Director of Public Health Annual Report 2023 Swindon

The Impact of Housing on Health



Foreword by Director of Public Health, Professor Steve Maddern

As Director of Public Health, I have a duty under the Health and Social Care Act 2012 to produce an annual report. This is my third report which I have themed around the impact that housing has on our health.

What makes a healthy home is a difficult and multifaceted question. The complex relationship between housing and health challenges public health departments across the UK. Being healthy does not just mean a lack of disease, it means the ability to cope with daily life and includes physical, social and psychological wellbeing⁽¹⁾. The places where we live can impact all of these.

While the government's Decent Home Standard sets safety criteria for new and existing houses, it does not cover everything we need to live a healthy life⁽²⁾. A home must have a sound structure, be free of hazards and provide adequate facilities for sleeping, personal hygiene, food preparation and storage. Homes also need an area for relaxation, privacy and quiet and allow social exchange with friends and family.

We cannot define a healthy home without examining the community it lies within. Levels of crime, green space and the quality of local services all impact health and access to these vary considerably.

The rising cost of living has meant that some people cannot afford to live in the communities they grew up in, or the places they would choose to settle. This is particularly the case for younger people, people from ethnic minority communities and those on the lowest incomes^(3,4).

The effect of housing on our health and wellbeing can also be seen at a societal level, with the longterm healthcare costs of poor housing estimated to cost the NHS £18.5 billion per year.⁶ The environmental impact is also a key consideration, with houses in England now producing 58.5 million tonnes of CO² annually. This is more than the combined total of all cars in the UK ^(5,6). Both of the financial and environmental costs of poor housing play a key role in our future health, especially given the projected impact of climate change over the next decade⁽⁷⁾.

It would be impossible to work in public health without recognising the considerable impact that housing and homes play in our lives. This report aims to approach the topic of housing from a public health viewpoint, linking our homes and our health.

This report is a result of team effort, and I would particularly like to thank Public Health Registrar Joseph Dalloz and Public Health Consultant Rob Carroll for their contributions.

Professor Steve Maddern Director of Public Health, Swindon Borough Council December 2023



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Housing in Swindon

Current Housing Stock

In Swindon, there are currently 100,950 houses. The majority are 3 or 4-bed houses, which account for around half of all housing within the borough. Over the previous 10 years, Swindon has increased its housing stock by an average of 850 homes per year – the majority of which are new builds. The Council's largest-ever housing regeneration project of Queens Drive commenced in 2021, delivering 149 homes in April 2022. While the number of houses within Swindon is rising, only 1500 of those houses built over the previous 10 years are deemed as being affordable^(8,9).

Houses within the borough are classified into those which are privately owned, owned by the local authority and those owned by housing associations. The majority of the houses in Swindon are privately owned (84%). These are homes owned by the people who live in them or by landlords or corporations. Homes in Swindon are considered to be reasonably priced when compared to many areas in the South West, with the average cost of a home being £272,000 in 2022⁽¹⁰⁾. This cost is six times the average income for Swindon. The typical mortgage payments for an average terraced property in Swindon currently cost £1,292 per month – a much higher figure than has been the case historically (11,12). Concerning the privately owned stock, a number are subdivided and provide shared accommodation rented by the room (also called Houses of Multiple Occupancy or HMOs). There are approximately 350 licenced HMOs in Swindon at any one time.

Around 10,000 homes in Swindon (10%) are owned by the local authority. These homes are offered to

people who could not otherwise afford a house of their own. While the number of social homes in Swindon is slightly lower than it was a decade ago, the proportion of housing that is Council-owned is still higher than both the regional and national averages^(13, 8). Over recent years, the Council waiting list for a home has increased by 50%, with demand significantly outweighing supply. This follows government spending cuts in 2010 which attempted to reduce the national deficit by removing funding from local Councils to build social rented housing⁽¹⁴⁾. Currently, approximately 700 households (out of 6,500 on the waiting list) are housed each year^(8,15). Swindon has allocated £3 million to continue a programme of purchasing more Council-owned properties, alongside a further £12 million for Council housing repairs⁽¹⁶⁾. Homes owned by the Council are currently undergoing a stock condition survey, with plans to assess all of these properties over the next 3 years. This will highlight any issues relating to how liveable the property is or identify any low energy performance certificate (EPC) ratings which can then be fixed. A further affordable housing development was agreed upon by the Cabinet in November 2023 which includes the construction of multiple affordable housing developments across Swindon.

Approximately 6% of homes in Swindon are owned by local housing associations. These are not-forprofit organisations which supply homes to people across the UK- typically in the formof social housing, shared ownership homes and supported/ specialist housing⁽⁸⁾. The number of houses owned by housing associations in Swindon is lower than both the regional and national averages, likely due to the larger number of local authority-owned homes.

Renting and private ownership

In Swindon, the number of people living in privately rented housing is increasing, with an estimated 20% of households being privately rented in 2021 compared to 16.0% in 2011. This is higher than other areas of the South West, but similar to that of England as a whole. In contrast, the percentage of Swindon households that owned their home (outright or with a mortgage) has slightly decreased over this period – From 66% in 2011 to 64% in 2021⁽¹⁷⁾. These changes coincide with the trends seen across the UK over the previous 20 years⁽¹⁸⁾.

In most cases, people who own their own homes have better physical and mental health outcomes than people who live in rented accommodation⁽¹⁹⁾. However, this is not the case for everyone. Rising mortgage prices or structural problems with someone's house may lead to higher stress which can affect a person's mental and physical health⁽²⁰⁾.

Housing services

Supported housing is specialised accommodation for people with disabilities who require housing-related or care-related support. Supported housing may be used as a short-term provision for those in crisis (for example people who have suffered from domestic abuse or are homeless) or can be used as a long-term provision for those with long-term physical or mental health conditions.

Within Swindon, there are 22 Supported Housing Schemes which support adults with support needs of all ages. Such schemes include supported housing for adults with learning disabilities, young women who are homeless and resettlement services aimed at older people with care needs. Schemes are also in place to support people who are experiencing domestic abuse, individuals with drug and alcohol issues and individuals with mental health needs⁽¹⁶⁾.

Sheltered Housing

Sheltered housing is designed for older people who may benefit from living in purpose-designed accommodation for their specific needs. Normally, residents are elderly people who wish to remain independent, but need access to nearby help should it be required. Within Swindon, the sheltered housing provision is made up of individual selfcontained flats, studio flats or bungalows, with some communal facilities such as laundry rooms.

Swindon Borough Council owns and manages 32 Sheltered Housing schemes across the borough, totalling around 1400 dwellings. These are supported by an additional 950 Sheltered Housing units owned by registered social landlords. The Council commissions 11 care providers to deliver care to these sites who deliver care to over 100 people, 39 of whom are provided with sleep-in support⁽¹⁶⁾.

Extra Care Housing

Extra Care housing (also called assisted living) is similar to sheltered accommodation, however, it is designed for people who have greater needs. As such, Extra Care housing offers more support than sheltered accommodation, with additional services provided by on-site staff, such as meals or personal care.

In Swindon, there are 165 Extra Care housing accommodation units for adults aged 55 and over. These units are delivered across four different schemes through a renting system which includes care and support services. In 2023, 65 people known to Adult Services were supported through Extra Care housing services, all of whom required 24-hour duty or on-call responsive cover⁽¹⁶⁾. The growing needs of Swindon's ageing population mean that more specific supported housing is required. Swindon's Housing Team have assessed the needs of the community and found that an additional 3,000 elderly care-specific dwellings will be required by 2036. A more detailed breakdown can be seen in Table 1⁽⁹⁾.

Table 1 - The Projected Demand for Older People's Housing in Swindon

		Swindon UA
change in population aged 75+ over the period 2016-36		+15,924
Demand for older person housing		
Extra care	Owned	480
	Rented	240
Sheltered 'plus' or 'Enhanced' Sheltered	Owned	160
	Rented	160
Dementia		100
Leasehold Schemes for the Elderly (LSE)		1,910
TOTAL		3,050



Why good housing and having a home is important for our health

How does housing impact our physical health?

The places that we live affect a range of determinants of our physical health. This can impact us in self-evident ways, such as a house with broken steps increasing your risk of falls or can be more hidden, such as poor air quality in your home increasing a child's risk of respiratory diseases⁽²¹⁾. Other ways that our houses impact our physical health include:

- Being too hot
- Being too cold
- Being too noisy
- Being overcrowded
- Being infested with pests
- Being a source of accidents such as fires
- Being in an area subject to anti-social behaviour or crime
- Not providing facilities for us to exercise or socialise

Ensuring that houses meet basic requirements, such as having suitable loft insulation or heating systems, has been shown to reduce hospital admissions in older people by 40%⁽²²⁾. As well as this, good quality housing supports people to be discharged from the hospital when they are fit to go home, helping them to return home more quickly with the right adaptations and support. It is estimated that almost a third of residential care placements could be avoided if alternative housing choices were available locally⁽²³⁾. Unsuitable housing can also increase inequalities within our communities, with those on lower incomes or with less choice, being forced to live in worse quality housing. This may have a knock-on effect on their health, further worsening these inequalities.

How does housing impact our mental Health?

As well as impacting our physical health, housing problems can affect our mental health in many different ways. 1 in 5 adults suffer from mental health problems as a result of their housing⁽²⁴⁾.

Living in overcrowded, noisy or uncomfortable accommodation can increase feelings of stress and affect sleep quality. These can impact our mental well-being and may result in problems such as anxiety or depression⁽²⁵⁾. Furthermore, living in conditions such as these makes coping with pre-existing mental health problems much more difficult. Living alone somewhere that is isolated or in a place where you do not feel safe can increase feelings of loneliness⁽²⁶⁾. This can also lead to feelings of depression and is a key factor in suicidal behaviour⁽²⁷⁾.

The effect of poor housing on your mental health can be worse if you have associated financial stresses or if you have to move home frequently⁽²⁸⁾. These can cause feelings of insecurity and affect the quality of your relationships, a key factor in protecting people from the effects of poor mental health. Problems may be even harder for people with underlying mental health conditions, where there may be additional challenges in finding the right place to live⁽²⁹⁾.

Cold homes

How does this affect health?

In 2022, 13,400 more deaths occurred in winter across England and Wales than during the rest of the year and the South West made up a slightly higher proportion of this number than would be expected. While this figure is lower than in previous years, it still represents a tragic loss of life⁽³⁰⁾. Cold homes are a major contributor to this, either through inadequate heating systems, fuel poverty or poor insulation, which can all result in cold living conditions, particularly for older or poorer residents⁽³¹⁾.

