

Written evidence submitted by Samantha Lewis [DPH 045]

I'm a housing solicitor acting for tenants (mostly social housing tenants) who have housing disrepair, associated injury caused by the disrepair (usually asthma) and equality act claims for disability discrimination.

I am also a private tenant myself with disabilities - rheumatoid arthritis, Crohn's disease, bladder incontinence, sleep apnoea, depression, anxiety and ADHD.

I'm speaking of my own personal opinions.

I live and work in London, I was born in London and this is where my network of friends and family are who help care for me by taking me to and from my 6 monthly colonoscopies, taking me shopping and accompanying me out, any DIY or household tasks I'm unable to do and caring for me when I'm particularly unwell.

We know there's a housing crisis, we know there's a cost-of-living crisis and we know that there's an increased cost to living with disabilities; any crisis invariably has a far more detrimental impact on disabled people than other members of society. The two major parties have been very vocal in that more disabled people need to work but there's no support for them to do so, suitable and affordable housing is a big part of this. I've been advised by multiple NHS, council and industry employees to quite work and enter the welfare system to access suitable housing. I love my job; I don't want to quit and just think this would create more societal problems. Suitable housing enables those with disabilities to work by providing a safe space to rest, recuperate and mitigate their symptoms ready to go back to work the next day. If we want people to work, we need to begin to resolve the housing and NHS crises to enable them to work.

The private and social rental sector both need major reform. The social sector is desperately lacking housing stock which is not a quick fix, therefore the private sector is being over relied with little protection to tenants, especially those with disabilities, and is unaffordable yet the stalled renters reform bill will make fairly immediate positive changes to the private sector for tenants and have little to no detrimental effect on good landlords. Therefore, we need to reform the private sector whilst significantly increasing the building of social housing properties and ending right to buy.

Having a home is a right and a need, making a profit of that need is a privilege with heavy responsibilities. Not everyone is cut out to be a landlord and it shouldn't be so easy and consequence free to be one.

I would like to address the experiences separately between the private and social housing sector.

Private Sector

Whilst section 21 evictions exist, we will never have a full understanding of the levels of disrepair, discrimination and harassment suffered by tenants. Those tenants who proceed to court to be evicted under section 21 are the ones who cannot afford to

move elsewhere or believe they have a counter claim for their treatment by their landlord; they also are the ones with the time, knowledge and mental fortitude to proceed to court. Most tenants do not fall within this category. Most tenants receive a notice to leave and do so, most tenants do not fight this for fear of losing a landlord reference which they require to secure their next property. Therefore, any problems we're statistically aware of will be hugely underreported.

I myself was subject to an eviction notice 18 months ago from a property I'd lived in and always paid rent on time for 5 years. The reason being, I spoke up to my landlord who kept arranging potential housemate viewings late in the evening with 2-3 hours' notice for which I was expected to conduct the viewing. I pointed out this was hard for me as living with disabilities I need to plan my day, manage my energy, meals and other daily living times.

Although I had the knowledge and resources to challenge an eviction notice, with section 21 an eviction was inevitable so anything I did would just be a delay. I would also then lose the landlord reference which is now required by most landlords when moving.

Due to my disabilities I'm unable to move my belongings myself so had to hire movers which cost around £2k.

Due to my disabilities I'm unable to travel with ease and had to take 1.5 weeks holiday from work to arrange and attend viewings. I often needed to pay for a taxi to take me to and from viewings which cost around £350 in total.

The stress of one month's notice and how fast I had to find a new home and move in caused my inflammatory and psychiatric conditions to significantly worsen. I started taking medication for anxiety attacks at this time. I was extremely concerned I would be homeless. I applied for over 50 properties, most unsuitable for my needs and was rejected for all but my current property. All properties required same day viewing and were let that same day often £hundreds over the advertised monthly rental price and for 6 months payment upfront. Same day viewings are extremely difficult for those with disabilities.

Being a social housing solicitor does not exactly pay a huge wage but it's above the UK average wage for women and slightly below the London average wage for women. I should be able to afford to rent a suitable studio or 1 bedroom flat when working as a full time professional. However, I have always paid between 50-70% of my take home wage on rent - I have had periods where my outgoing rent and bills have exceeded my take home income and have fallen into extensive debt just to afford my living needs.

