

## **Review of Housing and Health - Towards a Shared Agenda May 2000**

The purpose of this document is to give you a voice in the review of the Housing Executive's Housing and Health policy.

For some time the Housing Executive has drawn attention to the close relationship between poor housing and poor health. It is estimated that over 70% of health impacts occur as consequences of factors outside the formal health service. Housing and housing related activities, particularly the improvement in housing conditions are accepted as some of the most critical of these impacts.

**Housing and Health - Towards a Shared Agenda** published by the Housing Executive (May 2000), set out the many areas where housing interfaced with health and recognised the need for partnership working with not only the health sector, but also other statutory, voluntary and community sectors to tackle a wide range of housing related issues.

We are now reviewing our Health and Housing Strategy. It is timely to review the Strategy in light of not least the implications of the Review of Public Administration including the new HPSS structures and commissioning arrangements.

This review will:

- Examine progress made to date by the Housing Executive in the promotion of health and well-being.
- Identify the key developing themes and policy context that is shaping the development of Housing and Health.
- Assess the implications of current health policy for housing's corporate objectives.
- Propose recommendations for future action working in partnership with the HPSS and other stakeholders.

### **Progress**

Substantial progress has been made in partnership working between the Housing Executive and HPSS. A lot of what the Housing Executive does has had implications in relation to community care, targeting social need and promoting health and social wellbeing. One of the objectives of the original Housing and Health Strategy was to reprofile a lot of what we had been doing in terms of its beneficial health and wellbeing impacts.

Decent housing can be seen as an end in itself but it also makes a significant contribution to wider Government goals and is increasingly recognised as doing so in relation to health, education and poverty.

In a recent speech the Prime Minister Tony Blair understands the importance of housing to meeting wider government objectives when he said:

“For the families that live in social housing it’s probably the single most important factor in increasing their quality of life. If we improve the quality of their housing everything improves with it - the children get better educated, the families get more choice of staying together.”

The Review (a copy of which can also be accessed on the consultation page of the Housing Executive website at [www.nihe.gov.uk/publications/consultation\\_documents](http://www.nihe.gov.uk/publications/consultation_documents)) looked at developments both in housing and health policy since the Housing Executive’s Housing and Health Strategy was published and identified the key themes and direction of trend. For example, one of the key policy documents published by the DHSSPS was the Investing for Health Strategy (2002) which aimed to tackle health inequalities by focusing on the wider determinants of health and well-being.

A further important White Paper, “Our Health, Our Care, Our Say” (2006) underlined the shift to focus services on primary and community care and integration with other services, delivered as far as possible in people’s own homes and local communities. The DHSSPS long term health and social care strategy, A Healthier Future (2004), set out a vision for health and wellbeing for Northern Ireland over the next twenty years. It placed a strong emphasis on promoting public health and greater engagement with people and communities, in developing more flexible and efficient ways of providing responsive and integrated services in the community, rather than in hospital. Promotion of health and wellbeing was also integrated into the Programme for Government supported by the Priorities for Action 2006-2008.

On the housing front there have been a number of policy developments focusing on:

- Improving access to decent and affordable housing.
- Supporting people to live independently in their own homes.
- Building sustainable communities where people will want to live work and enjoy recreational pastimes.

## **Key Issues for Housing**

Having reviewed policy developments in both the housing and health fields it is clear a number of themes are emerging.

### **Health and Social Care**

- An increased emphasis on prevention and health promotion, encouraging people to take greater responsibility for their health and well-being.
- A move to shifting delivery of health care towards a primary care led service, to create an integrated health and social care service to where people live in their communities.
- Transfer of focus of patient from hospital to community setting e.g. as in the Bamford review.
- Investing in Health places greater emphasis on everyone to develop integrated and joined-up services to improve health and reduce inequalities.

### **Demographics**

- The demographic profile is changing with important implications, not only in terms of increased households/reducing household size but also an increasing older population.
- A growing number of older people and other client groups requiring varying levels of support to enable them to live as independently as possible.

### **Housing Implications**

The implications for housing and housing-related services are substantial including:

- Increased levels of affordable and decent housing.
- More supported housing to deal with an older population with increasing dependency needs and to address the recommendations in the Bamford Report.
- Improved energy efficiency including renewable technologies, helping to improve air quality and alleviate fuel poverty.
- Significant design and density issues, in terms of decent homes and decent communities which meet the increasing complex and dependency needs of individuals and communities.

- Remodelling of existing sheltered housing to reflect both greater independence and dependency.
- Increased use of assistive technology to promote greater independence e.g. community alarms.
- More integrated planning, commissioning and delivery of services between HPSS, housing and other stakeholders. This can be facilitated via community planning.
- An important if not lead role for housing in building sustainable communities including:
  - URA/ neighbourhood renewal
  - Community safety/anti-social behaviour  
Promoting good relations/Shared Future agendas
  - Environmental improvements
  - Community empowerment/development.

## **Integrating Housing, Health and Wellbeing in the Housing Executive's Business Plans**

The Northern Ireland Housing Executive's vision is one in which housing plays its part in creating a peaceful, inclusive, prosperous and fair society. This is reflected in our mission statement and corporate objectives.

The Housing Executive has integrated health and wellbeing throughout our business, and this is reflected in our mission statement:

*"Working together to ensure that everyone has access to a decent affordable home in a safe and healthy community."*

### **Corporate Objectives**

We have grouped the recommendations for our new housing and health policy under the Housing Executive's six Corporate Objectives. The pivotal role of housing in promoting health and wellbeing is recognised in the objectives which are:

- Achieving the Decent Homes standard
- Promoting independent living
- Fostering urban and rural regeneration
- Promoting affordable housing
- Building a stronger community
- Delivering better public services.

At the end of each objective we have set out key questions which we would like you to consider.



## **Objective 1 - Achieving the Decent Homes Standard**

**“We all need not just a roof over our head that is warm and dry, safe and free from infestation”**

World Health Organisation (1993)

### **Recommendations**

The Housing Executive will:

- Work towards reaching the Decent Homes Standard through programmes of improvement and planned maintenance.
- Continue to implement the Grants Investment Strategy to improve housing conditions in the private sector including HMOs.
- Work to improve the energy efficiency of Housing Executive homes and those in the private sector and help to alleviate fuel poverty.
- Reduce carbon emissions by piloting renewable energy schemes through the use of modern technology and help improve air quality.
- Continue to review and update technical housing standards to support health and wellbeing e.g. wheelchair standard, Lifetime Homes.
- Continue to work with all Investing for Health partnerships to alleviate fuel poverty.
- Continue to address home safety issues.