The human body responds in several different ways to cold weather, including raised blood pressure, increased risk of clotting, immune system suppression, reduced ability to fight off infection and diminished lung capacity⁽³²⁾. Living in a cold home increases your chance of serious illness or death, as well as increasing your risk of having a heart attack, stroke, developing breathing problems, catching the flu, suffering from depression or having a fall. These negative effects can start to occur in quite moderate weather conditions, with outdoor temperatures of below 6°C resulting in adverse health outcomes for those with inadequate heating or insulation⁽³³⁾. As well as mortality and morbidity, cold households can experience other social issues. People may become isolated if they are unable to invite people around to their cold homes and children's education can be affected by not being able to concentrate on homework if they have to study in a shared heated room⁽³⁴⁾.

The impact of living in a cold home disproportionately affects the most vulnerable members of our communities, including the elderly, individuals with care needs or residents with an underlying health condition. In recent years, the rising cost of living has placed additional pressure on household finances, making heating your home even harder. Fuel poverty, commonly defined as spending more than 10% of your household income on heating, depends on the interactions between income, energy prices and the energy efficiency of the dwelling⁽³⁵⁾.

The cost of heating the least efficient properties in England (Band G) is estimated to be almost three times higher than the costs of heating the most efficient properties (Band A-C) ⁽⁹⁾. This coupled with changes in the energy price cap, mortgage payments and the cost of living crisis means that fuel poverty and the effect of cold homes are likely to have a much bigger impact on low-income households. Latest estimates indicate that around 22% of households in England spent more than 10% of their household income on heating their homes in 2023 ⁽³⁵⁾.

At a national level, cold homes make up the largest proportion of housing-specific healthcare costs, accounting for £850 million of the NHS budget each year ⁽⁶⁾. Poorly insulated houses also pose a challenge to carbon-reducing environmental commitments and combined with fuel poverty, can also contribute to the wider determinants of poorer health- for example where households have to choose between spending money on food and heating ⁽³²⁾.

What is the impact in Swindon?

In England, it is estimated that around 1 in 18 dwellings are below acceptable energy efficiency standards. The proportion is higher in older dwellings built before energy efficiency considerations were part of building regulation ⁽³⁶⁾.

Analysis of local data provided by the Centre for Sustainable Energy shows that an estimated 13% of properties in Swindon are still classified with an Energy Performance Certificate (EPC) band of E, F or G, with Ridgeway having the highest number of such energy inefficient dwellings⁽¹³⁾.

While fuel poverty levels in Swindon (9%) are generally lower than in the South West (12%) and the rest of England (13%), there were still 50 excess deaths in Swindon during the 2021/2022 winter period when compared to the summer months. As with many of the other determinants of our health, the rates of fuel poverty are worst amongst the most deprived areas of Swindon, with rates varying between 2% and 25% depending on the area within Swindon⁽³⁰⁾.

At present, data on fuel poverty is only available for the 2021/22 period and as such will not yet reflect the full impact of the cost of living crisis. Current energy prices are considerably higher than those in 2021 and this combined with food price rises and inflationary pressures means that many more people are likely to be living in fuel poverty and that excess winter deaths are likely to be higher.

What is being done about this?

Measures to improve domestic energy efficiency and the affordability of home heating (i.e. reducing fuel poverty) have a significant positive impact on our health.

The Energy Company Obligation (ECO) scheme is the main route for privately owned and privately rented households needing support for energysaving measures. This scheme is targeted solely at those receiving means-tested benefits. There is a wider eligibility criteria offered by Swindon Borough Council through the Local Authority Flexible Eligibility route (ECOFlex). This enables households on low incomes, but not receiving means-tested benefits, to qualify for the ECO support available. Swindon Borough Council has also bid for external funding for energy efficiency and low-carbon schemes, including the Local Authority Delivery Scheme (LAD), Home Upgrade Grant (HUG) and the Social Housing Decarbonisation Fund (SHDF). It also promotes other energy-saving schemes including the Connected for Warmth (CFW) scheme and the Great British Insulation Scheme (GBIS).

Additional funding was received by the Council to provide emergency accommodation during the pandemic, as well as funding to provide Cold Weather Payments to support the rising cost of energy bills⁽¹³⁾. Swindon Borough Council has also been allocated over £ 7.5 million of financial support via the Household Support Fund (HSF) for residents struggling with energy and food costs, over the period October 2021 to March 2024.

One of the key problems with improving cold homes is that measures which enhance insulation may also reduce ventilation, leading to condensation, damp or mould⁽³⁷⁾. Swindon Borough Council housing tenants now benefit from a strategy for responding to complaints around these issues in its social housing. Problems with damp often arise in cold homes and can result in the deterioration of the property alongside the effect this can have on a tenant's health. A systematic approach is being taken to all complaints to ensure that they are fully investigated, causes identified and that remedial works are carried out where appropriate as well as improved communication with tenants regarding preventative measures that can be helpful. This should help to ensure that tenants have healthy, damp-free homes. This work is also supported by many other Council initiatives, including free hot meals available across the Borough.

For privately owned homes, our Environmental Health Team have regulatory powers to make sure that rented homes that fall below minimum standards are improved quickly. Environmental Health Officers use a statutory assessment system to assess homes and can compel landlords to improve heating or insulation and to remedy any dampness.

The Public Health Team coordinates affordable warmth activities across Swindon. The Swindon Affordable Warmth Strategy details the aims and objectives of this work, while its associated Action Plan lays out how this will be achieved.

Key to this strategy is the commissioning of the Warm and Safe Wiltshire Energy Advice Service, in partnership with Wiltshire Council. This service provides advice for residents on keeping warm in their homes and managing their energy costs. The service is aimed at those most at risk from cold homes and incorporates a referral system for key workers and health professionals to refer their clients for support.

Warm and Safe Wiltshire has helped over 3,000 households in the last 3 years, identifying around £450,000 in energy bill savings for households. 73% of households included a person with some form of ongoing health condition, 48% of which include people over the age of 60.

The Public Health Team has also provided leadership in the development and implementation of the cost of living strategy for the Council. This has a key focus on the cost of heating homes within the borough and has helped to focus the activity of internal and external partners in this area.

Warm homes

How does this affect health?

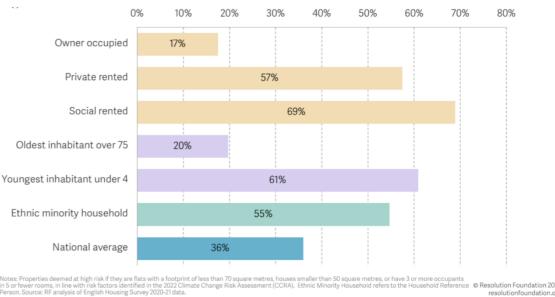
While the overall risk of death in the UK during periods of cold temperatures is greater than during warmer periods, having a home that is too hot can also pose a significant risk to our health. This is becoming increasingly important considering the impact of climate change and the recent record-high temperatures seen in England⁽³⁸⁾.

Nationally, one in five homes is at high risk of overheating, with four in five homes having suffered from at least a single period of overheating during the summer months (defined as the main bedroom exceeding 26°C for three or more consecutive nights)⁽³⁹⁾.

The homes at greatest risk of overheating are flats or smaller homes, which are less able to dissipate heat, as are overcrowded properties or those with a large solar gain (e.g. large, south-facing windows)⁽³⁶⁾. These effects can be worse in highly built-up areas, where 'heat-island' effects can result in significantly warmer temperatures (40).

These effects are not felt equally across the UK, with those on the lowest incomes being three times more likely to live in a home that overheats than those on the highest incomes. Figure 1 shows other groups at increased risk of overheating within their homes, including those in ethnic minority households and those with young children- who may also be at increased risk of the negative effects of overheating due to their reduced ability to regulate their body temperatures⁽⁴⁰⁾. It has also been shown at a national level that social-rented homes are more prone to overheating than privately owned homes⁽³⁹⁾.

Figure 1 - The Proportion of Homes at risk of overheating by occupant characteristics - England⁽⁴⁰⁾



Overheating in homes can result in a range of negative health outcomes. High temperatures have been shown to cause excess deaths and hospital admissions, resulting from worsening cardiovascular, respiratory and mental health conditions, as well as dehydration and accidents⁽⁴¹⁾. High temperatures adversely affect the health of pregnant women, increasing the risk of premature birth⁽⁴²⁾.

High temperatures in the home can also impact our health indirectly, either by reducing the productivity of people working from home or impacting the educational attainment of students through the discomfort, heat stress or sleep disruption caused by higher inside temperatures (38,43,44).

These effects can be seen when outside temperatures rise to above 25°C, with higher temperatures being associated with an even greater number of negative health impacts. Furthermore, the effects of high temperatures in the home are often seen in more concentrated periods than the effects of low temperatures, which can in turn put increased pressure on healthcare services and thus

worsen the quality of care people may receive⁽⁴⁵⁾.

Each year, overheating in houses costs the NHS £331,689⁽⁶⁾. Not only are these financial effects experienced at a national level, but individual homeowners may also suffer. Houses not designed to handle higher temperatures may absorb more of the sun's heat, which can cause cracks and worn surfaces to deteriorate or paint to fade faster⁽⁴⁶⁾.

What impact is this having in Swindon?

Recent work by the Climate Change Committee (CCC) assessed the risk of overheating in homes within 5 areas of the UK including Swindon, Birmingham, Glasgow, Manchester and London. Swindon was found to meet objective criteria concerning daytime overheating, with less than 3% of all house types suffering from overheating in kitchen and living spaces during the summer months. While this is positive, Swindon recorded the second highest rate of overheating, coming second only to London. Rates were highest amongst terraced and end-terraced housing within the

borough, especially when those homes had poor insulation ⁽⁴⁷⁾.

The report also highlighted that night-time overheating was an area in which Swindon required attention, with certain types of homes falling into the moderate and severe failure categories. Within these categories, Swindon scored even more poorly when simulations were undertaken to assess the potential impact of global warming within the region. A rise of temperatures by - 2°C, a potential figure by 2050, resulted in the majority of houses falling into the severe failure category^(47,48).

In the summer of 2022, an estimated 3,000 excess deaths associated with 5 separate heat episodes were recorded across the UK. 335 of these occurred in the South West, 56 of which were in Swindon. The majority of these deaths occurred in people over the age of $65^{(49)}$.

What is being done about this?

Improving home insulation for cold weather has the added benefit of insulating homes against periods of warm weather. Thus, much of the Council and Public Health Teams' work around energy efficiency measures, grant applications and housing legislation also plays a key role in limiting the risk of home overheating in the borough ⁽⁵⁰⁾

Within Swindon, all new builds must meet certain energy and sustainability requirements, these are set by the local plan to help limit their environmental impact, as well as protect against the effects of global warming. Specifically, it requires new developments to address the impact of climate change on the properties themselves, develop new builds in a sustainable and environmentally friendly way and ensure that all new accommodations can utilise sustainable energy sources. The Swindon Public Health Team are often involved in undertaking environmental impact assessments. These are systematic reviews of projects which ensure that decision-makers have considered the environmental impacts of their work, as well as suggesting potential prevention measures that can be undertaken⁽⁵¹⁾.

Existing housing, especially if rented, can also be improved if it fails minimum standards. The Council's Environmental Health Team have strong legal powers to make sure that rented homes can be brought up to standard quickly.

