

Challenging unsuitable housing

Reflections from
research with twenty
50-70 year olds living
in homes which do
not fully meet their
needs 2020

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in partnership with:

Ipsos MORI



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Executive summary

Background

This research explores the experience of twenty people aged between 50-70 living in homes that do not meet their needs. The findings highlight the toll that a damp, cold and inaccessible home has on daily life. And yet these experiences are a reality for over two million households in homes occupied by someone aged over 55 in England that do not meet basic decency standards¹. Although these problems are pervasive, some are also relatively cheap to solve: around one third of all non-decent homes could be repaired for £1,000².

The Good Home Inquiry, commissioned and supported by the Centre for Ageing Better, aims to provoke significant change and improvement in the quality of our existing homes. A key objective is to have one million fewer non-decent homes in England by 2030. The inquiry is also exploring what it means to live in a good quality home and understand what really matters to people's health and wellbeing. This research will feed into the inquiry to ensure the recommendations are grounded in the lived experience of those affected.

Key findings

Despite being recruited to the study on the basis that their home did not meet their needs, participants broadly felt positively about where they lived. We found that issues within the home were not always recognised due to:

- **Strong feelings of attachment to their current property.** Those living across the tenures had typically invested significant amounts of time, effort and money making a home their own. They were proud of what they had achieved, and emotionally attached to where they lived – feelings which had actually increased during lockdown, in some cases.

1 A home is defined as 'decent' or 'non-decent' according to a set of technical measures, including whether or not it: Has specific hazards that pose a threat to occupants' health or safety (risk measured using the Housing Health and Safety Rating System).2. Is in a reasonable state of repair. 3. Has reasonably modern facilities (e.g. has a kitchen that is 20 years old or less). 4. Has a reasonable degree of thermal comfort (e.g. efficient heating and effective insulation).

2 Centre for Ageing Better. 2020. Home and Dry.

- **A reluctance to think about possible negative future scenarios in their homes.** Even in the face of challenges, participants were keen to focus on the positives and appreciated the home they had, even if it was not perfect. Many did not view themselves to be ‘old’ enough to require adaptations, or at a point in their lives where they needed to think about taking such steps in their homes.
- **Limited awareness of the impact of issues.** While worrying in the abstract about the effect of problems such as damp, mould and cold homes, participants tended not to appreciate the extent of the potential health implications. This – combined with a tendency towards optimism and a lack of certainty about the future – often resulted in delays and inaction.

On further exploration, participants described significant problems and hazards in their homes, with many identified as issues that would likely get worse as they aged. The impacts of living with these problems were wide-ranging and significant: affecting personal finances, social connections, mental and physical health. Issues were grouped into three overarching themes:

1. Difficulties staying **warm and dry** at home, caused by issues relating to damp, mould, heating and insulation. These issues took a significant emotional toll as the cold and damp made participants feel miserable in their own homes. The perceived cost of investing in long-term solutions prohibited many from investing in changes, particularly owner occupiers who worried about affordability. This included scepticism about the potential savings of eco-friendly adaptations such as solar panels referred to by a few participants. Concerns about the costs of longer-term solutions often led to a focus on short-term fixes – such as cleaning or repainting – to address issues for now.
2. Problems when **moving around a home.** The accessibility of the home had a substantial impact on participants’ health and wellbeing. There was a strong sense – especially seen among those with declining mobility – that aspects of their home would become less suitable for them as they grew older. For some this was already a reality: they resorted to staying on one level as far as possible during the day or were forced to wash in the kitchen due to the inaccessibility of a bath.
3. Concerns around the **safety and security of a home and the local area.** Anxieties about security – within the property and within their tenure – had a clear impact on how participants felt about their home. Issues such as insecure front doors, animal infestations and not feeling safe in a local area also had implications on their feelings of comfort, security, and mental wellbeing. Predictably, living close to family and friends was a key contributor to satisfaction with a home, especially important for those with limited mobility or health conditions.

These issues were seen across tenure types. However, the barriers to addressing these problems – and subsequently the proposed solutions – differed according to housing tenure.

- We used a behavioural approach to understand participants' motivations for making changes in their home. This highlighted the role of the **wider situation and context** for making decisions, such as their financial situation, housing tenure and the structure of a property; their **attitudes**, including trust, confidence and expectations for the future; and their **knowledge** of where and how to seek support. In particular:
- The **affordability** of maintenance and renovations was a major barrier for owner occupiers which often resulted in putting off decisions to avoid the financial cost. As such, financial support options, such as grants or loans, were viewed as critical to enable repairs and adaptations for later life.
- **Housing tenure** meant that renters felt more restricted in what they could do to their homes. They often lacked confidence in their landlord or housing association's ability and willingness to make changes. The fear of being evicted at short notice often prevented private renters from asking for repairs or reaching out to other bodies, such as the council, as they were worried about the repercussions of making a complaint. As such, private renters wanted to see greater regulation and professional standards for landlords to ensure the maintenance and upkeep of a property.

While participants recognised the need for professional help, there was significant **distrust of tradespeople and limited awareness of where to find impartial advice**. This resulted in a reluctance to commission support, particularly among homeowners who worried about the cost. As such, participants wanted greater regulation of the sector and accreditation processes. They also suggested signposting of affordable, high-quality providers from impartial bodies such as the local council, to ultimately increase trust and make it easier to identify a suitable, qualified professional.

Recommendations

Based on this research, we have three key recommendations for supporting people to live in a home that meets their needs.

1. Solutions to poor quality homes need to be tailored by tenure type.

The experiences and solutions for owner occupiers, private renters and those living in social housing differed depending on the tenure. Private and social renters identified a need for systemic changes such as greater regulation, inspection and autonomy in their homes to make them suitable for their individual needs. In contrast, owner occupiers wanted financial support and information to help make the changes they felt they needed including verification systems to help them identify trusted professionals. **Solutions therefore need to be targeted and tailored to all housing tenures.**

2. There is a need for greater financial support options, particularly for homeowners.

While a key challenge for owner occupiers, financial barriers also applied to renters who worried about requesting expensive adaptations or repairs. Participants wanted to see universal financial support options that could help individuals make the changes required to remain in their home for longer. This could be in the form of a grant or loan with grants targeted at those who need financial support the most – whether because of their financial situation, lack of savings, extent of disrepair, or changing accessibility needs due to a health condition. **Financial support options should be accessible to all older people in some form to enable them to make the necessary changes to their home.**

3. Interventions should take account of the role of individual attitudes and identity in making repairs or renovations to a home.

Based on this research, it seems unlikely that financial options or greater information and signposting would be effective in isolation. We heard how many participants fundamentally do not perceive themselves to be in need of support and felt largely satisfied with their homes despite significant hazards. This was often based on:

- **A strong emotional attachment to their home** making it important to **selectively use language** and avoid terms such as ‘non-decent’ or ‘poor quality’.

- **Limited identification of problems and/or understanding of the impact.** Schemes to assess a home for hazards, accessibility needs and wider requirements such as energy efficiency could help individuals to take steps to future proof their home. Measures such as ‘**home MOTs**’ could also provide opportunities to raise awareness of the support available as well as the potential benefits renovations could have on their health and wellbeing.
- **Significant optimism biases and a reluctance to consider more negative futures**, particularly in relation to their mobility and health needs. **Reframing the conversation around adaptations and maintenance as steps to take ownership of the future** could help encourage action. This may benefit from using language associated with a prevention mindset that empowers individuals to effectively manage risks.
- **Not identifying as ‘old’** and therefore not perceiving themselves to be at a point in their life where they needed to consider measures to future-proof their homes. **Key life transitions, such as retirement, or health appointments could be used as milestones to provide information and encourage people to reflect on their future needs.**

The COVID-19 pandemic has given people a greater sense of their homes and the extent to which they meet their needs. Spending significant amounts of time at home means that we have become more attuned to ideas about how our homes can work better for us. **Action should therefore be taken to help facilitate people entering later life to feel more confident and empowered to make their homes more suitable for the future.** While many of the suggested recommendations would be reliant on funding to resource such measures, ultimately these actions could both save the NHS money while also improving the health, wellbeing and connections of millions of people aged over 55 living in homes which do not currently meet their needs³.

3 Centre for Ageing Better. 2020. Home and Dry: the need for decent homes in later life.

Introduction

Background

The COVID-19 pandemic has thrown the importance of where we live into sharp relief. With people spending more time at home, the standard and functionality of where we live matters more than ever. Yet of the 4.3 million homes in England that do not meet basic decency standards⁴, half are occupied by someone aged over 55. Across the country overall, one in five people aged over 75 live in a non-decent home⁵. This not only poses mental health problems – research conducted over the summer of 2020 found that just over a third of 50-70 year olds state that their mental health has deteriorated as a result of the pandemic⁶ – but there are physical health issues raised too. To illustrate, the impact of excess cold and hazards that could result in a fall are widespread problems in homes across England⁷. Although these problems are pervasive, some are also relatively cheap to solve: around one third of all non-decent homes could be repaired for £1,000.

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- 4 A home is defined as ‘decent’ or ‘non-decent’ according to a set of technical measures, including whether or not it: Has specific hazards that pose a threat to occupants’ health or safety (risk measured using the Housing Health and Safety Rating System). 2. Is in a reasonable state of repair. 3. Has reasonably modern facilities (e.g. has a kitchen that is 20 years old or less). 4. Has a reasonable degree of thermal comfort (e.g. efficient heating and effective insulation)
 - 5 Centre for Ageing Better. 2020. Home and Dry.
 - 6 Centre for Ageing Better. Ipsos MORI. 2020. The Experiences of People Approaching Later Life in Lockdown.
 - 7 Centre for Ageing Better. 2020. Home and Dry.

While the long-term safety of a home is essential, a home should be more than this

The Centre for Ageing Better asked Ipsos MORI to explore the lived experiences of people aged between 50-70 who live in homes that do not meet basic standards. We worked with twenty participants to understand more about:

- The relationship that people approaching later life have with their home;
- The impact of the problems they have with their home on their health, wellbeing, financial security and social connections;
- Their ability to access help and support to improve their living situation, and an analysis of the barriers that stops them from doing this.

