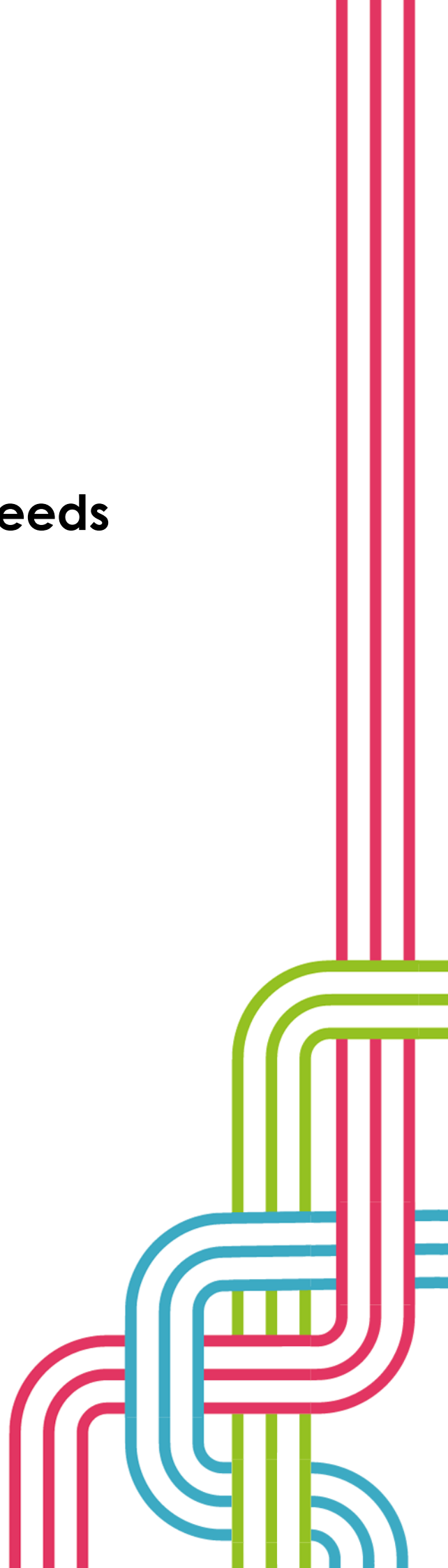


Housing and Health Needs Assessment

Unsuitable housing

Suffolk
2024



What does the H&HNA tell us about unsuitable housing in Suffolk?

Suffolk has an undersupply of suitable specialist housing to meet the needs of its ageing population and disabled residents.

Recommendations indicate a large unmet need for more age-exclusive and specialist retirement housing units, as well as care home places, to prevent unnecessary admissions. Adaptations through Disabled Facilities Grants are capped nationally at an amount now worth a third less compared to 2008.

While under-occupancy is high across Suffolk, overcrowding is an issue particularly in Ipswich. The number of estimated unlicensed HMOs has increased 5-fold in the past decade, suggesting the supply of unsuitable and unregulated accommodation is growing.

Unsuitable housing

Accessible and adaptable housing enables people to live more independently, while also providing financial savings on health and social costs in the future. It is better to build accessible housing from the outset rather than make adaptations at a later stage – both in terms of cost and allowing people to remain safe and independent in their homes.

Specialist housing needs – adults with care needs in Suffolk

It is recognised that people's support needs change over time, and one key area that Suffolk Adult and Community Services (ACS) team encourage is supporting independent living wherever suitable and possible.

A continuing challenge for Suffolk ACS is the provision of affordable step-down accommodation to meet people's care needs. This is a challenge being faced nationally as well as locally. This means that people who are ready to move from supported accommodation into more general housing are unable to do so. People get added to the general social housing waitlist, and '[bid](#)' for social housing in the same way as others. This could leave these individuals at a disadvantage in terms of prioritisation – as they are not identified as highest priority for accommodation (as they are already housed). The types of housing offered may also not always be suitable due to accessibility needs. Private sector rentals are rarely affordable.

Another key lever for personal independence is work – however, like many other parts of the population, those with adult care needs can be adversely affected by benefit caps. An individual may find good employment – but this takes them over the threshold for receiving benefits to assist in paying rent.

Suffolk ACS already work closely with district and boroughs and planners to look at both current and future need. However, a continued focus on partnership is needed to effectively plan for future populations, and to have suitable, accessible, affordable housing in Suffolk.

Specialist housing needs – older people

Having suitable housing for Suffolk's ageing population is important. Society is ageing, and more people will require housing that meets their needs as they get older. People may have specialist housing needs as they age – for issues relating to mobility, dexterity, and frailty, requiring greater levels of care or adaptations to homes.

Around 5% of people aged 65 and over live in specialist housing, but many older people would like to do so. Extra care housing also benefits family and carers who may struggle to provide enough care and support²⁰¹.

Offering older adults a better choice of accommodation to suit their changing needs can facilitate living independently for longer and greater connection to their community, while reducing social care and health-related costs.

According to the national planning policy framework, older people are:

- people over or approaching retirement age, including the active, newly retired through to the very frail elderly; and
- people whose housing needs can encompass accessible, adaptable general needs housing through to the full range of retirement and specialised housing for those with support or care needs²⁰².

Suitability of housing stock is vital to the health of individuals and impacts on public spending – both for adult social care, and the NHS²⁰³.

Specialist housing is designed to meet the diverse needs of older people, and can include:

- age-restricted general market housing: generally, for people aged 55 and above, and the active elderly. Does not typically include support or care services
- retirement living or sheltered housing: usually purpose-built flats or bungalows that do not provide care services. Can include support to enable independent living, such as 24-hour on-site assistance, or a house manager/warden
- extra care housing or housing with care: purpose-built with a medium to high level of care available if required, through an onsite care agency. Residents live independently with 24-hour access to support services and staff. These developments are often known as retirement communities or villages
- residential care homes and nursing homes: individual rooms within a residential building, providing a high level of care meeting all activities of daily living. Do not usually include support services for independent living. This type of housing can also include dementia care homes²⁰⁴.