Properties are harder to find and more expensive for those like me who have mobility disabilities. I need a level access property that is either on the ground floor or has lift access. I have never been able to afford a ground floor property but will only rent properties served by at least 2 lifts, as in previous properties I've at times been housebound for weeks when a lift is out of order, also after Grenfell I'm very nervous about living on higher stories but that's unavoidable for me. I need to be close to transport, I cannot regularly walk more than 5 minutes. I also experience stress and

urge double incontinence so cannot have a commute longer than 45 minutes and need to ensure any station has toilet facilities. I also need to consider access to hospitals, GP's, shops and delivery services where I live. As my conditions are degenerative, they have worsened over the years, and I am no longer able to live in most house shares. This is because I receive 6 months supplies of Humira injections at a time which need to be stored in a fridge and take up one shelf. I also need a lot of aids and equipment such as shower chairs, walking aids, commodes etc and have 6 month supplies of methotrexate which also need to be stored. So, there's rarely enough room for me and my equipment in a house share. All of this means there are less properties available to me and the only properties suitable for my health conditions are more expensive. A lot of my clients are on universal credit and PIP, I am often on a higher PIP than my clients, but they are frequently on a higher or similar monthly take home income than me, and do not have the 50-70% expense of rent taken from their take home incomes. I am not of the opinion that means tested benefits should be cut but rather that support should be given to those in work with disabilities as you can see how the only affordable option is to leave work and enter the benefits system. When I've asked for assistance to find suitable accommodation or whether any help is available to me as a working disabled person I've often been advised by medical professionals to quit my job to qualify for means tested benefits so that my housing and disability needs can be met which I find abhorrent as the only method I can achieve accessibility.

I now pay £1400 per month excluding bills and council tax for a studio in Southall and had to pay 6 months' rent upfront. Although the property itself is suitable I had to move from Highbury to Southall to be able to afford a suitable property. I am cut off from my care and social network. My commute takes significantly longer, the Elizabeth line is very poor running and even when it does the trains change platforms where some have a 3ft step into the train which I can't manage; as a result I often am incontinent on my commute, I arrive in pain and fatigued, as I now rely on one line so if there's issues I cannot travel or need to rely on taxis which are now much more expensive, at weekends I rarely leave my home, I miss hospital appointments at UCLH where I'm under the complex teams because I just can't get there. I used to rely on buses as bus drivers wait for you to be seated before driving off, can stop suddenly if I become unwell or at risk of incontinence and can help when experiencing discrimination (at least once a month I'm subjected to refusal and abuse when asking for a seat), but I am less safe on trains and less likely to travel. The GP care is not good in my current area and given difficulties in getting some medications I only have one pharmacy I am able to walk to (delivery pharmacies are slow and unreliable), so when without Co-codamol or SSRI medications both of which cause severe withdrawal side effects I am unable to travel around to pharmacies and have had to take over 7 days sick leave as a result of withdrawal symptoms due to lack of medications in the last 6 months. There are also no accessible swimming pools in my area which was my main method of rehabilitation exercise and therefore my arthritis symptoms have significantly worsened. I used to go out weekly to restaurants, shops and theatres etc, now I rarely go out more than once in two months - therefore my financial support of local businesses has dramatically reduced because my journey is unmanageable and I am no longer in my support network who accompany me out and on transport.

My current property is level access and a suitable size for my needs. However, it has an over bath shower which I struggle to get in and out of, sometimes falling and sometimes going without showers. The cupboards and shelves are too high for me to reach as my arthritis in my left shoulder, hands and wrists mean I can't lift items from high shelves. There is no free parking not availability to arrange the same for my carers to visit. The lifts frequently break leaving me housebound as I'm on the 7th floor. And the area leaves me isolated and unable to access my work, medical providers or social circle as frequently as I need to.

Councils underutilise EHO and PCN enforcement measures against private landlords, and often don't reply or attend. In my previous property the carpets were extremely worn and bare making them slippery, I had several falls as a result. The bannisters were broken, and the front step chipped - again causing falls. These meant I needed to receive NHS care. When I fall, I am prone to developing bursitis which may require steroid injections and often lasts for 1+ years, even after the bursitis has passed because of the injury that joint is then vulnerable to rheumatoid arthritis, and I have developed rheumatoid arthritis in both knees as a result of falls. The property also was single glazed, had heating and hot water outages and had mould; this made me a lot stiffer in the mornings and more prone to illness as I am immunocompromised. I asked for an EHO to attend, they never did. I ask the landlord to make adjustments and improvements, they never did. If councils made a concerted effort to increase EHO visits and PCN's against negligent private landlords, that income could be used to fund more EHO's and within a short period bring in a substantial income, whilst also improving housing conditions and deterring negligent landlords. Although tenants will underutilise this until they are protected properly from eviction. In the last two decades the amount of private rental properties has more than doubled from around 2mil in 2000 to over 4mil in 2022, these are usually the properties first time buyers would buy, landlords won't have 3-4 viewings with their parents and look at the area - they just look at the market rental price - meaning first time buyers are sped out of the process, meaning people who would be buying are renting but can afford to do so at a higher rent therefore raising market rents. Even help to buy properties in London advise a buyer needs an income of over £70k. There are too many private rental properties and despite the increase in property prices far outstripping the increase in wages mortgages are still given at 4-5 times annual wage; this needs to change. Disabled people are more likely to be single so the reliance on double incomes to rent and purchase properties has significantly disadvantaged disabled people.