The Lifetime Opportunities Strategy (Government’s anti-poverty and social inclusion strategy for Northern Ireland) which replaced the New Targeting Social Need (New TSN) initiative, recognises that many homes remain which do not meet the Decent Homes Standard and that homelessness continues to rise. The Strategy calls for every child, young person and pensioner to be housed in a decent warm home by 2020.

The Housing Executive’s aim is to bring all our homes to the Decent Home Standard. A decent home is defined as one that meets modern standards in relation to fitness, structure, energy efficiency and facilities (e.g. kitchens and bathrooms). The Housing Health and Safety Rating (HHSRS) is a means of evaluating the potential effect of any faults on the health and safety of occupants, visitors or

neighbours. The HHSRS places the emphasis on the effect of hazards rather than the existence of faults. Therefore it is the potential for harm which is significant. In England this standard will replace the current unfitness standard from 2007.

In Northern Ireland this decision has not yet been made but for the purposes of comparison the 2001 House Condition Survey included a HSSRS assessment. It showed that in 2001, eight per cent of all dwellings in Northern Ireland were considered to have unacceptable HHSRS risks. More common risks in dwellings in Northern Ireland were dampness, lead and excess cold.

Cold homes and the associated problems of condensation, damp and mould can affect both physical and mental health. People who spend a lot of time at home are particularly at risk. They are more likely to have a low income and are therefore faced both with being unable to adequately heat their home and with having to spend long periods in their cold dwelling. These groups are also more likely to live in poor housing with inadequate insulation.

Fuel poverty is defined as:

**“Where heating the home to a reasonable standard would cost more than 10% of household income”**

The DSD’s Fuel Poverty Strategy for Northern Ireland (2003) revealed that almost half of retired households are living in fuel poverty. The report also cites 1,300 cold related deaths, which serve as a reminder of the need to ensure that the most vulnerable in our society are able to afford adequate heating. The Housing Executive continues to remove solid fuel appliances and Economy 7 systems and replace these with more energy efficient heating systems in its own stock, at a rate of approximately 8,000 per annum.

The Home Accident Prevention Strategy (HAP) published in January 2005, tasked the Housing Executive with addressing home safety issues by identifying tenants at risk and by taking appropriate action to control risk in partnership with the voluntary and community sectors. Research (J Rowntree Foundation 2001) shows the benefit of small, less costly interventions to improve safety around the home, such as grab rails, with 77% of respondents perceiving a positive impact on their health as a result.

In response to the HAP strategy, the Housing Executive is working with all Investing for Health Partnerships rolling out a programme of home safety training to key staff. Housing Executive staff are represented on Home Accident Prevention Groups across Northern Ireland. HAP groups have the potential to be a useful vehicle for the delivery of home accident prevention initiatives at the local level. In the NHSSB area, families with children under five are being targeted by installing thermostatic mixing valves to control bath water temperature. Nearly 50% of Housing Executive dwellings have had hard wired smoke alarms fitted. This has included all flats and maisonettes. It is hoped to extend this scheme to cover all Housing Executive dwellings within the next five years.

<b>Consultation Questions: Objective 1</b>		
1. Do you agree with the recommendations relating to achieving the Decent Homes Standards?	Yes	No
2. Do you believe these recommendations go far enough?	Yes	No
3. Further comments		





## Objective 2 - Promoting Independent Living

**“The NI Anti Poverty Strategy, Lifetime Opportunities, aims by March 2010 to improve the quality of life and independence of people in need so that 45% of all who require community services are supported as necessary in their own homes.”**

Lifetime Opportunities OFMDFM (2006).

### Recommendations

The Housing Executive will:

- Continue to implement the Supporting People Strategy to reflect emerging priorities including the needs of older people and the implications of the Bamford Report.
- Review and revise current planning and commissioning arrangements in light of the Investing for Health Strategy and the Review of Public Administration.
- Develop assistive technology services
- Implement older people housing policy review action plan.
- Review and update forums of accommodation for older people.
- Implement the recommendations relating to housing arising from the “Including the Homeless” PSI draft report.
- Engage with DHSSPS Disability Taskforce to develop further its recommendations relating to housing.
- Review and update policy and standards for people with a disability taking account of recent legislation and research.
- Implement and develop the final recommendations of the Wheelchair User Housing Study.
- Contribute to PSI groups on Lone Parents, Teenage Pregnancy and Disability.
- Consider the implications for Housing Executive arising from the Mental Health Strategy and the Bamford Review.

The Northern Ireland Anti-Poverty strategy, Lifetime Opportunities, aims by March 2010 to improve the quality of life and independence of people in need, so that 45% of all who require community services are supported as necessary in their own homes.

The Supporting People programme was launched on 1st April 2003. The primary purpose of the programme is to provide housing related support to develop and sustain an individual's capacity to live in their own accommodation.

Now in its fifth year of operation the programme currently funds over 140 provider organisations, delivering services in over 1,000 schemes, both accommodation based and floating support. These services enable some of Northern Ireland's most vulnerable people to live independently and in doing so contribute to the achievement of important national and local objectives.

There are currently over 15,750 vulnerable people receiving housing support services in these schemes and the service user throughput in 2007-08 is expected to exceed 18,000. These include services for 11 main client populations such as:

- Learning Disabilities
- Mental Health
- Older People
- Young Vulnerable People
- Domestic violence
- Homeless
- Ethnic Minorities
- Criminal Justice
- Physical Impairment
- Addictions
- Refugees/Asylum Seeker
- Gay/Lesbian/Transsexual

Prior to the introduction of the Supporting People programme a project team was established in the Housing Executive to manage the implementation process. After the programme was introduced in April 2003, this team was reorganised to perform the Housing Executive's role as the Administering Authority for Supporting People in Northern Ireland.