In Suffolk, the 2021 census found that of households where the person responsible for the accommodation was 75 or older, 77.2% were owned outright, representing 46,878 people. Additionally, 12.5% of these older households were social rentals.

Suffolk's Market Sustainability Plan for adult social care in March 2023 found that there are not enough housing options that allow people to occupy or keep their

homes while receiving care. In 2021, analysis indicated that Suffolk needs 1,000 more Extra Care flats where older people can live independently but access care. If these extra care properties do not get built, it will lead to problems such as unnecessary care home admissions²⁰⁵.

The below table from Projecting Older People Population Information System (POPPI) estimates the number of people aged 65 and over living in a care home, either with or without nursing by local authority, and by age bands until 2040.

Between 2023 to 2040 in Suffolk, the number of people aged 65 and over living in a care home with or without nursing is expected to increase by 53.2% from 6,049 people to 9,267 people. The increase in Suffolk is greater than the expected rise nationally, where there is expected to be a 47.5% increase in the number of people aged 65 and over living in care homes by 2040.

Table 8. People aged 65 and over living in a care home with or without nursing in Suffolk, projected to 2040

	2023	2025	2030	2035	2040
People aged 65-74 living in a LA care home with or without nursing	29	30	33	36	36
People aged 75-84 living in a LA care home with or without nursing	144	153	163	163	186
People aged 85 and over living in a LA care home with or without nursing	275	288	341	436	465
People aged 65-74 living in a non-LA care home with or without nursing	402	406	455	496	485
People aged 75-84 living in a non-LA care home with or without nursing	1,728	1,837	1,949	1,959	2,223
People aged 85 and over living in a non LA care home with or without nursing	3,471	3,633	4,304	5,499	5,872
Total population aged 65 and over living in a care home with or without nursing	6,049	6,347	7,245	8,589	9,267

Source: [Projecting Older People Population Information System](#)

Housing for Older People Supply Recommendations (HOPSR)

The Housing for Older People Supply Recommendations (HOPSR) tool provides an assessment of the local supply requirements for older person's housing and projected need until 2035 by local authority area.

The research, led by Sheffield Hallam's Centre for Regional and Economic Social Research, uses national data from the Elderly Accommodation Counsel about most older people's housing schemes in England. The model identifies predictors of the supply of older people's housing and uses these to recommend the future supply requirements of older people's housing.

Baseline estimates of supply are from 2018 and use old local authority names, therefore West Suffolk has been aggregated from St Edmundsbury and Forest Heath, and East Suffolk has been aggregated with data for Suffolk Coastal and Waveney.

Age-exclusive housing

Table 9 presents the 2018 current supply of age-exclusive housing (and recommended supply) as well as the 2035 projected supply for Suffolk and local authority areas. Age-exclusive housing is designed, built, and let/sold exclusively to older people (typically 50+/55+) but without the supportive on-site management characteristics of sheltered housing.

In Suffolk in 2018, there were only 707 age-exclusive households, when the recommended supply from the HOPSR tool advises 5,932 households to meet the demand across the county. The recommended future supply of age-exclusive housing in Suffolk in 2035 is a 75.7% increase on the recommended supply in 2018 – increasing from a recommendation of 5,932 recommended age-exclusive households, to 10,420 in Suffolk²⁰.

Table 9. Units of age-exclusive housing, by 2018 supply and recommended supply, recommended supply for 2035, for Suffolk district and boroughs

Area	Recommended supply - 2018	Current supply - 2018	Recommended future supply - 2035
Suffolk	5,932	707	10,420
Babergh	709	202	1,360
East Suffolk	2,380	225	4,012
Ipswich	720	112	1,187
Mid Suffolk	759	83	1,471
West Suffolk	1,364	85	2,390

Source: [Housing for Older People Supply Recommendations \(HOPSR\)](#)

Specialist housing

Table 10 presents the 2018 supply of specialist housing (as well as recommended supply), in addition to 2035 recommended supply for Suffolk, and districts and boroughs.

Specialist housing includes (all of which offer varying levels of on-site supportive management):

- sheltered housing
- enhanced sheltered housing
- extra care housing

In 2018, Suffolk had an under-supply of specialist housing, based on the recommended supply estimate from HOPSR. There were 7,276 specialist households in Suffolk, 5,502 fewer than the recommended 12,788. There is a clear need to increase the number of specialist households in the county to cater to the ageing Suffolk population. The recommended supply of specialist housing in Suffolk in 2035 of 22,489 specialist households, is over 3 times the 2018 supply²⁰. It is important to note that many older people may not want, or need specialist accommodation or care, wishing to stay in general housing that is already suitable, such as bungalows or homes which can be adapted to meet changing needs²⁰⁶.

Table 10. Units of specialist housing, by 2018 supply and recommended supply, recommended supply for 2035, by Suffolk local authorities

Area	Recommended supply - 2018	Current supply - 2018	Recommended future supply - 2035
Suffolk	12,788	7,276	22,489
Babergh	1,589	524	3,049
East Suffolk	4,950	2,462	8,376
Ipswich	1,818	1,819	2,996
Mid Suffolk	1,649	893	3,194
West Suffolk	2,782	1,578	4,874

Source: [Housing for Older People Supply Recommendations \(HOPSR\)](#)

Table 11 presents the supply of care beds in 2018, the recommended supply of care beds in the same year, and the recommended future supply of care beds in 2035 for Suffolk and districts and boroughs. Care beds are residential settings where several older people live, usually in single rooms, and have access to on-site care; some also have registered nurses who can provide care for more complex cases.

Suffolk has a higher number of care beds in 2018, at 6,497 – close to the recommended supply from HOPSR of 7,450. The recommended future supply of care beds in Suffolk in 2035 is an increase of 76.1% to 13,121 care beds.

