Healthy Communities of

Opportunity: An Equity Blueprint to Address America's Housing Challenges

PolicyLink

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Preface

At the intersection of housing, health, and economic security lie enormous possibilities to build communities of opportunity across America. Housing and health are inextricably linked. Their complex interplay determines whether neighborhoods, cities, and regions flourish or fall behind, and whether children thrive and families succeed. Weaving together smart housing, health, and economic security policy can create stronger, resilient, inclusive, prosperous communities.

It has long been obvious that a lead-laden home or a house located by a toxic dump impacts health. The implications of a house far from fresh food or a safe place to exercise can also seem apparent. Less understood are other factors. For example, paying more than half of one's salary for a home, living in crowded conditions to save on rent, the tension and worry of being in and out of homelessness or in high-crime environments all take a toll. So, too, does living in a community isolated from jobs, job-connecting networks, and reliable public transportation. As this report reveals, housing, health, and economic security together shape the opportunity landscape in America, which in turn are shaped by the nation's structural, economic, and racial barriers.

The Kresge Foundation and PolicyLink embarked on this project to lift up fresh ideas, new collaborations, groundbreaking strategies, and the many opportunities for united action and policy change to advance healthy housing. Across America, grassroots leaders, policymakers, philanthropists, community builders, and advocates are addressing health and housing concurrently, comprehensively, and creatively with promising results. The work connects health and housing across the spectrum—from disinvested communities of concentrated poverty, to the rapidly changing neighborhoods where long-time residents live under the shadow of displacement, to the high-opportunity communities with quality schools and services.

Housing is an important issue for many community stakeholders, but it's a central concern for public health policymakers, fair housing supporters, and civil rights leaders. This report illuminates opportunities for these groups to bring together their varied perspectives to answer one of the most pressing questions facing the nation: how to fix the nation's mounting health and housing problems. By working together, leaders, advocates, and local residents can rebuild communities on a foundation of equity—just and fair inclusion into a society in which all can participate, prosper, and reach their full potential.

Our organizations began this project against the backdrop of the Great Recession's worst financial catastrophe in generations, one that hit people of color first and worst, causing a loss of wealth of historic proportions from which they have yet to recover. The reconfigured housing landscape that has emerged in the wake of the collapse has deepened inequity.

This paper offers a roadmap to face these challenges and secure the nation's future. The Obama Administration's new Affirmatively Furthering Fair Housing rule, Affordable Care Act investments in health promotion, the recent Supreme Court victory for advocates challenging exclusionary housing policies, the deepening engagement of philanthropy, the growing demand for investments that improve sustainability and climate resiliency, and robust organizing by communities—all this adds up to the best opportunity in years to transform the nation's housing infrastructure into an engine of health, opportunity, and prosperity for all.

Let's work across disciplines to advance the foundational housing changes this country urgently needs to make our communities healthy. We hope this report spurs your thinking, inspires your imagination, and points the way to new partnerships, effective advocacy, and transformative action.

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Framing a new approach

Where we live directly impacts our health and our ability to achieve our full potential. Access to good schools, quality jobs, reliable transportation, and other avenues of opportunity are the connector pieces for housing and health, and practitioners, scholars, policymakers, and advocates increasingly rely on an evolving framework to advance these twin ideas. This paper proposes bringing an equity framework to health and housing as an integrated approach to create healthy communities of opportunity where everyone can thrive.

Housing is not only the single greatest expense for most families—it is also a key determinant in whether or not household members have the resources to live healthy lives and achieve their full potential. Equitable housing must be more than affordable; it must also connect workers and residents to the jobs, schools, services, and community assets that will enable them to thrive and be healthy.

2015 was a historic year for health and housing policy and for the convergence of the two. On the housing front, the Supreme Court voted to uphold the disparate impact doctrine of the Fair Housing Act and the Obama Administration released the long-awaited Affirmatively Furthering Fair Housing rule, both actions recognizing the continuing impact of racial discrimination, segregation, and disinvestment on the lives of too many people of color. On the other front, the Affordable Care Act (ACA) survived a second Supreme Court challenge, costs have come in substantially lower than projections, 20 million new people are now enrolled, exceeding White House goals, and hospitals and managed care programs can now incorporate healthy housing into their planning for community benefits agreements.

Taken separately, these decisions and announcements, and the policy battles that preceded them, may not appear to be connected. Housing discrimination has traditionally been defined and combated based on relatively narrow and specific terms of the denial of accommodations to individuals, and health-care financing has been the purview of a powerful array of interests mostly concerned with medical services and insurance. But in reality these decisions are closely related. The broadening of "fair housing" enforcement and remediation—as provided for in the housing rulings—will now explicitly assess not just overt discrimination but also the structural disinvestment faced by people of color

and their lack of access to affordable housing in communities of high opportunity—with an aim to encourage more inclusive housing, planning, and investment strategies. The implementation of the ACA involves not only community-level strategies for prevention and reduction of health inequities in chronic diseases, but also offers opportunities for innovative financial solutions to urgent housing problems.

