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**Royal New Zealand Plunket Society (Inc.)**

**Submission on the Healthy Homes  
Guarantee Bill (No. 2)**

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## To the Government Administration Committee on the Healthy Homes Guarantee Bill (No. 2)

### Introduction

1. The Royal New Zealand Plunket Society (Inc.) has been part of New Zealand's landscape for over one hundred years, and our mission - supporting the development of healthy children and families - is just as relevant now as it was when Plunket was established by Dr (Frederic) Truby King in 1907.
2. Plunket provides universal well child primary health services to approximately 90% of new babies in New Zealand, as well as parenting education and support services in communities throughout New Zealand. Plunket has 6,000 volunteers who represent a broad spectrum of New Zealanders currently engaged in a variety of voluntary roles with Plunket, as well as more than 650 professional staff who deliver the Well Child/Tamariki Ora service framework to families with children aged from birth to five years. This submission represents the feedback from both Plunket's volunteer and professional staff.
3. Plunket's professional staff such as nurses and health workers complete in excess of 300,000 visits to family homes annually, the majority being within an infant's first year of life. These visits include assessing how housing conditions may impact on health and wellbeing, and where necessary, anticipatory guidance on preventing infectious diseases, skin infections and other primary health care activities to mitigate the effects of inadequate and overcrowded housing.
4. Poor quality rental housing affects young children disproportionately, because they are particularly vulnerable to negative health outcomes connected to sub-standard housing. This is for reasons directly connected to their age and stage of development.
5. The Plunket Society membership passed a remit at its 2014 conference calling for political action to improve the quality of housing in New Zealand, through promoting understanding of the correlation between housing and child health, the ultimate goal being to create good-quality family housing stock that is safe, accessible, affordable, and well-heated and ventilated. This Bill addresses the Plunket Society's conference remit by requiring published

standards for insulation, heating and ventilation, indoor room temperature and drainage; this would allow these to be compared with those required for owner-occupied premises.

### Summary of Submission

6. **The intent of the Bill:** Plunket supports this Bill's intention to improve the quality of housing stock that is available for rental, by proposing law changes that create further minimum standards for all landlords to abide by. It co-exists nicely with the Government's recent amendments to the *Residential Tenancies Act 1986*, which have addressed a safety matter (fire risk) and insulation to the 1978 standard.
7. **Clauses 4, 5 and 6:** Plunket supports clauses 4, 5 and 6 of the Bill, which would work together to create responsibilities for landlords to ensure their tenancy agreements explicitly complied with minimum heating and insulation standards published by the department (under new section 132A). A landlord's failure to comply would be an unlawful act and therefore enforceable.
8. **Proposed new section 132B:** Plunket proposes a further provision under Clause 6. New section 132B would require inspections of a representative sample of rental housing stock to support compliance with the healthy home standards and annual public reporting on the level of compliance.
9. **The heating standard:** Plunket proposes that the heating standard specify a requirement for fixed heating in the primary legislation and exclude the provision of unflued gas heaters, which are a children's health risk.

### The intent of the Bill

10. This Bill's intention is consistent with Plunket's advocacy focus. Children's health and housing is one of the RNZ Plunket Society Board's three advocacy priorities into 2017. The Board has recognised that housing adequacy is increasingly a public health issue in New Zealand. The New Zealand College of Public Health Medicine says:

*The health consequences of inadequate housing are substantial and the complex causal pathways between housing and health are becoming better understood and documented.*<sup>1</sup>

11. New Zealand is privileged to have world-class housing researchers to refer to. The well-established He Kainga Oranga/Housing and Health Research Programme,<sup>2</sup> led by Philippa Howden-Chapman, won the Prime Minister's Science Prize in 2014.<sup>3</sup>
12. Approximately 450,000 households, or around one million New Zealanders live in rented accommodation.<sup>4</sup> As the Ministry of Business, Innovation and Employment reported in its Regulatory Impact Statement [RIS] for the Residential Tenancies Amendment Bill: “[p]oor quality rental housing particularly affects the groups, including Māori, who are disproportionately represented in the lower quartile of the rental market.”<sup>5</sup> We don't know exactly how many children under five years live in rental accommodation, although excellent work has been done by Brian Perry.<sup>6</sup> Perry's Ministry of Social Development research showed that approximately 53% of poor<sup>7</sup> children lived in private rentals and 19% in Housing New Zealand accommodation.
13. The *Growing Up in New Zealand* study (involving 6,853 children), has shown nearly half of their enrolled children to be living in rental accommodation (39.8% in private rental homes,

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<sup>1</sup> New Zealand College of Public Health Medicine Policy Statement, at page 1.