Drawing housing related support services together in a single programme has enabled a strategic and co-ordinated approach to service provision. The creation of the strategic partnership with Health and Social services and the Probation Board NI has also helped to demonstrate how support fits with health, care and other support services, particularly as a means of early intervention and crisis prevention.

With the announcement of the outcome of the Review of Public Administration, the Housing Executive is preparing for the transfer of the Supporting People programme to the new council structures in 2009. It is also considering the Housing Executive's future role in the programme post 2009 as the Regional Strategic Housing Authority for Northern Ireland.

Research carried out for the Joseph Rowntree Foundation "The Effectiveness of Housing Adaptations" (JRF Findings 2001) reported that major adaptations such as extensions or bathroom conversions had a good impact on the lives of people with disabilities, enabling them to live with a greater degree of independence that brought benefits to health, self esteem and confidence. Housing plays a central role in maintaining the independence of people with a disability, learning difficulties and for people who become frailer or less mobile. Maintaining independence and being able to live life as fully as possible are all important to mental and physical health and wellbeing. Being able to access suitable housing or to adapt current housing can have a direct impact on delivering health and wellbeing, as can accessing relevant support and care to remain in one's own home.

A Housing Executive adaptation in the social housing sector and in the private sector through the Disabled Facilities grant plays a significant part in enabling people to remain independently in their own homes. Each year the Housing Executive completes approximately 2,500 major adaptations to public sector homes and 1,500 to private sector dwellings. Annual expenditure on adaptations has increased greatly within the last two years and is now over £37 million, as the demand for adaptations continues to rise. Expenditure on housing adaptations continues to remain a high priority for the Housing Executive.

In Northern Ireland the Housing Executive and the Community Occupational Therapy Departments within the HSSPS Trusts work together in partnership to deliver a housing adaptations service for people with a disability, to assist them in continuing to live independently in the community. In 2000 the Housing Executive carried out a review of the housing adaptations service in Northern Ireland. Following the review three themes were identified for action:

- Reduction of waiting time for Occupational Therapy assessment.
- Reduction of waiting time for processing and completing adaptations.
- Improving the quality of service.

To facilitate joint working within the review the Housing Executive and DHSSPS jointly funded an Adaptations Liaison Officer post.

A major research project on wheelchair adaptations was completed by the Housing Executive in 2006. This highlighted the major improvements that wheelchair adaptations have made to the health and wellbeing of those who are dependent on wheelchairs and on the lives of their families and carers. It also highlighted deficiencies in data which make estimating future need for wheelchair homes difficult and makes recommendations which will feed into design guidance for future adaptations and newly constructed homes.

A Healthier Future (the new 20 year regional HPSS strategy) sets out plans for the establishment of a DHSSPS Disability Taskforce to develop recommendations for people with physical and sensory disabilities. Issues to be considered by the Taskforce include housing and accommodation options, aids and adaptations, encouraging uptake of direct payment and interagency co-operation.

A partnership approach is essential for meeting the complex needs of households with more than one member with a disability. Any intervention will clearly require an inter-departmental, multi-disciplinary and multi-agency approach.

The DHSSPS Strategy for Children in Need also reinforces the need for a multi-disciplinary approach to the needs of disabled children. The Housing Executive plans to develop a network for people with a disability in relation to housing.

The Housing Executive needs to prepare for the challenges that an increasingly older population will bring. A big factor influencing the work of the Housing Executive will be the expected growth in the number of older person households. We need to ensure that older people will have access to a range of integrated services with tailored care services to meet their changing needs. These developments will recognise that older people would prefer to remain independently in their own homes.

There is a need to agree common performance indicators around supporting older people at home and reducing the use of hospital and institutional care.

Specialist housing services for older people need to be developed around four main areas:

- Information and advice
- Community alarms and assistive technology
- Adaptations and equipment
- Affordable warmth

An emerging area is the need to work collectively on assistive technologies that work. There is a need to look at funding a core package for housing of technology e.g. smoke and fire alarms and security systems, that could be enhanced with health and environmental controls. While the HPSS and the Housing Executive have priorities for research there is a need for joint research to meet the joint agendas of both agencies around e.g. assistive technologies and other areas.

Work has already begun with such groups as the homeless and asylum seekers, using multi disciplinary approaches to provide efficient care packages that make the best use of skills and knowledge of a range of professionals for the benefit of individuals, families and communities. The Housing Executive would wish to work better with those delivering primary care particularly with regard to the health needs of the homeless.

The Bamford Review of Mental Health and Learning Disability (2002) was set up to examine how services for people with mental illness or learning disabilities could be improved. In the past, policy has seen a move from the use of long stay institutions and hospitals, relocating the least vulnerable and dependent into community settings where they would be more independent and enjoy a better quality of life. The Housing Executive response to this policy was to develop a number of the strands including

- New build supported accommodation via the social housing programme.
- Target use of grants e.g. DFGs and adaptations.
- Amendments to Housing Selection Scheme to reflect the complex needs of these vulnerable groups.
- Development of planning frameworks with HPSS.
- Revenue funding initially via housing benefit and consequently under Supporting People Programme including floating support arrangements.

The Housing Executive would also be supportive of a project which would deliver awareness training to primary health care colleagues e.g. GPs. The aim would be to encourage health professionals to see the value that Supporting People services can bring to people living in the community. This approach would free up capacity enabling agencies to make better use of resources.

The Lifetime Opportunities Strategy (2006) also refers to isolated rural communities unable to access services. It highlights the Traveller Community position reflecting how their well-being falls short of the standards enjoyed by the majority of society.

Since taking responsibility for Traveller accommodation in 2003 the Housing Executive has been very proactive in dealing with the needs of the Traveller Community.

<b>Consultation Questions: Objective 2</b>		
1. Do you agree with the recommendations relating to Promoting Independent Living?	Yes	No
2. Do you believe these recommendations go far enough?	Yes	No
3. Further comments		



### Objective 3 - Foster urban and rural regeneration

**“The health of many people has been blighted by the consequence of social, economic and physical disadvantage associated with where they live.”**

People and Place A Strategy for  
Neighbourhood Renewal DSD (2003).

