



Social Determinants of Health: Housing

Housing influences health in many ways...

Adequacy

The presence of lead and mold, poor heating and draft, inadequate ventilation, vermin, and overcrowding are all determinants of adverse health outcomes.

Children who live in low quality housing conditions have a greater likelihood of poor health outcomes in both childhood and as adults. Dampness, for example, causes respiratory illness and makes pre-existing health conditions worse.²

Suitability

Overcrowding allows for transmission of respiratory and other illnesses.²

Affordability

High housing costs reduce the resources available to support other social determinants of health.²

FFE Fast Facts: Housing

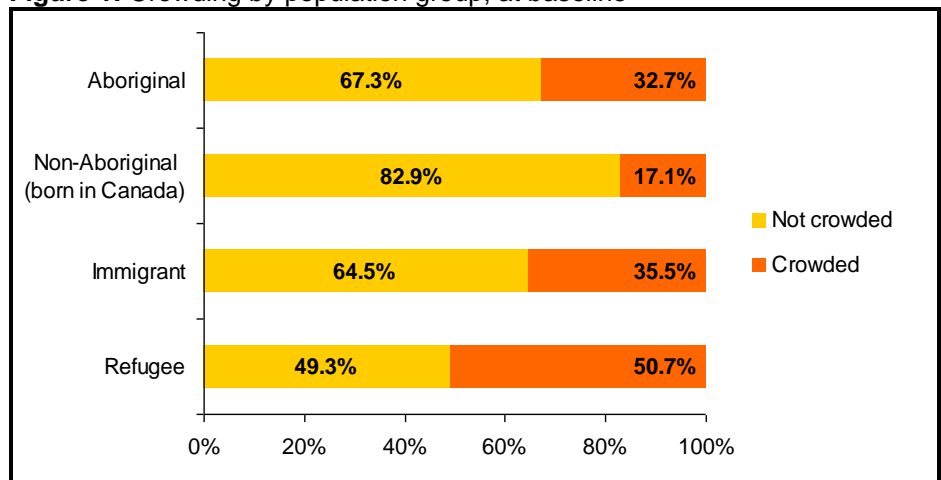
According to the Canada Mortgage and Housing Corporation (CMHC), acceptable housing is “adequate in condition, suitable in size and affordable”.¹ Homes in *core need* are those that do not meet one or more of these factors. The incidence of core housing need is highest for low-income households. In 2007, CMHC determined that approximately half (49.8%) of the “lowest income” households in Canada were in core need. Approximately 82% of FFE families report living in core housing need.

This Fact Sheet reports on the incidence of core housing need for FFE families.

Adequacy (State of Repair)

Homes deemed inadequate are those in need of major repairs (i.e. defective plumbing or electrical wiring, and/or structural repairs to walls, floors, or ceilings, etc). Overall, 21% of FFE families judged their current residence as needing major repairs.

Figure 1: Crowding by population group, at baseline



Source: Families First Edmonton 2010 & 2011.⁴

Suitability (Crowding)

According to the National Occupancy Standard (NOS) requirements¹, a home is crowded if it does not have enough bedrooms for the size and make-up of resident households*. Using information provided by FFE participants about the number of bedrooms in the home as well as the age, sex and



Families First Edmonton

Families First Edmonton is a research project to determine whether delivering health, family support and recreation services in a coordinated way can lead to better outcomes for low-income families.

relationship of all household members, 28% of FFE households demonstrate crowding. Compared to other FFE groups, primary caregivers who are refugees tend to be more crowded (51%). The group with the lowest incidence of crowding is primary caregivers who are Canadian-born non-Aboriginals (17%). (Figure 1)

