

## Hong Kong's housing shame

*Society for Community Organization (SoCO)* firmly believes that everyone should be entitled to equal rights. SoCO is an incorporated, non-profit-making and non-governmental community organization. Since 1972, it has, through civic education programs and social actions, nurtured grassroots people with a sense of civic responsibility so that they can flex their political muscle.

About 80,000 people were living in inadequate housing in Hong Kong in 2010, according to official figures, including in so-called 'cage homes', cubicle apartments, roof-top houses and small sub-divided and partitioned units. These homes and living spaces are usually less than 9.3 square metres (100 square feet) in size, but cage homes tend to be just 1.9 square metres (20 square feet). Residents living in these habitats include the working poor, the unemployed, new immigrants, people suffering from mental illness, ex-offenders and other marginalised and socially excluded groups. These residents face multiple housing-related problems, including poor ventilation, small living spaces, stressful relationships with their neighbours and, despite the poor quality accommodation, unaffordable rents.

Over the last thirty years, the Society for Community Organization (SoCO) has been working with grassroots groups to fight for reasonable living standards in Hong Kong. SoCO individually visits poor households and follows up on their needs, helping them to fight for public housing allocation and livelihood protection. Each year, the organisation assists 1,000 low-income cage home residents to obtain public housing allocations and provides housing, employment and financial consulting services. Despite our successful lobbying for a number of policy changes, inadequate housing remains a significant problem in Hong Kong. In order to help increase awareness of the difficulties faced by poor urban residents, we have compiled a series of short profiles of cubicle and cage home dwellers. These portraits provide a sense for what life is like for some of the residents of Hong Kong's cubicles and cage homes.

### PORTRAITS FROM HONG KONG'S CUBICLES AND CAGE HOMES

In Sham Shui Po, an older district in Kowloon, Mr and Mrs Wu live in a small cubicle: a 4.6 square metre (50 square foot) apartment so small that it is difficult even to turn round, containing no other furniture than a bed, and no electrical appliances. The tiny cubicle is extremely hot in the summer. As Mr Wu said, 'There is only one window, but I dare not open it, as it is full of rubbish outside. The temperature is well over 30 degrees now. I have to go up to the rooftop to sleep every night. It is just too hot to sleep inside.' Sixteen-year-old Wing lives in a neighbouring cubicle with his parents and younger sister, which costs them US\$193 (HK\$1,500) per month of the household's monthly income of US\$514 (HK\$4,000). Wing says, 'After school, we bring two chairs up to the rooftop and do our homework. We don't have a desk at our home, so we use the chairs as desks. My mum, sister and I stay up at the roof to eat and chat every evening. Sometimes, we play games up there too, and then go back to our cubicle after 11pm to sleep. Yes, the roof is full of trash, as long as you don't look at it, it's no problem.'

Rooftop living is equally challenging. Lau Yip Sum, aged eight, lives in a 9.3 square metre (100 square foot) cubicle on a rooftop with his family. Here, too, temperatures can be very high, and his family cannot switch on the air-conditioning continuously, which makes Yip Sum reluctant to go home. Fortunately, a social worker helped him to access free tutorial class at the Community Learning Centre, which provided him a more comfortable place to study after school. Yet, when at home, living conditions are far from healthy: 'Toilet, ceiling ... in any area you can see cockroaches and mice, and sometimes they are dead!' said the scared and helpless Yip Sum. His health has deteriorated, and he falls ill easily: he was ill with a fe-

ver for several days and caught pneumonia in the previous year, and his eye was wounded by his younger brother at night when they were asleep in their narrow bed. The family has been waiting for public rental housing for more than three years and it is still not clear when a flat will be found for them.