#### Recommendations

The Housing Executive will:

- Continue to support People and Place, the DSD strategy for neighbourhood renewal.
- Implement the remaining 12 areas of the Urban Renewal Programme.
- Contribute to the Sustainable Development Strategy.
- Pilot and evaluate the use of Health Impact Assessment with key stakeholders in major renewal and regeneration initiatives.
- Target vulnerable young people living in disadvantaged areas.
- Implement the recommendations of the Housing Executive review of rural housing policy Rural Homes and People (2002).
- Continue to invest in environmental improvement of our estates.

The link between poor health and deprivation is well documented. The health of many people has been blighted by the consequence of social, economic and physical disadvantage associated with where they live. One in seven of Northern Ireland’s population live in seriously deprived parts of our cities and towns. Many of these people do not enjoy the health they should because of the areas in which they live. Problems combine to create a vicious cycle of decline.

Often those in most need of health and other services are those who have the greatest difficulty accessing them.

It is important that the building of new housing is seen as a holistic package, where health is a consideration alongside transportation, infrastructure, employment and environmental issues. Overall, a key point to note is that poverty, joblessness and poor health are strongly interrelated and therefore health promoting housing environments with good transport links to employment hubs can make a contribution towards better job prospects and reduced poverty. Affordable, safe

housing can directly impact on health, which is also likely to improve job prospects.

DSD published its strategy for Neighbourhood Renewal, “People and Place” in 2003, with the aim to close the gap between the quality of life for people in the most deprived neighbourhoods and that for the rest of society.

The Neighbourhood Renewal Strategy is an area focussed approach that targets the top 10% of the most deprived areas in Northern Ireland. It represents a major shift away from short term funding programmes towards a more planned assessment of and response to local need. Thirty-two renewal areas have been identified for accelerated development across Northern Ireland. Some of the improvements residents of these areas may experience will be better access to health services, initiatives to lower crime in their area, improved education standards or the provision of activities for young people. Historically we have completed over 250 redevelopment/renewal areas since 1971. Twelve areas remain in our current urban renewal area programme.

The Housing Executive has recently completed a grants programme under the Creating Common Ground Consortium funded by the Big Lottery Fund. Evaluation of the programme found the funded projects had made a significant contribution in terms of environmental regeneration, improving community safety and neighbourhood renewal. A programme known as the 40 Most Disadvantaged Communities Programme ran until the end of 2006, which has through local project teams successfully developed cross sectoral partnerships to deliver environmental schemes. In 2001/2002 the Housing Executive launched its Neighbourhood Warden Service and now employs 58 wardens delivering localised housing management services, targeted on our most disadvantaged estates.

A decent home is acknowledged as a key determinant of health, with housing conditions being accepted as affecting both physical and mental wellbeing. The decent homes programme has made a real difference to the lives of tenants by not only making improvements to social housing but also through improved services. Communities and Local Government in England (formerly ODPM), is setting out how it sees social landlords building on the success of the programme. It will work more flexibly to go beyond the Decent Homes programme to undertake more radical solutions to transform some of the poorest neighbourhoods into mixed sustainable communities.



Northern Ireland's first sustainable development strategy addresses six priority areas for action:

- Climate change and energy
- Sustainable consumption and production
- Natural resource protection and environmental enhancement
- Sustainable communities
- Governance for sustainable development
- Communication and learning

Sustainable communities are places where people want to live and work, now and in the future. They meet the diverse needs of existing and future residents, are sensitive to their environment and contribute to a high quality of life. They are safe and inclusive, well planned, built and run, offer equality of opportunity and good services for all.

In building partnerships across Government, other departments and partners in Investing for Health will have a crucial role in implementing A Healthier Future over the next twenty years. Their contribution will be maximised and focused by the use of Health Impact Assessment in the development of all new policies, but their mainstream work will make a very positive impact across a range of key areas.

A clean, safe and attractive environment also supports health and improves quality of life. This has been stressed as an important component in overall satisfaction with housing and regeneration ('Respect and Renewal: A study of neighbourhood social regeneration, Joseph Rowntree Foundation, 2006).

Joseph Rowntree's latest research identifies a strong relationship between the state of the local outdoor physical environment and the level of deprivation. The relationship between housing quality and deprivation is much weaker.

The ten year Strategy for Children and Young People (2006) tasks the Neighbourhood Renewal Strategy to consider the needs of 86,877 children and young people living in targeted disadvantaged areas. Working in partnership, Government aims to improve sustainable economic activity and produce better social conditions through the provision of improved public services and both attractive and safe living conditions in these areas.

Health Action Zones are to be linked to Education Action Zones based on similar principles designed to tackle links between intergenerational disadvantage and educational attainment.

The Housing Executive first developed a rural housing policy in 1991. The current “Places for People” rural housing policy commenced in April 2000 to coincide with the NI Rural Development Programme. Given the current development of a new NI Rural Development programme, it was deemed appropriate to review the Housing Executive’s rural housing policy. Five main themes were identified in the policy review entitled Rural Homes and People. These themes cover almost all aspects of Housing Activity and represent areas of work where the Housing Executive believes it can make a difference in rural areas and include

- Enabling new home
- Building and serving communitie
- Improving existing propertie
- Supporting independent livin
- Contributing to rural development and regeneration

OFMDFM are developing an integrated assessment tool which will incorporate Health Impact Assessment, anti-poverty and equality screening templates to be used as part of their recommended screening process.

<b>Consultation Questions: Objective 3</b>		
1. Do you agree with the recommendations relating to Foster Urban and Rural Regeneration?	Yes	No
2. Do you believe these recommendations go far enough?	Yes	No
3. Further comments		



## Objective 4 - Promoting affordable housing

**“Living in unsuitable housing, as well as worrying over housing costs or finding suitable housing presents significant risk factors for physical, mental and social ill health.”**

Belfast Healthy Cities. Response to Affordability Review,  
Sir John Semple (2007)

### Recommendations

The Housing Executive will:

- Continue to contribute to social wellbeing through the promotion and delivery of affordable housing.
- Work with HPSS and Housing Associations to deliver supported living models in relation to home ownership options for people with a learning disability.
- Recommend that the Lifetime Homes standard be incorporated into Building Regulations.