Swindon's sustainability guided approach has meant that areas of the New Eastern Villages development, such as the Foxbridge Village North, will utilise a fabric-first design, alongside other measures such as high-performance insulating window glazing to reduce heat loss while also limiting the risk of overheating. These developments will also supply a significant area of "green" infrastructure, ensuring that residents will have access to green space and woodland. Not only will this be beneficial for residents' mental health, but these green spaces will also provide a natural cooling effect for the local area in periods of hot weather⁽⁵²⁾.

The Swindon Public Health Team are also currently involved in a hydration project with the Bath and North East Somerset, Swindon and Wiltshire Integrated Care Board (ICB). The project aims to improve hydration levels of older people within the region by promoting visits to local memory cafes - informal meeting groups open to people affected by dementia. While this work's main focus is to reduce the risk of falls and infections associated with dehydration, it should also help to prevent complications such as heat stroke or dehydration during heatwaves. While these measures will reduce the risk of overheating within homes, tackling the root cause of the problem is essential. Local authorities are responsible for between 2 to 5 percent of their local area's Carbon emissions. This is a key issue for Swindon, and the Council's local net zero action plan aims to achieve net zero by 2030⁽⁵³⁾. This will require ongoing work to provide solar power within the borough, improve the energy efficiency of homes, decarbonise the Council's fleet and support people in reducing their carbon footprint⁽⁵⁴⁾.

Accidents in Children

How does this affect health?

Unintentional injuries both in and around the home are a leading preventable cause of death for children under five years, accounting for around 5% of all deaths in children aged 1 to 4 years old in England and Wales ⁽⁵⁵⁾. An average of 55 children under the age of five die each year in England due to an accident in and around the home, along with a further 60,000 children who attend Accident and Emergency departments, 8,000 of which are admitted to hospitals as an emergency ⁽⁵⁶⁾.

By far the most common cause of accidents occurring to children in the home is falls from the stairs or furniture, with other common causes being poisoning, scalds or being hurt by a falling item⁽⁵⁶⁾. Certain types of accidents tend to be more severe than others, with choking, strangulation and drowning having a very high fatality rate, while others such as burns more often result in hospitalisation ⁽⁵⁶⁾. Any accident has the potential to cause a life-changing disability for a child or potential long-term effects on school readiness, education, employment, emotional well-being and family relationships ⁽⁵⁷⁾. The rate of accidents occurring in the home is much higher in more deprived areas, with emergency hospital admission rates for children living in the most deprived areas being 40% higher when compared with children from the least deprived areas ^(58–60).

Other factors which increase the risk of children having accidents in the home include:

- Child development
- The physical environment in the home
- Parental/Carer Education
- Overcrowding and homelessness
- The availability of safety equipment

Nationally, falls on stairs, for people of all ages, cost the NHS £218,744,202 a year⁽⁶⁾. Emergency admissions for accidents in children cost health and social care services an estimated £36m a year. This does not include the associated lifetime social care costs for children who are seriously injured which is estimated to an additional £1.19m spent for each child suffering a traumatic brain injury by age three⁽⁵⁷⁾.

What impact is this having in Swindon?

In 2022, Swindon had 110 admissions to hospital as a result of unintentional injuries in children 0-4 years old. This, as a ratio of the population, is lower than the national average and the average for the South West region. The same trend is also seen in 0-14-year-old children, with Swindon's children in this age group having a lower hospital admission rate for unintentional and deliberate injuries than the national and South West regional average ⁽⁶¹⁾. Swindon generally has lower accident admission rates for many of the main causes of unintentional injury within the UK, with the exception of burns among young children which is above average ⁽⁶²⁾.

What is being done about this?

Within Swindon, there are a range of teams and services that work to reduce the risk of childhood accidents in the home.

The Health Visitor Team, a group of specialised public health nurses, work with families with children aged 0 to 5, visiting the homes of newborn children routinely for the first 3 years of their lives. During each of these visits, nurses will explore and discuss home safety, highlighting potential risks as well as talking to parents about how to reduce accidents in the home.

Healthcare staff in Accident and Emergency Departments, GP practices and minor injury units also play an important role in advising families on how to prevent accidents in the home, as well as identifying children who are suffering from repeated accidents. Children identified in this manner can then be referred to the local children's safeguarding services ⁽⁶³⁾.

The Early Years Team within the Council is responsible for ensuring that all home-based childcare providers (e.g. childminders or nurseries) meet the welfare and safeguarding requirements outlined by the government. This requires robust risk assessments, as well as undertaking pre-registration visits to discuss potential risks and to carry out checks on the suitability of the environment and its staff.

The Public Health Team is also in regular contact with national agencies, such as the Child Accident Prevention Trust⁽⁶⁴⁾. This contact allows learning and experience to be shared between teams, such as recent updates regarding the risks associated with button batteries, pets in the home and safety near water. These are then disseminated to residents by the local Environmental Health Team.

The Environmental Health Team assess private housing against 29 common hazards linked to defects in a property which impact the safety of the occupants, including children. Some of the accident hazards to which children are particularly susceptible include:

- Falls between levels
- Collision and entrapment
- Hot surfaces and materials
- Electrical safety

Environmental Health Officers can provide advice on how to prevent hazards to occupiers and landlords and can compel repairs or improvements in some cases, especially in rented accommodation.

The Dorset and Wiltshire Fire and Rescue Service offer Safe and Well checks for families where there is a child under the age of 5 or where there is a family member with a disability. Research has shown that home safety visits are one of the best ways to reduce accidents in the home involving children, lowering the risk by up to 26% ⁽⁶⁵⁾. These checks provide families with information, education and advice on how to reduce the risk of accidents and fires in the home, including the use of safety gates, window restrictors and fireguards ⁽⁶⁶⁾.

Accidents in Older People

How does this affect health?

Homes are the most common location for an accident of any kind and the majority of house-based accidents in older people are slips or falls⁽⁶⁷⁾. A third of people over the age of 65 and half of people over the age of 80 fall every year ⁽⁶⁸⁾. While falls are more common in elderly people due to a range of pre-existing health conditions, it is clear that poor housing design and maintenance is also a factor in many accidents ⁽³⁶⁾.

Having a fall can significantly impact an older person's life. 75% of falls among those over the age of 65 result in an injury, 20% result in a fracture and 30% of people suffering from a hip fracture die within a year. Falls are the most common cause of death from injury in the over-65s ^(69,70). Most deaths resulting from falls are not due to the initial fall itself but from complications from falls. Older people are much more at risk of these complications, which include hypothermia, chest infections or a prolonged recovery period ⁽⁷¹⁾.

Other examples of accidents in the home include burns and poisoning, which are more common in the elderly due to higher rates of sensory, visual or memory impairment⁽⁷¹⁾. The main sources of burns in the home are radiators, kettles, electric heaters and cookers and the main cause of poisoning is accidental poisoning with medications or by gases such as carbon monoxide^(70, 72).

Not only can accidents impact older people's physical health, but they may also result in people losing confidence, becoming isolated or losing their independence which are key factors in mental wellbeing for older people⁽⁷³⁾. Accidents may also affect the family members and carers of people who are involved⁽⁶⁸⁾.

Accidents in older people cost the NHS over £2 billion a year and result in over 4 million days of hospital use. The cost of hospital, community and social care services for a patient after a fall is 70% higher than in the 12 months before the fall, with the majority of these additional costs coming from extra community care needs⁽⁶⁹⁾. There are also a range of indirect costs of accidents in the home, such as productivity losses associated with increased carer time and absence from work, which while hard to estimate, are likely to be substantial.

What impact is this having in Swindon?

Each year, the South West experiences around 700 deaths resulting from falls in people over the age of 60. The majority of these occur in people over the age of 90 and as a result of falls on steps or stairs ⁽⁷⁴⁾.

During 2021/22, Swindon recorded 710 emergency hospital admissions as a result of falls, which is lower than would be expected for the population size of Swindon⁽⁷⁵⁾. During this period, Swindon also recorded 532 hip fractures, 427 of which were treated in the Great Western Hospital^(76,77). Given the ageing demographic of Swindon and the rest of the UK, the impact of these accidents is likely to increase over time⁽¹³⁾.

What is being done about this?

While Swindon's priority will always be the safety of residents, ensuring older people's independence is also key. A recent analysis by Lancashire County Council identified a potential £100 per person weekly saving that could be made by supporting people to live in their own homes rather than in supported residential care⁽⁷⁸⁾. This is a considerable figure given that Swindon currently provides around 500 residential or nursing care placements per year⁽⁷⁹⁾. The Council's Occupational Therapists and Environmental Officers work together to provide Disabled Facilities Grants to qualifying residents⁽⁸⁰⁾. These adaptations, of both owned and rented homes, provide greater independence and help protect residents against falls and other accidents.

There are a range of different interventions which have been shown to reduce the risk of accidents in the home. Some focus on the personal factors which cause falls (such as medication, mobility or eyesight), while others focus on the environmental factors involved in accidents (for example steps, stairs or poor lighting). Swindon currently undertakes a whole system, multiagency approach to fall prevention, meaning that there is a coordinated approach across the Council⁽⁸¹⁾. This programme is delivered to residents at three separate levels, based on how likely someone is to have a fall:

Level 1 focuses on health promotion for the general population, including those who are seen as being at low risk of a fall or accident. In these groups, there is a focus on helping people to age well and identifying risks early on, allowing early interventions to be put in place. To do this, a wide range of community-based activities and exercises are offered through the Swindon Public Health Team, such as the Otago Exercise Programme (OEP) which is a supported, home and group exercise

class designed to increase the strength and balance of older people to prevent falls⁽⁸²⁾.

- Level 2 focuses on those who are at moderate risk of a fall or accident and includes everyone who has sustained previous a fall. People who fall into these groups are offered a multifactorial fall risk assessment, along with individualised interventions by a healthcare professional. This might include a face-to-face assessment, a medication review, postural stability information or guided rehabilitation sessions
- Level 3 focuses on those people with the highest risk of falls. People in these groups will be referred to specialist services, such as fall clinics in the hospital

Studies have shown that home hazard assessments and modifications carried out by Occupational Therapists (OTs) reduced the risk of falling by 12%. Home hazard assessments are provided in Swindon through multiple agencies, including the Fire and Rescue Service, Occupational Therapists, Handy Person Schemes and Housing Practitioners. Any older person who has received treatment in a hospital following a fall also receives a home hazard assessment ⁽⁸³⁾. A more detailed model of the fall prevention strategy in Swindon can be seen in Figure 2.



How does this affect health?