For 54 year old Chau Kam-chuen, the economic decline that followed the 2003 SARS outbreak in Hong Kong forced his employers to reduce his working hours as a chef, following which he reluctantly retired and was unable to find other work. He fell into financial difficulty, and was forced to take up increasingly poor housing: 'I used to make over HK\$10,000 [US\$1,286] a month, and was using HK\$2,000 [US\$257] for rent. I became unemployed and used up my savings. When the landlord raised the rent, I moved into a HK\$1,500 [US\$193] [per month] cubicle; then the landlord there raised the rent too! Since September 2007, I have been paying HK\$900 [US\$116] [per month] for an illegal caged bed space of less than 20 square feet [1.9 square metres]'. Having been promoted from waiter, to headwaiter and later chef during the 'golden era' of the 1980s and 1990s, Chau is now relying on Comprehensive Social Security Assistance (CSSA). Although he has been living in Sham Shui Po for more than twenty years, this is the first time he has had to share an enclosed living space of 74.3 square metres (800 square feet) with nearly forty other people, breathing stale air and queuing up for hours to use the toilet. When he first moved in, Chau was living through a period of depression, until SoCO found him: 'Soon after I moved in, social workers came and visited. I didn't trust them at first, didn't think they could help me, I couldn't help myself.' After a few more visits, he opened up and has become friends with others who share similar past experiences: 'I've become more positive since then.' His major concern is now finding a job. Chau is a strong man in his fifties, but most of his teeth are gone, and finding a job is not an easy task for him. 'No boss will employ me. It's just so sad.' Chau has had many frustrating job-hunting experiences, but he is determined not to give up. 'If I have a job, I don't need to rely on CSSA. I'll work hard and support myself. I can then move to a bigger place, a place with more privacy.'

Fung Kam-ho, a 43 year old unemployed waitress, has a 'suite' of just 9.3 square metres (100 square feet). She has suffered mental health problems, following a breakdown in 2004, and now relies on public assistance and has applied for Compassionate Rehousing

in a public housing estate. Kam-ho's neighbours are mostly prostitutes and second-hand goods traders but, compared to the cubicle she lived in for decades previously, it is indeed a great improvement. There, seven or eight people lived under the same roof, but Kam-ho was the only female and lived in fear. She admits that her mental condition was very bad when she was staying there, and while she wanted to move, living on public assistance, she did not have many choices and could only move from one cubicle in Sham Shui Po to another, and all were just as shabby and worn-out as each other. Now Kam-ho's wish is to gain access to public housing, so that she can have a place of her own, a bathroom, a kitchen and a living environment that is not as lousy as her present one, and to have a new start.

### **INADEQUATE HOUSING AND HEALTH**

As these portraits suggest, living in inadequate housing is likely to have a detrimental impact on residents' physical and mental health, which may already be poor in many cases. This is backed up by research conducted by SoCO since 1990 on cage homes and cubicles, which shows that chronic illnesses are common amongst residents, with only 21 per cent of cubicle residents and 31 per cent of cage home residents surveyed not suffering any chronic illness. Respiratory disease is one of the most common chronic illnesses, and, while the precise numbers have varied, respiratory diseases have tended to rank high in SoCO's different studies across the years. For example, 22.2 per cent of cubicle residents and 22.6 per cent of cage home residents surveyed in 2009 were suffering from respiratory disease.

Such high rates of disease are not difficult to understand in light of residents' over-crowded living areas, which facilitate the transmission of germs. They also reflect the concentration of socially excluded groups in inadequate housing: the 'dumping ground' for groups such as ex-offenders, drug-abusers and people suffering from mental illness. These groups made up 31.1 per cent of inadequate housing residents in 1997 but only 14.4 per cent in 2009, thanks in part to the improvements in housing policy successfully lobbied for by SoCO. Despite a reduction in the percentage of residents living in inadequate housing that have severe mental illness, from 8.9 per cent in 1997 to 5.2 per cent in 2009, these figures remain significantly higher than for the city as a whole. When surveyed by SoCO, 40 per cent of people with mental

illness said that their mental health had worsened as a result of living in inadequate housing. Again, this impact is not difficult to understand in light of the small spaces in which people are living, and the stressful relationships they have with their neighbours, who must also share such spaces.