This research contributes to the Centre for Ageing Better's two programmes on housing which explore existing and new homes. Their aim is for more people to live in safe and accessible homes that help them to live independently for as long as possible.

It is also feeding into the Good Home Inquiry which is exploring why so many of England's homes are in poor condition and hazardous to health. The inquiry aims to provoke significant change and improvement in the quality of our existing homes and a key objective is to have one million fewer non-decent homes in England by 2030. It is also exploring what it means to live in a good quality home; understanding what really matters to people's health and wellbeing. The intention is to ensure that recommendations are grounded in the lived experience of those affected. The research also sought to understand the behaviours and motivations linked to making changes or seeking support in relation to a home, and how this may inform policy development.

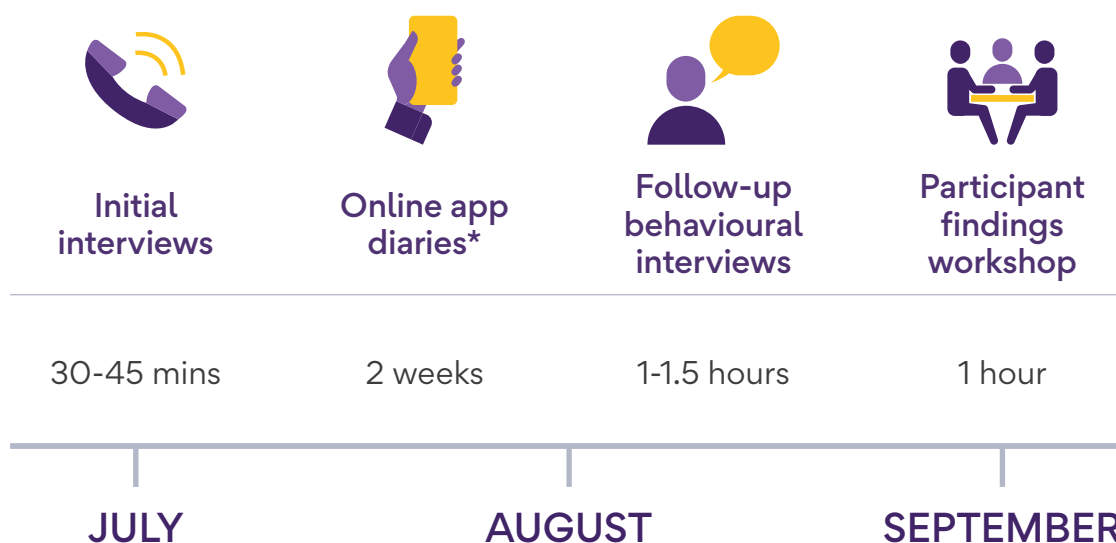
Our approach

We took a longitudinal approach to explore people's experiences of their homes. This involved:

- An initial telephone interview with twenty participants to understand their current situation and the reasons why they live where they do.
- A two-week online diary using Ipsos MORI's research tool, AppLife. Participants downloaded the app to their phones and used this to keep a diary about their home.
- A follow-up interview which used a behavioural framework to explore what might help overcome the barriers people face with regard to accessing help and support.
- An online workshop to share our initial findings with participants and get their thoughts on what the final report should focus on, to ensure they were included throughout the research process. Four participants were able to attend this session.

Participants, aged between 50 and 70, were purposively selected to ensure diversity. We recruited people from across England with a mix of gender, ethnicity, socio-economic group, housing tenure, living situation and type of home. All participants lived in a home that did not meet their needs. We used a broad definition when classifying homes in this way, encompassing issues with digital connectivity and the local neighbourhood as well as problems such as damp, cold, shortage of space, uneven surfaces, noise and a lack of natural light. More detail on the sample recruited can be found in the Annex.

20 longitudinal interviews



*With paper diary option available

How to read this report

We have focused on the lived experiences of people and the relationship they have with their home. It is structured in three main sections:

1. Detailed findings about the experience and impact of different issues within the home, covering three key areas: Warm and dry, moving around the home, and feeling safe, settled and secure at home.
2. The barriers and enablers that participants identified for making changes to their home, which also sets out what might support people – both now and in the future.
3. Our reflections on the study as researchers and recommendations for further consideration.

Qualitative research is designed to be exploratory and provide insight into people's perceptions, feelings and behaviours. The findings are therefore not intended to be representative of the views of all people who may share similar characteristics. Anonymised verbatim quotes have been used to help illustrate key findings, but these quotes do not necessarily summarise the views of all participants that we spoke to. Case study illustrations have been used throughout the report to highlight individual stories and demonstrate the impact of problems in their home.

01. What do the problems look like?

Warm and Dry

What is the problem?

Living in a cold, damp home has a significant impact on both physical and mental health⁸. In winter, around one in five excess deaths are attributed to cold housing in England⁹. This figure may rise in 2020 as extended exposure to damp and mould is likely to increase vulnerability to COVID-19. Despite these risks, millions of older adults live in cold, damp or mouldy homes.

What did we find?

Homeowners, social, and private renters all struggled to heat their homes adequately. During the research, we heard how the cost of heating prevented people from feeling warm at home, deciding to put on extra layers or use electric heaters instead of increasing the temperature. Many also struggled with keeping problems with damp or mould under control. Damp was often caused by condensation, faulty windows and leaking roofs.

While there was an abstract concern about the impact on their physical health, these issues primarily took an emotional toll. The cold and damp made people feel miserable in their own homes. However, participants often resorted to short-term fixes – such as cleaning or repainting – due to the perceived cost of long-term solutions. The situation often led them to feel helpless, causing significant stress and anxiety about their financial situation as well as shame at the state of their home.

8 MIND. 2017. Brick by brick: A review of mental health and housing.

9 Geddes et al. (2011) The Health Impacts of Cold Homes and Fuel Poverty. Friends of the Earth and Marmot Review Team, London.

Heating a home

Two million households headed by someone over 65 find it difficult to heat their home and it is estimated that over £300 million is spent on the cost to people's health as a result¹⁰. This was echoed in our research as participants described how cold their homes are – even in summer. The reasons for this varied: heating appliances were inefficient or expensive to run, homes were poorly insulated or had draughty windows. But the impact of this on wellbeing, mental health and finances was consistent and widespread.

“When it gets to July and you’ve got to put the heating on, it’s like ‘no we’re not doing that’ so we just put extra layers on. It is a problem.”

F, 57, rural, owner occupier

Participants living in cold homes often preferred to put on more layers to avoid increasing the cost of their bills. However, the trade-off between household finances and feeling cold made them “miserable” and “overwhelmed” and resulted in some keeping their heating turned off. To illustrate, one participant living in social housing described how she spent three quarters of her income on rent, repairs and other living expenses. The only time she felt justified in turning the heating on was when her granddaughter stayed. When alone, she resigned herself to constantly feeling cold.

Other appliances used to heat homes included oil pumps, oil boilers, storage heaters and electric fires where participants did not have central heating installed or wanted extra warmth in certain parts of the house. However, these required regular maintenance and professional support which was not always affordable or easy to find – the latter cited as a barrier explored in more detail in the following section. This also led to concerns about the safety of older appliances.

¹⁰ Centre for Ageing Better. 2020. Home and Dry: the need for decent homes in later life, p9

“It’s having to be serviced every two years or so, it’s well past its sell-by date... It’s blowing out exhaust fumes... It became clear that it would wear out like a car because it has a combustion engine.”

M, 66, rural, owner occupier

Gas boilers were also seen to need regular maintenance, but those who had one admitted to rarely having it serviced. Again, participants – particularly homeowners – were concerned about the financial impact of maintenance and repairs and so put off decisions rather than take steps to maintain the boiler in enough time. They also described taking their central heating for granted, even in cases where appliances were clearly declining.

“When something has been going for a few years, you forget it’s going to break until it does. Because it is in a cupboard, hidden away like magic. You look in the booklet and see it was installed in 2003 and that is why it broke. If it is out of sight it is out of mind.”

M, 56, suburban, owner occupier

Richard *“Until we replace the old boiler we can’t get the room to work as we want. We have been discussing plans to make changes and when we seek Government Grants to replace the boiler, it seems that one can only benefit if one claims state benefits!”*

“The biggest issue we have in the winter is the archaic oil boiler that supplies out heating. It has no timer clock, so that necessitates one of us to manually switch the heating on and off. It can be problematic on really cold mornings when the duvet is our best friend.”

“It does blow out exhaust fumes, which are very harmful to the environment. I’m just absolutely gobsmacked that there is nothing anywhere to support us to remove something that is helping to destroy the atmosphere. But we can’t find anybody to help us replace it with something green and clean.”



Age band: 65 - 69
Ethnicity: White
Region: East Anglia
Job status: Retired
Housing status: Owns home outright



Richard and his wife have lived in their family home for over 20 years, although their adult children have since moved out. They like their home and enjoy the rural location, but have an old, inefficient boiler that they would like to replace. It came with the house and they noticed there were issues with it within the first year of living there. The tank is situated ‘dangerously close’ to their lounge, which he does not believe adheres to current regulations. The boiler is ‘well beyond its self-by-date’ and doesn’t have a timer, which means it must be switched on manually.

Richard acknowledges this could be resolved by installing a timer, and explains that the main issue is that the boiler is having to be serviced and repaired about twice a year. The boiler recently had a leak and it resulted in an oil spill that took a long time to get rid of. It blows out diesel smelling exhaust fumes, which he knows is harmful for the environment and is also unpleasant for himself and his wife. Richard describes the boiler as being an ‘essential’ change that needs doing, but it is dependant on whether or not they can afford to have it replaced, as it will cost around £3-4,000. He is ‘gobsmacked’ that they can’t access any financial support to help them replace the boiler with something more environmentally friendly. They recently saw an advert about a new scheme introduced by the government to make homes more economical and green, but it is only eligible for those on benefits. Richard explained how he has never claimed benefits and now feels like his is being penalised for this, as when they need support they can’t get it; ‘we qualify for nothing’. He also has concerns about getting experts in, as he fears they may overcharge him.