Table 11. Units of care beds, by 2018 supply and recommended supply, recommended supply for 2035, by Suffolk local authorities

Area	Recommended supply - 2018	Current supply - 2018	Recommended future supply - 2035
Suffolk	7,450	6,497	13,121
Babergh	958	1,038	1,839
East Suffolk	2,854	2,383	4,840
Ipswich	1,079	1,041	1,778
Mid Suffolk	976	719	1,891
West Suffolk	1,583	1,316	2,773

Source: [Housing for Older People Supply Recommendations \(HOPSR\)](#)

Specialist housing needs – Disabled people

Appropriate housing for people with disabilities is crucial to help individuals live safe and independent lives. Housing that is unsuitable, or not properly adapted, can have significant negative impacts on disabled people and their carers. This can lead to mobility problems inside and outside the home, poorer mental health, and a lack of employment opportunities²⁰⁶. Not all disabled people will require adaptations in the home.

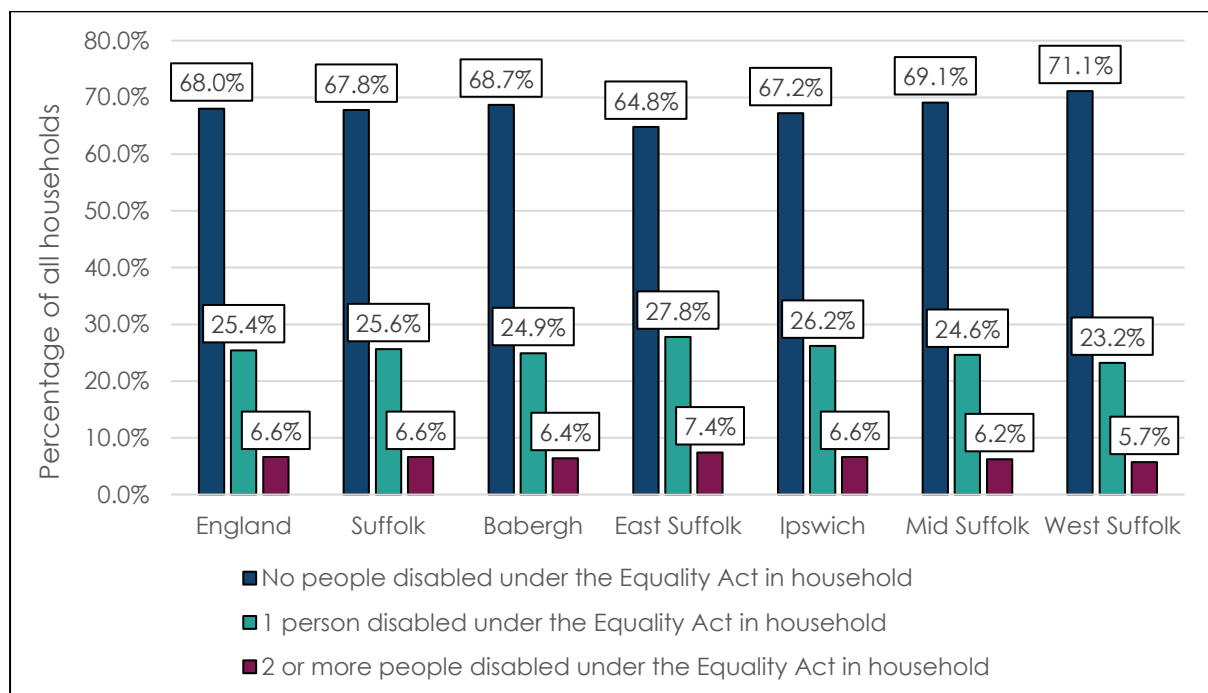
Suitable housing can enable disabled people to live more independently and safely, with greater control over their lives. An ageing population contributes to the number of disabled people increasing, therefore raising the need to plan early to meet needs throughout their lifetime²⁰⁶.

The national planning policy framework defines people with disabilities as “people have a disability if they have a physical or mental impairment, and that impairment has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities. These persons include, but are not limited to, people with ambulatory difficulties, blindness, learning difficulties, autism, and mental health needs”²⁰². These needs may generate housing requirements which can change over time.

The below figure provides census 2021 estimates that classify usual residents by long-term health problems or disabilities. People who assessed their day-to-day activities as limited by long-term physical or mental health conditions or illnesses are considered disabled. This definition of disability is in line with the Equality Act (2010).

In Suffolk in 2021, over 1 in 4 (25.6%) households had at least 1 person disabled under the Equality Act. This equates to 85,519 households. 21,951 (6.6%) of Suffolk households had 2 or more people disabled under the Equality Act. East Suffolk had the highest proportion of Suffolk districts and boroughs of households with at least 1 disabled person at 27.8%, or 30,751 households.

Figure 41. Percentage of disabled people in the household under the Equality Act, Suffolk’s districts and boroughs and England, 2021



Source: Nomis – census 2021 [TS040: Number of disabled people in the household](#)

Disabled facilities grant

The Disabled Facilities Grant is available from councils for disabled individuals that need to make changes to their homes.

It covers many disabilities, including physical disabilities, learning disabilities, age-related needs, autism, cognitive impairments (such as dementia), progressive conditions (like motor neurone disease), terminal illness, or mental health conditions.

Examples of how the disabled facilities grant may be used include:

- widening doors and installing ramps or grab rails
- improving access to rooms and facilities, for example with a stairlift or level access shower
- improving access to a garden
- building an extension (such as a downstairs bathroom)
- providing a heating system suitable for the individual's needs
- adapting heating or lighting controls to make them easier to use²⁰⁷

Grants can be up to £30,000 and depend on household income and household savings.

Nationally, there are pressures around funding compared to the level of need for adaptation works which leads to long waits for adaptations²⁰⁸. The 2019-20 English Housing Survey report on home adaptations found nationally 1 million households did not have all the adaptations they required, an increase of 45% from 2014/15²⁰⁹.

Local authorities are asked to submit annual returns to the Department for Levelling Up, Housing and Communities (DLUHC) outlining their Disabled Facilities Grant activity. Data is only published for the grant at a national level.