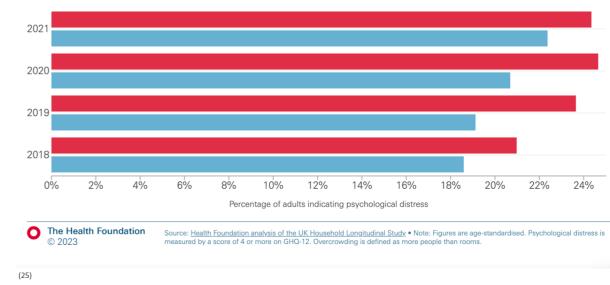
Overcrowding can be defined in three ways⁽⁸⁴⁾:

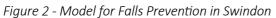
- If a boy and girl over the age of 10 are required to share the same room
- If there are too many people sleeping in a single room
- If the number of people sleeping in a house is too high for the size of the house

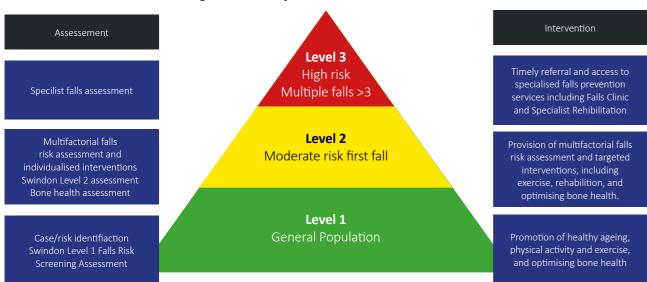
Overcrowded household Non-overcrowded household

Overcrowding has a significant impact on both physical and mental health, with three-quarters of overcrowded families experiencing an adverse impact from overcrowding. Children who live in overcrowded homes are more likely to be stressed or have mental health conditions such as depression or anxiety⁽⁸⁵⁾. Adults may also suffer from increased stress levels or have trouble with interpersonal/family relationships⁽⁸⁶⁾. Figure 3 shows that those in overcrowded housing have consistently higher levels of psychological distress than those in non-overcrowded housing. Increased stress levels or poor quality sleep may worsen underlying physical health conditions and can lead to other problems such as cardiovascular disease⁽⁸⁷⁾. During the COVID-19 pandemic, people in overcrowded accommodation were at increased risk of COVID-19 transmission (88), a pattern that can be seen with a range of respiratory conditions and infections⁽⁸⁹⁾.

Figure 3 - The Impact of Overcrowding on Adults experiences of psychological distress





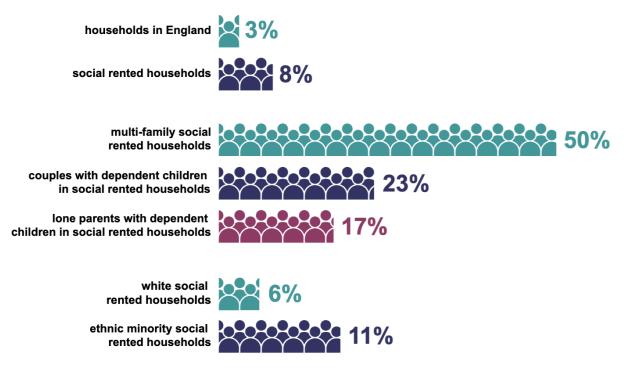


At a national level, overcrowding costs the NHS £5 million each year⁽⁶⁾, both through the direct effects of overcrowding as well as its impact on the wider determinants of our health. Children in overcrowded homes are at increased risk of suffering from behavioural problems and performing less well in school and may also find it harder to form social connections due to the challenge of socialising within their overcrowded homes ^(85,90).

The types of housing which are at the highest risk of being overcrowded are flats, apartments and maisonettes, followed by terraced homes. People living in rented accommodation are also more likely to suffer from overcrowding compared to owner-occupied accommodation, with those in social housing being the most affected ⁽⁹¹⁾. There appears to be a greater difference in the levels of overcrowding between rented and owner-occupied accommodation in the South West than the rest of England ⁽⁹²⁾.

Overcrowding is more common amongst certain demographic groups. These include households with people from certain minority ethnic and religious groups, households with dependent children, and households with multiple disabled people. These same residents may also be at increased risk of the negative health effects associated with overcrowding. A more detailed breakdown of the percentage of certain households deemed as being overcrowded nationally can be seen in Figure 4^(93,94).





What impact is this having in Swindon?

In the South West of England, 2.4% of homes were reported as being overcrowded in 2021, which is significantly lower than the national average $(4.4\%)^{(92)}$.

In the 2021 census, 4110 of Swindon's households were identified as being overcrowded (4.3% of homes in the area). The majority of these were made up of people living in terraced houses (1615) followed by flats and apartments (1205). In certain areas within central Swindon, more than one-quarter of households were deemed to be overcrowded, these included Regents Close, Manchester Road, Farringdon Road and Bathurst Road ⁽⁹⁵⁾.

As is the case nationally, certain groups within Swindon were at higher risk of overcrowding than others, including those who live in rented accommodation, those in multi-generational households and households with dependent children ⁽⁹⁶⁾.

What is being done about this?

The best way to tackle overcrowding is to increase the supply of homes. This can either be through the building of more homes or by moving people from under-occupied accommodation to more size suitable homes ⁽⁹⁷⁾.

The National Planning Policy Framework is a national strategy which guides local authorities in their planning of housing and other developments. Based on this, the local Swindon Planning Team creates a local plan, which provides a long-term policy about where homes will be built within the Borough. From this, developers and the Council make applications to build houses in the area ⁽⁹⁸⁾.

The Public Health Team are involved in the development of the local plan for the Borough, as well as reviewing planning applications weekly. These applications are assessed for their potential impact on the health of the population. The Public Health Team is also consulted at early stages on planning for large-scale developments, such as the New Eastern Villages and Wichelstowe, where they can ensure that developers meet the housing standards required to provide safe and spacious housing⁽⁹⁹⁾.

Swindon currently has multiple large-scale housing developments underway, including the New Eastern Villages. This is one of the largest greenfield developments in the country, consisting of 8,000 new homes, new schools, employment spaces and community and leisure facilities ⁽¹⁰⁰⁾.

In areas with high overcrowding rates (such as London), local authorities have trialled a range of programmes including cash incentives for residents who downsize from their under-occupied homes ⁽¹⁰¹⁾. At this time, programmes such as this are not currently being considered in Swindon due to the manageable rate of overcrowding within the Borough and the prioritisation of other key areas. The Public Health Team will continue to monitor rates of overcrowding within Swindon and will look to redirect resources as required.

Environmental Health Officers ensure that licensed shared housing (HMOs) is not over-occupied in relation to minimum standards. Overcrowding assessments are also conducted in support of other interventions such as the provision of social housing or reductions in the occupation of rented housing.

Hoarding

How does this affect health?

Around 5% of people in the UK suffer from a hoarding disorder ⁽¹⁰²⁾. This is where someone owns an excessive number of items and chaotically stores them, usually resulting in unmanageable amounts of clutter. This over-accumulation can be due to acquiring too many items or difficulty discarding them ⁽¹⁰³⁾. A person with a hoarding disorder may experience distress at the thought of getting rid of the items or simply be unable, either physically or through other health-related factors, to get rid of items despite an acknowledgement that changes need to be made⁽¹⁰⁴⁾. Hoarding is considered a mental health disorder and is included in the 5th edition of the Diagnostic and Statistical Manual of Mental Disorders. Hoarding can also be a symptom of other medical disorders ⁽¹⁰⁵⁾.

Hoarding can have a large impact on people's quality of life and their health. More clutter in the home can lead to an inability to tidy, which can make it difficult to do everyday tasks such as cooking or keeping yourself clean. Hoarding also increases the risk of accidents and injuries and a cluttered environment can encourage pest infestations or increase the risk of fires ⁽¹⁰⁶⁾. Indirectly, a cluttered home can result in a reluctance to invite visitors over, which can be isolating and may result in unsafe living conditions if repairs or compliance checks cannot be completed ⁽¹⁰⁶⁾. In addition, acquiring many items in a home can lead to financial stress or result in people feeling ashamed or embarrassed ⁽¹⁰⁷⁾.

What impact is this having in Swindon?

While the rate of hoarding nationally appears to be around 2-6%, collecting data on the condition is difficult at a local level⁽¹⁰⁸⁾. As such, confirming the incidence within Swindon is hard and other indicators, such as the rate of service utilisation have to be used instead. The Public Health Team offer a hoarding support service which sees around 60 people annually and provides an estimated 10 peer support sessions per year.

What is being done about this?

The Council's Live Well Team provide a local hoarding support service which is based on the Hoarding Disorders UK model ⁽¹⁰⁹⁾. People who are referred to the team meet a therapeutic specialist and then receive ongoing support from the Community Navigator Team ⁽¹⁰⁸⁾. Residents can self-refer to or be referred by a carer or a local service provider.

During the initial meeting, a psychotherapist specialising in both trauma and hoarding helps the person to understand their triggers, and what may have caused their hoarding and to identify any therapies which may support them e.g. specialist talking therapy or signposting to other mental health services. Following this, longer-term support is offered by the Community Navigator Team, who will attend homes on a weekly or fortnightly basis. The Community Navigator Team help residents maintain any improvements they have made, identify issues early on and support people to utilise the progress they made during therapy in a practical setting. This work is supplemented by local support groups where people suffering from hoarding disorders can meet and support one another.

While helping and supporting residents is preferred to taking formal action, sometimes the Council and other organisations may have to become involved if the hoarding results in a safety risk to the resident or their neighbours. This may involve a range of different teams⁽¹⁰⁷⁾:

- The Council, including the Environmental Health Team
- Fire and Rescue Service
- Social services or Safeguarding Teams
- The courts
- Animal Welfare Teams
- Landlords (Private or Social)

Environmental officers have to balance residents' autonomy with the health of the public and any risks to the property. Dealing with hoarding can be traumatising for the person who hoards and support is often resisted, leading to low success rates and high recurrence rates ^(110,111).

Helping people with a hoarding disorder requires a joined-up, multi-agency approach to provide people with the support they require and teams within the Council often work together to take steps before formal action is required.

Fire

How does this affect health?

Around 200 people in England die from residential fires every year, the majority of which result from smoke inhalation rather than burns⁽¹¹²⁾. The main sources of fires in the home include cookers, materials, candles, coal fires, heaters and electric blankets⁽⁷⁰⁾.

Not only do fires impact our health directly, but residential fires can have long-lasting effects. Fires can result in emotional distress, including shock, anger or hopelessness and can also lead to long-term mental health problems such as anxiety, depression or Post Traumatic Stress Disorder (PTSD)⁽¹¹³⁾. Furthermore, exposure to high levels of smoke in the air can also be a risk factor for heart disease, flare-ups of lung conditions and cancer⁽¹¹⁴⁾. These short and long-term effects cost the NHS ± 17 million per year ⁽⁶⁾, however, this is minimal in comparison to the total national cost of fires at an economic and social level, which is estimated to be closer to ± 3.2 billion. Furthermore, the UK spends an average of ± 8.8 billion per year on fire prevention ⁽¹¹⁵⁾.