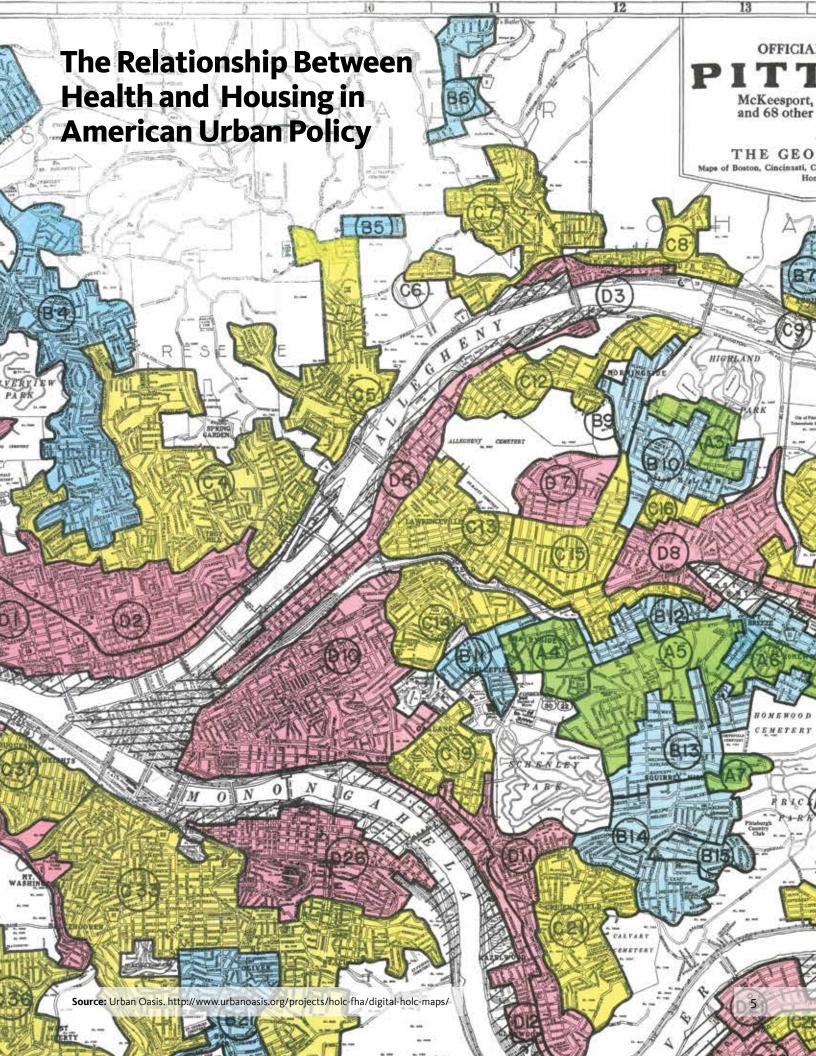
The confluence of new ideas in 2016 is bringing muchneeded energy to a bourgeoning crisis. The Great Recession, with mortgage finance malpractice at its root, did incalculable damage to the security of America's housing and the wealth of working families, especially among people of color. Even with the general recovery underway, the country is facing worsening conditions of housing insecurity, from homeowners at risk of losing their property and renters displaced by skyrocketing prices in newly popular neighborhoods, to the persistent challenges of ending homelessness, even among those who are employed. It is doubly cruel and challenging that so many forms of public support for affordable housing—defined by the federal government as less than 30 percent of pre-tax income—were imperiled by the crisis, but that only underscores the need for creative responses.

Further, the face of America is changing: more than half of Americans under age five are of color, and by 2044 we will be a majority people-of-color nation, according to latest projections by the U.S. Census Bureau.¹ People of color are disproportionately impacted by the housing affordability crisis—an alarming trend that threatens the fate and family well-being of the nation's emerging majority, and indeed, the nation's very prosperity. In growing and gentrifying areas, rising housing costs and stagnant wages have narrowed affordable housing options and displaced vulnerable communities; at the same time, in disinvested neighborhoods where housing is less expensive, inadequate infrastructure and critically underfunded institutions present tremendous barriers to the economic and social inclusion of their residents.

This report explores how connecting housing and health can provide a foundation for a stronger movement to support key housing policies that advance equity—just and fair inclusion for all—and how the housing and health fields can each benefit from these merging goals, interests, and practices. Putting America's most vulnerable communities front and

center in advancing housing policy means balancing the need to expand access to communities of opportunity with the need to invest in and increase opportunities in underserved communities, both urban and rural. This paper begins by examining how America's housing and development policies leave so many communities lacking real opportunity and facing daunting health challenges. It then reviews the postrecession trends contributing to greater housing insecurity, surveys the emerging promising practices that strengthen the nexus of health and housing opportunity, and suggests a reform agenda that can help build momentum for population-level policy change. In that agenda, there are critical steps for federal, state, and local officials; for a vibrant, well-informed, and effective movement of advocates; and for engaged philanthropy in building the movement for equitable policy change.

Right: A 1937 "redlining" map from Pittsburgh indicating neighborhoods—largely inhabited by people of color—deemed most risky for mortgage support. Sanctioned by the Federal Housing Administration in the 1930s, such maps were used across the country to accelerate housing segregation and deny mortgages to people of color.



