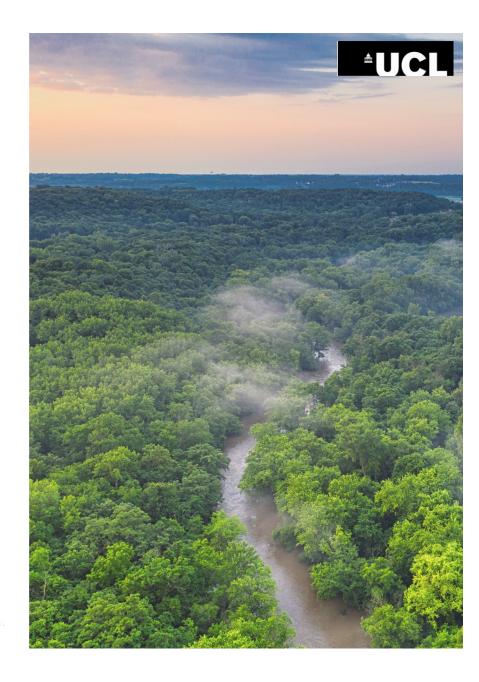


Social determinants of mental health

Social determinants of mental health encompass the set of conditions (e.g. income, employment, education, housing, childhood adversity and more) to which people are exposed across the life course which affect individual mental health outcomes and contribute to mental health disparities within and between populations.

The social determinants of mental health and disorder: evidence, prevention and recommendations

James B. Kirkbride¹, Deidre M. Anglin^{1,3}, Ian Colman⁴, Jennifer Dykxhoorn¹, Peter B. Jones^{5,6}, Praveetha Patalay^{7,8}, Alexandra Pitman^{1,9}, Emma Soneson¹⁰, Thomas Steare⁷, Talen Wright¹, Siân Lowri Griffiths¹¹





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Housing

Risk/Protective

Good quality, safe, and adequate housing is an important determinant of mental health. Adequate housing must have enough space to accommodate all who live there, be secure from intruders, safe from fire, heated adequately, and lacking hazards like damp or poisonous gasses (1). Further important aspects are housing tenure (e.g. renting or owning) and stability, which refers to feeling certainty regarding affording payments and having choice about whether and one wants to move (2).

Key Literature/Interventions

- Housing improvements for health and associated socioeconomic outcomes – Thomson et al. 2013
- Housing Policies and Health Inequalities Marí-Dell'Olmo et al. 2017
- The impact of interventions for youth experiencing homelessness [...]: a systematic review –Wang et al. 2019

Helpful Resources

- https://www.citizensadvice.org.uk/housing/
- · https://england.shelter.org.uk/housing_advice
- https://www.citizensadvice.org.uk/benefits/sick-or-disabled-people-and-carers/employment-and-support-allowance/





Lived Experience



How where you live affects your mental health - Mind



<u>The lived experience</u> <u>of homelessness -</u> Groundswell

Connected Determinants

Determinants of public mental health are interconnected.

Suggested links to Housing:

Neighbourhood Deprivation Public & Community Services

Ethnicity & Culture

(In)equality &

(In)equity

Built & Natural Environment

Migration

Welfare System

Individual / Sociodemographic / Housing

Housing affordability

Safe, secure housing is a key determinant of mental health. However, with costs of living at a historic high, there are many families struggling to cover their basic needs.

Housing costs, in particular, have risen so the proportion of families facing affordable housing has also increased.

Some have described this as a "crisis of affordability" in England. While it seems apparent that housing and financial stress can impact mental health, longitudinal evidence is limited.



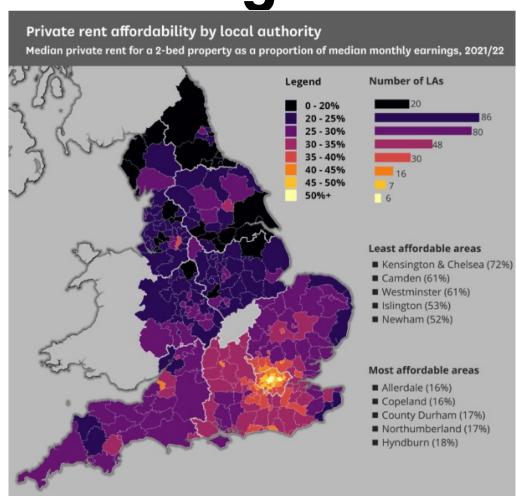


What is "affordable" housing?

There is no statutory/consensus definition of affordable housing in England.

A common way of measuring housing affordability is calculating a housing cost: income ratio (the average proportion of household income spent on housing cost).

We used the UK government ratio, where **spending** more than 30% of household income on housing (rent/mortgage) was considered to be experiencing housing affordability issues.