Certain groups are at increased risk of the effects of fire, including those with poor mobility or older people, who may suffer from a poor sense of smell or vision and may have a reduced tolerance to smoke and burns ⁽⁷⁰⁾. Other groups at increased risk include those who are in lower socio-economic groups, with children from unemployed families being 25 times more likely to die in a residential fire than children from the highest socio-economic groups ⁽⁵⁸⁾. Those who live in shared or overcrowded housing are also known to be at particular risk from fires.

What impact is this having in Swindon?

Within Swindon, Fire and Rescue services are supplied by Dorset and Wiltshire Fire and Rescue Service serving over 1.5 million people within Bournemouth, Christchurch, Poole, Dorset, Swindon and Wiltshire⁽¹¹⁶⁾.

Between June 2022 and June 2023, there were 163 accidental dwelling fires attended in Swindon by this team, along with an additional 16 fires which were deliberate ⁽¹¹⁷⁾.

Cigarettes cause an estimated 6% of accidental fires within the home and account for 36% of fire-related deaths. In 2022, there was an estimated £1.4 million spent on house fires resulting from cigarettes within Swindon, with the largest proportion of these costs coming from deaths and property damage⁽¹¹⁸⁾.

What is being done about this?

Swindon Borough Council has a long partnership with Dorset and Wiltshire Fire and Rescue Service. Through this, they can share safety improvement programmes, whilst receiving support regarding tenant engagement and information. This includes a free Safe and Well visit for Swindon residents, which involves a room-byroom check to provide advice on keeping households safe from the risk of fire ⁽¹¹⁹⁾. This is essential given that the World Health Organisation (WHO) has advised that fire prevention programmes which promote the use of smoke alarms are the best strategy to minimise residential fires ⁽¹²⁰).

Cigarettes account for a disproportionate amount of fire-related deaths and the best way to reduce this risk and other health risks is for smokers to quit. The Public Health Team has worked with Dorset and Wiltshire Fire and Rescue Service to ensure that their staff feel confident approaching conversations around smoking cessation and further collaboration has meant that people engaging with the local stop smoking service can now be directly referred for a 'safe and well' visit. People can also be directly referred to a local stopsmoking practitioner by the Dorset and Wiltshire Fire and Rescue Service during their visits. The Public Health Team are also heavily involved in reducing the prevalence of smoking in Swindon, as set out in the local tobacco control strategy⁽¹¹⁸⁾.

Collaborative work between the Council and the Dorset and Wiltshire Fire and Rescue Service has also helped ensure that the Council's new housing developments utilise smoke detectors alongside water misting systems to protect Swindon's residents. Inspections by a specialist contractor are being regularly undertaken to ensure that fire compartmentation is to the highest standard. For shared housing, Environmental Health Officers inspect licensed HMOs regularly to ensure that fire precautions such as fire doors and alarm systems are maintained appropriately. Environmental Health Officers also assess fire hazards when visiting other types of property and give advice to mitigate risks. This may include compelling owners to improve matters.

Following the Grenfell Tower tragedy, there has been a national focus on the safety of high-rise blocks. Following the tragedy, the Council worked with the Dorset and Wiltshire Fire and Rescue Service to support a programme of reassurance for residents who lived in these types of buildings. Swindon Borough Council has now registered all of its highrise buildings under the 2022 Building Safety Act and has collated supporting information packs for each of its high-rise buildings. As part of the Council's housing improvement programme, they have installed additional smoke detectors within all 3-storey blocks of flats and sprinklers within higher-risk flats or those in our high-rise sheltered scheme. Over the next 2 years, all of the Council's homes will have their smoke detectors upgraded to L2 level to ensure the highest level of safety for tenants.

Regular large-scale training exercises are also undertaken within Swindon, which allow the Fire and Rescue Service to practise responding to fires in tall residential buildings. During a recent exercise, crews were faced with a challenging situation involving a severe fire in a flat, which caused smoke to spread to multiple floors ⁽¹²¹⁾. The Council's Public Health, Civil Protection and Housing Teams are also involved in responding to both simulated and real-life emergencies where there is a risk posed to the health of the public.

Pests

How does this affect health?

Pests are animals or insects that can do damage to you or your property. Within the UK, the most common types of pests are cockroaches, ants, mites, silverfish, bedbugs, fleas, rats and mice. Each year the effect of household pests costs the NHS £4,377,730⁽⁶⁾.

Pests in the home can cause a variety of different health problems, the severity of which depend on the person's living situation as well as the type of pest. The most common problems include the ability of pests to spread diseases, as well as worsening underlying health problems – For example, cockroaches can worsen asthma⁽¹²²⁾. Pests can also impact our mental health conditions such as insomnia, phobias or anxiety can be caused or made worse by infestations from different types of pests⁽¹²³⁾.

Pests also pose a risk to the home in which you live. Termites, carpenter ants and woodworms can cause structural damage to your home while other pests, such as rodents, may damage your belongings or waste perishable goods such as food stores. This may result in increased financial pressures on residents or worsen the quality of housing that people have to live in ⁽¹²⁴⁾.

Pests within the home may become a more significant problem in the future. Climate change's effect on rising UK temperatures, as well as its impact on the local environment, may result in new types of pests migrating to the UK. Warmer winters may also result in a higher number of pests surviving winter, with some species predicted to increase in number by over 250%. This could significantly increase the health risks associated with pests, especially if new species such as malaria-carrying mosquitos become endemic in the UK⁽¹²⁵⁾.

What impact is this having in Swindon?

Table 2- The number of Pest Control services offered by the Council to Qualifying Residents between 2017 and 2023.

Year	Pest control operations performed
2017	31
2018	88
2019	82
2020	105
2021	121
2022	93
2023	135

Collecting data on the number of pests in homes is challenging, however, the number of pest control services offered by the Council to qualifying residents can be used as an indicator. These can be seen in Table 2.

What is being done about this?

Local authorities are not legally required to provide a pest control service, however, under the Prevention of Damage by Pests Act 1949, they are required to take steps to keep their boroughs free from rats and mice. This involves keeping Council-owned land free of vermin, as well as ensuring that substantially large numbers of rats/mice are managed by landowners⁽¹²⁶⁾

Within Swindon, the Environmental Health Team are responsible for investigating and managing pest outbreaks and for enforcing health and hygiene legislation set by the government. The Environmental Health Team have powers to take enforcement action and subsequent works to clear properties which have evidence of vermin or other pests ⁽¹²⁷⁾. This power is given to them through the Environmental Protection Act 1990, which allows local authorities to intervene when hazards pose a threat to other people's environments or communal/public areas ⁽¹²⁷⁾.

Damp and Mould

How does this affect health?

In 2020, long-term exposure to damp and mould in a Manchester home resulted in the death of a 2-year-old child. Following this, the government provided advice to social and private housing providers to ensure that the health impacts of damp and mould are limited ⁽¹²⁸⁾.

Mould and damp are caused by a build-up of moisture in the home, which can result from condensation, a lack of heating, poor ventilation or direct water leaks. This dampness can appear as wet patches on walls or more commonly as patches of black mould.

Mould can produce irritants or allergens which can

impact our health, including breathing or respiratory problems, as well as infections and allergies. Damp and mould may also impact people's mental health, with concerns about health impacts, poor living conditions or loss of possessions resulting in worse mental well-being ^(128,129). These effects are more significant in certain people, including younger children, older people, people with underlying lung conditions or those with a weaker immune system ⁽¹²⁹⁾.

What impact is this having in Swindon?

Combined with the current cost of living crisis and high energy costs many Council tenants are finding themselves having to choose between heating their home and eating. Colder homes are more susceptible to damp and mould.

Within Swindon, 4,000 of the Council's 10,000 properties have been built using non-traditional methods (e.g. steel and concrete panels). These are more susceptible to damp and mould due to cold bridging- a problem where uninsulated external areas of the structure contact internal areas.

What is being done about this?

Following national advice, the Council implemented a new damp and mould process in January 2023. This initial process involved telephoning all tenants in Council-owned homes who have reported damp and mould issues. Problems are being triaged into a two-tier system, with higher-risk homes (those with children, elderly people or where someone has an underlying respiratory condition) being contacted on the next working day to make an assessment. This assessment includes a range of triage questions to establish priority, which will then highlight if a mould cleaning is required and mark the tenant's account as being part of the damp and mould strategy.

During this phone call, a specialist survey appointment is scheduled, with the urgency based on the level of need identified. While the majority of cases receive an appointment within 7 working days, urgent cases can be seen within 24 hours. This programme has already resulted in over 700 specialist surveys being completed and over 300 homes being cleaned in 2023.

Environmental Health Officers must also consider 'Dampness and Mould' as one of the hazards they are responsible for assessing in private homes. There is a strong connection between cold homes and fuel poverty, as heat and ventilation are important controls for dampness and mould. In private homes, especially rented ones, Environmental Health Officers regularly take action to require landlords to improve heating, insulation, ventilation and to remedy dampness.

As part of the Council housing stock condition survey, the Council will be able to identify all active cases of damp and mould within the accommodation that it owns. This work will allow the Council to identify trends within its housing stock and to inform our planned works over the coming 5-10 years. It also allows rectification work schemes to be undertaken, which work in one of three key domains Fix, Ventilate, and Insulate.

- Fix Ensure that the property has no water ingress or internal water leaks
- Ventilate Ensure that the home (where practicable) has constant running humidity-controlled extraction in both the kitchen and bathroom
- Insulate Ensure the property is insulated as best as possible.

Further advice is available to residents on the Council's <u>website</u> and the <u>local educational booklet (130)</u>.



How the neighbourhoods and communities we live in affect our health

Crime and Antisocial Behaviour

How does this affect health?

Rates of crime and antisocial behaviour impact the health of both residents and the community as a whole. Antisocial behaviour, defined as "any behaviour which causes harassment, alarm or distress to persons not of the same household" has been linked to negative health outcomes and a worse quality of life for all involved⁽¹³¹⁾. This occurs through both the direct effects of crime, as well as the avoidance behaviours that people living in high-crime areas may undertake ⁽¹³²⁾. The effect of these behaviours on our mental health is also significant, with either the fear of crime or the crime itself, resulting in increased rates of mental health conditions (133).

Crime and antisocial behaviour do not affect us all equally. Those directly impacted by crime, friends or family of victims, those who live in areas with very high crime rates, women and the elderly are at increased risk of crime's negative effects (134). The type of crime that someone experiences will also impact how much of an effect it has or how long the effects last. In general, sexual crime, trouble with neighbours and noise pollution are known to have the greatest impact at a community level (135).

Not only do victims of crime and antisocial behaviour have worse health outcomes, but those who commit crime also have worse health. Markers of antisocial behaviour in young people, such as early contact with the police, truancy and school misconduct are significant predictors of premature death, injury, drug use and overall health (135-137).