Health and housing are inextricably connected

Health and housing have a historical nexus² that practitioners have recently sought to elevate and reconnect as a powerful tool for advancing equity and promoting health in all communities.³ In response to outbreaks of infectious diseases fueled by unsanitary and unhealthy conditions common in 19th century urban slums, a convergence of medical practitioners, social reformers, and philanthropists held up decent housing as a key tool to advancing public health.⁴ They modeled social housing and modern tenements that burgeoned into the settlement house movement and gave birth to the human services sector and the profession of urban planning. Florence Nightingale, the founder of modern nursing, famously stated that "the connection between health and dwelling is one of the most important that exists."⁵

The linkage of public health with city planning, forged in the Progressive Era at the turn of the 20th century, was not sustained as a driving force. Rather, a different recognition of the intersections between poverty, housing, and health later shaped the public sector response to the Great Depression. Landmark federal housing legislation in the 1930s and again after World War II solidified government's role in both public housing and in private market subsidies to stabilize massive numbers of people facing home loss. The original inspiration behind public housing was providing safe, sanitary, relatively economically integrated dwellings. For a while, public housing served that purpose relatively well for many working families, before systemic neglect, underfunding, segregation, and isolation led to intractable physical and social problems. Acute shortages of housing following WWII gave rise to racially inequitable home ownership subsidies and support for suburban development which spurred the mobility to vastly expand the White middle class, increase home equitydriven wealth, and consequently improve health and longevity for that segment of the population.

The community where we live has profound implications for health, well-being, and life expectancy. For many of us, home is a sanctuary, where we can find comfort and peace; a place where we can feel safe, connected to our neighbors and the opportunities around us. The safety and security of home provides a platform to connect to the opportunities of education, work, and health. Unfortunately, in America,

where you live is a proxy for opportunity: many people of color live in neighborhoods that either lack amenities for upward mobility, or face gentrification pressures and the attendant danger of displacement from rising rents just when the amenities do arrive. Both situations have profound impacts on health. These circumstances make it a critical time to link the diverse actors in both health and housing fields to reestablish housing as a platform for opportunity.

The full-scale policy drive to grow suburbia, aimed at producing housing or making it affordable, had a harmful impact on communities of color across America. The contributions to this harm came from federally driven housing, credit, and land use policies, and resulted in the racial disparities in health and wealth so unmistakable today. From the wholesale displacement of Native Americans that made settlement of the United States possible to the residential location and lending restrictions enforced against African Americans, Asians, and Latinos—people of color have been forced into substandard housing in reservations, urban ghettos, internment camps, and sharecropper shacks. Health problems such as lead poisoning and asthma, directly linked to poor housing, can lead to long-term impairment and disability as well as immediate problems. The adverse consequences for health of substandard housing are not in doubt, but the political will to fix them has never been equal to the task.

In communities across the nation, patterns of racial exclusion and disadvantage have not only persisted but expanded. While talent and potential exist in every zip code, opportunity does not. Consider zip code 63106, a distressed neighborhood in northern St. Louis where 96 percent of residents are Black and 52.5 percent of families live in poverty—more than three times the national poverty rate. A child born and raised here is expected to live only 69 years—10 years below the national average—attend schools deemed so substandard that the state took them over in 2013, and have few opportunities for livable wage work since manufacturing jobs fled in the 1970s and 80s. Drive 20 minutes southwest and you reach Clayton (zip code 63105), an affluent and predominately White St. Louis suburb, where residents live on average 16 years longer, their children attend schools in one of the best districts in Missouri, and a diverse economy offers family-sustaining jobs.

This is modern-day segregation. Though laws prohibit overt discriminatory policies, the decades-old patterns of racial segregation overlap almost completely with patterns of poverty and disinvestment today, leaving many low-income people of color cut off from essential community assets good schools, healthy environments, job opportunities—that would allow them to thrive. Over 50 million Americans live in distressed zip codes where nearly a quarter of adults have no high school degree, over half of adults are not working, and the median income is only two-thirds of the state level, according to a report by the Economic Innovation Group. Over 14 million people—including over 4 million children live in communities of disinvested racially concentrated poverty, and millions of others face rising housing cost burdens that force them to move, forgo basic needs, or become homeless—stresses that place significant burdens on health.

Take Yvonne Quinn, a home health care aide nearing retirement age who was priced out of her apartment in the San Francisco East Bay, a region where rents have soared by more than 44 percent since 2010.6 She now drives almost two hours from Stockton, California, to get to her church, where she can feel a sense of community again. She is one of over 72,000 African Americans who have been displaced from San Francisco and Oakland over the last two decades due to escalating housing costs, and has relocated to a distant community where poverty is growing. She is one of almost 15 million American households with extremely low incomes—two-thirds of whom spend more than half of their income on housing.

Homeownership was largely unobtainable for working-class Americans prior to the creation of the Federal Housing Administration in 1934. The specific practice called "redlining" began with the National Housing Act of 1934, which established the Federal Housing Administration (FHA). In 1935, the Federal Home Loan Bank Board asked Home Owners' Loan Corporation to look at 239 cities and create "residential security maps" to indicate the level of security for real-estate investments in each surveyed city. On the maps, the newest areas—those considered desirable for lending purposes—were outlined in green and known as "Type A." These were typically affluent suburbs on the outskirts of cities. "Type B" neighborhoods, outlined in blue, were considered "Still Desirable," whereas older "Type C" were labeled "Declining" and outlined in yellow. "Type D" neighborhoods were outlined in red and were considered the most risky for mortgage support. These neighborhoods tended to be the older districts in the center of cities; often they were also Black or Brown neighborhoods. Lenders then had to consider FHA standards if they wanted to receive FHA insurance for their loans. FHA appraisal manuals instructed banks to steer clear of areas with "inharmonious racial groups," and recommended that municipalities enact racially restrictive zoning ordinances. People of color were typically denied the rental housing and mortgages generated by FHA, and regulations purposefully reinforced racial segregation—directly contributing to the racial wealth gap that exists today.⁷

These historical barriers play out to this day, with young families from communities of color facing more barriers and fewer avenues to homeownership. For example, among first-time homebuyers, one out of three White homebuyers get financial help from family, while only one out of 16 African American homebuyers receive such assistance.8 Proactive laws providing tenant protections, minimum health and safety standards, and fair housing access were not widely recognized by the courts until the mid-20th century, but remain unenforced in far too many communities today.

