

ELGC COV 48

Ymchwiliad i COVID-19 a'i effaith

Inquiry into COVID-19 and its impact

Ymateb gan: 4thecommunity, Rhyl

Reponse from: 4thecommunity, Rhyl

4thecommunity is a community based small organisation working in a severely disadvantaged area. We work together very closely with St Marys church, the Catholic Church for Rhyl. We are based in West Rhyl, which has for most of the last 20 years been the most disadvantaged ward in Wales. It is currently considered the second most socially deprived in Wales as per Welsh Government deprivation statistics.

We are expressing views and information from three sources.

- 1) Experience of issues residents face in a disadvantaged area making the experience of covid especially difficult.
- 2) Views of residents we have face to face contact with.
- 3) Anecdotal comments heard from associates and through networks.

There are many issues affecting low income private sector renters both locally and in other areas, but we are focusing on housing conditions for low income renters in Rhyl and impact on covid-19.

Rhyl is typical of UK seaside towns which over the last forty years gradually fell into deprivation and poverty once their earlier tourist trade had diminished. In common with Blackpool and Jaywick in England, these are seaside towns now at the top of national Government deprivation tables. This represents a highly significant and surprising shift away from inner city areas having the greatest deprivation levels.

For 15 years at least social housing has not been built. The private sector now provide a great deal of the rented accommodation available for people who are on low incomes, disadvantaged and vulnerable. Especially so in seaside towns. Seaside towns have been in acute decline, with ex b+b's and small hotels being converted into houses of multiple occupation (HMO's). Many HMO buildings could comfortably accommodate several flats, but often also include several bedsits. Getting a flat or bedsit in a HMO fairly quickly and easily has been a magnet for many disadvantaged people drawing them to Rhyl and other seaside towns. It is the private sector housing market that has been the main driver in creating such concentrated areas of seaside poverty and disadvantage.

There is a link between disadvantage and covid-19 infection rates. Death rates related to covid-19 in disadvantaged areas are double those in more affluent areas (Office of National Statistics). (<https://www.bbc.co.uk/news/health-53021942> and <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/bulletins/deathsinvovingcovid19bylocalareasanddeprivation/deathsoccurringbetween1marchand17april#welsh-index-of-multiple-deprivation-analysis>)

Death rate figures for the town of Rhyl are not available, but they are for the county of Denbighshire where Rhyl is located. The following reflects figures from public health authorities on the spread of Covid-19 in England, Scotland, Wales and Northern Ireland. (<https://www.theguardian.com/world/2020/jul/07/coronavirus-uk-map-the-latest-deaths-and-confirmed-covid-19-cases>) Note, this is not total number of cases, there are lots of areas with much higher populations than the county of Denbighshire that have more cases.

On the 8th July 202 Denbighshire had the **6th highest concentration of covid-19 cases in the UK** at 752.4 cases per 100k people. This was behind Leicester, Oldham, Bradford and Barnsley, all areas with large black and minority ethnic populations that are disproportionately affected by the virus. Alongside Merthyr Tydfil and Rhonda Cynon Taf, both areas with high poverty levels in the Welsh Valleys. Above Blackpool, with one of the highest poverty rates in England.

On the 25th July Denbighshire had the **8th highest concentration of covid-19 cases in the UK** at 814 cases per 100k people. This was behind Leicester, Bradford, Blackburn, Oldham and Rochdale, all areas with large black and minority ethnic populations disproportionately affected by the virus. Alongside Merthyr Tydfil and Wrexham, both with high poverty levels.

This positioning of Denbighshire so high in the covid-19 infection rates across the UK is very surprising, even **alarming**.

Denbighshire (pop 90,000+) is mainly a rural area. Rhyl (pop 25,000+) is the largest urban area in the county. Rhyl has far higher rates of deprivation than other areas in Denbighshire. This combination of being the biggest local urban area, and by far the highest area of deprivation, suggests a very high proportion of covid-19 cases in Denbighshire are likely to be in Rhyl. In turn this suggests the covid-19 infection rates in Rhyl are much higher than those for Denbighshire, and places Rhyl much higher up infection rate tables.

Rhyl must be close to having the highest covid-19 infection rate in the UK.