Damp and mould

The 2017 English Housing Survey estimates that over 23 million households in England have some form of damp or mould¹¹. This was a major problem for those involved in the research, with damp, mould and condensation frequently mentioned as a concern across housing tenures. Not only did this result in anxiety about the possible impact on physical health, particularly for those with existing conditions including asthma, but there was also an emotional toll. Participants felt embarrassed and ashamed of the mould and damp in their home and frustrated by the difficulties they faced resolving the problem.

In many cases, participants had been living in damp homes for a prolonged period. Mould had often reappeared despite efforts to address it by cleaning, repainting or, in the case of renters, asking their landlord to look at the issue. Not being able to fully get rid of the problem caused frustration and feelings of helplessness among those living across tenures. They were at a loss to what more they could do to resolve the problem.

“The landlord just gets it done in his own time... He just wipes it off and tells me to wipe it and that’s it. There’s obviously a problem there, why are we getting so much mould and damp? The mould still finds a way in.”

F, 58, urban, private renter

To illustrate, one private renter was experiencing dampness and black mould throughout their whole house, including the bedrooms and kitchen. She found that wallpaper would not stick to the wall and that the mould was spoiling food in the cupboards. The mould had also destroyed her clothes and shoes after it got into her wardrobe, as well as her late father’s belongings which were irreplaceable. She felt overwhelmed by the problem and like she was “fighting a losing battle”, despite asking for help from her landlord.

Another, a social renter, was told her housing association would replace the “old-fashioned” windows several years ago to prevent mouldy and damp patches reappearing. This had not been done and she was not allowed to repair the windows herself. This left her feeling hopeless and frustrated by the situation, without any agency to make the changes she needed.

11 English Housing Survey. 2017.

“This has been, I’d say, about four or five years now I’ve had this problem... They came out and cleared the guttering at the front, but then they came out in the summer, so that I never knew until the winter whether it was going to be any good or not... But no, it’s not done the job. It’s come back again.”

F, 56, suburban, social renter

Problems with condensation and damp had a knock-on effect on other hazards in the home. Pools of water created slippery surfaces, causing participants to worry about falling. In one case, excess damp and condensation had also resulted in damaged electrics. The private renter described how significant water damage in his cellar had affected the electricity distribution board stored there. Several of the sockets in his home no longer worked which he suspected was a result of corrosion to the circuit board affecting his electrics. To overcome this, he used several adapters to connect appliances throughout the home. Although this had not been checked by an electrician, he was not particularly worried about the situation as he felt the adapters were designed for this purpose and this solution had worked to this point.

Across tenures, participants expressed embarrassment and shame about the appearance of their damp home, especially when they had guests around. The stigma around damp and mould was associated with uncleanliness and resulted in conflicted emotions: They loved their home but were ashamed about the condition.

“Nobody wants to say my home’s mouldy... As much as I try to clean it and take care of it, I still have this serious black mould problem and I guess it’s not doing our health any good either... But my home is my haven, it’s my castle.”

F, 58, urban, private renter

Although there was some connection with the possible impact of damp and mould on physical health, this was not top of mind for participants during interviews. When health was mentioned, it tended to be a more abstract worry without reference to specific conditions or possible outcomes. There was a sense that damp and mould was likely to have some impact on their physical health but what this would mean in practice was not clear to many participants.

Amy

"The cost of upkeep is horrific. I can't do anything without listed building consent. The windows are mainly rotten all along the front and it's very expensive to replace them. The windows have got sliding sashed very thin glass, soft wood which rots (...) The angle of the house means that the water sits on the bottom sill because the windows aren't straight."

"The costs are too prohibitive so [I] would rather just leave it."

"I would like people to balance preserving history but allowing me to live life and help with insulation. The information isn't there and isn't easy to access (...) I'd like more advice on what changes can be made and how to carry some repairs out myself. There are specialist companies, but you have to pay for membership to get their advice."



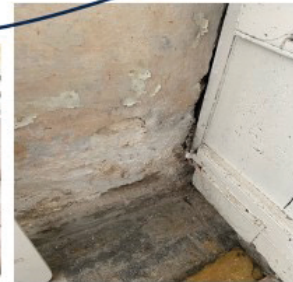
Age band: 50 - 54

Ethnicity: White

Region: East Anglia

Job status: In full-time employment

Housing status: Owns home with a mortgage



Amy owns a detached farmhouse with a mortgage where she lives alone. She moved into her current property three years ago, but when her husband moved out a year ago, she had to 'buy out' his part of the mortgage, and so when son moved out in February, she now only has one income to maintain a large house. While she loves the quirkiness and beauty of living in a 500 year old property, she finds the restrictions placed on amending a listed building very limiting. The windows are single-glazed, have rotten frames due to water collected on the sill and are very poorly insulated. This makes the house very cold, but they are protected under the listed status, making them expensive and difficult to replace, but she's not sure that they would last another winter.

The top floors of the house doesn't have any heating, which is where her bedroom is, and the heating appliances in the downstairs of her house do not effectively heat the size of the rooms. She has problems with rising damp, partly due to lack of insulation, but mostly down to the exposed brick flooring in her laundry room, which has resulted in the plaster coming off the walls. The cost of repairs needed on the house are very costly because they require planning permission and specialist companies to do the work. Due to costs of upkeep and her single income, Amy has had to prioritise what she will get repaired first, and what other issues will have less of an affect and she can live with. Amy doesn't feel like she had much control over her house, and while she appreciates looking after older properties, feels there needs to be some leniency so she can live in her house comfortably.

Roof damage

While not a frequently reported issue, problems with roofs was a significant source of anxiety for those affected. This included rotten timber, missing tiles and leaks. They felt anxious in bad weather as they worried about further damage to the roof and also the impact that this would have on the rest of their house; some had experienced water coming in through the ceiling. This was a stressful situation, not only because of the immediate damage caused to the home, but because they worried about how to afford the repairs.

“When you get your severe weather warnings it is a bit concerning. It does make you think...The last thing you want is a stormy night and water streaming out the bedroom ceiling which is going to cause a lot more money and repairs.”

M, 50, rural, private renter

To illustrate further, one homeowner had severe rot in a canopy roof he had fitted and felt overwhelmed by the amount of work required. He worried the whole roof could collapse. Although he felt unable to carry out the repairs himself, he was concerned about the cost of hiring someone to do the job.

“It’s overwhelming for me to deal with and it’s now beyond my ability go get up on the roof and deal with it.”

M, 66, rural, owner occupier

Repairing roof damage was seen as something which required professional help and not a job that participants could fix on their own. This was partly because they were not able to judge the extent of the damage; they were unable to get onto the roof and, even if they could, they did not have the expertise to assess the problem. This differed from issues such as damp and mould which participants felt more confident evaluating and mostly managing themselves, even if they were unsuccessful in dealing with this issue completely.

While recognising the need for professional expertise when it came to assessing roof damage, there was significant distrust of the tradespeople they would need to employ – a widespread barrier to making changes across a home. This mistrust created further stress as participants questioned the advice they were given, making it hard for them to know what to do for the best. Again, this was especially difficult for homeowners as they had to judge whether to trust the advice and pay for the work to be done or risk doing nothing and save the money.

Uncertainty about just how serious any roof damage was led to decisions to postpone the work as participants hoped the problem would not get worse. Tenure influenced concerns here; homeowners tended to focus on affordability, while renters worried about whether their landlord would agree to the work required, preferring to put off requests until they seemed urgent. Both situations resulted in delaying action. The extent of this uncertainty led to stress for many, particularly for homeowners who were ultimately responsible for the cost of repairs.

Making changes

There was a preference for short-term fixes over long-term solutions to improving cold, damp and leaking homes. Investing in additional heating appliances and spraying or covering up damp and mould patches were seen as a way to get by for now, with participants putting off more expensive and complex repairs. This was because homeowners doubted their ability to afford such work, while renters tended to be more restricted in what they could do themselves, relying instead on their landlord to make the necessary changes, which they did not always do.

Although participants struggled to find long-term solutions to problems that kept reappearing, they described examples of more complex renovations which they might explore in the future. These often focused on improving how warm it was in their home and included replacing older boilers and installing double or triple glazing. Not only were these changes regarded as a way to keep their home warm, but also as a way to save money in the longer term by reducing their bills. Indeed, the few who had made such changes spoke positively about the impact of it – and were keen to make further improvements. For instance, one homeowner had installed triple-glazing to replace old windows which had let in a draft. This had made a positive improvement to the temperature in the home and they now wanted to invest in more adaptations, including a new boiler which would heat their house more efficiently and save money on energy bills. However, for many, the upfront cost of such changes were often too prohibitive.

This extended to eco-friendly adaptations such as solar panels, which a small number of participants referred to. Although attractive in principle, due to the recognised benefits to the environment as well as their home, there was scepticism about the potential financial savings and limited awareness about the process. However, one homeowner who had installed solar panels four years ago described how they had repaid the cost of installation through savings on his energy bills and he was now exploring further eco-friendly options such as wind generators.

Moving around the home

What is the problem?

Falling within the home is one of the major causes of death, injury and decline among older adults¹². It is also common – a risk of falling is one of the most frequently reported Category 1 hazards¹³. Despite the low cost of many improvements, it is still not common practice to make homes more accessible to the people who live in them even though evidence highlights how this can accelerate a decline in the general wellbeing of older adults¹⁴.

What did we find?

We heard from participants who had problems with their mobility, including arthritis and difficulties walking, and issues with their knees and backs. As a result, their ability to move around their home had a significant impact on their health and wellbeing. Not only did this result in physical injuries but it also led to significant stress and anxiety linked to a fear of falling.

These issues were not just limited to those with pre-existing health conditions: both those with and without health conditions had experienced falls and worried about tripping on the stairs or in the bath. This was exacerbated by uneven surfaces inside and outside the home as well as a shortage of space, which also resulted in embarrassment about hosting people in a small or cluttered home. For some, this inaccessibility meant they could not easily enjoy their ‘whole home’ such as their garden or the upper levels of their house.

