WHO HOUSING AND HEALTH GUIDELINES

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Improved housing conditions can save lives, prevent disease, increase quality of life, reduce poverty, help mitigate climate change and contribute to the achievement of the Sustainable Development Goals (SDGs), including those addressing health (SDG 3) and sustainable cities (SDG 11). Housing is becoming increasingly important to health due to demographic and climate changes. The world’s urban population is expected to double by 2050 and will require housing solutions. The world’s population aged over 60 years of age, who tend to spend more time at home, will also double by 2050. Changing weather patterns, associated with climate change, underline the importance of housing providing protection from cold, heat and other extreme weather events in order to promote resilient communities.

Housing can expose people to a number of health risks. As discussed in the WHO Housing and health guidelines (HHGL), structurally deficient housing increases the likelihood that people slip or fall, increasing the risk of injury. Poor accessibility to their house puts disabled and elderly people at risk of injury, stress and isolation. Housing that is insecure, sometimes due to affordability issues or weak security of tenure, is stressful. Housing that is difficult or expensive to heat contributes to poor respiratory and cardiovascular outcomes, while high indoor temperatures can cause heat-related illnesses and increase cardiovascular mortality. Indoor air pollution is connected to a wide range of noncommunicable disease outcomes, harms respiratory and cardiovascular health, and may trigger allergic and irritant reactions, such as asthma. Crowded housing increases the risk of exposure to infectious disease. Inadequate water supply and sanitation facilities affect food safety and personal hygiene, and therefore lead to the development of communicable diseases.

The quality and environmental context of housing are some of the main dimensions of environmental inequalities. Poor housing conditions are one of the mechanisms through which social and environmental inequality translates into health inequality, which further affects quality of life and well-being.

In response to the above, the HHGL bring together the most recent evidence to provide practical recommendations to reduce the health burden due to unsafe and substandard housing conditions. They provide new guidance and recommendations relevant to inadequate living space (crowding), low and high indoor temperatures, injury hazards in the home, and accessibility of housing for people with functional impairments. In addition, the guidelines identify and summarize existing WHO guidelines and recommendations related to housing, with respect to water quality, air quality, neighbourhood noise, asbestos, lead, tobacco smoke and radon.

Drawing on a broad range of newly commissioned, or recently published, systematic reviews of the scientific literature, the guidelines apply strict criteria for assessing the quality of available evidence and its suitability for developing recommendations. The recommendations focus particular attention on reducing risk factors, while also recognizing the importance of key interventions. They encompass general considerations for policy and good practice recommendations for addressing health problems. The quality of the evidence is rated based on the risk of bias (and other quality features) in the included studies, inconsistency of results, indirectness, imprecision and other factors deemed relevant. Table 1 presents the new guidelines’ recommendations.

The guidelines aim at informing housing policies and regulations at the national, regional and local level on the impact of housing on health. Therefore, the main target audience for the guidelines is policy-makers who are responsible for housing-related policies and regulations, enforcement measures, and initiating intersectoral collaboration that seeks to support healthy housing from a government perspective.

The guidelines are also intended to be relevant in the daily activities of implementing actors such as government agencies, architects, builders, housing providers, developers, engineers, urban planners, industry regulators, financial institutions, as well as social services, community groups, and public health professionals. These stakeholders are directly involved in the construction, maintenance and demolition of housing in ways that influence human health and safety.

While the guidelines provide global recommendations, their implementation and prioritization will vary depending on local contexts and will require national, regional and local adaptation.
Table 1. Recommendations of the WHO Housing and health guidelines

<table>
<thead>
<tr>
<th>Topic</th>
<th>Recommendation</th>
<th>Strength of recommendation</th>
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<tbody>
<tr>
<td><strong>Crowding</strong></td>
<td>Strategies should be developed and implemented to prevent and reduce household crowding.</td>
<td>Strong</td>
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<tr>
<td><strong>Indoor cold and insulation</strong></td>
<td>Indoor housing temperatures should be high enough to protect residents from the harmful health effects of cold. For countries with temperate or colder climates, 18 °C has been proposed as a safe and well-balanced indoor temperature to protect the health of general populations during cold seasons. In climate zones with a cold season, efficient and safe thermal insulation should be installed in new housing and retrofitted in existing housing.</td>
<td>Strong</td>
</tr>
<tr>
<td><strong>Indoor heat</strong></td>
<td>In populations exposed to high ambient temperatures, strategies to protect populations from excess indoor heat should be developed and implemented.</td>
<td>Conditional</td>
</tr>
<tr>
<td><strong>Home safety and injuries</strong></td>
<td>Housing should be equipped with safety devices (such as smoke and carbon monoxide alarms, stair gates and window guards) and measures should be taken to reduce hazards that lead to unintentional injuries.</td>
<td>Strong</td>
</tr>
<tr>
<td><strong>Accessibility</strong></td>
<td>Based on the current and projected national prevalence of populations with functional impairments and taking into account trends of ageing, an adequate proportion of the housing stock should be accessible to people with functional impairments.</td>
<td>Strong</td>
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As a result, implementing the guidelines entails political will and coordination between different levels of governance: local, state and central governments; government departments; the health, private, nongovernmental and community sectors; and support and input from international development and finance organizations. It requires taking into account the need to address the social determinants of health, empower communities, tackle social and health inequalities, align local and global actors, and monitor.

WHO is preparing web-based guidance and tools that build on the evidence used to inform these guidelines and will work with Member States to support the implementation process through its regional and country offices.
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