I have asked for a council OT housing equipment and aids assessment in every property I have ever lived in, and never been contacted or received one. Again, these are things that could help me with daily living and enable me to stay in work, but it seems councils are putting their head in the sand and avoiding anything that would put figures to the true extent of the housing crisis.

I have friends who are deaf and wheelchair users who have been denied private rental accommodation because the landlord is worried, they may request adjustments and repairs more urgently, and that they're unlikely to remain employed in the landlord's opinion. I myself when contacting agents with my property requirements have been told that my requirements are 'quite a lot' and given how

many tenants are looking they're not willing to spend the time locating a suitable property for me.

Ultimately if renters are routinely paying over 30-40% of their income for rent something's gone very wrong. If a single professional person in full time work on an average wage can't afford to rent suitable studio flat, something's gone very wrong. If a single professional person in full time work on an average wage can't afford to buy a suitable studio flat with a £40k deposit they've inherited something's gone very wrong. And if single professional people in full time work on an average wage are actually being advised by healthcare professionals the only way they can feasibly access suitable accommodation is to quit work and become homeless, the entire system is untenable and drastic urgent change is required.

Social housing

Social housing was designed and did up to the 90s provide housing for those who couldn't afford market rent properties. That of course included those unable to work, but also those working with disabilities, those with large families, those on lower incomes. Through successive governments' failures social housing has been sold off or fallen into such disrepair it needs to be destroyed. This means that it is no longer available for those who need it. It wasn't that long ago that 30% of Londoners lived in social housing.

There's been a trend in social housing providers councils and housing associations of removing their direct disrepair emails from their websites. Email is for a lot of disabilities a preferable communication method; I have a lot of deaf clients who have really struggled to report disrepair. Also, if someone has anxiety, depression, ADHD or other psychiatric conditions email is a way to communicate all of their issues where phone calls can exacerbate their symptoms. As well as those who English isn't a first language. In addition, we know record keeping within landlords is very poor, email trains are easier to file and give residents a method of keeping their own records. Less appointments will be missed if communicated by email saving landlords time and money.

Landlords are also outsourcing and losing track of repairs. Directly transferring their tenants to contractors when chasing repairs. Again, this poses significant accessibility issues regarding the mode of contact and how information is communicated. Landlords should instruct their own contractors, keep a record of when repairs are completed and chase their own contractors when not done so. This should not be their tenant's responsibility. I've had client's (and seen the phone records) be on the phone all day every day for over a month for urgent repairs like heating and hot water, how are they supposed to work, study or attend healthcare appointments in that situation?

Council and housing association banding policies are very complicated to read and understand; especially for those with disabilities, limited English or literacy. I have seen numerous tenants especially of housing associations allocated incorrectly despite numerous pleas for help. Social housing providers should actively call their disabled tenants annually to check they're banded correctly and share this information between councils and housing associations.

We know space is a premium in rented accommodation and often people are living in properties too small for them, especially when it comes to equipment storage for those with disabilities. There are long wait lists for larger properties which has no immediate solve. However, landlords could with empathy think of cheap and quick solves, including installing internal and external storage such as an external watertight storage lock box for wheelchair and walker storage or an additional lockable medical cabinet when there are children in the property.

When a landlord knows that the property is likely unsuitable from what the resident has said but the resident has not had an OT an assessment or may not be on the correct banding landlords should be able to directly refer the resident to the council OT services for a housing, aids and equipment assessment. The landlord should also have links to local resources that can help the resident apply for the correct banding. OT council assessments and allocation policies are very hard to navigate, I sometimes struggle and I'm a housing lawyer, so it's understandable that someone with disabilities may not be able to access or navigate these resources. Residents who are struggling should not be left without further steps but instead signposted appropriately.

When making offers to residents of appropriate properties social landlords must have pictures and floor plans of their properties to send to the residents. Too often I have asked for these for clients and the lettings team say 'we don't have them all my file says is it's disability adapted' my client's then travel sometimes 1.5 hours to arrive at a property with steps leading up to the front door when they're a wheelchair user so they can't even view the property after making a long, fatiguing and painful journey for the purpose of viewing.