There was a strong sense – especially seen among those whose mobility was already declining – that aspects of their home, such as stairs and bathrooms, would become less suitable for them as they grew older. This created significant anxieties when they thought about moving around their home in the future. Although there was appetite for installing adaptations, participants often faced barriers in making changes as discussed in the next section.

12 Centre for Ageing Better (2020) Homes, health and COVID-19 p.15

13 Centre for Ageing Better (2020) Home and Dry p.18

14 Communities and Local Government Committee, Betts, C. (Eds.), 2018. Housing for older people: second report of session 2017-19: report, together with formal minutes relating to the report, House of Commons papers. Session 2017-2019. House of Commons., London.

Uneven surfaces and trip hazards outside of the home

Falls are the main cause of accidental injury-related deaths in the home among older people¹⁵. Falls either on, or between, levels accounted for 239,062 incidents of Category 1 hazards among households headed by someone aged over 55, making them the third and fourth most commonly reported issues in the 2017 English Housing Survey¹⁶. The impact of uneven surfaces and trip hazards ranged from annoyance and mild concern for those who were more mobile to significant stress and exhaustion for those with more severe mobility issues. Participants with decreasing mobility spoke about falls they had experienced around doorways and steps which were unsuitable for them, as well as uneven and slippery surfaces outside of their home.

“I find it a little difficult to enter the house because the approach underfoot is uneven and on a slight slope and I’m really frightened of falling.”

F, 58, urban, private renter

These incidents were not only physically painful, but also mentally scarring. They reminded participants they were becoming frailer, and that they were likely to experience more frequent falls as they aged. For example, one social renter who had recently tripped when trying to leave her home could see this happening again and felt resigned to the fact she would now need to ask her housing association to install a small slope outside the entrance. This was upsetting as she was unsure when her housing association would be able to make this change during the COVID-19 pandemic, but also because this was another example of an everyday task that was becoming more difficult.

“It just makes [the limitations] real... it becomes really difficult and quite emotional. Nobody wants to accept that they can’t do things.”

F, 52, rural, social housing

15 NHS (2019) Overview Falls, Available online at: www.nhs.uk/conditions/falls

16 English Housing Survey 2017

What do the problems look like?

As a result of this anxiety, participants took more time completing everyday tasks to try and prevent the risk of trips and falls. This led to feelings of frustration and annoyance as everything took longer to do. In some instances, it resulted in spending less time outdoors, as they felt worried leaving and entering their home. Taken together, these small behaviour changes took a toll on participants' mental wellbeing.

Moira

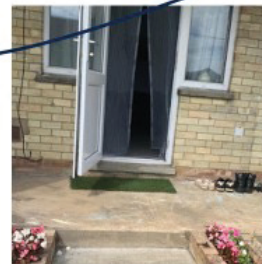
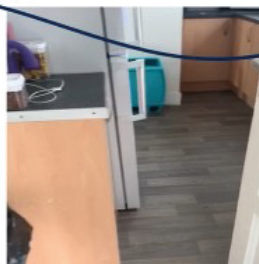
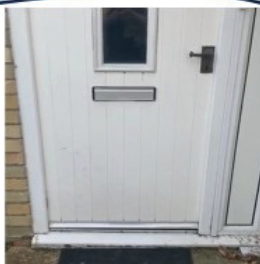
"This is my favourite place - my garden...Unfortunately I can only access [it] from front of my property then walking round as I am unable to manage these steps from my back door. . . It makes you wonder what would happen if there was a fire in the front of the house because there's only a front and back entrance and I literally cannot manage the steps, and I've tried a couple of times. . . I don't know how to get around it so how I get around it is by using the front entrance."

"I thought I'd made enough changes to manage until I had to make other changes. Whereas in actual fact, last week I just had a fall stepping out my front door...things like that, it's made me more aware that to stay here, there's more things that I'll need to do."

"[My home] can have both positive and negative impacts on my daily wellbeing and mental health. . . The kitchen can be difficult to manoeuvre due to uneven flooring so cooking can be and feel somewhat precarious. Even the act of making a cup of tea and taking it to my living room can feel like an obstacle course. . . If it's not completely flat, it's almost like being on hyper alert."



Age band: 50-54
Ethnicity: Mixed race
Region: East Anglia
Job status: Furloughed due to COVID-19
Housing status: Social housing tenant



Moira lives with her granddaughter in a bungalow that she rents from a housing association in a very rural area. She has several mobility issues and the house had grab rails installed when she moved in. However, due to the steps up to the house, Moira struggles to get out her front and back door. This makes her concerned about having to quickly get out if there was a fire. She wants to put lino down in the kitchen as the surface is currently uneven, which causes her stress when moving around. Her housing association has not agreed to make this change, so she is currently saving up to do this herself. This is challenging as she says most of her income gets taken up by rent and other repairs. She is also waiting for her bathroom to be converted into a wet room, as it is currently inaccessible for her. For the most part, Moira likes her home but has significant concerns about the amount of changes that need to be made in order to meet her needs and make her comfortable. For many of these she is reliant on the housing association to agree and action, which feels overwhelming.

Going up and down the stairs

There were 420,384 incidents of falls on stairs within households headed by someone over 55 in 2017¹⁷. This was echoed in the research where stairs caused major difficulties, especially for those living in older properties where the stairs were shallow and steep. For instance, one homeowner living on her own in an older property with narrow and winding stairs described feeling scared about falling in the house with no one around to help her.

“I have trip hazards caused by winding stairs and steps up and down between rooms. On my son’s recent visit, he fell down the main stairs and took a chunk out of his toe as he hit the wall.”

F, 54, rural, owner occupier

As before, the need to be more cautious when completing routine tasks was described as frustrating, particularly where this was leading to physical pain and discomfort. In response, participants avoided the stairs by staying on one floor or not going outside, limiting what they did each day. One homeowner waiting for a knee operation described how going up and down the stairs was making him feel “miserable” due to the pain and how he needed to take one step at a time. He reported only going upstairs to go to bed, spending the rest of the time on the ground floor to avoid the discomfort and anxiety of using the stairs.

There was a strong sense that stairs either had already, or would become, less suitable for participants as they grew older. This created anxieties when they thought about moving around their home in the future and was particularly concerning for those whose mobility was already waning. By way of example, one social renter with limited mobility had to walk up three flights of stairs to access her home. She acknowledged that she had not seriously thought about the implications of navigating the stairs when she moved in. However, the challenge of doing so was becoming more apparent the longer she lived there and the more her health declined. As a result, she was planning to discuss installing an additional handrail with her housing association.

17 English Housing Survey 2017

What do the problems look like?

David

"The stairs are the hardest stairs to climb that I have ever come across but then it adds to the quirkiness of the cottage."

"I have fallen down them several times but luckily with no injuries. You cannot walk up them you have to crawl up especially if you are carrying anything."

"I near enough have to crawl up the stairs they're that steep – but there's not a lot we can do about it because they're too narrow for a lift...We have thought about putting a sofa-bed downstairs for me to sleep on when I can no longer get up the stairs, but it's not ideal having to put it away all time."

"I think our home has a huge positive impact on our wellbeing. We both can't wait to get home from work and take the dogs into the garden. It is quite peaceful here and as we can't really do any updating of the property it is something we don't have to worry about. We are happy at the moment but I think we both know that sooner or later getting up the stairs will be a big problem."



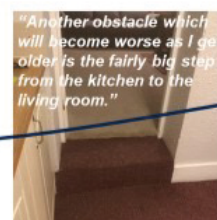
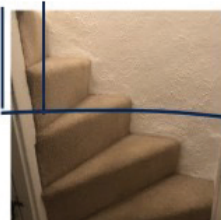
Age band: 60-64

Ethnicity: White British

Region: East Anglia

Job status: In full-time employment

Housing status: Privately renting



"Another obstacle which will become worse as I get older is the fairly big step from the kitchen to the living room."

David lives in an old, detached cottage in a small village, rented from a private landlord with his wife of ten years and two dogs. He plans to retire in a couple of years. He suffers from a bad back so struggles getting around the house, particularly getting up the stairs. He had an operation on his back last year and had to put a mattress in the living room as he was unable to get upstairs. The cottage he lives in is very old so making significant, structural adjustments, such as a stairlift, would not be feasible. In the future he suspects they will have to move somewhere with only one floor, although he would be sad if he had to move home as he enjoys living in his home, despite these challenges.

Inaccessible bathrooms

Getting in and out of the bath was another task which was becoming increasingly more challenging, especially for those with mobility limitations including degenerative conditions such as arthritis. For this group, slipping in the bath was a daily concern. It weighed especially heavily on those living alone who worried about who would help them if they fell and were unable to call for help.

One social renter living alone felt she was “managing alright” for the moment, but the situation was less than ideal as she was now having to stand on a stool to get in and out of the bath. She felt this was impractical and not something she wanted to continue in the long-term. She was waiting for her housing association to install a wet room but was unsure when this would happen. Another social housing tenant was washing in her kitchen sink or travelling to her family’s home to shower. The inaccessibility of her bathroom and her lack of agency to change the situation was causing her a great deal of frustration and distress, severely affecting her mental health.

“I deserve the right to wash freely like anybody else, and when you have to wash in the kitchen, or rely on family members – why should I have to do that?”

F, 52, rural, social housing

Storage and space in the home

Homes without sufficient storage were frustrating to live in and also potentially hazardous. Those with smaller homes described falling over items on account of not having anywhere to store them and being especially conscious of where they placed furniture to ensure their safety. They were also mindful of what they were buying, so as not to take up too much space. Living in a constantly cluttered home led to unhappiness and a sense of hopelessness which had been exacerbated during the COVID-19 pandemic with more time spent indoors.

“Being in the house full time the last few months made me feel claustrophobic in some rooms. It would be ideal to have a conservatory and downstairs so I can spend more time looking at the nature and get more space in the house.”

M, 58, urban, owner occupier

One private renter struggled to feel comfortable in his small home. The lack of storage space made his house feel constantly untidy and he resented feeling as though he needed to throw away belongings to improve the situation. He also worried about his children hurting themselves while they were playing due to the limited space. This ultimately had a negative effect on his wellbeing and put him off inviting people over.