[http://www.nzcpmh.org.nz/media/64535/2013\\_08\\_02\\_housing\\_policy\\_statment.pdf](http://www.nzcpmh.org.nz/media/64535/2013_08_02_housing_policy_statment.pdf) (downloaded 20 June 2016).

<sup>2</sup> <http://www.healthyhousing.org.nz/publications/>

<sup>3</sup> <http://www.pmscienceprizes.org.nz/previous-winners/2014-science/>

<sup>4</sup> 2013 Census QuickStats about housing.

<sup>5</sup> Ministry of Business, Innovation and Employment, *Regulatory Impact Statement: Smoke alarms and insulation in residential rental properties*. Wellington, June 2015. <http://www.mbie.govt.nz/publications-research/publications/housing-and-property/ris-smoke-alarms-insulation-residential-rental-properties.pdf> (Downloaded 22 June 2016).

<sup>6</sup> Perry, B., *Household incomes in New Zealand: trends in indicators of inequality and hardship 1982 to 2009*, Ministry of Social Development, Wellington, 2010.

<sup>7</sup> 'Poor' is defined here as suffering income poverty (i.e. household income below 60% of the median household income, after housing costs subtracted).

with a further 7.8% in public rental)<sup>8</sup>. These rates did not vary significantly when children were nine months and two years of age<sup>9</sup>.

14. It is important for the Committee to know that young children (in Plunket's age-group) are particularly vulnerable to poor health outcomes connected to sub-standard housing. This is for reasons directly connected to their age and stage of development.<sup>10</sup> Babies and young children tend to spend a lot of their time at home,<sup>11</sup> especially in winter, when the impact of poor quality housing is most felt. They are also more likely than adults to be affected by poor quality air, as their lungs and respiratory system continue to develop up until around the age of six.

15. As well, young children's bodies are more affected by ambient temperature variations than those of adults or teens.<sup>12</sup> Finally, their higher metabolic rate means that they breathe higher air volume per body weight. Unfortunately, this causes young children to take in more cold, damp air containing mould spores.<sup>13</sup>

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<sup>8</sup> Morton, S.M.B., Atatoa Carr, P.E., Grant, C.C., Lee, A.C., Bandara, D.K., Mohal, J., Kinloch, J.M., Schmidt, J.M., Hedges, M.R., Ivory, V.C., Kingi, T.R., Liang, R., Perese, L.M., Peterson, E., Pryor, J.E., Reese, E., Robinson, E.M., Waldie, K.E., and Wall, C.R., *Growing Up in New Zealand: A longitudinal study of New Zealand children and their families. Report 2: Now we are born*. Auckland, 2012.

<sup>9</sup> Morton, S. M. B., Atatoa Carr, P. E., Berry, S. D., Grant, C. C., Bandara, D.K., Mohal, J., Tricker, P. J., *Growing Up in New Zealand: A longitudinal study of New Zealand children and their families. Residential Mobility Report 1: Moving house in the first 1000 days*. Auckland, 2014.

<sup>10</sup> Bearer, C. F., *Future Child*, "Environmental health hazards: how children are different from adults", 5(2): 11-26. United States, 1995.

<sup>11</sup> Ministry of Business, Innovation and Employment, *Regulatory Impact Statement: Smoke alarms and insulation in residential rental properties*. Wellington, June 2015. <http://www.mbie.govt.nz/publications-research/publications/housing-and-property/ris-smoke-alarms-insulation-residential-rental-properties.pdf> (Downloaded 22 June 2016).

<sup>12</sup> Because young children's surface area to body mass ratio is higher.

<sup>13</sup> Bearer, C. F., *Future Child*, "Environmental health hazards: how children are different from adults", 5(2): 11-26. United States, 1995.

