The relationship between housing and health is multidimensional because of the many functions that housing plays in our lives.

Housing has both material form and symbolic meaning. Our home is the most intimate space we inhabit – the centre of daily routine where important human relationships are played out and nurtured. Housing has economic, social and cultural value as well as aesthetic, design and representational elements. One's residence can signify social status, prosperity and cultural norms, in addition to economic and emotional investment. Accordingly, the bonds between inhabitant and dwelling can be very deep. When severed through forced relocation, the impact can be akin to the death of a loved one.

When we think about housing and health we have to consider both the characteristics of the individual dwelling and its geographic location. Air pollution and noise from nearby heavily trafficked streets and aircraft flying overhead can impact on health – sleep disruption is one possible outcome. A neighbourhood will be detrimental to a healthy lifestyle where it is difficult to walk to local shops and services, where quality open space is unavailable, and where healthy food is scarce. Furthermore, if residents do not feel safe, they will hesitate to venture outdoors except by car, reducing their physical activity and social interaction with neighbours.

Housing provides shelter from extremes of climate. It is a place where we rest, where we can grow, prepare, store and consume food, where we clean our bodies and where we care for growing children and other dependents. The material conditions of the dwelling have to support these fundamental human requirements in healthy ways. Housing that is in disrepair, does not have functioning waste removal systems and is infested with pests will have adverse health impacts. So too will interiors that are polluted with tobacco smoke, dust and dust mites, toxins from the burning of gas, oil and kerosene, mould, or chemical emissions from building materials. Respiratory illness, including asthma, may eventuate. In colder climates this is exacerbated by drafty and poorly heated homes.

In hot climates, the house needs to be cooled appropriately to ensure thermal comfort for restful sleep and harmonious living. Building orientation, ventilation and design, together with insulation and external shading, are ways of addressing this issue. The use of air conditioning may be necessary, but is not sustainable because of the high energy requirements and resultant production of greenhouse gases.

Housing affordability is an important issue for mental health. Home ownership, a strong cultural tradition in Australia, is linked to financial security, particularly in older age. Ownership can also represent freedom to alter structures, decorate and plant gardens in ways that have particular meanings for the inhabitant. Nevertheless, the high cost of housing can be a significant burden, increasingly so, and especially for young families, resulting in anxiety, stress and depression.

The traditional Queenslander house is sustainable and healthy in a hot climate.
Personalisation of the home’s exterior can take many forms

Housing design determines how well the built form can adapt to individual and family needs, particularly as they change over the life course. For some, being able to remain in one’s home well into old age is critical to happiness and wellbeing. For others, a fresh start in a purpose built residential complex can be a welcome relief from having to maintain a dwelling and its garden.

Housing fulfils physical, psychological, social and emotional needs. Housing is without doubt fundamental to human health. To understand the issues involved, planners need to build on their knowledge of household tenure, settlement patterns and occupancy rates. Housing will continue to evolve to meet the demands of climate change, resource depletion, together with demographic, economic and socio-cultural shifts. The Healthy Built Environments Program is involved in an Australian Housing and Research Institute (AHURI) funded project examining research on housing and health – see our web site for further details.

The health implications of housing should inform housing policy to ensure the best possible outcomes for physical and mental health.

Associate Professor Susan Thompson and Professor Anthony Capon direct the Healthy Built Environments Program in the City Futures Research Centre at the University of New South Wales (http://www.cfr.unsw.edu.au/ct/HBEP). The Program receives funding from the NSW Department of Health.