Feeling embarrassed about hosting guests was frequently mentioned by those who lacked space in their home. This had a significant impact, especially if participants lived alone and valued being able to spend time with people in their homes. To illustrate, one homeowner who mostly lived alone when her son was away described how the space in her home prohibited her from easily hosting friends and family. Each time she did so, she needed to move the kitchen table and chairs into the lounge for everyone to fit.

“I go into other people’s homes and they look so neat and tidy, everything’s away in a cupboard and I come back into mine and I just feel a little bit disheartened about it really. It would just make such a big difference to my wellbeing, probably my mental health and my home life.”

F, 59, urban, owner occupier

Making changes

While on the whole, participants felt able to navigate their homes for the time being, there were significant concerns about being able to do so in the future. This was especially a source of anxiety for those who did not want to move but felt that they would have to relocate to somewhere more suitable for their needs, such as a bungalow.

“I love my little house, but in a couple of years’ time it’s not going to be suitable for me – the stairs. The bathroom certainly isn’t, because I need a walk-in shower, I can’t get in the bath... Long-term, I think I need to move.”

F, 56, suburban, social housing

As a result, there was a strong desire for adaptations to be made which would enable them to remain in their home as they aged. Across the interviews, participants mentioned a range of minor adaptations they would like, including:

- Installing grabrails and handrails both outside of and within the property
 - specifically at entrance ways, on stairs and in the bathrooms
- Moving up power sockets to be more accessible
- Replacing doors with swing doors with handles and installing lever taps

Participants across tenures felt these measures would provide greater safety and a sense of security that they could stay in their home. They also recognised these changes could be completed easily and cheaply with minimal disruption.

What do the problems look like?

Those who were currently experiencing, or anticipated more significant mobility restrictions, spoke about wanting substantial, structural changes to their entranceways, bathrooms and stairs to make them more accessible. These included:

- Ramps and slopes which would make it easier to use entrance ways and ease anxieties about not being able to get out of the property
- Renovating floors to ensure flat surfaces and remove trip hazards such as loose carpets
- Altering staircases by making the rises shorter and the treads deeper
- Installing chairlifts to help individuals go up and down the stairs safely
- Building a downstairs bathroom to avoid the need to climb the stairs

There was also a widespread desire to replace baths with walk-in showers or create a wet room. These were seen as measures which would significantly reduce anxieties about slipping in the bath while also making it practically easier to wash as they get older.

“We are getting old, we cannot climb the tub and go for a bath... We worry about slipping, getting a fracture or damaging the body. It is better to avoid such problems with a standing shower. We want to be cautious before anything happens.”

M, 58, urban, owner occupier

Concerns over safety and a desire for improved comfort levels and convenience were the driving forces behind wanting to make these adaptations. Such measures were perceived as providing security and reassurance, while also enabling participants to remain independent in their own home. The barriers to making these changes are discussed in the following section.

Safe, settled and secure at home

What is the problem?

The importance of neighbourhood has never been clearer than in 2020. Where you live has a profound impact on wellbeing as well as physical and mental health¹⁸. Access to green spaces, local amenities, crime rates and social connections all influence health outcomes¹⁹. There is also evidence that the same age groups who are more likely to live in poor-quality homes are also more likely to lack digital access²⁰. This includes many older people who can be reliant on virtual connections due to social distancing restrictions, a rural location or living far from family and friends²¹. Affordability and security of tenure also has a major effect on mental and physical wellbeing, with frequent house moves and financial anxiety leading to chronic stress. Despite this, it is estimated that 2.5 million people in England are unable to afford the rent or mortgage on their home²².

What did we find?

Throughout the research, the importance of location was obvious – stopping some from wanting to move out of a home that did not meet their needs, while making others feel unsafe and insecure. The latter was particularly true for women living alone, who were more likely to express concern about their personal safety at home or in their local area. Attitudes were influenced by perceptions of security – both the physical security of a property and security within their tenure. In particular, fear of being evicted resulted in substantial stress and sometimes led private renters to decide not to ask for repairs or make a complaint. Predictably, living close to family and friends was also a key contributor to happiness with a home; especially important for those with limited mobility or health conditions.

18 MIND. 2017. Brick by brick: A review of mental health and housing; World Health Organization. 2018. WHO Housing and health guidelines.

19 Centre for Ageing Better. The King's Fund. 2020 Homes, Health and COVID-19.

20 Centre for Ageing Better. The King's Fund. 2020 Homes, Health and COVID-19.

21 Centre for Ageing Better. 2020. How has COVID-19 changed the landscape of digital inclusion?

22 National Housing Federation. 2019. 1 in 7 people in England directly hit by the housing crisis. www.housing.org.uk/news-and-blogs/news/1-in-7-people-in-england-directly-hit-by-the-housing-crisis

The importance of location

Location underpinned where people chose to live, irrespective of tenure. It also played a critical role in how participants felt about their home overall; they were often more likely to overlook issues in their home if they liked the location and felt connected to their neighbourhood.

However, a number of participants were dissatisfied with the area they lived in. They had concerns about crime rates, theft, anti-social behaviour, drug use, litter and loud noises. In some cases, this led to feelings of unease if their home was near open public spaces or alley ways where they had witnessed antisocial behaviour. They worried about their own safety – sometimes questioning whether they would want to continue living there as a result.

“It’s just a little village where I am, and I’ve got this big area on the corner of my street that’s meant to be a rest area, but it’s not it’s just full of hooligans... The police come and move them along, it doesn’t make any difference because they’re back there the next night. That’s scary, and it was my ideal location when I moved here because it was quiet... It’s just getting worse now, our little village is not nice anymore. I’ve got a lovely canal where I am but it’s too frightening to go walk there anymore.”

F, 56, suburban, social housing

These concerns were particularly apparent among women living alone. One such participant whose home backed onto a public carpark worried about who might be outside and whether they could gain access to her home via a garden door which opened onto the carpark. She felt that “anything could happen” particularly during the winter when it is cold and dark.

Tania

"I do like it but it's gone right down the nick. There's all sorts of trouble...Now you're getting a lot of knife crime, trouble every weekend with teenagers, it's just all over. They started doing all these illegal raves...it's all open fields and they virtually destroyed that with all the litter and god knows what. They didn't have toilets there and people had to clear it up, it's just not on but that's the way it is."

"I wouldn't go out at night these days, too much going on and you never know who's about..."I keep my door lock all the time and we've got security lights...there have been people trying doors."

"A lot of the crime rates have gone up, you get a lot of car theft, of bike theft and they're around all hours trying people's doors. We never had this before until these people came to the area...We don't have a police station anymore,...it's miles away now so they know they can get away with it...It's all sorts, nicking cars, theft from cars, grown men threatening kids and taking their bikes."



Age band: 65-69
Ethnicity: White
Region: North West
Job status: Retired
Housing status: Social housing tenant



Tania has lived in her flat that she rents from a housing association for 34 years, because it is ‘too handy too move’ in terms of her proximity to amenities, but now feels that she is too old to move. She has mobility issues and doesn't drive, so it is important that she is close to local shops, with decent transport links. She likes the flat she lives in because it mostly meets her needs; she has a ground floor with easy access from the entrance and grabrails either side of the front door to help her up the step. The flats have a large communal garden which she likes, as most other tenants don't use it so she feels ‘it's like having my own garden really.’

Tania really liked the area when she first moved in, and still likes being able to go into town about once a week to get everything she needs, however the local area has deteriorated over the years and she feels less safe than she used to. She described how a hotel near her flats has been turned into a hostel for addiction sufferers; “the criteria is that you've got to be an alcoholic or a drug addict and they come from all over the country. The local lads that are working and homeless can't get in there”. The crime rates have increased and Tania no longer feels safe going out at night anymore, for fear of not knowing who's around. She keeps her door locked at all times but has heard people outside trying neighbours doors. There have been recent incidents of illegal raves in nearby fields, which “ended up full of trash and excrement” and three people were stabbed. They don't have a local police station and the lack of police presence encourages this sort of behaviour. Tania is overall happy in her flat and where she is but prefers the area how it use to be. Despite the high crime rates and concerns over safety, she sees herself living in her home for the rest of her life as she sees herself as being too old to uproot herself.

Physical security

Although less common than problems with moving around the home, and feeling warm and dry, participants' concerns about their security had a significant impact on how they felt about their home. Issues with the security of the front door was a problem across tenures. This resulted in concerns about homes being broken into, particularly in areas where participants did not feel safe.

One social renter described how cracks in the front door had become so bad she could see through them – something she reported to the housing association twelve months ago and was still waiting for them to fix. This affected her wellbeing, making her anxious about her safety while the delays with the repair made her feel frustrated and powerless.

“You shouldn’t have to live in such an insecure property... You think you’re helpless, aren’t you, as to who you turn to... I think it would have been nice if they [housing association] had come and just secured the door, so you couldn’t see the gap, so it would make you feel better.”

F, 56, suburban, social housing

While not commonly reported, animal infestations also affected feelings of comfort, security, and mental wellbeing. One homeowner living in a rural area described the impact of separate moth and squirrel infestations. The moth infestation destroyed an expensive carpet they loved and cost them close to £5,000 in repairs. Not only was the experience upsetting but they had to throw away damaged clothing and furniture. The squirrel infestation chewed through electrical cables and wires in the attic causing electrical damage. The process of trapping and killing the animals also had a significant emotional toll.

“It causes a lot of sleepless nights... When you go to bed, you don’t sleep too well knowing that you’re going to have to wake up and check the trap and find a squirrel alive in there and you then know you’re going to have to do something to dispatch it.”

M, 66, rural, owner occupier

Local connections

Many participants relied on their neighbours for help with repairs, recommendations for tradespeople and social connections. This typically led them to feel settled and secure in the area, as they knew they could reach out to people living nearby if they needed help. Where this was not the case, it could result in isolation and distress. For instance, one social renter in a rural area described how she found it challenging to make connections when she first moved as her neighbours had all lived there for many years and were homeowners, while she was renting from the council. She felt isolated and like an outsider in the first few months after moving. This was especially upsetting as she was a key part of the community in her previous home.