These practices and policies contributed greatly to the decline of the safety and viability of neighborhoods in the central city that were home to most Black, Latino, Asian, and Native American residents. Communities of color created cultural hubs, social networks, and faith-based institutions to support families in the ghettos and barrios of late 20th century America, but they were operating in a political and economic context that fundamentally compromised their health and well-being.

Poverty, violence, and structural racism are not just adversities in the direct sense; they also create stresses that further exacerbate physical as well as mental health problems, and make it difficult for parents to protect and nurture their children. Socioeconomic conditions shape health outcomes for all residents in a given neighborhood, with disadvantaged neighborhoods providing fewer opportunities for good health. With African Americans, Hispanics, and Native Americans living disproportionately in disadvantaged neighborhoods, they are more likely to experience chronic stress and other burdens that negatively contribute to health risks. 10

The trauma engendered by adverse childhood experiences, such as domestic abuse or violence in the streets, must be understood if the youth who experience them are to be successfully guided through school and adolescence. Extensive research has complemented common sense and shown that children's well-being, educational progress, and physical and mental health are fundamentally threatened by the conditions of concentrated poverty, which cannot be solved without creating better housing and neighborhood opportunities. The history of efforts to improve conditions in troubled neighborhoods, and to help families "move to opportunity" throughout a region, confirms that both strategies are necessary to create family and community health; but both require more cultural competency, resources, comprehensiveness, scale, and continuity than have been provided to date.

Beyond the federal mortgage policies that fostered White flight, the deindustrialization—the loss of mostly urban factories—and the suburbanization of many remaining jobs, created a spatial disconnect on a regional scale for people of color between where they lived and where work was located. This contributed greatly to lower employment levels and lower incomes in communities of color, and lack of income is one of the most consequential influences on health status in its own right.

The racially segregated and disinvested communities seen in America's cities and regions today, coupled with lower incomes and assets, are the basis of much of our current health disparities. While landmark civil rights legislation from the 19th and 20th century was intended to end racial discrimination, discriminatory conduct continues to this day. The more recent broad trends in metropolitan development now include the emergence of low-income suburbs and the "return" to the central city of middle-class Whites along with significant rises in employment. Yet these trends do not change the fundamental phenomenon of concentrated poverty and the high levels of *de facto* segregation (though they do create some different dimensions of it, as will be seen later).

In the midst of these new trends in urban development and with official recognition of the persistence of intergenerational concentrated poverty, the historical connection between housing reform and public health is fortuitously being revived. In the last decade, public health experts have incorporated

a strong sensibility that the built environment—from the dwelling to the neighborhood, the city, and the region affects population-level health in countless ways. This recognition has been tied not just to the conditions in poor neighborhoods, but more to the regional challenges of creating more sustainable development in place of our auto-centric suburban sprawl. As a result, public health and equity leaders now weigh in on every dimension of transportation planning from walkability to transit-oriented development to the highway budget, with the goal of combating obesity, heart disease, asthma, and other chronic conditions made worse by car-dependent sprawling metropolitan areas. They encourage compact development and reinvestment in the central city, and raise new awareness of issues of housing equity, environmental justice, and the consequences of public disinvestment that drive racially concentrated poverty. A full-fledged societal commitment to "community prevention"—to addressing the "upstream" social determinants of health outcomes in order to keep chronic conditions from taking root—needs a strong focus on housing.

Accordingly, this paper next documents the critical nexus between health outcomes and equitable access to a quality, affordable home in a safe and opportunity-rich neighborhood, informing a policy framework to address housing insecurity and its health impacts that have reached crisis proportions in America.

Placing healthy housing in context

"Healthy housing" is a home where the physical, mental, and socioeconomic environment supports household members in making healthy choices, achieving educational and economic success, and engaging in robust social and cultural networks. It is housing in a neighborhood connected to good employment and business opportunities in the region. It is a home free from toxins and threats from the built environment such as unsafe streets, violence, poor air quality, industrial chemical exposures, allergens, mold, or pests. It does not impose cost burdens that divert household income away from healthy food, medical care, or educational opportunities. It is located in healthy and well-resourced neighborhoods.

A rapidly growing research base has confirmed that "place matters" for health, and that medical care alone accounts for only a modest share of health and mortality outcomes. Neighborhood services and amenities play a powerful role in shaping health outcomes, with residents' health impacted by access to fresh and healthy groceries, public parks for exercise, and a diversity of transit options.¹²

The dimensions of concentrated poverty, persistent racial segregation, and limited economic mobility raise important questions of how housing can serve as a platform for better health outcomes. Low-income, racially segregated communities are disproportionately impacted by an aggregation of factors such as proximity to landfills, freeways, industrial areas, and other toxins and pollutants. Such communities experience unequal enforcement of environmental laws. And the burden of substandard housing falls most heavily on low-income children of color who suffer from higher rates of elevated blood lead levels and asthma, which are both strongly related to older and substandard homes. These diseases not only impair physical health, but also contribute to poor educational outcomes and classroom attendance.