Crime and antisocial behaviour also have an impact at a community level. Over half of all people who live in high-crime areas will undertake avoidance behaviours, including avoiding certain places, certain situations, changing travel plans or cancelling social events⁽¹³²⁾. Studies show that the number of physically active people would significantly increase if residents felt safer in their communities ⁽¹³⁸⁾. High-crime areas also result in a loss of trust in institutions (such as the police and local authorities) - which in itself can result in worse health outcomes⁽¹³⁹⁾. People living in highcrime areas may also be embarrassed about where they live, impacting their mental well-being, and residents within these areas are more likely to become involved in crime themselves⁽¹³⁵⁾. High crime rates may also weaken communities, with people being too afraid to interact or socialise in the community due to feeling unsafe.

The impact of crime at a community level, along with the fact that people living in high-crime areas are more likely to lose their jobs or spend money on security measures, results in significant financial hardship ⁽¹³⁵⁾. This cost is also incurred at a national level, with crimes such as household intrusion estimated to cost the NHS £7 million per year⁽⁶⁾.

Crime rates across the UK are strongly linked with deprivation, which means that some of the poorest members of our community often live in the areas with the highest rates of crime. In 2022, 52% more crimes were recorded in the most deprived areas of the UK compared to the least deprived areas⁽¹⁴⁰⁾. Not only is this unjust, but it may also reinforce inequalities. Higher exposure to crime may impact people's health and educational outcomes and limit their ability to move up the socioeconomic ladder. Furthermore, this effect is compounded by the fact that those of non-white British ethnicity, who are overly represented in deprived communities, are at the highest risk of being involved in crime. People of black ethnicity are more likely to be arrested, even though they have lower conviction rates than people of white British ethnicity (141) and almost half of all young homicide victims in 2020 were from black ethnic groups⁽¹⁴²⁾.

What impact is this having in Swindon?

Swindon is among the top 20 safest towns across the UK, with an overall crime rate of 76 crimes per 1,000 people. This is 8% lower than the national average, but almost 25% higher than the South West average⁽¹⁴³⁾.

The most common crimes in Swindon are violence and sexual offences, however, these are the most common types of crime for many local authorities and rates are similar to the rest of England. Figures 5 and 6 show the rate of violent and sexual offences committed in Swindon. Several localities within Swindon fall into the 10% most deprived nationally, these areas experience disproportionally high violent crime rates and include Park North, Eldene, Gorse Hill, Penhill and Pinehurst⁽¹⁴⁴⁾.

Figure 5 - The number of sexual offences committed in Swindon per 1000 people compared to England

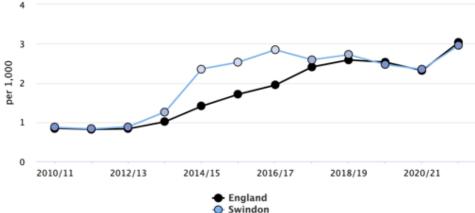
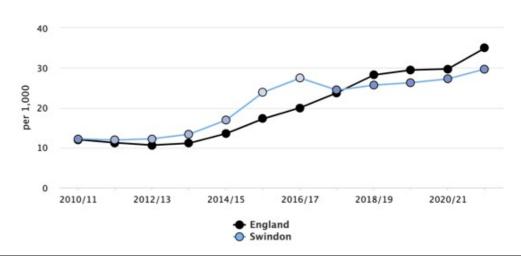
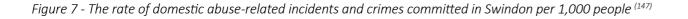
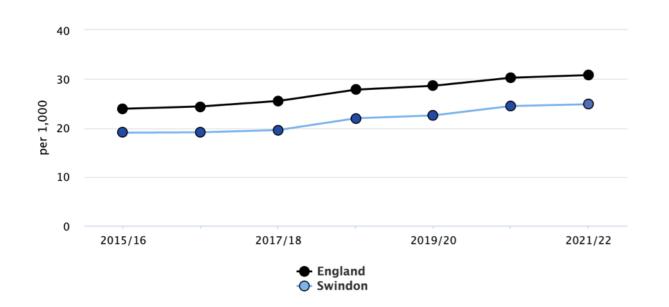


Figure 6 - The number of violent offences committed in Swindon per 1000 people compared to England



In a survey of residents completed following the COVID-19 pandemic, half of the surveyed residents felt that community safety had been negatively affected by the COVID-19 pandemic with an increase in rates of domestic violence. As seen in figure 7, rates of domestic violence have seen an upward trend, which also reflects the national picture ⁽¹³⁾. While levels of domestic violence in the area are still lower than the national average, the rising rates have made this a key priority for Swindon.





What is being done about this?

Tackling crime and serious violence requires a multiagency approach, involving education, health, social services, housing, youth and victim services, with a focus on prevention and tackling the root cause of violence. Within the borough, the statutory responsibility to reduce crime, anti-social behaviour and re-offending sits with the Swindon Community Safety Partnership (CSP)- A local partnership made up of representatives from the police, fire and rescue services, healthcare services, as well as the Council and other key stakeholders.

The Safer Communities Group works to deliver the parts of the CSP strategy that focus on the community and antisocial behaviour. Current work has included the recruitment of an antisocial behaviour officer and 3 community wardens, as well as the development of an early intervention antisocial behaviour workshop and one-to-one sessions for higher-risk pupils within schools. These interventions, alongside the mobile CCTV which has been deployed in hot-spot areas, aim to prevent, detect and evidence crime and antisocial behaviour which should help the community feel safer. The Council is also developing an antisocial behaviour survey, which will help to direct the work of the group, the community wardens and the antisocial behaviour officer ⁽¹⁴⁸⁾.

The Council works closely with Wiltshire Police to reduce crime and antisocial behaviour, including knife crime, domestic abuse and serious violence. Operation Sceptre, a national campaign aimed at reducing knife crime, has led to the creation of four new permanent knife surrender bins within Swindon. These are being introduced alongside several "Blunt Truth" sessions, run by the Wiltshire Police and the NHS, which aim to engage with students about the consequences of carrying knives and offer an option to report knife carrying anonymously⁽¹⁴⁹⁾. This is being supported by other work, such as the Swindon Youth Safety Summit in October 2023, which brought together key stakeholders to identify the profile of serious violence in the area and highlight the importance of taking a public health approach.

In 2022/23, Swindon and Wiltshire Councils were awarded more than £1.5 million from the Safer Streets fund, which has been used to fund antisocial behaviour work and to tackle violence against women and girls ⁽¹⁵⁰⁾. The Public Health Team have also recently completed a Domestic Abuse Needs Assessment, which will be supported by a multi-agency Domestic Abuse strategy and a Violence Against Women and Girls action plan.

Air Quality

How does this affect health?

Air pollution is the contamination of the air by substances that are harmful to our health or that cause damage to the climate. This pollution can occur both inside and outside of the home.

The majority of outdoor air pollutants are either particles, ozone or carbon and nitrogen dioxide. Each of these causes problems in their own way and are produced by different sources.

 Particles include dust, dirt, soot, smoke and liquid droplets. These are most commonly released by vehicle and industrial emissions, cigarette smoke and incinerators

- Ozone is a gas which forms smog when at ground level. While it does occur naturally, the largest sources of ozone are cars, power plants and boilers
- Noxious gases, which include carbon dioxide and nitrogen dioxides are components of motor vehicle emissions and by-products of industrial processes

Exposure to high levels of any of these pollutants, both in the short and long term, can cause a range of health problems, including stroke, lung disease, cancer, susceptibility to infections and increased mortality. Long-term exposure to air pollution has also been shown to increase the risk of certain chronic conditions, such as diabetes, obesity, inflammation, Alzheimer's disease and dementia ^(151,152).

We are exposed to air pollutants both in and around our homes. Outdoor air quality is influenced by what we and other residents do and consume and some of that resultant air pollution makes its way into our homes, contributing to poor indoor air quality.

We also generate air pollution inside our homes from the personal care and cleaning products we use, paints and varnishes, smoking, cooking and heating and by the off-gassing of furniture, carpets and building materials. Mould spores, viruses and bio-effluents can also build up indoors if we do not ventilate our homes adequately.

Because indoor air quality is affected by both air pollution outside the home and the pollution produced inside the home, which can dissipate more slowly, it can often be worse indoors than outdoors. This is a relatively under-studied area to date, but it is a growing area of interest for environmental and health bodies worldwide. The elderly, young people and those with certain underlying conditions are more susceptible to the effects of air pollution. This is particularly important for children who are still developing, where air pollution may result in low birth weight, childhood asthma, reduced lung function and allergies, as well as increased risks of developing diseases as an adult ⁽¹⁵³⁾.

Air pollution is a key public health problem for many local authorities, with 97% of people in Europe being exposed to air pollution levels above the guideline set by the World Health Organization in $2021^{(154,155)}$. Within the UK, it is estimated that 43,000 deaths a year occur due to the effects of air pollution and the associated healthcare costs are significant, with an estimated £160 million being spent in $2017^{(156, 157)}$.

What impact is this having in Swindon?

In general, Swindon's air quality is good and improving. Across the Borough, there are 38 monitoring sites which collect data on the different levels of air pollution. Locally, traffic-derived nitrogen dioxide is the main pollutant of concern and so these sites are situated close to roads across the area.

Since 2018, there has been a Local Air Quality Management Area over part of Kingshill Road in Swindon due to poor air quality concerns. In this area, nitrogen dioxide levels now only marginally exceed objective limits and have been falling since the management area was established. Across the remainder of our 37 monitoring sites, there is a clear improving trend and there is no concern regarding any other emerging hotspots.

As is the case for the UK as a whole, Fine Particulate Matter (PM2.5) is a concern, as there is thought to be no threshold under which there are no negative health effects. Across the Borough, PM2.5 levels are improving, but there is a need to reduce levels further and more quickly. It is thought that up to 30% of locally generated PM2.5 is emitted as a result of domestic solid fuel burning in log burners and bonfires.

What is being done about it?

Air quality in Swindon is monitored by the Environmental Health Team, which is part of the Public Health Team. The Director of Public Health chairs an Air Quality Steering Group which coordinates actions within any Air Quality Management Area. Currently, the priority is to return the Air Quality Management Case area on Kingshill Road to full compliance with regard to nitrogen dioxide (NO2), whilst also identifying and mitigating any new or emerging hotspots that may result from the multiple large-scale developments going on in the local authority area.

The Council is planning to introduce a Traffic Regulation Order in 2024, which will restrict heavy vehicle access to Kingshill Road road. This is expected to reduce NO2 levels in the air quality management area by at least 5%. Alongside this, the Council is looking to increase active travel and public transport in the area and a a public health practitioner is being recruited to run air quality engagement campaigns and projects across Swindon. This post is being funded by a DEFRA Air Quality Grant, which is also being used to fund a Variable Message Sign on both approaches to the area to deliver nudge and enforcement messages to drivers and the public.

Unfortunately, much of the particulate pollution inhaled by Swindon residents originates outside of its boundaries and even outside of the UK, so there is relatively limited local influence over levels in Swindon. Domestic solid fuel burning is likely the biggest single local source of PM2.5 pollution in Swindon and something we can all help to limit.