Nationally, returns submitted over 2019/20 in England showed 70,563 grant applications were received, with 58,181 homes leading to adaptations²¹⁰. This is an increase of 31.6% on the number of grants delivered 5 years prior in 2014-15.

Over half (52%) of grants awarded are for less than £5,000, with 14% for more than £15,000. Level access showers and stairlifts are the most common adaptations²¹¹.

The UK government had previously promised to increase the maximum amount disabled people in England can claim through the Disabled Facilities Grant (DFG) to adapt their homes. This grant has been capped at £30,000 since 2008.

An external review of Disabled Facilities Grants commissioned by the government identified several challenges:

- A reduction in local authority contributions meaning increased central government funding had not resulted in as many people being helped.
- Limited analysis of local needs and demand, and limited advertising of DFGs for fear of stimulating demand.
- Restrictive upper limits on grant. High levels of 'drop outs' due to a requirement to contribute.
- Tenure inequalities – relatively few grants are issued to private sector tenants²¹².

Specialist housing needs – Other groups

Many other groups in Suffolk may be at risk of inadequate housing. Some of these groups who may be at greater risk of unsuitable housing and will be explored further include:

- people fleeing abusive relationships
- care leavers

- those in contact with the criminal justice system

Research identifies that these groups can be victims of a system where landlords can claim high rents with little accountability. This can lead to costly and unsafe environments, where residents are at their most vulnerable and forced to accept unsuitable or expensive housing²¹³.

People fleeing abusive relationships

Domestic violence (also called domestic abuse) includes physical, emotional, economic, and sexual abuse in couple relationships, or between family members.

Domestic abuse takes different forms, but always centres on having power and control over another person²¹⁴. Anybody can be a victim of domestic abuse regardless of age, race, gender, sexual orientation, faith, or class.

Domestic abuse prevents access to safe, affordable housing that promotes good physical and mental wellbeing. Tackling domestic violence requires improving pathways to safe housing and healthcare access for survivors of abuse.

Many people fleeing domestic abuse are forced to leave their homes to seek safety and support, typically in a refuge or another form of temporary accommodation. For many, this is often in a different local authority area to provide a safe distance between themselves and the abuser. These shelters must meet the needs of a diverse group of people – ensuring no one fleeing abuse is turned away from the support they require²¹⁵.

Children are now recognised as survivors of domestic abuse²¹⁶. Some victim-survivors will need to flee to safe accommodation with their children. It is important that rooms and communal areas at shelters can accommodate children.

Temporary accommodation includes hostels, short term supported housing, or temporary accommodation provided under homelessness legislation. By providing survivors of abuse with easily accessible settled accommodation creates capacity for others fleeing abuse who require these services²¹⁵.

Survivors of domestic abuse should be supported to move on from a refuge into settled accommodation when they are ready. The government guidance states that they must not be pressured to accept accommodation that is inappropriate to increase throughput for refuges. There should also be consistency in the conditions of the different types of accommodation available for those fleeing abuse.

Districts and boroughs housed individuals fleeing domestic abuse under certain housing legislations, while local authorities must provide safe accommodation under a duty directed by the Department for Levelling Up, Housing and Communities. Local authorities must also ensure offered accommodation meets the individual's needs and circumstances, and their preferences where possible²¹⁵. Within Suffolk, as of March 2024, there are 3 refuges and 2 sites of dispersed accommodation.

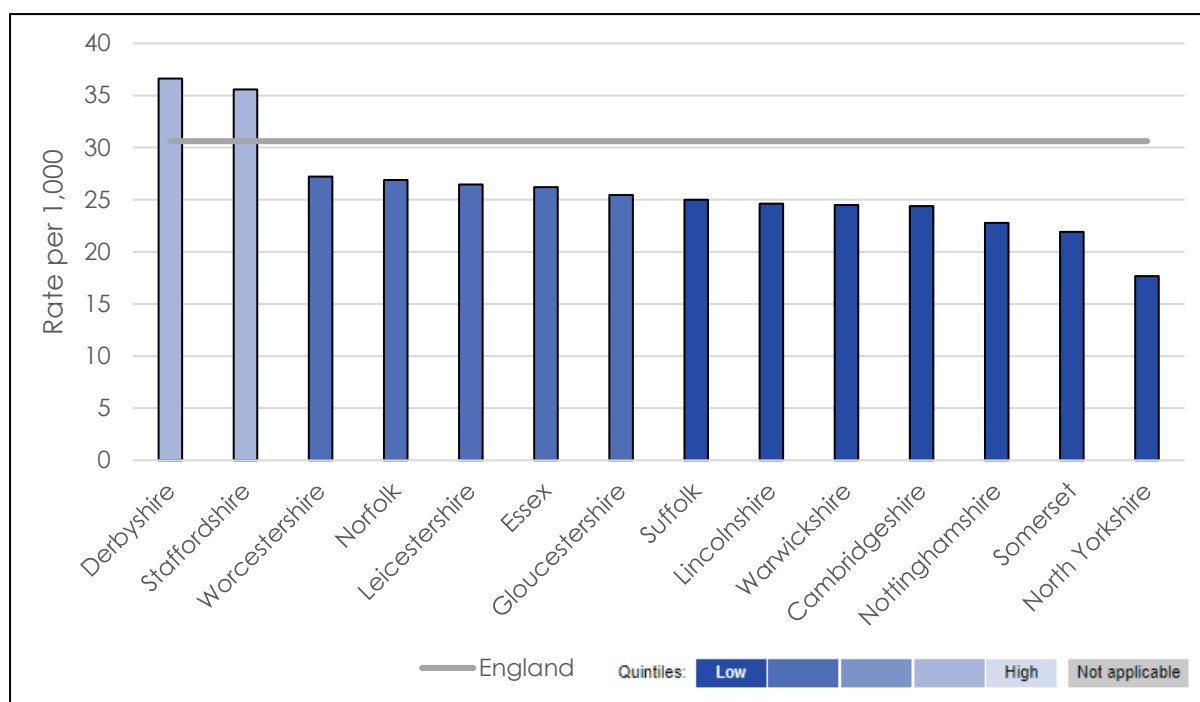
Other considerations for accommodation for those fleeing abuse include whether the safe accommodation is gendered and if it is suitable for those with a disability or caring needs, or for any of the protected characteristics. Some survivors may also

have no recourse to public funds – consideration should be made as to where these survivors can access and live if they need to flee abuse.