The major links between health and housing—housing quality, affordability, physical and social neighborhood attributes, and housing as a platform for economic opportunity—strongly indicate that improved housing and neighborhood environments could lead to significant reductions in health disparities. These improvements will require a deep, prolonged cross-sectoral and multidisciplinary engagement. To understand the particular challenges the nation faces in implementing these improvements, the next section reviews current housing trends.

National Housing Trends and Their Implications for Health



Impacts on low-income communities and communities of color

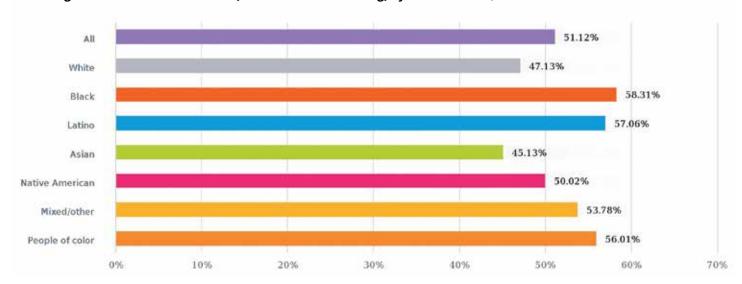
This section characterizes the current impacts of nationwide housing trends on low-income communities and communities of color; on renters and the housing market; and on the economy.

Though racial disparities in housing security have a long history, these disparities accelerated during the Great Recession of 2008 and continue to worsen. The recession's aftermath both altered the housing landscape and left behind an uneven recovery that has health and economic consequences today. Fueled by the subprime lending that targeted people of color and their neighborhoods, Hispanics lost 66 percent of household wealth through foreclosure, African Americans lost 53 percent, and Whites lost 16 percent.¹⁶ Housing challenges were further compounded by job losses and the public sector budget deficits that followed the collapse of the housing bubble. The significant recessionera cuts to federal, state, and local investments in affordable housing that followed have not been restored. A resulting growth in renter households, a new corporate strategy of investing in and maximizing rents from single-family rental homes, and the loss of family-supporting wages as the economy produces mostly low-paying service jobs all constitute the current landscape.

While stable, affordable housing supports better intellectual development outcomes for children,¹⁷ 43 percent of families with children report that they are struggling to afford housing.¹⁸ People of color are especially affected: half of all African American and Hispanic children live in households that spend more than 30 percent of their income on rent, and almost a third of White children face such challenges.¹⁹ Families facing housing-cost burdens move more frequently, bringing great instability to childrens' lives. Low-income families are particularly susceptible to relocating: in any two-year period, 43 percent of extremely low-income families with children move homes.²⁰

Gentrification is undermining the social and economic fabric of communities of color nationwide. The affordable housing crisis is leading to more and more low-income families and individuals being evicted to make room for higher paying renters or condominium purchasers.²¹ Rapidly gentrifying urban centers are leading low-income households to relocate to the suburbs where they are further removed from essential supports and services, such as public transportation and job centers.²² One study estimated that 16 percent of people-of-color urban neighborhoods experienced gentrification from 2000-2009.23 Governing magazine found that 8 percent of neighborhoods in the nation's 50 largest cities gentrified between 2000 and 2013, with between 20 and 58 percent of census tracts gentrifying in the top 15 cities.²⁴ Strong-market cities like Portland, Oregon (58.1 percent), Washington, DC (51.9 percent),

Housing Cost-Burdened Households (>30% income on housing) by Race in the US, 2012



Source: PolicyLink/PERE National Equity Atlas, www.nationalequityatlas.org.

Minneapolis (50.6 percent), and the San Francisco Bay Area witnessed concurrent job and development growth. These areas saw significant displacement of communities of color—such as the loss of 72,000 African Americans from San Francisco and Oakland over the last two decades, or the displacement of 8,000 Latino residents from their cultural enclave in the San Francisco Mission District over the last decade and a half. In several high-cost cities, an additional stressor has been the conversion of lower-cost rentals and foreclosed homes into more profitable high-cost rentals or short-term rentals facilitated by online brokering companies such as Airbnb. A study commissioned by the San Francisco Board of Supervisors found that 15 percent of the rental housing stock in that city was removed from the market by such arrangements.²⁵ This increased shortage of available units drives market rents higher for all renters.

Over 14 million people live in RECAPs, racially and ethnically concentrated areas of poverty, including over 4 million children.²⁶ RECAPs are census tracts where the family poverty rate is over 40 percent and a majority of the residents are people of color. According to the U.S. Census, in 2014, the overall poverty rate nationwide was 14.8 percent, with 46.9 million people in poverty. The rate for African Americans was 26.2 percent, with 10.8 million people in poverty; for Latinos 23.6 percent, with 13.1 million in poverty; for Asians the poverty rate was 12 percent, which represented 2.1 million people in poverty; for Native Americans, the poverty rate was 29.1 percent, with 1.3 million people in poverty; for Whites the poverty rate was 10.1 percent, representing 19.6 million people.²⁷ While poverty in itself contributes to health disparities and compromised life expectancy, the stresses of life in disinvested RECAPs exacerbate these disparities. People with disabilities have an exceedingly high poverty rate, with 28.5 percent of adults with a disability experiencing poverty.²⁸

