ACADEMIC: ESSAY

The health burden of unhealthy homes in New Zealand: a call for more action and a change in perspective

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Abstract

The housing crisis in New Zealand poses severe health risks, particularly for children and vulnerable populations. Approximately 20% of homes are damp, cold, or mouldy, contributing to respiratory problems and hospitalisations. The condition of rental properties, often poorer than that of owner-occupied homes, disproportionately affects lower-income and Māori households. The Healthy Homes Standards aim to improve living conditions by setting minimum requirements for heating, insulation, ventilation, moisture control, and draught stopping. However, the reliance on landlord self-certification has limited effectiveness, placing the burden on tenants to report non-compliance. The principle of landlord reported compliance continues the narrative of placing inequitable burden on vulnerable communities, leading to a cycle of health disparities. This viewpoint piece highlights the need for a formal external certification process to ensure consistent adherence to standards. Establishing an agency to certify rental homes and creating a registry would enhance transparency and accountability. A collaborative approach involving landlords, tenants, property managers, community groups, and health advocates is crucial for sustainable solutions. Prioritising tenant well-being and equitable living standards is essential to protect New Zealanders from the dangers of unhealthy homes.

Imagine a child, wheezing and coughing through the night, struggling to breathe in a damp, mould-ridden home. For too many families in New Zealand this is not a distant nightmare but a harsh reality. The homes they live in, meant to be sanctuaries, instead pose severe health risks, particularly to children and vulnerable populations. The implementation of the Healthy Homes Standards in 2019 was intended to ensure rental properties met basic health and safety criteria. However, a system of landlord-reported compliance has limited the effectiveness of the Healthy Homes Standards. Consequently, the burden of unhealthy living conditions falls disproportionately on tenants, exacerbating health disparities and perpetuating cycles of poverty and illness. This viewpoint piece highlights the consequences of New Zealand's unhealthy homes, recognises the shortcomings of the Healthy Homes Policy, and calls for change to protect New Zealand's most vulnerable residents from the dangers of unhealthy homes.

Background and context

Housing conditions in New Zealand are a significant concern, with a substantial portion of homes deemed "unhealthy." For example, approximately 20% of New Zealand homes are considered damp, cold, or mouldy, contributing to health issues such as respiratory problems.¹

The 2018 Census revealed that nearly 50% of rental properties lacked adequate heating. Furthermore, 1 in 5 households reported problems with dampness and mould. These conditions are particularly prevalent among lower-income households and in older housing, many of which operate as rental housing.

Rental housing in New Zealand is frequently of lower quality compared to owner-occupied homes. Approximately two-thirds of rental properties are poorly insulated and often fall below the World Health Organisation's recommended minimum temperatures.² Furthermore, homeownership rates vary significantly among different population groups, with 70.6% of Europeans owning their homes compared to only 47.2% of Māori.² This disparity highlights the significant inequities in living standards across these population groups. Housing is a direct determinant of many other aspects of an individual's life, as highlighted by the modified Williams model.³ Decades after Te Tiriti o Waitangi (Treaty of Waitangi), Māori still face the enduring impacts of colonisation, including significantly lower homeownership rates. It is a poignant irony that Māori, once the sole owners of all land in New Zealand, are now more likely to be renters thus experiencing the consequences of poor quality of housing. This disparity in housing not only underscores the ongoing inequities but also reflects the broader historical and systemic challenges Māori communities face today. Addressing these housing issues is crucial for achieving true equity and honouring the spirit of Te Tiriti.

The Healthy Homes Standards in New Zealand were implemented on July 1, 2019, under the Residential Tenancies (Healthy Homes Standards Regulations) 2019.⁴ These standards aim to improve the quality of rental properties, setting minimum requirements for heating, insulation, ventilation, moisture ingress and drainage, and draught stopping to ensure safer and healthier living conditions for tenants. Key requirements include:

- 1. Heating: Rentals must have a fixed heater in the main living room capable of achieving a minimum temperature of 18°C.
- 2. Insulation: Ceiling and underfloor insulation must meet the 2008 Building Code or have a minimum thickness of 120mm.
- 3. Ventilation: There must be windows or doors in the living room, dining room, kitchen, and bedrooms that open to the outdoors and extractor fans in kitchens and bathrooms.
- 4. Moisture and Drainage: Rental properties must have efficient drainage for the removal of stormwater, surface water, and groundwater, as well as ground moisture barriers if the property has an enclosed subfloor.
- Draught Stopping: Landlords must block any unreasonable gaps or holes that cause noticeable draughts and ensure that all unused chimneys and fireplaces are sealed.⁴