The Office for National Statistics conducted qualitative research exploring the experiences of 40 women who have survived domestic abuse and lived in temporary safe accommodation in England. Survivors reported staying in various types of accommodation including refuges, hotels, hostels, and local authority provided self-contained and shared accommodation. Barriers accessing and moving on from temporary safe accommodation included the lack of available suitable accommodation, complex processes, lack of information and support, and not feeling involved in decisions. Support from staff was crucial, but counselling and mental health support was often lacking²¹⁷.

It is difficult to obtain reliable information on the extent of domestic abuse as there is a degree of under-reporting of these incidents. The figure below includes domestic abuse related offences and incidents (including psychological, physical, sexual, financial, or emotional abuse) recorded by police in those aged 16 and over. The data is a crude rate per 1,000 and does not include confidence intervals so cannot be compared for statistical significance. CIPFA (Chartered Institute of Public Finance and Accountancy) nearest neighbours are a set of local authorities that are deemed to be the most similar to a particular local authority across a range of socio-economic and demographic statistics²¹⁸. In 2022/23, the rate of domestic abuse related incidents and crimes in Suffolk was 25.0 per 1,000, placing Suffolk in the bottom 20% of local authorities for domestic abuse nationally.

Figure 42. Suffolk and CIPFA nearest neighbours – crude rate per 1,000 of domestic abuse related incidents and crimes, 2022/23



Source: [OHID Fingertips - Domestic abuse related incidents and crimes 2021/22](#)

Care leavers

As identified within the government's 'Care Leaver Strategy', care leavers are a vulnerable group of young adults with specific needs relating to housing and homelessness²¹⁹. Most care leavers leave care by the age of 18. Demands for social housing and other accommodation makes it increasingly difficult for young people to find suitable accommodation as they enter adulthood²¹⁹. The government's Care Leavers Strategy also notes that many care leavers do not always feel safe in their accommodation, with some local authorities using 'staying put' arrangements to allow care leavers to continue to get support from their former foster carers²¹⁹.

Social services within local councils must provide care leavers with housing and money if they are 16 or 17, and advice and support until the age of 25 if requested. Young people can leave care at 16, but do not have to leave until they turn 18 years old²²⁰.

Moving to independent living can be extremely difficult for care leavers. While support may be available, the transition is often challenging. For this population moving to independent living, financial management, home maintenance and personal wellbeing may be more of a challenge.

Data for Suffolk shows there were 160 care leavers (aged 17 to 18) in Suffolk in 2022. 100% of these 160 care leavers were living in suitable accommodation²²¹.

Suffolk County Council has a [Leaving Care Offer](#) outlining the council's commitments to support with education, employment and training,

accommodation, health and emotional wellbeing, finance and self-care and contact with important persons.

Individuals who have previously served a custodial sentence

The term ex-offender includes individuals who have committed any criminal offence. This needs assessment concentrates on those who have served a custodial sentence.

Either the prison or probation service must refer individuals leaving prison to a council's homeless team if:

- they are homeless already or likely to become homeless in the next 8 weeks
- they are being released in the next 8 weeks, but without anywhere suitable to stay
- they are staying in probation or bail accommodation with nowhere to go²²²

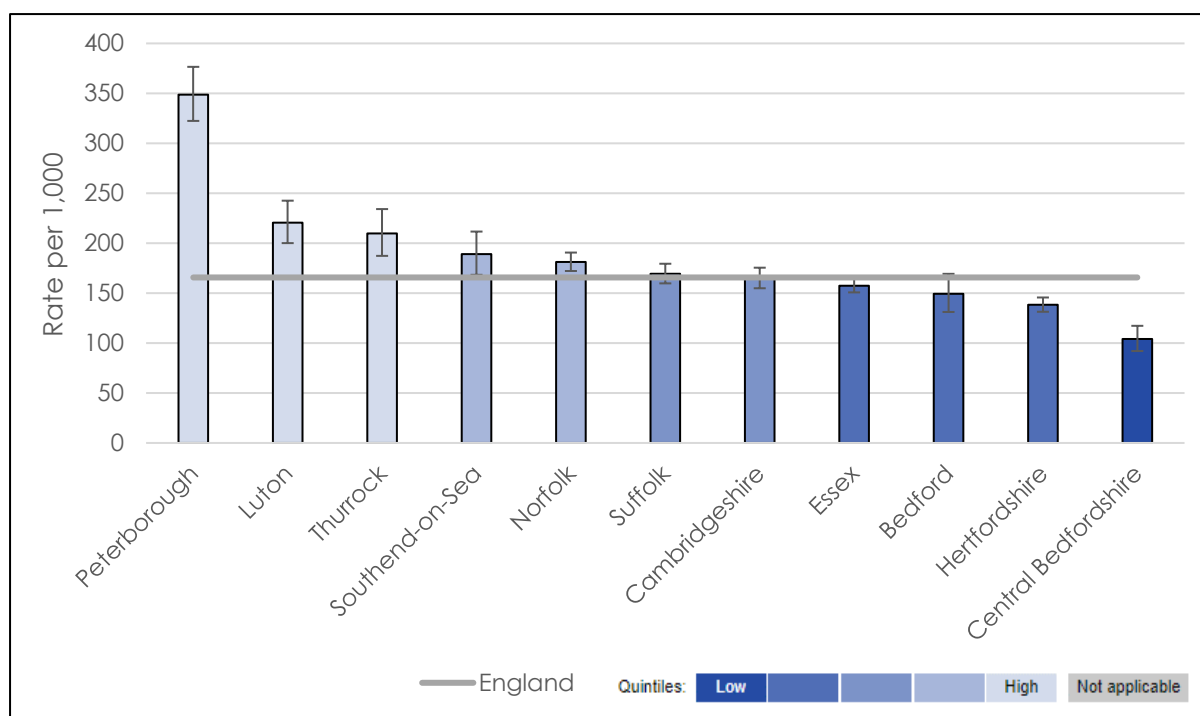
Good practice has identified the importance of taking a proactive approach towards managing the housing needs of prisoners, including assessing needs on entry into custody, rather than immediately before release. This early intervention may prevent the loss of accommodation when prisoners are taken into custody²²³.