The disproportionate arrest and incarceration rates of people of color in the United States limits their subsequent access to safe and affordable housing and work opportunities. The racial disparities in arrest and incarceration rates have strong implications for individuals with a criminal record seeking stable housing. African Americans are incarcerated at nearly six times the rate of Whites, ²⁹ and Latinos are incarcerated at four times the rate of Whites, ³⁰ with incarceration rates over the past two decades increasing fourfold. ³¹ Low-income individuals with arrest records and the formerly incarcerated and their families face denials in accessing subsidized housing, due to

criminal background checks by public housing authorities (PHAs) and owners of federally assisted housing, often in violation of state law. Studies show that individuals released from prison without access to permanent housing are much more likely to commit crimes again and to be reincarcerated. Yet the public costs to an overburdened criminal justice system, not to mention the financial and emotional toll on crime victims, far exceed the costs of providing housing.

Land use policies and "not in my backyard" denials of proposed projects continue to exclude lower-income renters and people of color from higher-opportunity neighborhoods. Local zoning and land use practices continue to exclude apartment buildings, modest size homes, and use of rental housing vouchers, thus preventing lowand moderate-income housing from being developed. Exclusionary zoning in suburban areas prevents low-income people from living in high-opportunity neighborhoods, increases transportation and other costs for families who are already struggling to make ends meet, and reinforces residential racial segregation. Other factors include disinvestment in urban areas in favor of suburban investment and land use patterns, the legacy of redlining, and other exclusionary practices.

Suburbanization of poverty leads to negative economic and environmental consequences. Though poverty has historically been perceived as an urban and rural issue, the number of poor people living in the suburbs has grown rapidly in recent years, and in 2012 there were 3 million more poor people living in the suburbs as compared to U.S. cities.³⁵ Unlike urban areas where a range of services and amenities are typically concentrated and accessible, car-centric suburbs have challenges in meeting the complex needs of a growing number of low-wage households.³⁶ Transportation costs strongly impact lower-income households that are pushed to suburbs with fewer transit options. Low-income people tend to own older, less fuel-efficient cars, if they own cars at all, causing increased emission levels when residents who do own cars are pushed out to suburbs farther from job centers. Nearly 14 percent of Latino and Native American households and 20 percent of African American households lack access to automobiles.37

Impacts on rental and subsidized housing

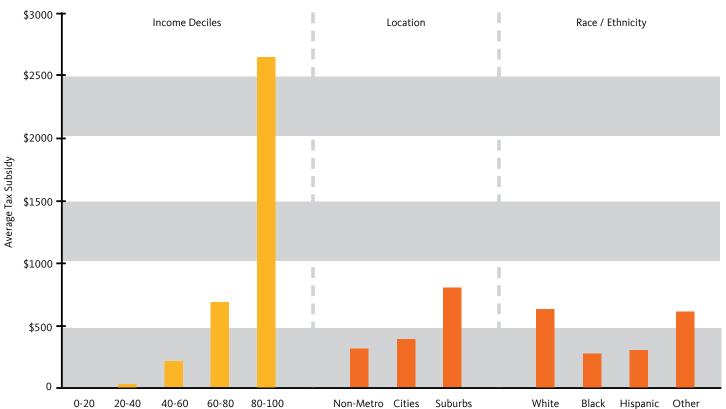
The rental population is growing dramatically, with nine out of the 11 largest cities in the United States experiencing double-digit percentage growth in the number of renters from 2006-2013.38 In the eight years leading up to 2013, more than 1 million new renters were added each year nationally, the strongest growth in 50 years.³⁹ According to Zillow's Chief Economist Stan Humphries, "renting has never been less affordable in this country."40 While renting versus homeownership in itself is not a problem, an increase in renters that is driven by families losing their homes, in a time when little affordable rental housing is being produced and wages are stagnating or losing ground, means increased housing-cost burdens, particularly for low-income households. The enormous increase in demand for rental housing has led to plummeting vacancy rates in all but two of the 11 largest cities in the United States. 41 Extremely low-income renters are particularly vulnerable to the shifting market, with over

75 percent paying more than half of their incomes on rent and utilities.⁴² Nationwide, there are just 31 affordable and available units for every 100 extremely low-income renter households.⁴³

Federal housing subsidies fall short of their stated goal of broadening homeownership and shortchange renters.

Most of the funds from the Home Mortgage Tax Deduction (HMTD) program go to high-income homeowners, who use it to purchase larger and more expensive homes.⁴⁴ Over 77 percent of the deductions go to homeowners with incomes upwards of \$100,000.⁴⁵ Most low-and middle-income families, who are disproportionately of color, receive no benefit at all from the deduction, as depicted in the graph below.⁴⁶ Conservative estimates of the annual subsidy to homeowners via the HMTD range from \$70 to \$195 billion per year.⁴⁷ By comparison, federal subsidies for affordable rental housing amount to \$46 billion per year.⁴⁸

Average Mortgage Interest Tax Deduction Benefits by Income, Location, and Race



Source: Margery Austin Turner, "Who Gets the Biggest Housing Subsidies," Urban Institute, 2011. http://www.urban.org/urban-wire/who-gets-biggest-housing-subsidies.