There needs to be more training for those who work for social landlords. The amount of client calls I have heard where a landlord employee had said 'you're not even that disabled, my xxx has xxx and they manage fine, just be grateful you have a council house I don't have one' is overwhelming. By default, of someone being in social housing invariably means they have been assessed as deserving of the same. Regardless this does not mean their queries and reports of their housing conditions should be ignored and definitely not that they should have to put up with disrepair or unsuitable housing. The housing crisis is not these tenants' fault but the fault of multiple governments.

I have yet to see a response from a landlord to a medical practitioner who has written on my clients' behalf to inform of the detrimental impact of their housing. Considering medical practitioners are the experts in that aspect to ignore those communications is negligent.

Repairs for those with disabilities pertaining to heating, hot water and accessibility should be prioritised. We still have common instances of weeks and months without heating and hot water in social housing estates, but those with disabilities are less able to travel elsewhere for a shower or pour a bucket of kettle heated water over their heads.

As for the suggested questions:

What has been your experience of finding housing that is suitable for your needs? The assumption that disabled people have found and are in suitable accommodation in this question and the questions in this section is a significant oversight and implies a bias against disabled people similar to that we have seen by various MP's and party leaders in recent months.

- What have been the main barriers to you accessing a suitable home?
 - Can't afford to buy, can barely afford to rent and landlords won't agree to adaptations.
- Did you seek a new-build accessible home, or did you make adaptations to make an existing property accessible?
 - I do not have an accessible home and I know of very few in the disabled community who do, only those of older generations or with severe spinal/brain injuries. Why are we assuming disabled people are in an accessible home?
- How long did your search for an accessible home take?
 - 14 years and counting ... Why are we assuming disabled people are in an accessible home?
- What impact did your housing situation have on your mental health?
 - I started taking medication for anxiety attacks around the time of my last eviction, I have experienced self-harm and suicidal ideations regarding my housing situation, my medications and symptoms are still ongoing as I am always at risk of eviction and never feel secure or confident that I will keep a roof over my head. I also have had to move a long way for a more suitable property leaving me isolated and unable to travel for anything other than work and hospital appointments. This question should not be worded in the past tense.

What support have you received in finding suitable housing?

- What support did the council provide? What did they do well, and what could they have done better?
 - None, they said as I work, I should be able to afford private rentals. At that time 70% of my £1,800.00 wage went on rent, bills excluded.
 - They did not refer or recommend any other assistance or check I was aware of OT suitability assessments.
 - If any Council I had lived under had done anything that would have been better but I have never received help or support when I have asked and really even received a reply.
- Were you able to find all the information you needed?
 - No
- If you have used it, how was your experience of applying for the Disabled Facilities Grant?
 - I've never had a call back for an OT assessment to enable me to access the Grant.
- Did the Grant cover the cost of all the adaptations you needed?
 - N/A

- [If applicable] Have your housing associations/landlords been supportive?
 - Never

What more should the Government do to support disabled people to access suitable housing?

- What should be the Government's short-term priorities to support disabled people before the next general election?
 - Either financial support for working disabled people by giving them discounted or priority access to suitable housing in city centres. Protection for working disabled people.
 - Get S.21 abolished ASAP so disabled people can report hazards and request reasonable adjustments without being evicted.
 - Pause right to buy.
 - Councils enforce PCN's and EHO inspections.
 - Spread awareness for the resources available.
- What longer-term policies would you like to see, to deliver more accessible housing?
 - More houses-built ASAP! And in new builds a certain amount 'built to order' for those with specific disabilities on the wait list i.e. a wet room, a ramp ... then brand-new properties don't need to be further adapted.
 - Disabled people prioritised for social housing regardless of work/financial status in a similar way to veterans or offer disabled people the Market/London Living Rent (which is something else that's fallen of the face of the rental market).
 - Protections from eviction for disabled tenants.
 - Stop relying on shared ownership schemes, no one who needs it earns the £70k plus needed and they're flooding the market. Consider other schemes to help disabled people buy and adapt a suitable property.
 - Reduce the number of private landlords to stabilise the private rental sector and allow people to buy and adapt suitable homes.
 - No landlords not residing in the UK.
- What more could local authorities do to support disabled residents?
 - Anything!
 - Share resources, housing associations and councils should share bidding and allocation information.
 - Automatically conduct OT housing assessments for disabled residents and have an annual follow up.
 - Actually, fine and enforce repairs on private landlords rather than letting hazards slide. That money can and should be put back into housing needs.
- What should the Committee recommend in its Report?
 - The housing crisis is out of control and disabled people are particularly detrimentally affected. To help disabled people work and be independent positive changes need to urgently be made or more disabled people will be forced to exit the workforce to access suitable housing.