Data on the prison population is difficult to determine, with the below figure only including first time offenders. Upon release, many may not necessarily continue to live in the area. In Suffolk, there are three prisons:

- Hollesley Bay – a prison and young offender institution for men over 18 in Woodbridge. Almost 500 men are housed in 9 residential units
- Warren Hill – a male adult prison near Hollesley village. There are over 250 prisoners at Warren Hill, housed in single cells
- Highpoint – a men's prison in Stradishall. Highpoint has around 1,300 prisoners over 2 sites, with 15 residential units²²⁴

In 2022 in Suffolk, there were 1,160 first time offenders. This is the total number of offenders recorded as having received their first conviction, caution, or youth caution. The rate for Suffolk (169 per 100,000) was statistically similar to the England rate of 166 per 100,000 in 2022.

Figure 43. Suffolk and Eastern region counties – rate per 100,000 of first-time offenders, 2022



Source: OHID Fingertips – [First time offenders rate per 100,000](#)

Numerous studies support that adequate housing for ex-offenders reduces re-offending rates. There has also been criticism about the level of support prison leavers receive, as well as the lack of housing options available.

The Homelessness Reduction Act 2017 means local authorities must support individuals at risk of homelessness. Previously, local authorities may have judged ex-offenders as making themselves homeless if losing their home was a likely outcome of committing a crime²²⁵.

Suitable housing is a single component of successful transition into the community. Holistic support is required to support those who have served a custodial sentence to settle, for example finding suitable education and employment opportunities.

Overcrowding

In England, the statutory overcrowding standard was last updated in 1935. Both the English Housing Survey (EHS) and the census in England use a different standard to measure residential overcrowding²²⁶.

High rates of overcrowding across all housing tenures serve as a major warning sign of systemic issues in the housing system. Overcrowding in the social sector indicates a shortage in the supply of available housing of the right size, and the private sector indicates the affordability issues households face in obtaining a suitable, large enough home^{226,227}.

Overcrowding has a detrimental effect on household members' physical and mental health. Research by the National Housing Federation in 2022 found evidence

of children forced to share beds with other family members, households experiencing poor mental and physical health due to overcrowding, and family members forced to sleep in rooms other than bedrooms²²⁷.

Reports also identified an increased risk of Covid-19 transmission in overcrowded housing²²⁸.

Overcrowding and under-occupancy are assessed with two measures in the 2021 census:

- occupancy rating for bedrooms
- occupancy rating for rooms

The ages of household members and their relationships to one another are used to derive the number of rooms and bedrooms they require, based on a standard formula. The household is then given an occupancy rating:

- -1 implies the household has one fewer room/bedroom than required
- 0 suggests a household has an ideal number of rooms/bedrooms
- +1 implies there is one more room/bedroom than the standard requirement¹³

Under-occupied housing is defined as that with an occupancy rating of +1 or more, indicating that a household has one bedroom more than is recommended for the number and composition of people living in the household. Overcrowded housing is defined as a dwelling that has an occupancy rating of -1 or less, indicating a household has at least 1 bedroom too few for the number and composition of people living in the household²²⁹.

Recent national level analysis on overcrowding and underoccupancy from the census 2021 found in England;

- flats, maisonettes, and apartments were most likely to be overcrowded (8.3%) compared to other accommodation types.
- households living in rented accommodation were more likely to be overcrowded (8.5%), compared with owner-occupied accommodation (1.9%).
- households where all members identified as Muslim were more than five times more likely to be in overcrowded accommodation in comparison to all households in England.
- households where all members identified as Black, Black British, Black Welsh, Caribbean or African had the highest level of overcrowding (16.1%) compared with all households in England (4.4%).
- households where all members were economically inactive (retired, looking after home or family, or long-term sick or disabled) had the highest proportion of under-occupied accommodation with other employment status combinations²²⁹.

The 2021 census stated that 2.1% of all households (n = 6,888) in Suffolk lived in overcrowded housing. This is a decrease of 7.3% from 2011, where 7,431 households in Suffolk were classified as overcrowded. Overcrowding is not as prominent in Suffolk compared to the England average (4.3%), or East of England average (3.4%).