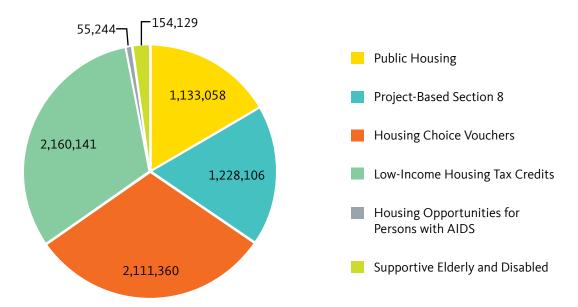
Morgage Interest Deduction Mostly Benefits Families with Least Need



Sources: Joint Committee on Taxation, Estimates of Federal Tax Expenditures for Fiscal Years 2012-2017 (data shown are for 2012), and Center on Budget and Policy Priorities tabulations of data from the American Housing Survey (data shown are for 2011).

Note: Severely cost-burdened households pay more than half of their incomes toward housing.

Households Served through Federal Rental Housing Subsidies



Sources: Center on Budget and Policy Priorities "United States Fact Sheet: Federal Rental Assistance," "HOPWA Performance Profile – National Program;" HUD "Understanding Whom the LIHTC Program Serves: Tenants in LIHTC Units as of December 31, 2012."

Loss of affordable housing stock is significantly contributing to the household affordability crisis. Hundreds of thousands of affordable housing units are lost each year as affordability requirements expire, with nowhere near the added affordable housing construction to offset these losses. ⁴⁹ By 2020, up to 1 million Low Income Housing Tax Credit-subsidized units may no longer be required to provide low-cost rents. ⁵⁰ More than 190,000 voucher-assisted units are shedding their affordability restrictions each year. ⁵¹ Looking forward, out of the 4.8 million total subsidized units across the nation, more than 2 million are set to expire from affordability restrictions over the next decade. ⁵²

Demolition and loss of rental housing further decreased the supply and contributed to increased rent. Nearly 2 million rental units, including 650,000 low-cost housing units, were demolished between 2001 and 2011.⁵³
Additionally, under HOPE VI and Choice Neighborhoods, the redevelopment of public housing has meant close to 20 percent of the public housing stock nationwide have been lost or approved for demolition.⁵⁴ Deferred maintenance is also taking a toll, with the Department of Housing and Urban Development (HUD) estimating that the total cost of meeting basic health and safety standards for public housing to be in excess of \$26 billion.⁵⁵ As public housing developments continue to face federal austerity cuts and delays to normal maintenance, the share of inadequate public housing units will continue to grow.

Only one in four low-income households that qualify for rental subsidies receive them. Housing assistance is not guaranteed for all who qualify, currently leaving 11.5 million extremely low-income renters to compete for a shrinking stock of 3.3 million affordable and available units.⁵⁶ Housing vouchers are in short supply, with under a quarter of the 19.3 million households eligible for rental subsidies receiving assistance.⁵⁷ Due to across-the-board spending cuts implemented under sequestration in 2012, HUD's voucher program was slashed by billions of dollars, resulting in an estimated 42,000 fewer households receiving housing assistance, according to the Government Accountability Office. 58 Additionally, the increasing gap between rising rents and stagnant incomes has resulted in increased federal spending per housing voucher. While voucher subsidies have increased to an average of \$705 per month, the average rent has increased 13 percent to \$1,041 per month, meaning fewer eligible households can be served.59

Economic impacts

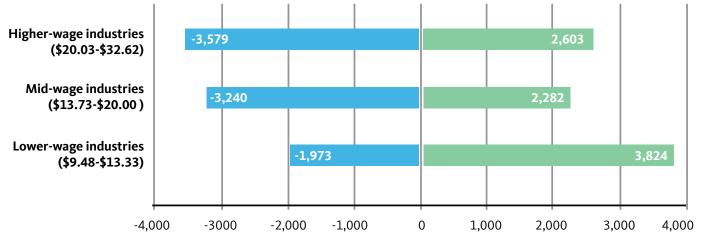
Housing costs are rising faster than wages, with 14.3 million households across America facing growing housing instability with increased housing costs, low wages, and diminishing affordable housing stock.⁶⁰

Housing is considered unaffordable when the median rent prices exceed 30 percent of median pre-tax income.⁶¹
Nationwide, by this measure, fully 53 percent of renters are considered housing cost-burdened.⁶² An increasing share of U.S. households are renters, who pay a growing portion of their income for housing. Those most adversely cost-burdened include the three-quarters of extremely low and low-income households who pay more than 50 percent of their incomes on housing expenses.⁶³ Rental rates rose 6 percent between 2000 and 2012 while renter incomes fell 13 percent in the same time period. The National Bureau of Economic Research estimates that this unbalanced housing market has deprived the United States of 9.5 percent of gross domestic product growth, mostly due to tight housing markets making more productive work inaccessible to American workers.⁶⁴

Unaffordable housing increases the risk of eviction, housing instability, food insecurity, and economic losses.