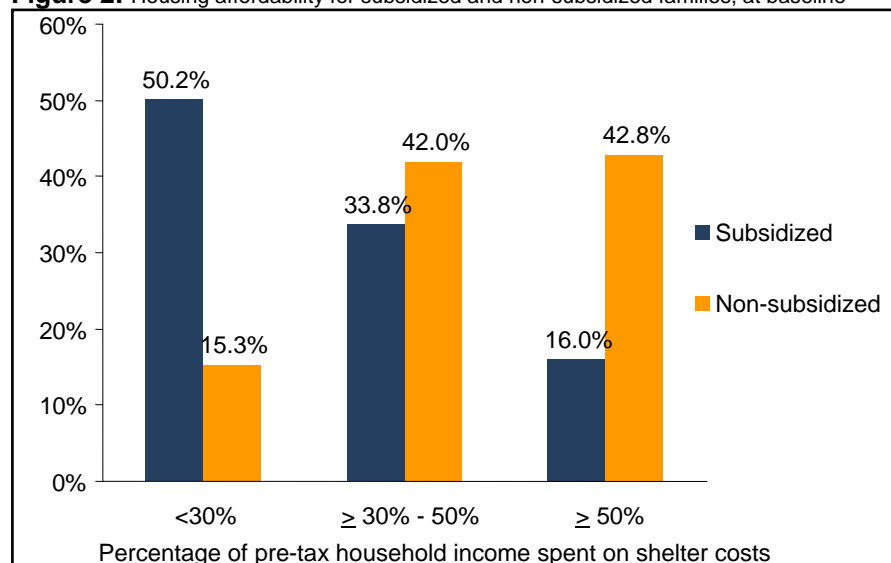
* Enough bedrooms means one bedroom for each cohabiting adult couple; unattached household member 18 years of age and over; same-sex pair of children under age 18; and additional boy or girl in the family, unless there are two opposite sex children under 5 years of age, in which case they are expected to share a bedroom¹.

Affordability

Housing is considered affordable when shelter costs are less than 30% of the before-tax household income.¹ However, according to the Public Health Agency of Canada, “when families spend more than 50% of income on housing, it significantly reduces the amount that can be spent on recreation, food, and other social determinants of health”.³

Overall, 71% of FFE families are spending 30% or more of gross household income on shelter costs. Figure 2 shows the percentage of FFE families who are able to afford their homes (i.e., spend less than 30% of gross household income on shelter costs), how many are spending 30% or more of the gross household income on housing and how many are exceeding the 50% critical point noted by the Public Health Agency of Canada.

Figure 2: Housing affordability for subsidized and non-subsidized families, at baseline



Source: Families First Edmonton 2010 & 2011.⁴



According to Figure 2, housing subsidization results in two major affordability patterns. First, FFE families who receive housing subsidization are more likely to afford their shelter costs compared to non-subsidized families. Half of subsidized families are able to keep shelter costs under 30% of the gross household income compared to 15% of non-subsidized families.

The second trend is that housing subsidization keeps more families out of the critical affordability range ($\geq 50\%$ of gross household income spent on housing). Forty-three percent of non-subsidized families are in the critical range compared to 16% of subsidized families.

Things to Consider:

- Are you aware that housing is a basic human right as defined by the United Nations Bill of Rights?
- Are you aware of the impact of housing as a social determinant of family health and well being?
- Does your intake process identify which families are experiencing unstable housing and who may at risk for not completing/attending your programs?
- Do you have up-to-date lists of resources/programs to support housing affordability, repair and emergencies for your staff to share with families?
- Are there opportunities to create innovative resources to repair and maintain housing either rented or owned by low-income families?
- Are there opportunities to develop rent-gear-to-income housing and create inclusive and connected communities?
- Do we have enough affordable, suitable and adequate housing in Edmonton with the flexibility to accommodate different kinds of families; large families, single parents, multi-generational families, people with health and accessibility needs, and people who need additional supports to stabilize their housing?



For information about FFE data contact:

Community-University Partnership for the Study of Children, Youth and Families, University of Alberta: (780) 492-6177

Dr. Jane Drummond, Principal Investigator

Dr. Laurie Schnirer

Dr. Maria Mayan

www.familiesfirstedmonton.ualberta.ca

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¹ Canada Mortgage and Housing Corporation. (2010). Canadian Housing Observer 2010. *Affordability and Core Housing Need*. (pgs. 63-80) <http://www.cmhc-schl.gc.ca/odpub/pdf/67065.pdf?fr=1305054746046>

² Mikonnen & Raphael (2010). Social Determinants of Health: The Canadian Facts. Retrieved April 11, 2011 from: http://www.thecanadianfacts.org/The_Canadian_Facts.pdf

³ Public Health Agency of Canada (2002). Housing as a determinant of health. Retrieved May 1, 2011 from: http://www.phac-aspc.gc.ca/ph-sp/oi-ar/pdf/09_housing_e.pdf

⁴ Families First Edmonton (Oct, 2010 and Feb., 2011). *Housing for FFE Families* presentations to Steering Committee. www.familiesfirstedmonton.ualberta.ca