West Rhyl has a population of 5000+. Locally, there is substantial social and financial inequality in comparison to other areas. This includes many local community members facing some of the following: entrenched poverty, child poverty, social exclusion, social isolation, poor housing, overcrowded housing, unemployment, low paid work, bad work conditions, financial exclusion, low self-esteem, low confidence, prejudice, very limited education & basic skills, high levels of crime, anti-social behaviour and drug misuse. Health poverty, with many local residents facing poor mental and physical health.

Most very disadvantaged areas have a high proportion of social housing. In West Rhyl there is a low level of social housing for rent in the public sector with local housing stock nearly entirely private rented sector. There is a very high density of Houses of Multiple Occupation (HMO's) in the West Rhyl private rented sector. HMO's have a range of issues as follows.

- # lack of social housing (social housing has not been built for the last 15+ years).
- # severe overcrowding eg 3 flats and 5 bedsits in one building suitable for 3 flats only
- # shared toilets and bathrooms
- # very diverse tenancies eg elderly, yp leaving care, lone parents and children fleeing domestic violence, people leaving prison, all living in one building.
- # no support – HA's do well being calls with their tenants and can have family support workers, financial inclusion workers, participation workers, none of which are available to people in private rented hmo's.
- # many have absentee landlords remote from the tenants.
- # poor quality accommodation with eg damp, electrical problems
- # usually there is no garden with HMO'S depriving children of opportunities for play (play is hugely important for children's health, well-being, and development.)
- # costly with rents above benefit levels needing a "top up" creating financial pressures of heat or eat, and / or yp needing to leave education to work
- # need far stronger enforcement of health and safety regulations with private sector rented properties by the Local Authority

There are also non HMO specific issues impacting on private sector tenants, as follows.

lack of suitable social housing with young boys and girls, and of different ages, sharing bedrooms.

private landlord tensions – threat of eviction, problems getting repairs done, landlords assuming open access to the property without advance notification and agreement of a visit.

private sector poor quality housing with damp, overcrowding, high rents

universal credit and the requirement that people self-regulate their finances when people who are vulnerable, eg with an addiction or mental health issues, struggle greatly with this.

placing people in empty properties with bare floors and walls, no furniture or kitchen facilities.

lack of provision and support for young people needing housing, with many young people sofa surfing moving from one place to another.

B+B's and small hotels are also used for emergency accommodation. Without suitable accommodation for people to move onto, families can be stuck in a single room in a b+b with no cooking facilities not just for days or weeks, but over many months.

Locally there are several large caravan parks. Caravans are used to house families intended as short term emergency accommodation but in practise involve longer periods over many months in very cramped and sometimes damp conditions.

Tenant comments to us include; “it never feels like home; revenge evictions; not getting repairs done; high rents; rent top up fees; no security of tenure; landlords expecting instant access; poor treatment or harassment by landlords; mould; rats; ovens that don't work; no hot water; high letting agent's fees; evictions to let landlords hike rents up; poor living conditions; poor health because of damp; dangerous electrical work; dangerous structural repairs not getting done; unable to keep my pet; I need to hide my pet every time the landlord comes.”

One family reported to us of renting a flat above the landlords flat, finding that they were paying for the landlord's electricity, raising this with the landlord, and then being evicted because of this.

Children are having to grow up quicker in order to support families ... so many young people in year 10-11, will say that their parents need them to top up the rent and they are forced into work, having to help financially. Youths as young as twelve are asking “where can we get a job so that we can give money to our families? If I go into education, I will not be able to support my family.”

Covid-19 issues

Some factors directly link deprivation, poverty, poor housing and covid-19 infection rates.

Pre-existing health inequalities affecting deprived communities, eg higher mortality rates.

High levels of people with pre-existing health conditions directly compromising their ability to deal with a covid infection, eg heart disease, lung disease, diabetes

High levels of people with other health conditions that may affect their ability to avoid or resist covid infection, eg disability, mental health issues, substance addiction problems.

overcrowded cramped living conditions severely compromises social distancing.

shared bathrooms and toilets

lack of support leaving people isolated and without information or help

low incomes so needing going out to work to generate income with higher risk of infection.

Very poor low quality housing in areas of extreme deprivation present serious public health issues, including vastly increased likelihood of spread of the virus.

Board of Directors, 4thecommunity, Rhyl