The health impacts of unhealthy homes

In New Zealand, poor housing conditions have significant health impacts, with 28,000 children and 54,000 adults admitted to hospitals annually for potentially avoidable conditions linked to inadequate housing.⁵ Damp or mouldy homes are estimated to cause up to 6,300 hospitalisations each year, resulting in around 37,000 hospital nights and costing the healthcare system approximately \$36 million. Rates of hospitalisation for Māori aged <15 years with bronchiectasis were 4 times higher than for non-Māori, non-Pacific, and Asian people.⁵ Additionally, 75% of rheumatic fever cases occur in individuals living in rental housing, highlighting the critical need for improved living standards to prevent such health issues.⁶

Māori and Pacific children in New Zealand are disproportionately affected by rheumatic fever. According to health statistics, Māori children are 20 times more likely, and Pacific children are 50 times more likely to contract rheumatic fever compared to NZ European children. Pacific children are 80 times more likely, and Māori children 36 times more likely to develop acute rheumatic fever compared to non-Māori and non-Pacific children. These alarming disparities underscore the critical need for targeted health interventions, including reducing household crowding and improving housing quality.

The reality of "healthy homes" implementation

The concept of 'healthy homes' in New Zealand emerged in response to the high prevalence of rheumatic fever. According to former prime minister Jacinda Ardern, "Rheumatic fever is a disease we should not have in New Zealand...lt is unacceptable that poor quality housing is causing lifelong heart damage...and increased risk of asthma and other respiratory illness." Whilst the stipulated requirements for a 'healthy home' aim to improve housing quality, a significant flaw arises from the reliance on landlords to self-certify their properties. In tenancy agreements, landlords must include a healthy homes standards compliance statement; however, these compliance statements do not undergo rigorous external monitoring or verification. Therefore, from a tenant's perspective it may appear that the rental is 'up to standard', but this might not be the case. It becomes the responsibility of the tenants to raise issues, sometimes leading to conflict and involvement of tenancy services.

The principle of renters reporting to tenancy services when their home does not meet the Healthy Homes Standards reflects a reliance on tenant vigilance rather than a fair robust verification process. This approach places the onus on renters to identify and report substandard housing conditions, which can be burdensome and often ineffective due to various barriers, such as fear of repercussions from landlords or lack of awareness of their rights. This echoes a historical pattern where marginalised communities bear disproportionate burdens.

Landlords who do not meet their obligations under the Healthy Homes Standards are in breach of the Residential Tenancies Act 1986 and may be liable for exemplary damages of up to \$7,200. However, due to an asymmetry of knowledge regarding the Healthy Home legislation, it is likely that non-compliance issues will be underreported.⁹

Recommendation

According to the 2023 Census, 'homes are getting healthier,' with data indicating that the Healthy Homes Standards have positively impacted housing conditions. Since the 2018 Census, the proportion of homes reported as sometimes or always damp has decreased by 3.4%, with a prevalence of 18.1%. Additionally, the proportion of homes heated by electricity has risen by 8.9%, reaching 84.2%.¹⁰ While these trends are encouraging, a more equitable approach would involve implementing a compulsory, formal certification process to ensure that all rental properties consistently meet the Healthy Homes Standards. Establishing an agency that certifies rental homes as 'healthy homes,' valid for a specified duration, would provide clarity and accountability. In addition to this, creating a registry of rental homes to collect data would

be instrumental in informing policy decisions and allocating funding effectively. This systematic approach not only promotes consistent compliance with housing standards but also enhances transparency and empowers tenants by ensuring they reside in safe and healthy environments. Forming an agency could also serve as a unifying force, bringing together proactive landlords, renters, property managers, community groups, housing and health advocacy non-governmental organisations, Māori authorities, and healthcare providers. This collaborative effort can streamline efforts to promote healthy homes by fostering communication, sharing resources, and coordinating initiatives. By leveraging collective expertise and resources, we can create sustainable solutions that ensure every home in our communities meets the Healthy Homes Standards.

Conclusion

The condition of housing in New Zealand remains a critical public health issue, disproportionately affecting children and vulnerable populations. Despite the introduction of the Healthy Homes Standards to enforce basic health and safety requirements in rental properties, the use of landlord self-reporting places a burden on tenants. This approach can leave many living in substandard conditions due to inconsistent enforcement. Moving forward, it is crucial to critique the current policy framework, to conduct ongoing research into the profound health impacts of unhealthy housing and advocate for stronger enforcement measures. By prioritising tenant well-being and promoting equitable living standards, we can ensure healthier homes for all New Zealanders.

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About the author

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