Over recent years the Housing Executive has been highlighting the shortfall of available affordable housing. That shortfall is now causing rising levels in our waiting lists, rises in the numbers of people in housing stress and rises in homelessness. Our joint submission with housing associations to the Semple Review covered:

- A definition of affordable housing.
- Future need for new house building
- The Planning System
- Land and building (vesting powers etc)
- Extending access to sustainable home ownership.
- Better use of assets.
- Raising standards in the private rented sector.
- Building on the Review of Public Administration.

Access to affordable housing in a safe and decent neighbourhood is an important contribution to a good quality of life and promotes a sense of well being. Similarly choice is paramount according to ones

means, whether that is in social housing, low cost affordable private housing or private renting supported by housing benefit.

Living in unsuitable housing, as well as worrying over housing costs or finding suitable housing, presents significant risk factors for physical, mental and social ill-health. Improved access to housing especially affordable housing is likely to make a contribution towards an overall healthier population. It should be noted that particular risk related to housing difficulties in affording to adequately heat a house and fuel poverty is a much more widespread problem than homelessness or substandard housing. Affordability should include a consideration of heating systems in order to provide the most cost efficient system available.

The growth of the private rented sector has created new opportunities for people looking for a home. The number of properties available for private renting is continuing to grow. The Housing Executive has worked with DSD to produce a strategic framework on private renting. New legislation was introduced on 1st April 2007. The legislation will deal with a number of matters including unfitness, management standards and rent control. The Housing Executive are working closely with a range of key stakeholders in the sector to implement the legislation.

The success of the Housing Executive's House Sales Scheme has meant that over 115,000 people have bought their homes from us. This accounts for more than one fifth of the owner occupied sector and provides an affordable sound investment for first time buyers. The scheme is to be reviewed to make it more sensitive to local need.

The Housing Executive and Planning Service are due to complete the proposed document outlining working processes for applying Policy OS1 in January 2007. On completion, a training course will be rolled out for all concerned parties. The Rathcoole Estate pilot study has been submitted to Planning Service for their consideration. In addition appraisals are being worked up on a number of sites in the Social Housing Development programme.

The Housing Executive is keen to develop with the Voluntary Sector supported living models on a homeownership basis. A similar scheme has existed in England for some time albeit on a small scale involving around 100 dwellings. A number of potential applicants have been identified by Triangle Housing Association and discussions have taken place with NI Co-Ownership and the Society for Mortgage Lenders.

<b>Consultation Questions: Objective 4</b>		
1. Do you agree with the recommendations relating to Promoting affordable housing?	Yes	No
2. Do you believe these recommendations go far enough?	Yes	No
3. Further comments		



## Objective 5 - Building a stronger community

**“The DHSSPS Investing for Health strategy is focussed on creating a shared vision for improving health and wellbeing and reducing health inequalities that exist in our community.”**

Investing for Health Strategy Update (2004).

### Recommendations

The Housing Executive will:

- Review implications of the Governments response to the Hills Report.
- Work with local Councils and other key stakeholders to play our part in the community planning process.
- Implement the recommendations of the Shared Future Action Plan to promote good relations.
- Continue to implement the Community Safety Strategy and strengthen the role of our neighbourhood wardens.
- Promote community empowerment through the Housing Community Network and NITAP.
- Use local community houses to promote our services for community development and health promotion activities.
- Address local needs through the development work of Healthy Living Centres.
- In light of RPA the Housing Executive will review and agree partnership working arrangements with HPSS e.g. Investing for Health, Health Action Zones, Belfast and Derry Healthy Cities, Healthy Living Centres.
- To explore with Investing for Health cross-cutting shared performance indicators through the Community Planning process.

If Objective 3 is to provide the physical infrastructure for sustainable communities, this objective is about developing the social capital and resources to empower people. An important element of the Housing Executive Strategy has been the “Investing for Health” (IfH) strategy which was launched in 2002. It represents a key strategy within the Northern Ireland Programme for Government. The Investing for Health strategy (DHSSPS 2002) was the first major interdepartmental

strategy in Northern Ireland which aimed to tackle health inequalities by focussing on the wider determinants of health. The strategy, which has a 15 year horizon, is recognised as one of the cross cutting priority themes for all Government Departments and is designed to provide a framework for joint working between government departments, public bodies, and voluntary and community groups.

The strategy is focused on “Creating a shared vision for improving health and well being and reducing health inequalities that exist in our community.”

There are seven key areas recognised as the key determinants of health and wellbeing. These are to:

- Reduce poverty
- Improve education
- Improve mental health and emotional well being
- Provide healthy work environments, access to decent, affordable housing, reducing in particular homelessness and fuel poverty
- Improve neighbourhoods and the wider environment
- Reduce accidents in the home on the roads and in workplaces
- Enable people to make healthier choices in relation to their lifestyle.

Strong relationships have been developed between the Investing for Health Teams and Housing Executive staff at both headquarters and district office levels. These partnerships have resulted in a range of locality based models of working, addressing issues such as fuel poverty, supported housing, homelessness, home safety, mental health and well being and environmental improvement. Specific work within localities is reported in the Housing Executive’s Annual District Housing Plan.

The Housing Executive would be willing to facilitate the engagement of its well developed community structure in wider participation in health matters, building on existing relationships such as Investing for Health partnerships, Health Action Zones, Belfast and Derry Healthy Cities, Healthy Living Centres and service user forums. In 2004 Belfast Healthy Cities funded by the EHSSB, led the development of a basket of indicators which are to be used to monitor progress against the Investing for Health goals and objectives across Northern Ireland.

The Healthy Living Centres programme was launched across the UK in 1999 by the Big Lottery Fund with a budget of £300 million. There

are 19 HLCs in Northern Ireland. Focused on deprived areas and run by local partnerships, they provide a range of services to local communities and seek to address the wider determinants of health and health inequalities, such as social exclusion, lack of access to services and socio-economic deprivation.

<b>Consultation Questions: Objective 5</b>		
1. Do you agree with the recommendations relating to Building a stronger community?	Yes	No
2. Do you believe these recommendations go far enough?	Yes	No
3. Further comments		





## **Objective 6 - Deliver better public services**

**“At the heart of our services to customers is the quality and commitment of our 3,000 staff. Successful organisations realise that managing health within the workplace is an important part of doing good business.”**

NIHE Corporate Plan (2007/08 - 2009/10).