“It’s a close-knit community. But I see both sides. It can feel warm but also invasive... People look out for each other. At the same time if people fall out it’s like school with people taking sides.”

F, 52, rural, social housing

Living close to family and friends was also a major contributor to happiness with a home. In addition to providing social connections, participants often relied on family and friends for support, including help with transport and access to facilities. This was especially important for those with limited mobility or health conditions. For some, being near a support network made living in an isolated location feasible as they could rely on others to help them get to the shops or hospital appointments.

What do the problems look like?

However, this could also have negative implications. One social renter lived in a rural village with poor broadband and limited transport links but had little option to move as she needed to be close to her daughters due to her health. Her reliance on her family, and the limited options for accessible social housing in the area restricted her choices, resulting in her feeling trapped in a home where she had significant accessibility challenges.

“It’s a lovely place, it’s like going back in time... If you didn’t drive it would be very difficult because there’s a bus maybe four times day, so it is quite dependent on your own transport... Sometimes it’s good, sometimes it’s very isolating, because of the location.”

F, 52, rural, social housing

In contrast, one owner occupier lived nine miles away from the nearest supermarket. His local village consisted of a church without any shops, a pub or even a streetlamp. Despite needing to drive to access local amenities, he did not want to move as he loved his home and the rural location. This reflected the trade-offs participants were sometimes willing to make: overlooking safety and accessibility to remain in a location they loved, even if this restricted their connectivity.

Digital connectivity disproportionately impacted those in more rural areas, sometimes affecting their social connections as they were unable to speak to friends and family online. One homeowner who lived in a remote area installed a satellite on the roof to improve his broadband access, but the phone service remained poor despite complaints to providers. This issue had a significant impact on the wellbeing of those living alone or who were not friendly with their neighbours and resulted in feelings of isolation.

“You’re in the middle of nowhere, you absolutely rely on your phones and on your computers.”

M, 70, rural, owner occupier

Security of tenure

Private renters were significantly more concerned about the security of their tenure compared to social housing tenants or homeowners. Fear of being evicted resulted in substantial stress and anxiety, especially for those who had experience of being evicted from previous properties at short notice. They described feeling they were “at mercy to the landlord” and constantly worried about having to find a new home quickly and under pressure. The fear of being evicted at short notice often prevented private renters from asking for repairs or reaching out to other bodies, such as the council, as they were worried about the repercussions of making a complaint.

“I’m continuously aware of my vulnerability, if the landlord suddenly thinks ‘oh, I’ll sell that’. In my mind you’ve got very little protection rights and that does sometimes worry you, you think ‘Am I going to get a letter one day saying I’ve got to get out’ and go through all the aggravation of doing that, and you don’t get a lot of time.”

M, 63, suburban, private renter

Several private renters described making aesthetic renovations themselves, valuing the freedom their landlord gave them to do so. However, they recognised that they were ultimately investing in a property they did not own and did not like thinking about losing this if they moved. Finances were also a barrier preventing private renters from moving; they did not always have the financial means to continue paying rent in addition to a deposit on a new property. This financial stress meant they were trapped in a home that was not meeting their needs, resulting in a negative impact on their mental health and feelings of despair.

“I can’t afford to move, because fair enough you have to put a bond down, and generally you hope you’d get that back, but in some circumstances, you don’t get that back... I couldn’t afford to move because it’s the rent, which is extortionate, and then another month rent on top of that for the bond.”

F, 58, urban, private renter

Making changes

Across tenure types, moving to a new property was typically seen as a way to fix the problems of not feeling safe, and/or the challenges associated with private renters' security of tenure. Where moving was possible, participants described wanting to relocate to be close to family and friends or moving to places with access to green spaces in quiet neighbourhoods. However, this was not always feasible, affordable or desirable, often due to strong feelings of attachment to their current home.

“[Downsizing] has been a consideration but with great reluctance and for the foreseeable future it is not a route I would choose.”

M, 70, rural, owner occupier

Beyond moving to a new home, participants found it difficult to identify solutions which would help them to feel more secure and connected. They described small changes such as installing security lights, replacing locks and increasing the height of surrounding fences as ways to increase their comfort and safety. But these measures did not fundamentally improve their attitudes towards the local area. Similarly, it was difficult for private renters to identify steps they could take to feel a greater sense of security in their tenure without wider regulatory changes outside of their control.

02. What stops people making changes? What might help??

Barriers and enablers

Interviews explored the reasons why participants felt unable to improve or solve the problems in their homes. They listed a wide range of barriers including:

- The wider situation and context for making decisions: covering their financial situation, housing tenure and the structure of a property
- Their attitudes towards making current and future changes: including trust, confidence and their expectations for the future
- Not knowing where and how to seek support: including identifying problems, awareness of support options and knowing how to access these.

Our findings draw on behavioural analysis to explore the motivations for making changes to a home. Participants were also asked about what might help them to overcome these barriers, including discussions around financial, technical and information support. Their suggestions are highlighted in the blue boxes below.

The situation and context for making decisions

Finances

Finances were one of the most significant barriers prohibiting participants across tenure types from making changes to their homes. Both larger adaptations and more minor repairs were widely perceived as costly and many did not have the funds available to spend. What's more, the benefits of making such changes were not always seen to outweigh the costs, even if these measures were recognised as essential for repairing or future-proofing a home. Owner occupiers in particular spoke about the difficulties they faced when making decisions about what took priority when finances were tight. They described weighing up the priority of different tasks and balancing this against wider priorities in their lives, such as supporting their family.

“It does make you worry about where you are going to get the money from. Is it more important to do this than other things? It is about prioritising.”

M, 56, suburban, owner occupier

This was exacerbated by uncertainty surrounding the outcome – it was unclear whether their health would decline further or if the leak in the roof would get worse. Thus, the financial cost which would need to be spent today was often regarded as too expensive when compared to what might happen tomorrow. In some cases, this led homeowners to make small-scale changes, such as installing grabrails or security lights, as a cheaper alternative.

In contrast, private and social renters valued the fact they were ultimately not responsible for funding large-scale repairs and renovations. However, this resulted in renters feeling reluctant to ask a private landlord, and in some cases a housing association, to make changes to their homes. They worried about the appetite of landlords to fund renovations, even if these were to meet accessibility needs.

Financial grants and loans

Financial support options, such as grants or loans, were viewed as critical to enable repairs and adaptations for later life. Grants were particularly sought by owner occupiers, reflecting the scale of the financial barriers they faced, but tenants also recognised the value in financial support. For example, they suggested financial options could be made available for landlords to improve homes to meet their tenants' needs. Both grants and loans were perceived as a way to fill an immediate funding gap, such as unexpected repairs, as well to invest in adaptations with high upfront costs, for example to make a home more accessible or energy efficient. Ultimately participants felt this would allow people to stay in their homes safely for longer.

However, participants were largely unaware of current grants which might be available to them and struggled to name specific schemes. Consequently, they felt that taking out a loan would be their only option but there were mixed views on the appropriateness of this. On the one hand, those with experiences of taking out loans described how they could be useful for addressing issues in a home which they could not afford. Low-interest loans were perceived as helping homeowners complete minor renovations or repairs which could otherwise get worse – seeing this as “better than nothing.” On the other hand, there were concerns about people being “caught out”. They worried about people who may overlook or misunderstand the fine print attached to a loan which could result in debt being left “hanging over” them. Nevertheless, loans were seen as more appropriate for landlords given their continued rental income.

“It is getting a balance so not giving them tonnes of stuff when they have plenty of money, but I suppose making it better that the tenant gets a better deal.”

M, 50, rural, private renter

There was widespread agreement across tenure types that financial support options should be means-tested to ensure that those who needed support can access it. However, participants emphasised that financial support should be readily available to all older people, even if it was primarily targeted towards those on the lowest incomes. Ultimately, there was a strong focus on creating a system that avoided putting individuals in financial difficulty, whatever their situation.

“The Government could go back to how it used to be, let people upgrade their houses by giving out grants. Especially if they get a medical note from the doctor. Instead of making people go bankrupt when they get older.” M, 56, suburban, owner occupier

In particular, concerns focused on those with disabilities or without savings who might struggle to adapt homes to meet their needs without financial support. There was also a suggestion – primarily among homeowners – that they should not be expected to fully fund measures on their own given their tax contributions throughout their working life. They felt that if they needed help from the state in later life, they should be supported. Suggestions therefore included broad eligibility criteria based on need to ensure funding is accessible to a diverse range of people, not just those on the lowest incomes.

A key consideration for administering financial support was to ensure an easy and accessible application process. One suggestion was to have grant amounts directly compared to the cost of specific renovations, in order to support people to make an informed decision on how support options would compare to the overall costs. Another proposal was for advisers to guide people through an application process, helping those who were less digitally literate or without wider support networks.

Tenure type

While finances were a larger barrier for owner occupiers, it was the nature of renters’ tenure which made it more challenging for them to make changes to their home. Structural alterations, adaptations and repairs needed to be approved by private landlords, the council or a housing association. This resulted in renters feeling awkward about asking for adaptations and feeling as though they were “asking for more than they should”. Both private and social renters did not always perceive their landlords or housing associations as necessarily being willing to make adaptations relating to their needs. They described how it would ultimately cost a landlord money to renovate a house which may make it less desirable for future tenants. For example, one social renter described how she was made to feel like her request to convert her bathroom into a wet room was inappropriate, causing her significant upset.

“When [disability grant organisation] were taking away the bath to make the bathroom into a wet room [the housing association] said what was being done was ruining a perfectly good three-bed family home... It makes you feel worthless, like you were an inconvenience.”

F, 52, rural, social housing

In cases where private renters had asked for adaptations, they described how landlords had not always responded to their requests in the way they wanted. This exacerbated feelings of a lack of agency and was another reminder that they were living in a home that was not theirs. This was similar for those living in social housing who had negative experiences of the council or their housing association addressing issues, which included delays caused by the COVID-19 pandemic. As a result, often they were unsure when adaptations would be installed and felt very little control over the process. This was frustrating and left them struggling in a home that was not suitable for their needs.