The results of SoCO's research are consistent with official statistics. Poor people in Hong Kong are more likely to rate their own health as fair or poor than other income groups: nearly 47.7 per cent of people with 'no income' and 40.1 per cent of people earning less than US\$1,286 (HK\$10,000). The same findings arise from other physical and mental health assessments: the median scores for physical health as assessed by the 'SF-12' scheme, for example, are 47.7 for people with 'no income', 50.5 for people earning less than US\$1,286 and 51.4 for people earning US\$2,572 (HK\$20,000) or more. SoCO's own analysis of the differences in mental health (as measured by the CES-D scheme) by district found that mental health was significantly worse in Kwun Tong (CES-D score of 29.0), Sham Shui Po (22.0) and Yau Tsim Mong (25.0) than in Hong Kong as a whole (17.0). These three districts are old urban areas in Hong Kong, where much inadequate housing is concentrated. While the study is not conclusive, and does not prove any causal relationship, it is at least an attempt to fill a gap in the official statistics to explore the relationships between inadequate housing and mental health within Hong Kong.

SoCO's research is also consistent with various academic studies in Hong Kong and elsewhere on the relationships between housing and physical and mental health. The transmission of tuberculosis in Hong Kong, for example, has been found to be facilitated by crowded living conditions in rooms and bedsits, as well as being a disease of the poor more generally. The connections between poor housing and mental health have been explored internationally, and various correlations between housing quality and mental wellness have been identified. The subject has, however, received relatively little attention in Hong Kong: the only available local study, conducted in 1971, is now rather out of date.

## **RECOGNISING AND ACTING ON HONG KONG'S HOUSING PROBLEM**

Unfortunately, the Hong Kong SAR Government does not approach the issue of housing from a health perspective. While the government has promised to

house public housing applicants within three years, many have to wait much longer due to various discriminatory housing policies, as well as a lack of supply. New immigrant families may have to wait seven years, because they are regarded as non-permanent Hong Kong residents, while non-elderly single people have to wait for more than ten years as a result of the government's efforts to control demand by limiting the supply of public housing for single people. Despite the 50 per cent increase in public housing applications from around 100,000 in 2006 to around 150,000 in 2011, the government only promises to build 15,000 public housing units per year in the coming years. Residents' health is thus ignored by housing policy, which forces them to remain for long periods of time in poor living environments while they wait helplessly for public housing.

To improve the health of residents living in inadequate housing, the government should start by commissioning a comprehensive study on health and housing in order to understand and recognise the nature and extent of the problem. This study should then trigger a review of existing housing policy, considering changes such as shortening the waiting time for public housing, subsidising residents of inadequate housing to enable them to live in a healthier living environment while they wait, enhancing primary health care and rehabilitation services and, in particular, initiatives that focus on socially excluded groups.

The evidence linking poor housing and health is clear, yet the issue receives little attention in Hong Kong. Unless this is recognised, and the related complex problems of poverty, insufficient housing supply and lack of social support are adequately addressed by the government, the health of Hong Kong's residents will remain in danger.

Contact:

LSE Cities  
London School of Economics  
Houghton Street  
London WC2A 2AE

+44 (0)20 7955 7706  
[lse.cities@lse.ac.uk](mailto:lse.cities@lse.ac.uk)  
[www.urban-age.net](http://www.urban-age.net)  
[www2.lse.ac.uk/lsecities](http://www2.lse.ac.uk/lsecities)

Alfred Herrhausen Society  
Deutsche Bank  
Unter den Linden 13/15  
10117 Berlin  
Germany

T +49 (0)30 3407 4201  
[ute.weiland@db.com](mailto:ute.weiland@db.com)  
[www.alfred-herrhausen-gesellschaft.de](http://www.alfred-herrhausen-gesellschaft.de)

**LSE Cities**  
AN INTERNATIONAL CENTRE SUPPORTED BY DEUTSCHE BANK

**LSE** THE LONDON SCHOOL  
OF ECONOMICS AND  
POLITICAL SCIENCE ■

**Alfred Herrhausen Society**   
The International Forum of Deutsche Bank