Environmental Health Officers appraise planning applications for new developments, to ensure that

they are designed and built in a way that minimises exposure to air pollution. The Environmental Health Team also regulate high-emitting industries in the Borough to ensure that emission targets are met. The team also respond to large bonfires in the area, where they may cause a nuisance to residents and air pollution.

Residents can access the latest Air Quality monitoring reports on our <u>website</u>⁽¹⁵⁸⁾.

The Stop Smoking service and the Dorset and Wiltshire Fire and Rescue Service also have a particular focus on indoor air pollution, encouraging residents to make their homes and cars smoke-free.

Noise pollution

How does this affect health?

Noise pollution is any unwanted or excessive sound that can have negative effects on our health or the environment. The most common causes of noise pollution are traffic noise, air traffic, construction work, nightlife and animals^(159,160).

Noise pollution can have a significant effect on mental health, costing the NHS £2.5 million per year⁽⁶⁾. These mental health effects can result from difficulty sleeping, an inability to concentrate or being woken up too early. Over a long period, this can increase stress levels and result in a range of different mental health conditions⁽¹⁶¹⁾.

Prolonged periods with poor sleep or stress may result in stress hormone levels rising, raised blood pressure and increased blood viscosity (thickening). Over time these may lead to people developing cardiovascular diseases such as heart attacks or stroke. Noise pollution accounts for 48,000 heart attacks and 12,000 deaths per year across Europe⁽¹⁶²⁾. Raised blood pressure can be even more dangerous for people who are pregnant and noise pollution may be associated with complications during pregnancy, such as pre-term birth or underdevelopment ^(142,163).

Long-term exposure to loud noises can damage our hearing, either through hearing loss or an oversensitivity to loud noises. Noise pollution may also result in tinnitus, a condition which causes ringing in the ear ⁽¹⁶⁴⁾. These effects are more impactful on young children, who are more likely to develop complications from long-term noise pollution, as well as have problems with their development or education if they are unable to concentrate or communicate effectively as a result ⁽¹⁶⁵⁾.

What impact is this having in Swindon?

Across the UK, around 40% of adults are exposed to road traffic noise exceeding 50 decibels on an annual basis ⁽¹⁵⁹⁾. The highest levels of noise pollution occur in the South East, particularly in London where nearly 16% of people are exposed to transport noise above 55 decibels during the night-time.

The South West, including Swindon, has lower levels of noise pollution than the rest of the UK. It is reported that 5.5% of Swindon residents are exposed to transport noise above 55 decibels overnight ⁽¹⁶⁶⁾ and that 3.2% of residents are exposed to transport noise above 65 decibels ⁽¹⁶⁷⁾, however, it should be noted that the latest data is from 2016.

Extrium, an environmental consultancy firm has developed a noise pollution map which records road and railway noise levels across the UK. As can be seen in Figure 8, the areas with the highest levels of nose pollution in or surrounding Swindon (those in dark blue with average noise levels over 75 decibels) are located near the M4, the A419 and the A420, as well as the roads that feed into them (for example Cirencester Road and Great Western Way)⁽¹⁶⁸⁾.

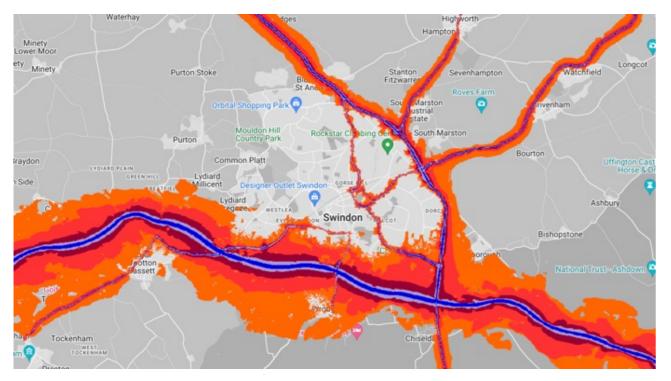
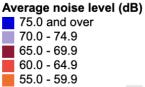


Figure 8 - Road and Railway Noise Level Map of Swindon and the surrounding area⁽¹⁶⁸⁾.



Traditionally, Swindon has also reported lower-thanaverage rates of noise complaints, however, the latest data from 2021 showed that the rate of noise complaints in Swindon doubled between 2019/20 and 2020/21 from 6.1% to 12.5%. This same trend was seen nationally. and is thought to be related to the national lockdowns. It is believed that working from home and home-schooling led to an increase in sensitivity to neighbourhood noise ^(169,170).

What is being done about this?

The Council's Environmental Health Team is responsible for reducing noise pollution in Swindon by giving pre-development advice and by addressing noise complaints. Around 200-300 pre-planning applications are reviewed by the Environmental Health Team each year. During this review, potential problems, such as proposed new houses being built too close to roads or factories, can be highlighted and plans adjusted. This process includes assessing noise studies in the area and suggesting planning conditions to achieve an appropriate noise environment for all residents. At times, the Environmental Health Team will perform noise surveys, either to confirm submitted studies or to check noise exposure has been mitigated. The team also conduct compliance checks on developments where noise guidelines are not being met.

The Environmental Health Team also respond to noise complaints under the Environmental Protection Act

1990 and statutory nuisance provisions. These cover noise issues between residential neighbours and also between commercial and residential premises. Each year, the team receive around 700 complaints and formally investigate approximately 150 of these. Investigations can result in Formal Notices being served, prosecutions and seizures of equipment.

The Environmental Health Team aim to resolve issues at the lowest appropriate level of intervention and manage a majority of their cases through the provision of advice to complainants and noise sources. The Environmental Health Team also run a 24-hour call-out service, which enables residents to call for advice on what to do in situations of noisy one-off disturbances. Full details of the process can be found on the <u>website</u>.

Flooding

How does this affect health?

While many of us recognise the significant effects of flooding globally, there are considerable potential health impacts of flooding within the UK and Swindon. In 2023, 7 people died as a direct result of the UK's Storm Babet⁽¹⁷¹⁾.

People can be at risk of drowning during severe flooding and murky flood water may conceal or displace objects, leading to accidents and injuries. During floods, the risk of electrocution or fires increases, as safety measures may become damaged or overrun. In addition, flood water may be contaminated by bacteria or viruses, which can result in a range of infections, especially if food or water stores become contaminated ^(36,172). Flooding may also result in longer-term indirect effects on our health. There are significant mental health problems associated with flooding, which can result from the initial stress of the event itself, the loss of possessions and pets, being separated from family and friends during an evacuation or as a result of the long-term stress of rebuilding or repairing the damage. This repair process can also result in other health problems. Generators being used as a backup may result in carbon monoxide poisoning and damaged homes are more likely to become infested with pests and flood water may result in long-term problems with damp and mould ^(36,172).

Certain groups are at higher risk of the effects of flooding than others, this includes older people, younger children, those with underlying health conditions, people in lower socio-economic groups and people who experience language barriers- who are less likely to receive flood alerts and warnings ⁽¹⁷²⁾

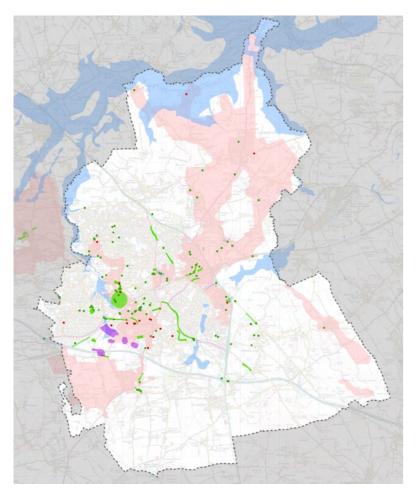
Flooding also has considerable financial implications for affected residents, especially those in rented accommodation who are less likely to have home or contents insurance. This can place additional pressure and stress on people, especially those on lower incomes, which may impact a person's mental wellbeing⁽¹⁷³⁾.

As a result of climate change, the risk and effects of flooding in the UK are likely to increase over time, with an estimated increase in the amount of land in England at high risk of flooding rising from 35,000 to 130,000 hectares by $2080^{(174,175)}$.

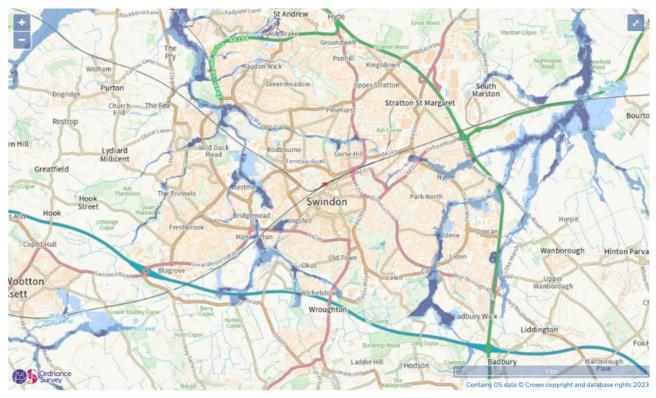
What impact is this having in Swindon?

The recorded health impacts of flooding are often underestimated because those most affected by flooding have to move out of the flooded area, resulting in an underreporting of the long-term effects. The latest data from 2021 shows the geographical areas most at risk of flooding in Swindon, as well as their cause (Figure 9). Many of these locations have flooded multiple times. Flooding in Swindon is best characterised by multiple, localised events, with the main reason for flooding being reported as inadequately maintained highway drainage⁽¹⁷⁶⁾.

Figure 9 - The common locations of flooding within Swindon and their sources ⁽¹⁷⁶⁾.



Legend Swindon Borough boundary Groundwater flooding (points) Localised flooding (points) . Wichelstowe flooding (areas) Localised flooding (areas) Historical fluvial flooding Sewer flooding (by postcode area) Figure 10 - A map showing the long-term river and sea flood risk for Swindon and the surrounding area (176)



High 🔵 Medium 🔵 Low 🔵 Very low

What is being done about this?

Across the UK, local authorities and emergency services view flood management as a multi-step process, ranging from immediate actions to long-term recovery support. Depending on the location and severity of the flooding, a range of different services and teams will be involved, including the police, fire and ambulance services, charities, voluntary organisations, utility companies, the NHS, as well as the Council.

During the initial stages, flood management involves managing any immediate threats and risks to life and health, as well as ensuring that adequate advice and public health messaging are being sent out to the public. This might require the Public Health Team to prepare these messages and to work with local healthcare services and other key partners to ensure

The government also produces a national flood risk map, which shows the areas at the highest risk of flooding from rivers or the sea. These can be seen in Figure 10.

that resources are directed to our most vulnerable residents. As time goes on, other interventions such as psychosocial support for victims, as well as involving voluntary and community sector organisations in the long-term repair and recovery process will become more important⁽¹⁷²⁾.

Swindon Borough Council also prepare for and prevent floods from occurring. Areas deemed to be at high risk of flooding are monitored within the Council's flood risk register⁽¹⁷⁸⁾. Work is undertaken with local partners and communities to increase resilience to flooding. Residents can register for flood alerts and forecasts on the government website, which should allow time for precautionary measures to be taken⁽¹⁷⁹⁾.