“I have also asked my landlord for a grab rail in the bathroom, but it seems to have fallen on deaf ears... That’s one of the drawbacks of renting... You have to ask permission to do anything.”

F, 58, urban, private renter

Increased regulation and improved relations with landlords

Participants identified a need for improved relationships with landlords and housing associations, as well as training for staff to highlight the importance of respecting tenants' individual housing needs. They felt that clearer, person-centred communication with tenants was required to increase transparency and give individuals a greater say in their home. This reflected the positive experiences of those with good relationships with their housing association or local housing officer, who felt greater agency and confidence in their home being made suitable for their needs.

Private renters wanted to see greater regulation and professional standards for landlords to ensure the maintenance and upkeep of a property, including regular checks. This was viewed as especially important for people as they got older and may not identify hazards or repairs – as was seen throughout this research. Private renters emphasised the importance of landlords being vetted to ensure standards in each property and avoid tenants being overcharged on poor quality homes. It was suggested that inspections of rental properties could also include energy efficiency checks to give tenants a sense of the likely cost of future bills.

“It’s like anything isn’t it, you should have some sort of decency standards. If it is not fit to live in, there should be some sort of body that enforces that. Like they say you have got to have your gas checked or your electricity checked, check out the dampness, condensation and mould. Maybe there should be some sort of inspection body.”

M, 50, rural, private renter

The physical structure of homes

The physical properties of a home, including the age and structure, limited participants' ability to make changes. This was especially the case for older homes which were not as easily adaptable and, in some cases, faced restrictions due to listed status, or the location in a protection zone. Smaller properties were also limited in terms of making larger structural changes such as wet rooms or installing stairlifts, due to the nature of the space which reduced the options available.

“I don't think there's much we can actually change to the house because I think it might be listed... Our stairs are on a tight bend and are very steep. There is no way we could get a lift on them.”

M, 64, rural, private renter

Building adaptable homes for the future

Participants recognised there was little they could do to address the physical nature of a property and thus often saw moving as their only option to living in a home more suitable for their needs. However, they wanted to see future homes built that could be more easily adapted across the life-course to meet people's needs as they got older. Suggestions included: homes with features that could be adapted to change function and building spaces that provided enough room for future installations such as stairlifts. Examples also covered easily changeable taps, wider doorframes to allow for wheelchair access and living rooms which could be converted into ground floor bedrooms to meet mobility needs. One homeowner suggested these options could be promoted through example show-homes, providing people with ideas about what could be possible in their home.

Attitudes towards making current and future changes

Making immediate repairs

Trust in others

Anxieties around identifying reputable tradespeople and trusting them to make quality repairs was a significant barrier, most commonly seen among owner occupiers. There was a widespread reluctance to commission professional help unless absolutely required, and uncertainty about where to go to access impartial advice. This was typically underpinned by past negative experiences, including contractors being unreliable, a lack of transparency about timings and processes and overcharging for poor quality repairs. These concerns resulted in homeowners either making changes themselves where they could, employing qualified friends or family, or acting on recommendations provided by people they trusted. Without these sources of support, they were unsure where to go for reliable advice, which often stopped them from taking action.

Although participants had experience looking for information about tradespeople online, they mistrusted review websites arguing that positive reviews could be manipulated. They also had concerns about builders 'scamming' people into paying for unnecessary repairs. There was discomfort with having to put trust in tradespeople who were both able to determine the scale and cost of an issue, while also financially benefiting from addressing it.

“We’re at the mercy of people telling us what is wrong... it is stressful. You are just hoping things will last longer than [builders] say they will.”

M, 56, suburban, owner occupier

Professional accreditation and signposting

Participants wanted mechanisms to improve trust in tradespeople. This included accreditation processes and signposting of affordable, high-quality providers from impartial bodies such as the local council, or a government-backed central database of approved suppliers. There was also a strongly-held desire for greater regulation of the sector which could include regular inspections and monitoring to ultimately increase trust and make it easier to identify a suitable, qualified professional.

“Something that’s regulated and inspected, even if it’s every so often, every year, every three years, so they’ve got to make sure that they’re giving a good quality of service.”

F, 55, suburban, social housing

Participants also stressed the need for transparent, fair, and responsive communication to cultivate and build trust. It was felt that tradespeople openly communicating and detailing the process would facilitate a positive experience and help people feel comfortable with someone else in their home.

Confidence and identity

Participants, particularly male owner occupiers, felt significant pride in their prior ability to carry out repairs, forming a barrier to them making changes. They did not want to face how they now had a greater reliance on others and were unable to carry out the same tasks. This was closely entwined with their sense of identity and how they felt about themselves getting older. Those who were experiencing decreasing strength and energy particularly struggled to reconcile their perceived shift away from self-sufficiency. This often resulted in a reluctance to accept help or think about seeking support until absolutely necessary.

“I find myself at 64 entering that time of life where things could get a little bit more difficult for me and I don’t like to admit them out loud because [my wife] thinks I’ve always taken care of everything, so I’ll always take care of everything.”

M, 64, suburban/rural, owner occupier

For social and private renters, having the confidence to request changes from a landlord was essential for enabling repairs. One private renter saw herself as too “conservative” and “not a strong enough character” to stand her ground when requesting repairs. In contrast, one owner occupier reported feeling assured in her ability to know when she was “being listened to” when explaining the renovations that she needed. This resulted in her feeling confident and equipped to oversee work to a good standard.

Support co-ordinating renovations

There was a demand for maintaining or increasing occupants' autonomy over deciding on which professionals conduct repairs or renovations. This was especially important to those homeowners who took pride in their self-sufficiency, and among tenants who felt they lacked control over the tradespeople contracted by their landlord, the council or housing association.

“I would want to choose my own people as the council don't always choose the best people, often just the cheapest.”

F, 55, suburban, social housing

Conversely, those homeowners who were not as confident in their DIY-skills saw value in having an organisation arrange and co-ordinate the maintenance of a home. They described feeling overwhelmed or struggling to co-ordinate multiple contractors for different tasks. This kind of service was recognised as beneficial for people as they got older and potentially less capable to manage on their own.

“Because every time you cannot keep searching for each and every job. Plumbing I research for one person, electrics I research for another person. If just one person would take care of all of it so that I don't have to search for each and every problem, I would be relaxed.”

M, 58, urban, owner occupier

Making changes in the future

Expectations about the future

Attitudes held towards later life underpinned how participants felt about making changes to their home in the future, and specifically whether adaptations were a priority. Many – irrespective of their age and mobility – simply did not ‘feel old’. As such, the need to think about making changes did not feel urgent. While recognising that there would come a point where they would need to act to address specific issues, many felt they were not yet at this stage and had not investigated options for support. This was especially the case if they perceived their home as suitable for their current needs. Those in good health who were active and without mobility issues often found it more difficult to plan for their future requirements, seeing themselves as still too young to do so. In contrast, those with existing health conditions were more likely to accept the need for adaptations or renovations as a way of ensuring their home was suitable for them in later life.

“I’m going to have to wait until I really need the changes. Because I don’t think arthritis [is something] you suddenly wake up with, it comes on slowly but surely. If it does start coming through, I’ll start looking there and then to make changes.”

M, 56, suburban, owner occupier

Attitudes towards the future were linked to expectations that their current living situation would not get worse – both in terms of their personal situation and health, as well as the quality of their home. Even in the face of challenges, such as the issues highlighted in the previous sections, participants were keen to focus on the positives and appreciated the home they had, even if it was not perfect. This highlighted a sense of optimism and a reluctance to think about potentially more challenging future circumstances, especially given the strong link between their identity and their home. They struggled to consider what their future needs might be and at what point they might be required to make changes.

This optimism extended to expectations that appliances would also last, resulting in participants rarely making changes until they needed to. For example, there was a preference to wait until appliances such as boilers broke down or leave repairs until absolutely necessary before replacing or fixing items. There was also a tendency to prioritise quick fixes rather than address underlying issues due to the scale and cost of the situation as well as optimism that things would not get worse.

Knowing where and how to seek support

Identifying problems

Participants did not always identify problems in their homes. They described situations where issues progressively got worse before they identified that something was not right, and they did not always recognise hazards. This was reflected in a lack of awareness of the impact that certain problems – such as damp, cold or mould – could have on their health. While worrying in the abstract about the effect of such problems, participants tended not to appreciate the extent of the potential health implications these issues could cause. This – combined with a tendency towards optimism and a lack of certainty about the future – often resulted in delays and inaction.

Home assessments

Participants wanted schemes involving support officers visiting homes and conducting assessments to “look at the problem with you”. For example, one homeowner described a workplace scheme that arranged for their employees to receive in-home visits after retirement to assess the suitability of their home. He felt this could be rolled out on a larger scale to ensure people were supported and living in a comfortable home. Charities or the council were also seen as bodies which could provide assessments to check on the energy efficiency and accessibility of a property, as well as providing information about support including grants and loans at the same time. It was felt this could help people to consider options they may not have thought about before.

“That could be straightforward and basic but make a lot of difference to their lives.”

M, 70, rural, owner occupier

Awareness of available sources of support

Participants widely reported they would approach advice organisations such as Citizens Advice and Age UK if, or when, they required support with their home. These organisations were viewed as being knowledgeable about housing-related issues and there was a strongly held belief they would provide signposting to relevant support options. Other sources of information included websites such as Money Saving Expert, or a council website. Beyond this, participants were unsure where they could go for specific, housing-related support. There was very limited awareness of what options were available and who would be eligible, with participants across tenures expressing they “did not know where to start.”

“Besides Age Concern, if I wanted advice on how to make my house easier to move around or easier to use, I’d be banging my head against a brick wall for a bit.”

M, 70, rural, owner occupier

This included limited knowledge of financial options, support for making adaptations, or advocacy for making housing-related complaints. Private renters spoke about approaching their landlord in the first instance for support with issues in their home but were not aware of where to go if this was unsuccessful. While there was a common assumption that support for installing adaptations would be managed by the local council, there was uncertainty about the process in practice and what individuals needed to do to access this support.