16. An international study of children from 20 countries (including New Zealand) supported an association of exposure to dampness at home and an increased risk for reported eczema.<sup>14</sup>
17. A New Zealand epidemiological study published in the Lancet connects increased incidence of infectious diseases with what the authors term “fundamental social determinants” including poor housing conditions. It notes that people of Māori and Pacific ethnicity are especially affected and reports that “[c]hildren younger than 5 years were significantly more likely than other age groups to be admitted with infections throughout the observation period...”<sup>15</sup> [emphasis added]. This is of tremendous concern to Plunket.
18. Evidence links living in over-crowded conditions with communicable diseases such as meningococcal disease, acute rheumatic fever and tuberculosis among children.<sup>16</sup> The link between over-crowding and insulation might not be immediately obvious, but it is this: cold and damp houses are more expensive to heat. Families share houses to save costs, not just rental costs but the cost of utilities, particularly power, which is the most expensive. They save power by heating one room and thereby create an over-crowding situation, which facilitates the spread of communicable diseases and skin infections, such as infected eczema or impetigo (school sores).<sup>17</sup> Living in homes with reported visible mould has also been associated with decreased cognitive function in children.<sup>18</sup> The children Plunket sees, at

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<sup>14</sup> (Weinmayr, G., Gehring, U., Genuneit, J., et al., *Dampness and moulds in relation to respiratory and allergic symptoms in children: results from PhaseTwo of the International Study of Asthma and Allergies in Childhood (ISAAC Phase Two)*. Clin. Exp. Allergy 43, 762–774), 2013.

<sup>15</sup> Baker MG, Telfar Barnard L, Kvalsvig A, Verrall A, Zhang J, Keall M, et al. *Increasing incidence of serious infectious diseases and inequalities in New Zealand: A national epidemiological study*. The Lancet. 2012; 379:1112-9.

<sup>16</sup> Baker MG, Howden-Chapman P., *Time to invest in better housing for New Zealand children*. New Zealand Medical Journal; 125:6-10., 2012.

<sup>17</sup> Treating skin infections is expensive and time-consuming: all household members need to be treated with prescription products from the GP. All clothing and bedding has to be washed in *hot* water and the whole process needs to then be repeated. Even with free GP care for under 13 year olds, treating a skin infection effectively could cost a family in excess of \$100.

<sup>18</sup>Jedrychowski. W., Maugeri, U., Perera. F., Stitger, L., Jankowski, J., Mroz, E., Flak, E., Skarupa, A., and Sowa, A., “Cognitive function of 6-year old children exposed to mold-contaminated homes in early postnatal period. Prospective birth cohort study in Poland.” *Physiology & Behavior*, 104 (5), pp. 989–995), 2011.

zero to five years of age, tend to spend a high proportion of their time at home. When the home environment is not optimal, this creates or exacerbates health problems.

19. One South Island Plunket nurse describes her experiences of the impact of sub-standard housing in the following terms:

*“Houses in my [high deprivation] area are often rentals, old, with poor insulation or not insulated at all. They often lack carpet, have poor quality curtains, that aren’t thermal lined. I visit houses where curtains are kept drawn all day in an attempt to retain heat in the home. Overall, it’s very hard to keep the house warm enough to maintain good health.*

*“If families are using the living area as their sleeping area as well to save on heating bills, there is very little private space. I think adults’ moods are influenced by a lack of private space, which to my mind increases the risk of anger towards other family members. I see how a lack of space contributes to unsuitable sleeping arrangements for babies, including bed-sharing.*

*“In winter, the warmed room is often used to dry clothes in also, which makes for more condensation. It’s just too expensive to use a drier and families don’t have a garage to hang the clothes in – or they are living in the garage.*

*“It’s an environment in which infectious diseases thrive: gastroenteritis, respiratory infections such as bronchiolitis are common in babies [(older children can often get away with a nasty head-cold)], ‘strep throat’ and immunisation-preventable diseases such as measles and whooping cough. Asthma is exacerbated and eczema tends to become infected. Skin infections, including scabies and impetigo (or school sores) are also seen unfortunately. The cycle of skin infections is really hard to break, because all family members need GP-prescribed medication, and clothes as well as bedding have to be washed in hot water. For some families, this is just too costly to do in one go.”*

20. A North Island-based B4 School Check Plunket Nurse talks about children being hospitalised as the ‘trigger’ that results in obtaining better quality housing:

*“I visited a family of five, who were renting a Housing New Zealand home. Both parents were working. Their home was cold and received little sunlight. There was some insulation but the house remained cold. Two of their children had admissions to hospital for respiratory illnesses –bronchiolitis and asthma.*

*“They were desperate to improve their housing conditions, particularly after the discussion around rheumatic fever. Eventually a [healthy housing] referral was accepted, due to the children’s respiratory illnesses, and a warmer, drier house found.*

*“This was a good result for that family, but we would like to make a difference by being pro-active and support families with housing before it leads to hospital admissions.”*

### Clauses 4, 5 and 6 of the Bill

21. The health benefits for children of living in good quality housing cannot be over-stated. Clause 4 ensures the matters in new section 132A, particularly insulation and heating, are explicated when the premises are let. Failure to attend to these matters constitutes an unlawful act, thereby bringing it within the jurisdiction of the Tenancy Tribunal.<sup>19</sup> The need for the measures contained in clauses 4, 5 and 6 is illustrated by the stories and evidence above. Unfortunately however, some tenants with young children are reluctant to complain to the Tribunal for fear of losing their tenancy and having difficulty finding a new rental property without a reference. This is one of the reasons that Plunket proposes the insertion of new section 132B.