Source: Annual Survey of Hours and Earnings (ASHE)



Aim



Investigate the longitudinal association between trajectories of housing affordability problems and mental health.

Methods

DATA: Understanding Society, a UK longitudinal household

survey

EXPOSURES: Trajectory of housing affordability (Wave 1-9)

OUTCOMES: Common mental disorders including symptoms

of depression & anxiety (GHQ-12; Wave 10)

ANALYSIS: Group based trajectory modelling, linear

regression

DATA: Understanding Society, a UK longitudinal household survey; Waves 1-10

EXPOSURES: Trajectory of housing affordability (Wave 1-9; 2009-19)

OUTCOMES: Mental health problems including symptoms of depression & anxiety as measured by the GHQ-12 (Wave 10; 2018-20)

ANALYSIS: Group based trajectory modelling to assess housing affordability exposures, unadjusted and adjusted linear regression to estimate the association between housing affordability and mental health problems.

WEIGHTS: We used generated probability weights to account for unequal selection probabilities, differential non-response, and potential sampling error using inverse probability weighting.

MISSING DATA: We assumed data were missing at random and used maximum likelihood estimation in the trajectory modelling, and imputed missing data for the regression models.

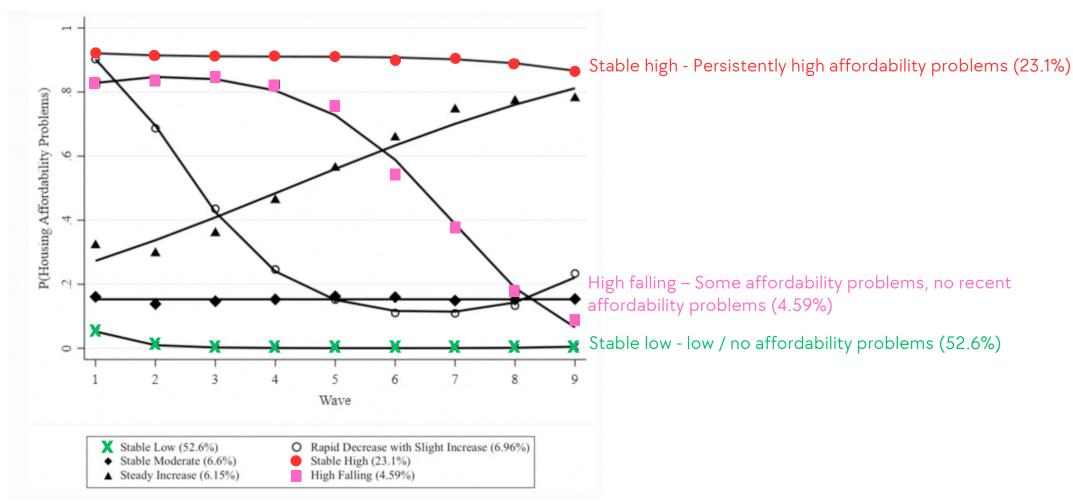
Results – sample characteristics

The final sample included 30,025 participants (max 1 per household)

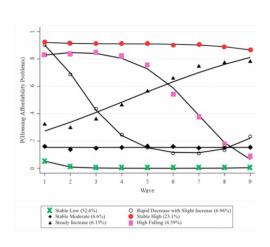
In the overall sample, the mean age was 50.0 (SD 17.0), 51.3% were female, 83.8% lived in England, and 78.1% were White British/Irish.



Results - trajectory groups



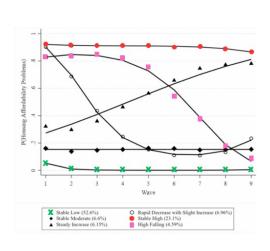
Results – linear regression



	Unadjusted model	Age, sex, country adjusted
	Coeff. (95% CI)	Coeff. (95% CI)
Stable low	Reference	Reference
Stable moderate	0.91 (0.57, 1.24)	0.58 (0.24, 0.92)
Steady increase	1.03 (0.68, 1.38)	0.56 (0.22, 0.90)
Rapid decrease with slight increase	1.02 (0.63, 1.41)	0.63 (0.25, 1.01)
Stable high	1.43 (1.14, 1.73)	0.93 (0.63, 1.22)
High falling	1.69 (1.16, 2.22)	1.29 (0.76, 1.82)

Results – linear r

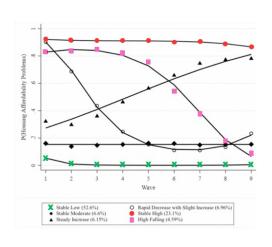
Compared to the stable low group, all other groups had significantly worse mental health at follow-up