“I’m not sure what the avenue is or what you need to do or who they are, or if there are certain people. I don’t know, and I know things have been cut. I don’t know if it’s done through the housing, so if you needed to go through the housing to do it.”

F, 55, suburban, social housing

Promoting support options

Participants across tenures gave clear suggestions for how support options could be promoted. They emphasised the importance of accessibility and providing both online and offline resources through leaflets, newspapers, adverts and poster campaigns.

“Everything’s online. There are people that you’re excluding when you’re doing that. A lot of people have been excluded, whether they’re aware of it or not.” F, 55, suburban, social housing

Putting information in places where older people are likely to go was regarded as a good way of reaching the target audience. For example, placing posters at bus stops, in libraries, GP practices and housing associations. Participants also felt that interactions with doctors, nurses or carers could be a way of identifying individuals who require support and cascading information accordingly. Trust was important to this, with healthcare professionals identified as credible navigators who would be listened to by those facing problems with their home.

Participants described how specific time points might provide opportunities for raising awareness. For example, sending information to people when they reached state pension age, or energy companies signposting customers by including resources on bills.

What stops people making changes? What might help??

Limited awareness of support was linked to a reluctance to research the options available. As they currently did not feel old – or in need of support despite facing problems – few had investigated what help they might be eligible for. While there was an acknowledgement that housing-related services likely existed, participants could not recall many examples explaining this was because they had not needed to make use of them.

“I’ve always thought that anything I do, I do myself. I’ve never really looked into what I could get help-wise... I never really look ahead in that way. I just take it as it comes and if I find a problem, I sort it out... At the moment I feel like I could go on forever doing stuff myself, but I know that I won’t be able to. There will come a time when I’ll have to look into it.”

M, 64, rural, private renter

Participants with older relatives who they had helped to access support understandably had greater awareness of organisations they would approach and felt more assured about doing so. Similarly, those who knew people who had made related changes felt more confident seeking support, as they had someone to discuss and confirm the process with.

Joined up support

There was a strong desire for greater signposting between organisations and centralised support and information. For example, participants frequently spoke about the benefits of approaching a single organisation for all their housing-related issues, including information, advice and access to financial or wider support. In particular, those who had found it difficult to access help from multiple sources in the past saw this as a valuable way of smoothing the process.

“It’s not always money that we want, it is help and advice. It has got to be a broad range of subjects. You really want something like a one-stop-shop. Financial advice and then living advice, and repairs and that sort of thing.” M, 70, rural, owner occupier

03. What next?

Reflections and recommendations

This report has described the experience of living in a home that does not fully meet an individual's needs. It also summarises the barriers participants faced in accessing support and what they believe would help them to make changes to their homes. Below we provide three areas for recommendations, reflecting on the findings from this study.

1. Solutions to poor quality homes need to be tailored by tenure type.

Issues with homes were pervasive across housing tenures. However, the experiences and solutions for owner occupiers, private renters and those living in social housing differed depending on the tenure. Private and social renters identified a need for systemic changes such as greater regulation, inspection and autonomy in their homes to make them suitable for their individual needs. In contrast, owner occupiers wanted financial support and information to help make the changes they felt they needed including verification systems to help them identify trusted professionals. **Solutions therefore need to be targeted and tailored to all housing tenures.**

2. There is a need for greater financial support options, particularly for homeowners.

Finances remain a significant barrier to making or requesting changes to a home. While a key challenge for owner occupiers, financial barriers also applied to renters who worried about requesting expensive adaptations or repairs. Participants wanted to see universal financial support options that could help individuals make the changes required to remain in their home for longer. This could be in the form of a grant or loan, with grants targeted at those who need financial support the most – whether because of their financial situation, lack of savings, extent of disrepair or changing accessibility needs due to a health condition. There could also be scope for creating loans specifically for landlords to ensure they make home improvements and adapt their homes for the needs of older tenants. **Financial support options should be accessible to all older people in some form to enable them to make the necessary changes to their home.**

3. Interventions should take account of the role of individual attitudes and identity in making repairs or renovations to a home.

Based on this research, it seems unlikely that financial options or greater information and signposting would be effective in isolation. We heard how many participants fundamentally do not perceive themselves to be in need of support and felt largely satisfied with their homes despite significant hazards. This was often based on:

a) A strong emotional attachment to their home. This was especially evident in the language participants used and the time it took for them to open up about the more distressing or negative elements of their home. New issues often emerged over the course of the diary and during the final interview after we'd spoken to participants on several occasions. They often felt reluctant to complain and saw themselves as doing better than most even with significant problems. As such, individuals may not self-identify as living in 'poor quality housing' and may therefore not apply for support they are eligible for. **Selectively using language and avoiding terms such as 'non-decent' or 'poor quality' may be important for future research as well as communication about support options.**

b) Limited identification of problems and/or understanding of the impact. Insights from the diaries and depth interviews showed our team some of the significant hazards participants had in their homes. However, these were not always identified or seen as a problem by participants themselves. Without identifying a problem, individuals will not seek support or explore how they could go about making changes. **Schemes to assess a home for hazards, accessibility needs and wider requirements such as energy efficiency could help individuals to take steps to future proof their home. Measures such as 'home MOTs' could also provide opportunities to raise awareness of the support available as well as the potential benefits renovations could have on their health and wellbeing.**

c) Significant optimism biases and a reluctance to consider more negative futures, particularly in relation to their mobility and health needs. Tapping into the pride individuals feel about their home could help to reframe conversations about how they see the future as something to look forward to rather than worry about. It may also be important to consider a preventative rather than proactive framing as participants tended to focus on managing risks rather than seeking benefits when considering their home. **Reframing the conversation around adaptations and maintenance as steps to take ownership of the future could help encourage action. This may benefit from using language associated with a prevention mindset that empowers individuals to effectively manage risks.**

d) Not identifying as 'old' and therefore not perceiving themselves to be at a point in their life where they needed to consider measures to future-proof their homes. This was the case even in instances where participants were currently experiencing a decline in their mobility, although those with health conditions were more likely to see an urgent need to adapt their homes. A key finding from this study was the impact that engaging in the research process itself had on participants. Specifically, the impact of keeping a diary where they were required to reflect on their current living situation twice a day for a two-week period disrupted their daily routine and led participants to start making changes. Key life transitions, such as retirement, or health appointments could be used as milestones to provide information and encourage people to reflect on their future needs.

The COVID-19 pandemic has given people a greater sense of their homes and the extent to which they meet their needs. Spending significant amounts of time at home means we have become more attuned to ideas about how our homes can work better for us. **Action should be taken to help facilitate people entering later life to feel more confident and empowered to make their homes more suitable for the future.** While many of the suggested recommendations would be reliant on funding to resource such measures, ultimately these actions could both save the NHS money while also improving the health, wellbeing and connections of millions of people aged over 55 living in homes which do not currently meet their needs²³.

23 Centre for Ageing Better. 2020. Home and Dry: the need for decent homes in later life.

Annex

The sampling approach aimed to capture a diverse range of participants aged between 50-70, who were experiencing issues with their homes. While ensuring diversity in terms of housing tenure, location, situation and problems with their home, the sample included ten owner occupiers to reflect the high number of homeowners living in non-decent homes in England.

We also looked for a mix of living situations i.e. those living alone, those living with partners and/or children; participants with and without health conditions; as well as the type of property they lived in (bungalow, detached house, flat etc.). The achieved sample demographics and household compositions are outlined in the below.

The initial screening questions asked potential participants a range of questions to determine their suitability for the research. At least one participant indicated that they had, or were worried about each of the following issues in their home:

Falls or trips on stairs, flat surfaces, between levels, or in the bath, or uneven surfaces which may cause a fall

People being able to force entry into your home

Pest infestations

Collapse of housing structure

Fire hazards

Carbon monoxide leaks

Shortage of indoor or outdoor space

Noise from neighbours or other street noise, such as traffic, businesses, factories

Too dark, not enough light

Rising damp in floors and walls

Bad condensation problem

Problems with electrical wiring or plumbing

Too cold in winter, or cannot heat effectively

Poor internet connectivity

Property in a poor state of repair

In a neighbourhood where you do not feel safe

Too far from friends or family

The rent / mortgage payments are too expensive

| | | Owner occupier | Rents from a private landlord | Rents from the council / lives in social housing |
|-----------------------------|--|----------------|-------------------------------|--|
| Gender | Female | 5 | 1 | 6 |
| | Male | 5 | 3 | |
| Age | 50-54 | 1 | 1 | 3 |
| | 55-59 | 4 | 1 | 2 |
| | 60-64 | 2 | 2 | |
| | 65-70 | 3 | | 1 |
| Socio-economic group | B | 1 | 1 | |
| | C1 | 1 | 1 | 1 |
| | C2 | 7 | | 3 |
| | D | 1 | 2 | 2 |
| Ethnicity | White | 8 | 4 | 4 |
| | Black | 1 | | 1 |
| | Asian | 1 | | |
| | Mixed Race | | | 1 |
| Region | Great Manchester | 2 | 1 | 1 |
| | Lincolnshire | 2 | | 2 |
| | Leeds city region | 3 | 1 | 1 |
| | South | 2 | 1 | 1 |
| | East of England | 2 | 1 | 1 |
| Rural / urban | Rural | 5 | 2 | 2 |
| | Suburban | 3 | 2 | 4 |
| | Urban | 2 | | |
| Working status | Full-time employment/ self employed | | 4 | 2 |
| | Part-time employment | | | 1 |
| | Retired | 5 | 1 | |
| | Furloughed due to COVID-19 | | | 1 |

| | | Owner occupier | Rents from a private landlord | Rents from the council / lives in social housing |
|---------------------------|--|----------------|-------------------------------|--|
| Health condition | Mental health | | | 2 |
| | Mobility impairment | 2 | 1 | |
| | Long-term physical condition | 2 | | 2 |
| | Other | | 1 | |
| | More than one health condition or disability | 1 | 1 | 2 |
| | None | 5 | 1 | 1 |
| Total Participants | | 10 | 4 | 6 |

Let's take action today for all our tomorrows.
Let's make ageing better.



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