needs, but also having the potential to speed up planning permission and reduce objections and delays.
- In order for regeneration to support greater equity and health, property developers must develop for existing residents as well as prospective residents.
- Neighbourhood-level post-occupancy evaluations (POEs) are essential to ensure developments meet community needs, enhance wellbeing, and reduce health inequalities. POEs also foster trust and transparency between developers and residents through community engagement activities.
- The property sector can also contribute to equity by encouraging ethnic and other diversity in their workforce and by actively recruiting from and contracting with local communities.

ENVIRONMENT

Climate and health

- Evidence shows the cumulative effects of climate change on health will widen existing health inequalities in the UK and globally (58).
- Decarbonisation can provide benefits for health equity locally by cutting air and noise pollution, creating green jobs, reducing fuel poverty, and promoting active travel.
- The UK's built environment is responsible for approximately 25 percent of the UK's total greenhouse gas emissions via operational carbon and embodied carbon (59).

Biodiversity

- The preservation of biodiversity is an important concern for health and equity and the development of healthy, sustainable communities.
- Protection of the natural environment is best served by construction focussing on land with low biodiversity wherever possible, preserving high-quality and biodiverse sites.

Pollution

- Air pollution contributes to 40,000 deaths, over 20,200 hospital admissions, and 6 million sick days annually in the UK, disproportionately affecting deprived and ethnic minority communities near polluting sites (60) (61) (62) (63) (46).
- 97 percent of UK homes are affected by air pollution levels that breach at least one of the three Global Air Quality Guidelines produced by the WHO for different pollutants, and 70 percent of UK addresses breach all three (64) (65).

The property sector and the environment

- Place-shaping represents an essential and significant opportunity to deliver environmentally sustainable places by supporting active and sustainable transport options, low-carbon energy systems, high-quality, low-carbon buildings and the retrofitting of existing homes.
- Building sustainably keeps ahead of tightening regulation and provides desirable neighbourhoods that attract consumers.
- Well-designed neighbourhoods incorporate adaptation to climate change, particularly in relation to the increased risks of overheating and floods.
- The densification of cities, if done with equity in mind, can improve the economy, health and the social determinants of health by offering good access to employment and amenities, including community and green spaces, whilst positively impacting on environmental sustainability (66).
- Developers can also reduce air pollution generated by construction processes and materials, and ensure homes have sufficient ventilation to improve indoor air quality.

4. THE WIDER SYSTEM AND REFORM

While the focus of this report is the property sector and what this sector can do today to promote health equity and ensure good health for all, we recognise that these businesses operate within a broader context, including legislative and regulatory frameworks. To ensure sufficient healthy housing is built, the planning process needs to be simplified, balanced with the necessary legislation and regulation to ensure that the right homes are built in the right places, which will support health into the future.

In this section, we outline some of the ways in which this system could be resourced and reformed to incentivise and support the property sector to provide a new generation of healthy homes and neighbourhoods.



The planning system

- The UK planning system has failed to support sufficient affordable, healthy development (67).
- In our roundtable and interviews, stakeholders cited the planning system as a major barrier to housing supply, pointing to delays in planning permission, under-resourced Local Planning Authorities (LPAs), and a lengthy, contested process that often spans years from site identification to housing production (68).
- Planning departments have faced significant cuts, losing over a third of their budgets since 2010 (69). While the government plans to hire 300 new planning officers in England, this falls short of addressing the full deficit.
- Local plans are currently not being used to their full potential and many are out of date, with most being over five years old (70).
- Increased funding is needed for planning departments to create binding plans that specify housing needs and align with government building mandates.
- Properly resourced LPAs will be able negotiate effectively with developers, providing clarity and consistency while also being able to challenge when necessary.
- With good local plans in place, developers should have the confidence that if they propose developments within the plan, they will receive approval rapidly and without additional costs.
- LPAs should retain the ability to purchase land compulsorily from developers who do not meet their planning obligations in exceptional cases (71).

Health in planning

- The NPPF mandates that local plans address health needs and promote wellbeing, yet only 36.4 percent identify local health needs, 29.2 percent link to local health strategies, 37.5 percent include a health policy, and just 38 percent require Health Impact Assessments (HIAs) for developments (72). The NPPF does not mention health equity (73).
- A healthy planning system requires health and health equity to be integrated at every stage of planning and development, with a focus on the social determinants of health.
- Public health departments can bring expertise in local health needs and the social determinants, as well as in community engagement and links to the local voluntary sector, aiding in community co-production of plans.

