House Value as an Indicator of Wealth and Predictor of Health

Key Findings:

- there were a total of 191,848 people aged 65 or over who had information on house value: 59% were females, 42% were aged 75 or older and 71% lived in an owner-occupier residence;

- of the owner-occupier grouping: 19% resided in houses valued at less than £75,000 and 11% in houses valued at £200,000 or more;

- housing tenure/house value was highly correlated with other indicators of socio-economic status;

- public sector renters had worse self-reported health and higher mortality rates than owner-occupiers;

- owner-occupiers living in higher-value properties were less likely to report ill health than those in lower-value properties.

BACKGROUND TO THE RESEARCH

There has been relatively little research into health inequalities in older populations, partly because it is difficult to identify appropriate indicators of socio-economic status. This research uses house value and tenure, as a measure of life-time socio-economic standing, to examine whether such accumulated wealth can predict of ill-health in older populations.

METHODOLOGY

A longitudinal study was conducted using the Northern Ireland Mortality Study (NIMS) to link deaths from 2001-2006 to a cohort aged 65 and over, not living in communal establishments, enumerated at the 2001 Census. House value was based on a domestic valuation exercise[1] and this was combined with census housing tenure information to create an indicator with several groupings. These ranged from public sector renters to owner-occupiers with a house value equal or greater to £200,000.

Study members were analysed in relation to other census-based demographic and socio-economic characteristics (including marital status, household size, composition and quality). Morbidity was assessed through self-reported health status. Area-based measures such as settlement classifications and quality of the physical and social environment from the NI Multiple Deprivation Measure 2005[2] were also used.

A descriptive analysis examined the characteristics of the seven housing tenure/house value groups, multivariate logistic regression analysis was used to look at variation in self-reported health and finally, a mortality analysis was based on Cox Proportional Hazards modelling.

POLICY IMPLICATIONS

- With projected increasing demands on public expenditure, arising from increasing proportions of older people in the population, policy makers need accurate assessments of the extent of health inequalities for the over 65s.

- This research confirms (1) an association between house value and health, (2) health differences between public sector renters, private renters and owner-occupiers at older ages and (3) health differences between owner-occupiers vis-à-vis lower and higher-valued houses.

- House value is an accessible measure, reflecting lifetime socio-economic circumstances, and should be considered for use in both policy formation and studies in relation to health needs and resources for older age groups.

Table 1: Relationship between Housing Tenure/Value and Self-Reported Health (Fully Adjusted Cox Proportional Hazards Ratios & 95% Confidence Intervals)

Housing Tenure/Value	Aged 65-74	Aged 75+
Public sector renter	1.00	1.00
Private renter	0.68 (0.63, 0.72)	0.79 (0.73, 0.84)
Owner-occupier:		
< 75,000	0.61 (0.58, 0.64)	0.70 (0.66, 0.74)
75,000 – 99,999	0.55 (0.53, 0.58)	0.69 (0.66, 0.73)
100,000 – 149,999	0.43 (0.41, 0.45)	0.54 (0.51, 0.56)
150,000 – 199,999	0.36 (0.34, 0.38)	0.43 (0.40, 0.45)
≥ 200,000	0.28 (0.26, 0.30)	0.33 (0.31, 0.35)

Table 2: Relationship between Housing Tenure/Value and 5 Year All Cause Mortality Risk (Fully Adjusted Cox Proportional Hazards Ratios & 95% Confidence Intervals)

Housing Tenure/Value	Aged 65-74	Aged 75+
Public sector renter	1.00	1.00
Private renter	0.76 (0.70, 0.82)	0.81 (0.77, 0.85)
Owner-occupier:		
< 75,000	0.80 (0.76, 0.85)	0.92 (0.88, 0.96)
75,000 – 99,999	0.81 (0.77, 0.86)	0.91 (0.87, 0.95)
100,000 – 149,999	0.71 (0.67, 0.75)	0.85 (0.81, 0.88)
150,000 – 199,999	0.67 (0.62, 0.73)	0.79 (0.75, 0.84)
≥ 200,000	0.64 (0.59, 0.70)	0.79 (0.75, 0.84)

1.0= reference category, <1.00 = lower risk, >1= higher risk

NORTHERN IRELAND MORTALITY STUDY (NIMS)

The NIMS, a sister study to the Northern Ireland Longitudinal Study (NILS), is a record linkage study which links 2001 Census returns to subsequently registered mortality data. Both studies allow exploration of health and socio-demographic characteristics to provide an insight into the status of the population. The NILS Research Support Unit provides information, advice and support for potential academic and government research users of the NILS and NIMS databases. For further information please go to our website at www.nils-rsu.census.ac.uk.

This research brief is based on Connolly S, O'Reilly D and Rosato M (2010) *House value as an indicator of cumulative wealth is strongly related to morbidity and mortality risk in older people*. International Journal of Epidemiology. For further information please go to: NILS RSU Publications.

---

[1] This was undertaken to determine local tax payable by each household based on the property's value in 2005 see: http://www.dfpni.gov.uk/lps/index/property_valuation.htm
[2] See: http://www.nisra.gov.uk/deprivation/nimdm_2005.htm