### Proposed new section 132B

22. Once the department has published standards for healthy homes, the obvious next step is to ensure they are complied with. Plunket’s proposal is that a representative sample of rental housing stock be inspected to support compliance with the healthy home standards and the level of compliance be reported on annually. This procedure could be encapsulated under a new section 132B. As well as assisting tenants, this would assist governmental planning by producing data on housing quality in New Zealand.

23. We appear to have a dearth of robust evidence on housing quality. There is the BRANZ 2010 House Condition Survey, referred to in the RIS<sup>20</sup> accompanying the Government’s recent bill amending the *Residential Tenancies Act 1986*. However, the BRANZ survey had a small sample size. It found that 43 percent of rental properties had moderate to high levels of mould, compared with 25 percent of owner-occupied properties. This means that

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<sup>19</sup> Under Section 77 *Residential Tenancies Act 1986*.

<sup>20</sup> Ministry of Business, Innovation and Employment, *Regulatory Impact Statement: Smoke alarms and insulation in residential rental properties*. Wellington, June 2015. <http://www.mbie.govt.nz/publications-research/publications/housing-and-property/ris-smoke-alarms-insulation-residential-rental-properties.pdf> (Downloaded 22 June 2016).



almost half did not comply with a set of regulations promulgated in 1947.<sup>21</sup> This is surprising, and very disappointing.

24. The RIS for the *Residential Tenancies Amendment Bill* states:

*Officials estimate that approximately 180,000 private sector rental properties (including approximately 90,000 occupied by low-income tenants) would not meet a moderate ceiling and underfloor insulation standard. [This excludes properties where it is not practical to retrofit insulation, for example because there is insufficient crawl space under the floor].*<sup>22</sup>

25. Rather than a win-win, this is a 'lose-lose' situation: as the RIS states, "...persistent cold, dampness and mould reduce the lifetime of internal wall linings and other components, and increase long-term maintenance costs."<sup>23</sup>

26. Plunket staff's own experiences when undertaking home visits, inform us that compliance with Clause 15 ("*[e]very house shall be free from dampness.*") of the *Housing Improvement Regulations 1947*<sup>24</sup> is not always adequate.

27. The shortage of robust data on rental housing quality, when combined with evidence that tenants with children are reluctant to take complaints against landlords, lead Plunket to propose that consideration be given to accompanying the publication of standards with requirements for inspection (of a representative sample of rental housing stock) and reporting on residential rental properties. The proportion of properties that would need to be inspected in order to gain valid information on compliance would be a matter on which officials would be best placed to advise, if the Committee required that. From Plunket's perspective, if the law is not enforced, that becomes a public health issue and one that impacts first and foremost on young children.

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<sup>21</sup> Clause 15 of the *Housing Improvement Regulations 1947* states that "*[e]very house shall be free from dampness.*"

<sup>22</sup> Ministry of Business, Innovation and Employment, *Regulatory Impact Statement: Smoke alarms and insulation in residential rental properties*. Wellington, June 2015. <http://www.mbie.govt.nz/publications-research/publications/housing-and-property/ris-smoke-alarms-insulation-residential-rental-properties.pdf> (Downloaded 22 June 2016), *paragraph 14*.

<sup>23</sup> *Ibid.*

<sup>24</sup> <http://www.legislation.govt.nz/>

## The heating standard

28. New Zealand homes require some form of heating during the winter months to increase ambient indoor temperatures to the levels recommended by the World Health Organisation.<sup>25</sup> Heating – the power bill – is ‘the elephant in the room’ when healthy housing is discussed. In the *Growing Up in New Zealand* study when the infants were nine months of age, 11% of mothers reported that their babies were living in homes where no heating was used and nearly one in five (18%) families with infants reported ‘putting up with feeling cold’ to save on heating costs. Children living in more deprived areas were more likely to live in homes where no heating was used.<sup>26</sup>
29. Plunket has been concerned about the use of unflued gas heaters in residential dwellings for some years now, because of the polluting gases they release (nitrogen dioxide and carbon monoxide). It is aware of labelling and provision of information to consumers, but unflued heaters continue to be used in New Zealand homes.
30. The Plunket Society’s members passed a remit at the 2009 conference advocating for legislation making the use of unflued gas heaters in the home unlawful. These heaters can pose a number of health risks such as an increased risk of asthma, especially when they are used without adequate ventilation.<sup>27</sup> As explained earlier, young children are more likely to suffer because they spend more time at home indoors in the winter months and because of developmental respiratory factors and so forth.
31. Nevertheless, such heaters are common in New Zealand homes, and may be favoured by families in rental tenure as they are portable, seen as cheaper than heaters powered by