Planning and infrastructure funding

- Some UK areas have used other forms of land value capture to fund specific infrastructure projects (74). There have also been proposals for national schemes, including forms of land value tax.
- Land banking is a symptom of a planning system that is not functioning optimally (75) (76) (77). This problem is best solved by a planning system that reduces uncertainty for developments and that supports health and health equity.
- Negotiable S106 planning obligations can increase regional inequality, as areas with higher housing demand and land values are able to negotiate greater contributions; a national tariff or redistribution mechanism may help reduce these inequities (78).

National strategy

- A housing strategy that connects up the health, industrial and skills agendas can improve health, housing and support jobs in green construction and retrofitting.
- Local authorities also need to be empowered and properly funded to build social housing themselves.
- Enforcement of safety and quality regulations needs to be properly funded and supported nationally and locally.
- In the context of housing, proportionate universalism means a plan for housing for all, with resources focussed on where the housing need is greatest.

5. RECOMMENDATIONS AND NEXT STEPS

RECOMMENDATIONS

PUT HEALTH EQUITY AT THE HEART OF DEVELOPMENT

- The government to develop a Healthy Housing mission to maximise the health equity impacts of housebuilding, co-owned by the Ministry of Housing, Communities and Local Government and the Department of Health and Social Care, working alongside the property sector.
- The revised National Planning Policy Framework to explicitly prioritise health equity, making the creation of healthy places and the reduction of health inequalities part of the social objective of planning.
- Property sector businesses to establish a health equity lead or team to inform internal project development and communicate externally.
- Develop and implement Health Equity Impact Assessments for all local plans and for all large developments.
- Businesses in the property sector should expand their Environmental, Social and Governance (ESG) monitoring to explicitly include health equity (ESHG), so that the full range of their impacts can be properly assessed.

REFORM THE PLANNING SYSTEM TO ENCOURAGE EQUITABLE DEVELOPMENT

- The planning system should be reformed to reduce its discretionary nature and place comprehensive and binding local plans at the centre, working to mandatory targets.
- Local planning authorities (LPAs) must be properly funded and supported to produce and maintain up-to-date local plans, providing clarity and consistency in the planning system.
- Local plans must include projected accessibility needs, taking into account our aging population, and compensating for the low level of accessibility in older housing and places.
- The government should explore and implement additional forms of land value capture mechanisms.

USE DEVELOPER CONTRIBUTIONS TO ENHANCE HEALTH EQUITY

- Developers must meet their planning obligations for affordable housing, including social housing, with greater transparency around financial viability assessment.
- LPAs must be empowered to negotiate firmly with developers, including challenging viability assessments, reviewing them as projects progress, and holding developers to account for meeting obligations.
- Reform Compulsory Purchase Orders (CPOs) to allow LPAs to acquire land from developers who fail to meet planning obligations and build affordable housing directly.
- Local authorities should ensure that developer contributions are targeted more strategically at the social determinants of health, using the expertise of public health departments.

BUILD QUALITY, AFFORDABLE HOUSING

- All new homes should adhere to legal standards on quality, space and safety. These standards should be reviewed and maintained to keep pace with the highest standards across Western Europe.
- All homes should incorporate features of universal design, such as step-free entries and wide doorways, wherever possible, to encourage inclusion and accessibility.
- In the context of local government resource scarcity, institutional investors should provide capital to invest in good quality, affordable housing, giving them a long-term financial return while meeting Environmental, Sustainability and Governance (ESG) impact goals.
- The public sector must also fund and build social housing itself, transitioning from a model of individual subsidy via housing benefit, toward a new generation of social house building.

CREATE A STRONG REGULATORY FRAMEWORK WITH EFFECTIVE ENFORCEMENT

- Safety must be prioritised with appropriate regulation and properly funded enforcement. This is a responsibility that falls on the property sector, as well as legislators, regulators and inspectors.
- Legal minimum standards of build quality, accessibility, place-making and environmental protection must also be clear, binding, and consistently enforced.
- The National Housing Quality Board and National Housing Ombudsman Service should be put on a statutory basis, with a review of what powers and resources are required for these bodies to enforce compliance with the National Housing Quality Code. In the meantime, we urge all developers to register with the NHQB.