	Unadjusted mode	ge, sex, country adjusted
	Coeff. (95% CI)	Coeff. (95% CI)
Stable low	Reference	Reference
Stable moderate	0.91 (0.57, 1.24)	0.58 (0.24, 0.92)
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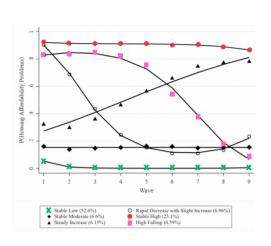
Results – linear regression





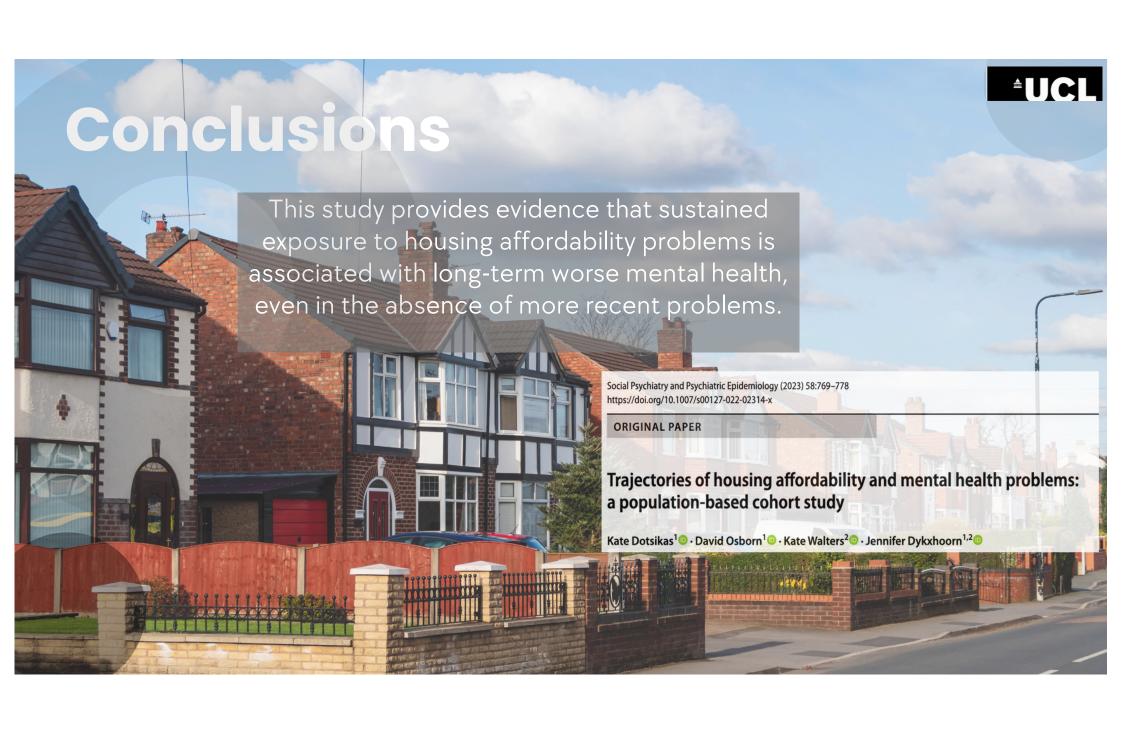
	Unadjusted model	Age, sex, country adjusted
	Coeff. (95% CI)	Coeff. (95% CI)
Stable low	Reference	Reference
Stable moderate	1091 103/ 1	The GHQ-12 score was 0.93 points ner in the stable high group compared
Steady increase	1.03 (0.68, 1.3	to the stable low group
Rapid decrease with slight increase	1.02 (0.63, 1.41)	0 .25, 1.01)
Stable high	1.43 (1.14, 1.73)	6 .93 (0.63, 1.22)
High falling	1.69 (1.16, 2.22)	1.29 (0.76, 1.82)
		0

Results – linear regression



	Unadjusted model	Age, sex, country adjusted
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Stable high	1.43 (1.14, 1.73)	0.93 (0.63, 1.22)
High falling	1.69 (1.16, 2.22)	1.29 (0.76, 1.82)

Those who had a high probability of housing affordability problems in the past but who no longer had housing affordability problems in recent waves (high falling) still had worse mental health than the stable low group





Thank you!







Co-authors



Kate Dotsikas



Prof David Osborn Prof Kate Walters

Acknowledgements

Funders:

- -National Institute for Health and Care Research (NIHR) School for Public Health Research
- -NIHR University College London Hospitals Biomedical Research Centre
- -Mental Health Research UK

Data: Understanding Society, funded by the ESRC with scientific leadership by University of Essex and survey delivery by NatCen and Verian.

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