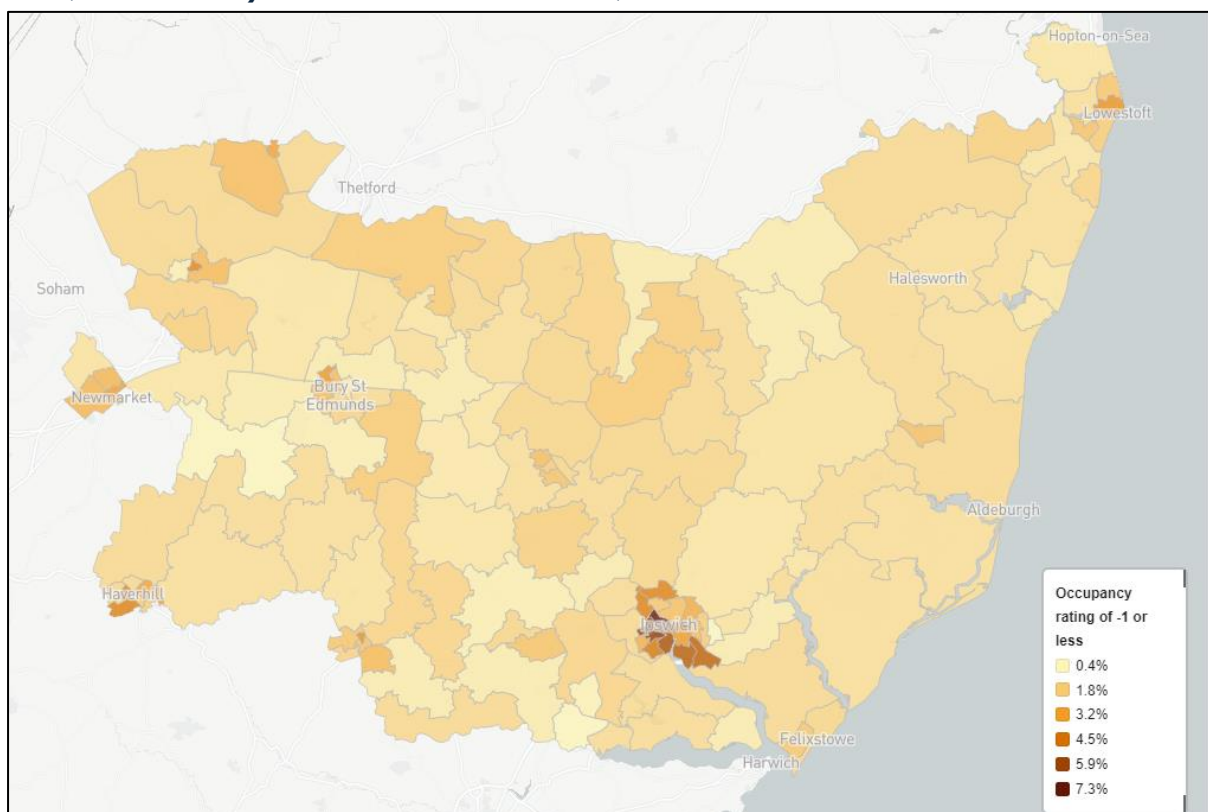
Over 3 in 4 households in Suffolk (76.3% or 254,725 households) lived in under-occupied housing, with a bedroom-based occupancy rating of +1 or more at the 2021 census. This is significantly higher than the East of England (71.4%) and England (68.8%) averages²²⁹.

Under-occupied housing varies significantly across Suffolk's districts and boroughs. The percentage of households with an occupancy rating of +1 or more is as follows:

- Babergh: 80.2%
- East Suffolk: 78.8%
- Ipswich: 65.7%
- Mid Suffolk: 81.6%
- West Suffolk: 76.2%

Data from the 2021 census for overcrowding (households with occupancy ratings for bedrooms of -1, or -2 or less) were combined at ward level. The Westgate (7.3%) and Gipping (6.2%) wards in Ipswich had the highest proportion of households that were overcrowded, with occupancy ratings of 1 or less.

Figure 44. Percentage of overcrowded households (occupancy ratings for bedrooms of -1, or -2 or less) within Suffolk ward areas, census 2021



Source: [TS052 – Occupancy rating for bedrooms](#)

Houses in multiple occupation

A dwelling where unrelated tenants rent their home from a private landlord is a house in multiple occupation (HMO), if both of the following apply:

- at least three unrelated individuals live there, forming more than one household

- toilet, bathroom, or kitchen facilities are shared with other tenants²¹

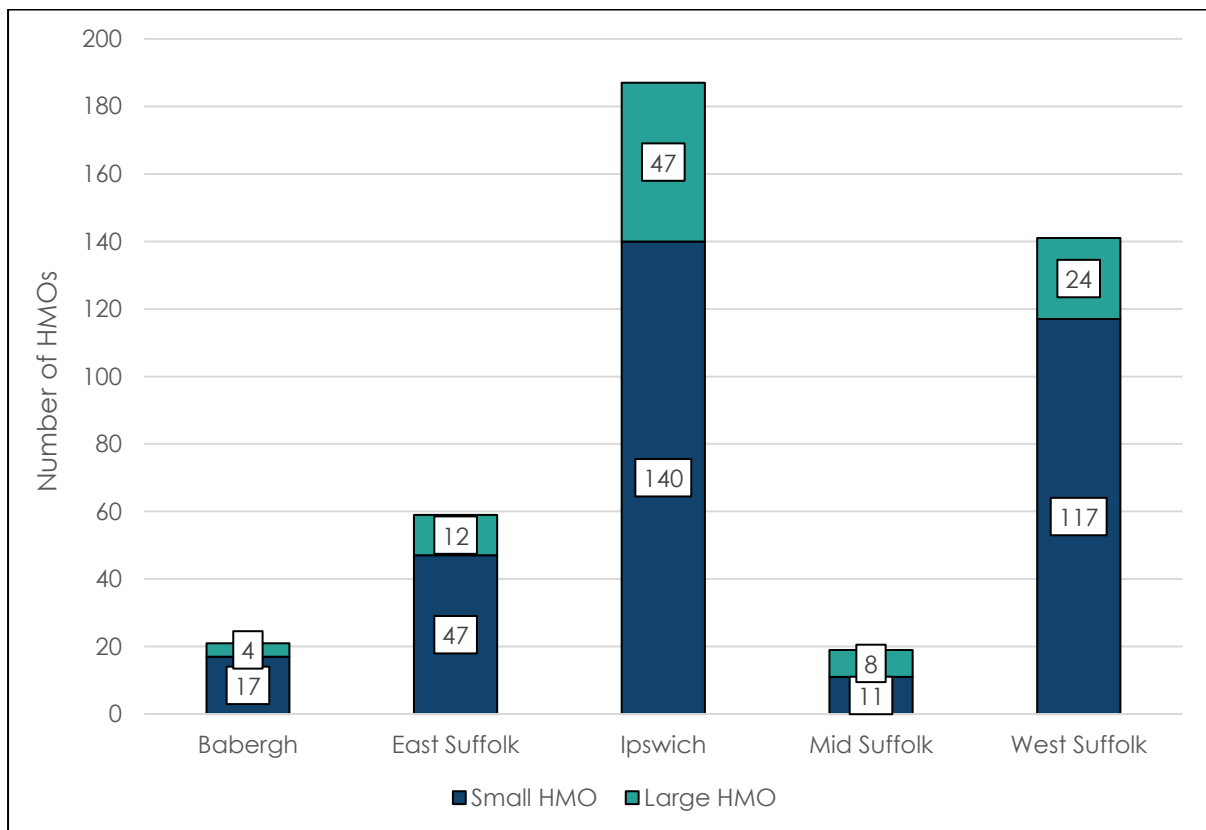
A small HMO is shared by 3 or 4 unrelated tenants. A large HMO is shared by 5 or more unrelated tenants. Most HMO landlords must be licensed by the council. Individuals who rent privately when the landlord lives elsewhere usually have an assured shorthold tenancy rental agreement.