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<sup>25</sup> 21°C in the living room and 18°C in the other occupied rooms.

<sup>26</sup> Morton, S.M.B., Atatoa Carr, P.E., Grant, C.C., Lee, A.C., Bandara, D.K., Mohal, J., Kinloch, J.M., Schmidt, J.M., Hedges, M.R., Ivory, V.C., Kingi, T.R., Liang, R., Perese, L.M., Peterson, E., Pryor, J.E., Reese, E., Robinson, E.M., Waldie, K.E., and Wall, C.R., *Growing Up in New Zealand: A longitudinal study of New Zealand children and their families. Report 2: Now we are born.* Auckland, 2012.

<sup>27</sup> Wickham, L., “Review of Unflued LPG Cabinet Heaters in New Zealand.” *Air Quality and Climate Change*, 45(1), 19. 2011.

electricity and can be used if the power has been cut off.<sup>28</sup> Within the *Growing up in New Zealand* study, for households which used heating, unflued (portable) gas heater usage was the source of heating for 12% of households.

32. The minimum heating standard must consider tenants' operational costs as well as their health and safety. Plunket proposes that the heating standard specify a requirement for fixed heating in the primary legislation and exclude the provision of unflued gas heaters, which are a children's health risk. Making *fixed* heating available in the living room as a minimum standard would be in line with the *Home Improvement Regulations 1947*,<sup>29</sup> which require a "...means of heating to be **fitted** if it is not an open fireplace." [Emphasis added].

33. **It is proposed that two amendments are made to clause 6:**

First, before the word "heating" in sub-paragraph (i) of paragraph (a), the word "fixed" is inserted. The revision will read:

(a) the standards must describe what constitutes adequate—

(i) methods of fixed heating; and...

34. This would have the dual effect of ensuring the landlord takes responsibility for providing a means to adequately heat the living space in the house and of discouraging the residential use of unflued gas heaters, many of which are portable. If the Committee wished to go further, it could amend paragraph (b) of new section 132A, by adding, *after* the words "...referred to in **paragraph (a)**" and before the semi-colon, the words:

"except that an unflued gas heater will never constitute an adequate method of heating"

## Conclusion and recommendation

35. Improvements in New Zealand's housing stock cannot happen quickly enough for the health of our children. It is hoped that this submission has persuaded members of the Committee of the urgency of this, and the need to take advantage of the opportunity the Bill offers to

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<sup>28</sup> <http://www.health.govt.nz/your-health/healthy-living/environmental-health/household-items-and-electronics/unflued-gas-heaters>

<sup>29</sup> <http://www.legislation.govt.nz/>

build on the changes in the *Residential Tenancies Amendment Bill*. Plunket staff visiting zero to five year old children in cold, damp dwellings need to know that improved housing standards for these children and their families are an absolute priority here in Wellington. The *Healthy Homes Guarantee Bill (No.2)* is a further step in the right direction for those whom Plunket visits in sub-standard rental homes.

36. The last word should go to housing researcher, Philippa Howden-Chapman. In talking about He Kainga Oranga/Housing and Health Research Programme winning the 2014 Prime Minister's Science Prize, she said that "she was motivated to establish the team by concern about growing inequality in New Zealand and the desire to do something practical to improve the health and wellbeing of New Zealanders. *'There's been a long standing assumption that all New Zealanders would own their own house but a lot of people now live in rental housing. I wanted to provide evidence to support the premise that everyone should have the right to warm, dry, safe housing regardless of whether they own or rent.'*"<sup>30</sup>
37. **Plunket commends the *Healthy Homes Guarantee Bill (No.2)* to the Committee and asks it to recommend the Bill be passed with the amendments proposed above.**

Thank you for considering Plunket's submission. We do not wish to appear before the Committee.

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<sup>30</sup> <http://www.pmscienceprizes.org.nz/previous-winners/2014-science/>