REFURBISH EXISTING HOUSING STOCK

- Refurbishment of existing stock should be encouraged by the reduction or removal of VAT on refurbishment projects for affordable homes.
- Bring adaptive reuse into the NPPF and encourage provision within local plans, rather than allowing the use of Permitted Development Rights to undermine quality and planning standards.
- Local government should use developer contributions to fund refurbishment programmes for existing stock, including adaptation for accessibility where possible.
- Developers with the capability to refurbish and retrofit can provide contributions by combining refurbishment programmes with new development.

ENSURE DEVELOPMENT IS COMMUNITY-FOCUSSED

- Local plans should be informed by consultation with the local community, Housing Associations and other local partners, and subject to Health Equity Impact Assessments, covering the social determinants of health, and ensuring the right mix of services and amenities to promote health, inclusivity and equitable access.
- The property sector to work more closely with local government, particularly planning and public health departments, and with communities at every stage of planning, building and operation, to understand and meet local needs with health and health equity at their core.
- Investors and developers should consult with the final purchasers and operators of affordable homes, including local government, housing associations and community-led housing groups, to ensure that the homes they build meet the needs of these groups, and the needs of the community.
- Investors, developers and operators should commit to building relationships with existing local stakeholders and community groups to develop stewardship plans that are tailored to local context and make best of existing community assets. This includes, for example, the ongoing maintenance of green and social infrastructure.
- LPAs should ensure that local plans are clear, up-to-date and include identification of smaller sites, so that Small and Medium Enterprises (SMEs), community-led initiatives, and self-builders can all contribute to development. Alongside increased public sector building, this is vital to diversify housing supply and lessen reliance on large developers.

CREATE HEALTH-SUPPORTING MIXED COMMUNITIES

- Developers must facilitate the creation and preservation of mixed communities by designing neighbourhoods with a range of housing options, including different sizes, tenures, and price points.
- Developers should commit to delivering adaptable and flexible places, designing inclusive public spaces, and providing accessible and safe transportation options and infrastructure.
- Developers should ensure that new homes are built within walkable proximity of every day services and amenities (or that those services and amenities are provided on-site) and provide high-quality walking, wheeling and cycling infrastructure, to help prevent ongoing issues of air pollution.
- Post Occupancy Evaluations (POEs) should be required for all developments. POEs should be standardised and carried out by a neutral third party, funded by the developer as part of planning obligations, and made publicly available.
- Plans for long-term stewardship, particularly of shared spaces and community assets, need to form part of planning agreements. These must include arrangements for sustainable governance and funding.

PROTECT THE NATURAL ENVIRONMENT

- All homes should be built in line with the Future Homes Standard 2025, reducing emissions and fuel poverty together. We urge the government to adopt the strongest proposed recommendations for incorporating heat pumps, solar panels and waste water heat recovery systems in all new housing.
- The government and the property sector should prioritise densification of cities, protecting undeveloped areas and improving carbon efficiency.
- Development should focus on sites with low biodiversity, based on a specific assessment of current and potential biodiversity and ecological significance of sites.
- All developments should prioritise walkability and local amenities with concurrent benefits for healthy travel, air pollution, and carbon emissions.

NEXT STEPS

Good housing and healthy places are essential for health and health equity, as well as the sustainability of the NHS and national prosperity. This report sets out the evidence showing that the property sector has an enormous impact on the health of the nation – through the homes it does (and does not) build and through the places it shapes. We believe that the property sector can greatly improve health equity if other stakeholders can support, incentivise and encourage it to do so.

This report is just the beginning of an ambitious agenda to revolutionise the way we build homes, construct neighbourhoods and facilitate communities, all in the interest of health. The next steps will involve working with all stakeholders to effect change across the system.

- Further work is needed with the property sector and other stakeholders to operationalise the principles laid out within this report for the creation and maintenance of healthy homes and places.
- Further work is also needed with national government to ensure that planning, regulation and enforcement structures are fit for purpose and take sufficient account of health equity.

- Stakeholders have reported concerns that current forms of impact assessment are not fit for purpose. Further research is needed to develop Health Impact Assessments, taking greater account of health equity and the social determinants, creating true Health Equity Impact Assessments.
- Pilot projects are needed to build the evidence base for what works. These could be trialled in some of the more than 50 local authorities that have become Marmot Places, taking leadership on health equity and incorporating it into their ways of working. Best practice can then be shared across all partners, via the Health Equity Network. We invite all interested parties to join the Health Equity Network at healthequitynetwork.co.uk

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