### **Recommendations**

The Housing Executive will:

- Implement the Housing Executive Health Promotion Strategy which will introduce the process of Stress Risk Assessments.
- Review provisions in relation to First Aid to ensure the Housing Executive meets legislative requirements and best practice in this area.
- Review its position in relation to the promotion of Health Care Plans within the organisation.
- Adopt a more structured and coherent approach to health promotion activities around smoking, alcohol, healthy eating and physical activity.
- Review and evaluate the Housing Executive’s health screening programme.
- Monitor the Health Promotion Strategy through the Health Promotion and Training sub-committee.
- Introduce a revised policy on ‘phasing in’ to work following illness or injury.
- Review and update family friendly policies for staff.
- Support the planning and delivery of our services and achievement of our six corporate objectives by appropriate research including relevant topics impacting on health and well-being.
- Continue through our research programme to investigate and inform policy development and delivery in terms of housing and health issues.

The Housing Executive’s aim is to deliver the best possible services within a framework of continuous improvement. At the heart of our services to customers is the quality and commitment of our 3,000 staff. Successful organisations realise that managing health within the workplace is an important management function. Having healthy employees is an important part of doing good business. There is much opportunity to improve health both through Government policy and through action in the workplace by employers. A healthier workplace will also pay dividends in terms of reduced absenteeism and increased

productivity. In short a happy, healthy workforce is needed to deliver better public services.

Working for Health is a long term workplace health strategy for Northern Ireland which represents a commitment by Government Departments, employers, Trade Unions, Occupational Health professionals and other key stakeholder's to work in partnership to improve standards of health in the workplace. Working for Health is about assisting those who are out of work due to illness to return to work as soon as possible and for using the workplace as a setting to promote health. The health and wellbeing of its employees is a key concern for the Housing Executive. A Workplace Health Promotion Strategy was approved in May 2006. Its overall strategic aim is to:

'Create a workplace culture that protects, promotes and supports health and wellbeing'.

The Housing Executive has already in place a number of policies aimed at providing support to employees in relation to their physical and/or mental health. These include:

- Staff welfare
- Occupational Health
- Policies on health and safety
- Risk assessment
- First aid
- Substance abuse policy
- Training programme

One area for development is health promotion. Programmes relating to nutrition, physical activity and smoking cessation have been an ad-hoc feature of health promotion to date. It is envisaged that the Health Promotion Strategy will continue to promote these activities across the organisation.

<b>Consultation Questions: Objective 6</b>		
1. Do you agree with the recommendations relating to delivering better public services?	Yes	No
2. Do you believe these recommendations go far enough?	Yes	No
3. Further comments		

## Appendix 1

### **The Housing Executive's Housing and Health Strategy**

Existing research indicates that there is a relationship between poverty, deprivation social exclusion and ill health. In 1998 the Acheson Report, the independent inquiry into health inequalities, explicitly linked poor quality housing with poor health. It recognised that health improvements could only be achieved through a multi-agency approach that tackled the causes of ill health.

The Housing Executive's strategy Housing and Health - Towards A Shared Agenda (2000) drew this research together. It examined existing approaches to addressing some of the worst symptoms of multiple deprivations and made a series of recommendations which formed the basis of the Housing Executive's five year 'Housing and Health Action Plan in 2001.

The strategy provides the opportunity to create healthier living environments and to support healthy lifestyles by:

- Improving the availability of affordable housing across Northern Ireland.
- Supporting people to live independent lives through the provision of supported housing and housing support services.
- Providing aids and adaptations for older people and persons with a disability.
- Addressing the needs of the homeless
- Promoting safety and accident prevention in the home.
- Improving the quality of housing and the environment.
- Alleviating fuel poverty and promoting energy conservation.
- Promoting community safety and reducing anti-social behaviour.
- Fostering good community relations
- Facilitating neighbourhood renewal and urban and rural regeneration.
- Contributing to improving the health and well-being of ethnic minority and migrant worker communities.

The original Housing and Health Action Plan contained 36 recommendations to be achieved over a five-year period. These were reviewed in 2003 to reflect new arrangements created under Supporting People, Investing for Health Partnerships and Neighbourhood Renewal strategies. A Memorandum of Understanding between the Housing Executive and the four Health Boards was

developed to reflect a commitment to closer co-operation and collaboration under these new arrangements.

The 36 recommendations are now regrouped under the following 10 generic themes

- Supporting People and Supported Housing
- Research
- Homelessness
- Adaptation
- Neighbourhood Renewal/Community Safety
- Investing for Health, Health Action Zones/Healthy Cities partnerships/Healthy Living Centres
- Home Accident Prevention
- Ethnic minorities/Travellers
- Rural regeneration
- Fuel Poverty

Substantial progress has been made in partnership working between the Housing Executive and the HPSS in relation to community care, targeting social need and promoting health and social well being. The Strategy has been reported on at six monthly intervals with the Chief Executives of all four HPSS Boards and the Chief Executive and Deputy Chief Executive of the Housing Executive.

Now in its sixth year it is timely to review the Strategy in light of not least the implications of the Review of Public Administration.

## Appendix 2

### Progress

Since 1991 following the publication of 'People First', the Housing Executive had extended and broadened its housing programmes and policies as they affected health and the quality of life of households in Northern Ireland. At the same time the Government had been establishing a new health agenda through proposals to shift the delivery of health care towards a primary care-led service. It was intended to concentrate resources, planning and support at a primary care level, to create integrated health and social care provision closer to where people live in their communities.

The NIHE Housing and Health Strategy recognised that the interaction between Housing and Health went beyond traditional boundaries and that successful health outcomes derive from all the factors affecting the lives of individuals, families and communities in different ways. Significant improvements in a community's health and a reduction in health inequalities can only be realised through improvements to people's social, economic and environmental conditions, supported by appropriate health and social care and action to promote healthy attitudes and behaviours.

Health and wellbeing is influenced by many factors including genetic makeup and lifestyle choices. The latter are not made in isolation but can be influenced by a person's social and economic circumstances. Major health determinants also include

- Housing and neighbourhood condition
- Social and community network
- Access to facilities and services
- Environmental factors

The promotion of health and wellbeing is integrated into the plans and priorities of all Government Departments through the Northern Ireland Executive's Programme for Government (2002) and during direct rule through Government's Annual Plans and Priorities.