An extensive survey of highway drainage assets, which include jet-cleaning gullies and sewers, CCTV surveys and digital mapping of all drains is being undertaken across the borough. New properties or building works

within the borough are reviewed to ensure that flood risk is taken into account at all stages of the planning process and to avoid the risk of inappropriate development in areas at risk of flooding ⁽¹⁷⁶⁾. This is being further supported by the new local plan, which will include a planning policy to manage flood risk.

Local Services and Green Spaces

How does this affect health?

Access to good quality local services and green spaces is essential for a happy and healthy life, improving both our physical and mental health. The use of free and local green space increases physical activity levels, preventing common diseases such as high blood pressure, diabetes or heart disease ⁽¹⁸⁰⁾. It also reduces the risk of cancer and musculoskeletal conditions ⁽¹⁸¹⁾. A 10% increase in exposure to green space can result in people experiencing a 5-year improvement in healthy life expectancy ^(182,183).

There are also considerable mental health benefits. People who spend more time in green space show improved brain function, have a greater sense of identity and are happier ^(184,185). Lower stress levels also result in less risk of anxiety disorders or depression. These effects are particularly important for children, where connection to nature is key to development, as well as reducing the lifelong risk of chronic conditions such as obesit^{y (186)}.

Parks and green spaces can be a great place to socialise and if used correctly, can promote a range of healthy lifestyle choices such as healthy eating and physical activity. Green spaces also provide spaces for people to build social networks while improving air quality, regulating temperature and protecting people from the effects of climate change, all of which impact our health. Providing access to suitable outdoor green spaces has great economic benefits and could save the NHS £2 billion in obesity treatment every year. Sporting and leisure facilities have a similar effect, with £23 being saved for every £1 spent on these services. These financial gains result from the better quality of life people experience, reduced NHS use and increased productivity gains.

Access to green spaces and leisure facilities remains inequitably distributed across the UK. Nationally, the areas which have the lowest incomes or those with the largest proportion of people from ethnic minority groups have the least access to green space – with children in the most deprived areas being nine times less likely to have access to green space and places to play than the general population. Even when parks are located in these communities, they tend to be of lower quality and are therefore used less often. However, these spaces are an effective way of reducing this inequality, with evidence showing that the gap between rich and poor reduces significantly when everyone has access to green space ⁽¹⁸⁷⁾.

What impact is this having in Swindon?

Across Swindon, there are 9 parks, 7 outdoor gyms and a wide range of organisations offering arts-related activities. There are also 13 libraries, both Council- and community-led which provide over 100,000 library loans a year. Swindon has many cycle routes and walking opportunities and although data suggests local people cover 1.4 billion miles in motor vehicles, it is estimated that nearly one in four adults walk regularly for transport⁽¹³⁾.

Latest data shows that only 5.7% of Swindon residents have easy access to a woodland space, which is lower than the England average of 15% ⁽¹⁸⁸⁾. However, 26% of Swindon residents spend time in nature each week for relaxation, compared to the England average of 18% ⁽¹⁸⁸⁾. Moreover, Swindon has fewer fast food outlets in comparison to the rest of the South West, with only 62 fast food outlets per 100,000 people, while the South West has 72.5⁽¹⁸⁹⁾.

The most comprehensive assessment of a local area is the Access to Healthy Assets & Hazards (AHAH) index, which summarises how conducive to good health an area is relative to its neighbours. The score is comprised of four domains relating to access to retail services, access to health services, the local physical environment and air pollution levels. Within Swindon, 14% of residents live in an area which has a low AHAH score. While this value is higher than the South West average of 7.8%. These figures are better than the national average of 23% ⁽¹⁹⁰⁾.

What is being done about this?

There is already a wide range of spaces, services and activities in Swindon that support people around their homes. As such, recent work has focused on supporting these services following the pandemic.

In addition to supporting the already present services, activities and infrastructure, Swindon also has plans to create a 'Cultural Quarter' within the next 10 years. Offering an additional leisure space for residents and an estimated 850,000 visitors in the first year alone. This will include a new theatre, dance studio and art pavilion ⁽¹⁹¹⁾.

The Public Health Team is currently supporting the The Moredon Sports Hub project, which will be Council's Planning Team to develop a new local plan operated by Central Swindon North Parish Council is for Swindon. This collaboration allows them to support close to completion. There will be facilities such as 3G the development of the built environment in Swindon, football pitches, a 1.5km closed-circuit cycle road track, ensuring that residents have access to local services and cyclocross track, a pump track, cricket pitches, croquet green spaces which can support them to live happy and facilities, a youth room and a coffee shop. This will healthy lives. Teams within the council such as the Public provide residents of Swindon with the opportunity to Health Team also use their knowledge and influence engage in a range of physical activities. to advocate for a focus on active travel, healthy food options and access to green spaces.

The Public Health Team have also been working with colleagues in the Placemaking Team to redevelop the Spring Gardens Green Space in Eastcott Ward. This has involved community consultation to understand what local residents would like to see happen with the space. Plans are underway to improve the soil quality and explore the potential for an additional path around the perimeter, creating a natural circuit that could be conducive to exercise.

The Public health team are also working with South Swindon Parish Council to redevelop the Buckhurst Field green space and play areas in Walcot and Park North Ward. Depending on funding, this project will hopefully see a number of improvements. The playing pitches will aim to have better drainage, and associated changing room improvements, allowing local teams to host regular football fixtures. There are plans for a new PlayZone to be installed, building on the popularity of the Multi-Use Games Area. Improvements to the already existing skate park are planned. Re-wilding and tree planting are planned to increase biodiversity in the area.

Swindon's Public Health Team have been working with Highworth Town Council to redevelop two existing play parks. Plans for the parks have been developed in collaboration with local children and young people, as well as stakeholders with an interest in ensuring the parks are inclusive for families with children with disabilities.

Inequalities in access to housing and homes

How does not having a home affect your health?

Given that a good home is essential to living a healthy life, it is unsurprising that those without homes have worse health than the rest of the population. The differences are stark. People who are homeless have a lower life expectancy (47 years) compared to the general population (77 years)⁽¹⁹²⁾. This is due to the increased risks that homeless people are exposed to, as well as the lower quality of care that people in these groups may receive ⁽¹⁹³⁾.

People who are homeless also live a longer proportion of their lives in poor health. This results from the increased risk of certain health conditions such as infections, mental health conditions, addiction and liver disease, as well as the higher risk of trauma or sexual assault ⁽¹⁹⁴⁾. People who are homeless are much more likely to have poor respiratory health, with 64% suffering from respiratory infections, 20% being diagnosed with asthma and 5% having Chronic obstructive pulmonary disease (COPD) which is double the national average ⁽¹⁹⁵⁾.

What impact is this having in Swindon?

Knowing the exact number of people who are suffering from homelessness is challenging, but it appears that the number within Swindon and the UK is rising⁽¹⁹⁶⁾.

The 2017 Homelessness Reduction Act states that Councils must assess and support people who are currently, or at risk of becoming, homeless ⁽¹⁹⁷⁾. The majority of people who end up being assessed are found to require support. 2023 estimates show that 912 people in Swindon are currently in temporary accommodation, with an additional 463 at high risk of becoming homeless in under 2 months ⁽¹⁹⁸⁾. As a Council, Swindon assesses a higher proportion of its households for homelessness than England and the South West. Of the households assessed, a lower proportion are deemed to be at risk than would be expected when compared nationally ⁽¹³⁾.

Within Swindon, the majority of people assessed under the act are between 16 and 34-yearsold (63%) and the most common reasons for homelessness are "Family or friends no longer willing or able to accommodate" (30%) and "Domestic Abuse" (9%) ⁽¹³⁾. These are also the most common causes across the UK generally ⁽¹⁹⁹⁾. It should be noted that people who are homeless are not are not the same as people who are rough sleeping. Within Swindon, an estimated 9 people were sleeping rough in 2022 on an average night ⁽²⁰⁰⁾.

What is being done about this?

Swindon Borough Council's Housing and Public Health Teams, have a key focus on homelessness and rough sleeping. Each year the Council spends approximately £1.4m on supported housing schemes for the single homeless (those without dependant children), mainly funding direct-access hostels and move-on accommodation. A homelessness needs assessment was undertaken in 2019 and used to develop the Council's recent 2019 and 2023 rough sleeping prevention strategies. Much of this work has required additional funding and multiple successful funding applications have been made over recent years. This includes £1.7 million from the Government's Rough Sleeper Initiative Fund, a £1.9 million Homelessness Prevention Grant as well as multiple additional funding pots to provide purposebuilt local accommodation and support the Council's dedicated rough sleeping service.

This additional funding has allowed the Council to support those at greatest risk of homelessness, to prevent households from becoming homeless and to keep former rough sleepers in accommodation. Support within the borough includes a dedicated rough sleeping project coordinator and outreach team who engage with people who are rough sleeping. Teams within the Council who work with people at risk of homelessness are offered specialist mental health training to better equip them to work with and identify those most vulnerable and at immediate risk.

While the waiting list for accommodation in Swindon increased by more than 50% between 2016 and 2019, the Government's 'Everyone In' initiative during the COVID-19 pandemic meant that over 150 individuals were accommodated across Swindon during this time. Many of these individuals subsequently moved into long-term accommodation. Following this, the council also bought 9 new selfcontained independent accommodations across Swindon for those who require accommodation, as well as a further 10 properties which provide move-on accommodation for those recently sleeping rough. As a borough, Swindon has supported a much higher percentage of homeless households to find long-term accommodation than the rest of England and the South West.

The Council's recent work has focused on the most vulnerable groups, including those who are victims of domestic abuse, which involves re-housing victims in a planned and supportive way, to reduce the risk of further abuse. Additional work has included our partnership work with local organisations and services, ensuring that those with more complex, mental health or care needs have access to the support they require^(13,196,201,202).



Conclusion

Housing is a major determinant of health. Whether or not you have your own home, the condition and design of the home, the neighbourhood that surrounds it and whether you need support in living independently can all impact your health in both positive and negative ways.

This report provides an overview of some of the key challenges faced by our residents in the pursuit of a safe and healthy home. It also identifies the significant impact of housing on health and outlines some of the programmes, services and projects that have been put in place to support Swindon residents to have safe and healthy homes.

It also highlights the close connection between residents' homes, living conditions and their health, as well as the role of the Council and other key partners in improving housing quality, providing access to safe and affordable housing and supporting residents through the current cost of living crisis.

However, it also shows how wonderful Swindon can be with a diverse range of communities, organisations and volunteers, many of whom are committed and passionate about improving the lives of residents. Access to a good quality, safe home is fundamental, helping to provide a foundation for a healthy life. You cannot maintain good health without good housing and we all have a role to play in ensuring that everyone has a decent home that meets their needs.

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