Those that live with the landlord and share rooms like the kitchen, bathroom or living room are likely to be a lodger. Tenants and lodgers have different rights. More information on the different type of rights can be accessed through the [Shelter resource: tenancy agreements in shared homes](#).

In Suffolk, there were 427 HMOs on census day, 2021. Of these HMOs, over 3 in 4 (77.8%) were small HMOs, and 22.2% were large HMOs. Both large and small HMOs accounted for 0.1% of the Suffolk housing stock.

Of the HMOs in Suffolk in 2021, most were in Ipswich (187) and West Suffolk (141).

Figure 45. Number of houses in multiple occupation (HMOs) by Suffolk's districts and boroughs in 2021



Source: [Number of dwellings that are houses in multiple occupation \(HMOs\)](#)

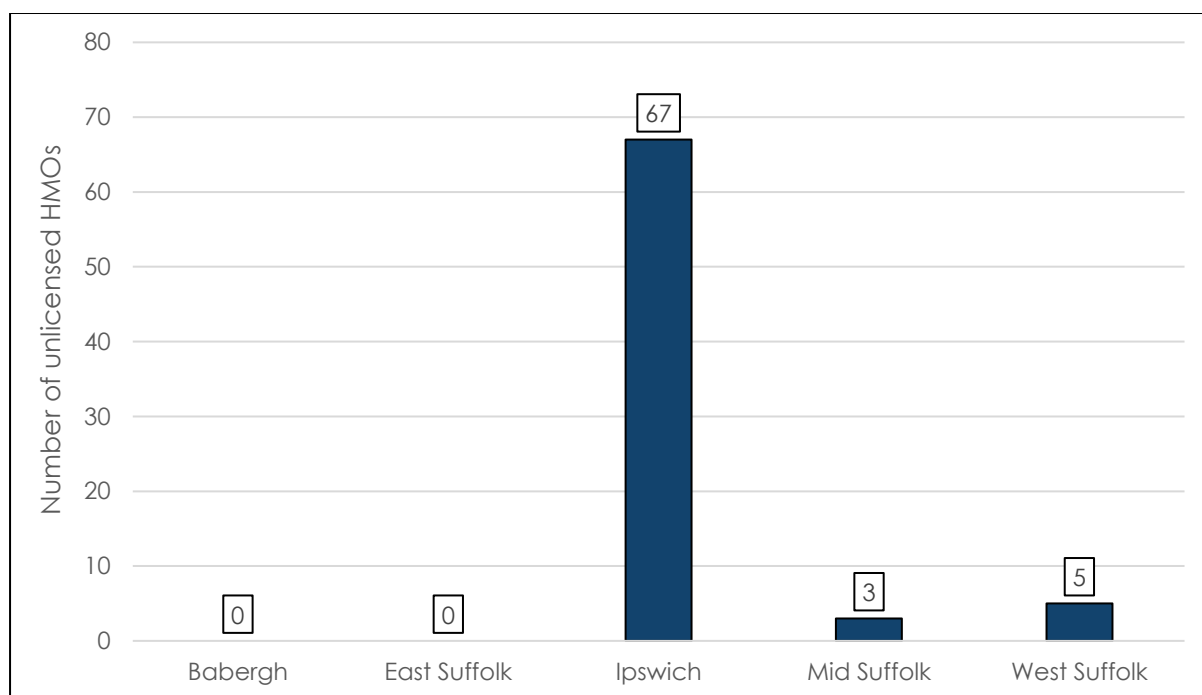
Recent analysis suggests nearly 160,000 people in England live in unlicensed large, shared houses or 'bedsits' – an increase of 46% over the past decade. Data from council returns across England in 2021/22 suggests there were 32,000 unregulated HMOs accommodating 5 or more unrelated occupants sharing facilities²³.

Residents of HMOs are attracted by cheap rents, but often endure squalid, overcrowded, and unsafe conditions²⁵. Councils are reporting rapid rises in bedsit-type accommodation, with unlawful conversions of family homes.

The number of unlicensed HMOs were calculated for this analysis by:

- Estimate of the total number of HMOs within local authority area – actual number of properties with mandatory HMO licenses issued within local authority area.
- Applying this formula, in 2021/22 it is estimated there are 75 unlicensed HMOs in Suffolk between 2021/22, with most in Ipswich.
- HMOs with 5 or more unrelated persons require a mandatory HMO license. With 75 unlicensed HMOs in Suffolk in 2021/22, it is estimated that there are at least 375 people living in unlicensed HMOs.

Figure 46. Number of unlicensed houses in multiple occupation (HMOs) by Suffolk's districts and boroughs, 2021/22



Source: [Local authority housing statistics data returns for 2021 to 2022](#)

Using the same methodology, there were only 15 unlicensed HMOs across Suffolk's districts and boroughs in 2011/12²⁴. While this is a small number of properties in Suffolk, it is estimated that the number of unlicensed HMOs in Suffolk in 2021/22 (75) has increased by 5 times the figure 10 years prior.