In response to this multifaceted aspect of wellbeing, the Government has attempted to ensure that action to improve health and address major health problems, whilst being led by the DHSSPS, is considered and included in the actions of other Departments. At a local level the

role of local authorities and the need to integrate planning for social care services with health has been emphasised.

A great deal of work has been undertaken over the past six years and the key achievements include:

- Successful implementation and ongoing development of the Supporting People programme from April 2003, providing housing support services to 18,000 clients.
- Research relating to health and housing is now an integral part of the Housing Executive's annual research programme and informs policy decisions.
- Development and implementation of the Homelessness Strategy and homeless action plans.
- Adaptations in both social and private housing continue to play a significant part in enabling people to remain independent in their own homes.
- Expansion of the Housing Executive's Community Safety Team to reflect the application of its new statutory powers to tackle anti-social behaviour, including in-house mediation services and the appointment of 58 neighbourhood wardens.
- A Community Cohesion Unit has been established to lead out the Housing Executive's Good Relations Strategy.
- The Housing Executive participates in all Investing for Health Partnerships, Health Action Zones and Healthy Cities programmes.
- The Housing Executive is responding to the Home Accident Prevention Strategy, addressing home safety issues through a number of pilot schemes and staff training.
- Since 2003 the Housing Executive has been very proactive in dealing with the housing support and accommodation needs of the Traveller Community.
- Through its rural policy 'Places for People' the Housing Executive is contributing to independent rural living, particularly for those more vulnerable households.
- The Housing Executive in partnership with others is tackling fuel poverty through its heating upgrading and energy efficiency programmes. These programmes also contribute to improving air quality.

### **Existing interfaces with HPSS**

Much progress has been made in joint working with the health sector across a number of fronts including Supporting People, adaptations and homelessness programmes. It is hoped that this progress will

be maintained and further developed under the new structures, in particular the reduction of the 18 existing Health and Social Services Trusts to 5 Health and Social Care Trusts, with effect from the 1st April 2007. The Housing Executive is also an active partner on each of the Investing for Health Partnerships, Health Action Zones, Healthy Cities and Healthy Living Centres.

It is important that good collaborative working relationships are maintained in this time of change.

## **Appendix 3**

### **Housing Policy in Northern Ireland**

Decent and affordable housing is widely accepted as an important catalyst as a first step towards a sense of individual and community wellbeing, with beneficial consequences in terms of a stable home environment, better health and better educational and employment opportunities.

### **Northern Ireland Housing Market Review and Perspectives (2007-2010)**

The key points arising from the recent Review of the Housing Market are;

- The NI economy is still looking robust, but growth has slowed down UK wide.
- The growing demand for housing in NI
- The waiting list for social housing is up 8% (2005-06) on previous year, and the number of applicants in housing stress is rising.
- Homelessness applicants up from 17,360 (2004-05) to 20,100 (2005-06) and the numbers accepted as homeless have risen from 8,470 (March 2005) to 9,749 (March 2006).
- Housing conditions improved, unfitness down to 3.8%. Repair costs have not declined.
- House sales falling, 3,000 (2004-05) to 2,500 (2005-06) and likely to fall further.
- The private rented sector grew rapidly in 2004 representing 9.0%, up from 7.62% in 2001.
- Repair costs in the private rented sector increased considerably.
- The Annual need for new social housing dwellings continues to be at least 2,000.

Findings from research into the private rented sector found that the sector:

- Is experiencing much higher turnover.
- Is increasingly dominated by younger households.

In terms of demographics the review highlighted;

- The growing number and proportion of people of pensionable age.
- The projected increase in the number of people aged 74 and over.
- The declining number and proportion of children under 16.
- The Housing Executive has sold 115,000 homes, accounting for one fifth of owner occupiers.



- International migration is also starting to have a significant impact
- The demographic profile has important implications not only for the number of new dwellings required, but also their design and the growing need for housing support services to help older people live independently in their own homes.

The Government's Affordability Review led by Sir John Semple seeks to address the difficulties for first time buyers trying to purchase their own home, by a combination of policies in relation to planning regulations, support for co-ownership, an adequate social new build programme and facilitating the private rented sector. The Research Unit (Housing Executive) contributed to the Review and affordability is also a key element to the Second Homes research underway.

The 2004 House Condition Survey confirmed the steady progress made in improving housing conditions and energy efficiency over the previous three years. It also highlighted the need for adequate ongoing investment to ensure that the gains made are not undermined and the important social goals of alleviating fuel poverty and bringing all social dwellings up to the Decent Homes Standard by 2010 standard, can be successfully achieved.

The "Priorities and Budget" 2006-2008 document reaffirms the Government's ongoing commitment to giving everyone access to decent affordable housing despite the expected reduction in Government's funding for housing.

The Department for Social Development published its strategy for Neighbourhood Renewal, entitled 'People and Place' in June 2003. The overall aim of the strategy is to help close the gap between the quality of life for people in the most deprived neighbourhoods and that for the rest of society. It aspires to tackle the complex, multi-dimensional nature of deprivation in an integrated way.

In January 2003 the Northern Ireland Office issued a consultation paper on improving community relations in Northern Ireland, entitled 'A Shared Future'. This document sets out a number of specific policy aims including the following:

- To support the development of integrated/shared communities where people wish to learn, live, work and play together.
- To reduce tension and conflict at interface areas.

Northern Ireland's first Sustainable Development Strategy First Steps Towards Sustainability (May 2006), focuses on the most deprived neighbourhoods, creating opportunities locally for people to improve their environment, health, education, job prospects and housing.

### **National Housing Strategy and Policy**

The Labour Government launched two five year plans in 2005 which formed £38 billion action programmes to create sustainable communities, to deliver decent affordable homes for all, in places in which people want to live and work.

### **Sustainable Communities Homes for All (January 2005)**

This sets out the action to be taken to offer everyone the opportunity of a decent home at an affordable price, providing more homes where they are needed, whilst enhancing the environment and revitalising communities suffering from abandoned housing and deprivation. Homes for All offers more opportunities for home ownership, better housing and services for those who rent and secure housing for the homeless.

### **Sustainable Communities People, Places and Prosperity (January 2005)**

This sets out action to revitalise neighbourhoods, strengthen local leadership and increase regional prosperity to create places in which people want to live and work.

In January 2007 Government announced proposals for a new agency to deliver regeneration and housing in a major shake up of the way it supports the delivery of new homes and develops mixed, sustainable communities in England. The proposed agency Communities England, brings together the functions of English Partnerships, the Housing Corporation and a range of work carried out by the Department, including delivery in the areas of decent homes, housing market renewal, housing PFI, housing growth and urban regeneration. Communities England will pioneer innovative and more efficient ways of working with key partners in the public, private and voluntary sector to achieve better outcomes from public investment.

### **Ends and Means - John Hills (February 2007)**

The Hills Report comprises an independent review of the current state of social housing in England, which was commissioned by the Secretary of State for Communities and Local Government to 'stand back and ask what role social housing can play in 21st century housing

policy.’ It includes coverage of housing needs, the availability of affordable housing, compares housing supplied by landlords and local authorities and housing associations and considers how the supply of social housing can be maintained to promote social and geographical mobility.

Greater emphasis on the elimination of health inequalities and on health outcomes are key features of the present Government’s approach. A major Whitehall Review headed up by the Prime Minister is to scrutinise how the future of arms length management organisations can be secured. Mr Blair wants improved housing to be part of his legacy. He has acknowledged the wider role housing has played in meeting his policy objectives in education, health and crime.

Derek Wanless is to chair a wide ranging review of the future cost of mental health care commissioned by the Kings Fund. He will lead an inquiry that will seek to estimate the number of people with mental disorders and the expenditure required to deal with them between 2007 and 2026. The remit will cover children and adolescents. It will examine NHS and social care costs and the cost of mental illness on areas such as housing, education and criminal justice.

### **Review of Public Administration Northern Ireland**

The Government’s decision arising from RPA to reorganise local government into larger councils with effect from 2009, will put in place new structures for Councils and the Health and Education sectors. These Councils will have a new range of increased powers and functions including community planning. In March 2006 the Secretary of State made further announcements, which include the transfer of a number of functions from the Housing Executive to the proposed Councils. These functions include Grants, Home Energy Conservation, Supporting People, Traveller sites and regeneration. The Government has stated that for the foreseeable future the Housing Executive will continue to be the Regional Strategic Housing Authority.

## Appendix 4

### Key Policies Influencing Housing and Health

Historically health and social services was centred on a reactive model of ill health. However there has been a strong social and economic case for a move towards prevention and tackling poverty and inequalities, where people take more responsibility and ownership of their health and are more empowered in relation to improving individual and community health and wellbeing.

Government policy on health has been shifting its focus since the 1990's from tackling disease to improving the health of the worst off in society and reducing health inequalities as seen in the Acheson Report (1998). The Wanless report (2004) focused attention on how deprived communities might become more fully engaged in their own health. Since then the pressure to speed up reform is evidenced in a succession of White Papers, seven in all, under the present government, culminating in "Our Health, Our Care, Our Say" (2006). After several years of reforms aimed at the acute sector this represents a fundamental shift towards integrated services provided in local communities.

In Northern Ireland we have come a long way from the 1990's when People First set out proposals for improving the management and delivery of Community Care that enabled people to remain at home, who might otherwise have gone into residential care. The Programme for Government (2000) set out its priorities which included Working for a Healthier People. It was recognised that work across Departments was necessary to improve health and tackle current inequalities. Likewise it recognised that a good environment is essential for a good quality of life and health.

Investing for Health (2002) set the public health agenda for taking forward the principles of Well Into 2000 and is supported within the themes outlined in the Programme for Government. It placed greater emphasis across departments, agencies, community and the voluntary sector to develop joined up programmes and initiatives to improve health and reduce inequalities. It is estimated that preventable ill health accounts for over 6,500 avoidable deaths per year in Northern Ireland.

Investing for Health links to a number of policies, programmes and services which impact on housing and relate to the needs of many

vulnerable groups e.g. Homeless people, victims of domestic violence, people with mental health problems, substance misuse issues, older people or those with a disability with specific health and social care requirements. Their needs have been reflected in a number of recent strategies developed by DHSSPS. There are moreover, unacceptable inequalities in health often associated with socio-economic status and disadvantaged areas. Addressing this through the Investing for Health Strategy remains a key priority for HPSS. The Ministerial Group on Public Health has been recommended to oversee and monitor its implementation and a mid-term review due in 2008 will help to evaluate progress.

The DHSSPS long term health and social care strategy, *A Healthier Future* (2004), sets out a vision for health and wellbeing for Northern Ireland over the next twenty years. It places a strong emphasis on promoting public health and greater engagement with people and communities, in developing more flexible and efficient ways of providing responsive and integrated services aimed to treat people in communities rather than in hospital. Promotion of health and wellbeing is now integrated into the Programme for Government and is supported by the Priorities for Action 2006-2008. Other health policy commitments which promote health and wellbeing through other departments and agencies include the Primary Care Strategy (2003), the Independent Review of Health and Social Care Services in Northern Ireland, (also referred to as the Appleby Review (2005)) and the Bamford Report (2006). Furthermore the government has stated that its objectives can only be met through partnership working arrangements with the voluntary and community sectors. Consequent to the Appleby Review, the Review of Public Administration set in train major changes in the structure of health and social services with an emphasis on joined up services that are patient led, less bureaucratic and more efficient all round.

Northern Ireland's Social Inclusion Policy encourages government departments to form interdepartmental groups and work together with social partners to identify and tackle factors which contribute to social exclusion. It aims to undertake positive initiatives to improve and enhance the life circumstances of the most deprived and marginalised people in our community. A number of PSI (Promoting Social Inclusion) working groups were formed to develop action plans around the Traveller Community, older people, disability, pregnancy, lone parents and homelessness.

Successive TSN (Targeting Social Need) policies looked at inequalities in health and social care, promoting social inclusion in areas of high social and economic deprivation, to empowering people to improve the quality of their own health and wellbeing through proactive approaches. Promoting Social Inclusion (PSI) is an important element of the Wider Lifetime Opportunities - the Government's current anti-poverty and social inclusion strategy (November 2006).

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