When housing costs increase, low-income households are forced to seek other housing options, often in lowopportunity neighborhoods with higher concentrations of lower-cost, substandard housing units. Even if longtime residents manage to stay in place, rising rent brings about challenging tradeoffs—the most severely cost-burdened households spend 39 percent less on food and 65 percent less on health care than otherwise similar households who live in affordable housing.⁶⁵ For every \$500 increase in annual rent costs, a rent-burdened family experiences a 3 percent increase in food insecurity.⁶⁶ These health impacts due to housing-cost burdens have strong implications for the U.S. economy. Despite the U.S. spending \$3 trillion on health costs annually—more than any other nation per capita—U.S. life expectancy is lowest among the wealthiest nations, 67 with health disparities resulting in over \$1 trillion in lost economic gains each year in the United States.⁶⁸

Jobs Lost and Gained in Private Sector Employment, in Thousands, 2008-2014



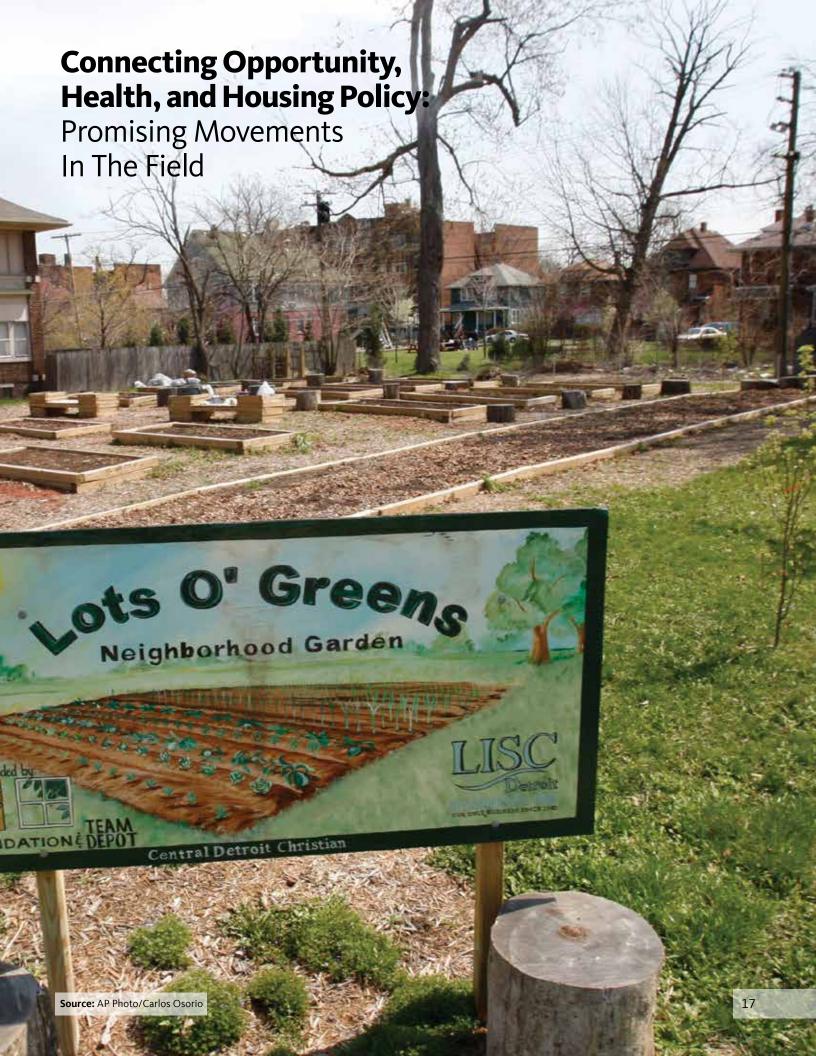
Source: NELP analysis of Bureau of Labor Statistics data.

Note: Wage ranges are updated from earlier reports to adjust for inflation and are in 2013 dollars. At the time of publication, employment data for disaggregated industries were only available through February 2014.

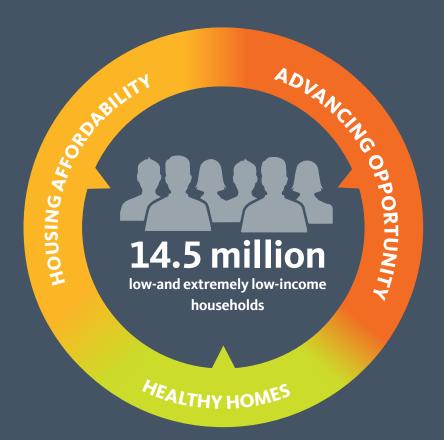
Declining wages have taken an intense toll on people being securely housed. While almost 9 million new jobs
have been created since the 2008 economic crisis, the
majority of them have been low-wage service sector jobs
(as depicted above).⁶⁹ On average, the hourly wage for each
job lost was \$29.63, while the wage for the new jobs was
\$22.68, an average annual net loss of \$14,466.⁷⁰ At a time
when an average full-time worker in the United States must
earn \$18.92 an hour to afford an adequate two-bedroom
rental home, over 58 percent of the new jobs in the postrecession recovery period pay less than \$13.84 an hour.⁷¹
It is now impossible in any state for a full-time minimum
wage worker to afford a one-bedroom or two-bedroom
rental unit at fair market price.⁷²

Homelessness has grown to include more working families who cannot afford rising costs of housing. Despite substantial progress in addressing homelessness, it remains a persistent challenge nationwide. On one January night in 2015, almost 600,000 people were experiencing homelessness, including over 200,000 people in families.⁷³ The public image of chronically homeless people living on the streets represents only about 15 percent of the entire population.⁷⁴

The number of people in poor households living doubled up with family and friends grew to 7.7 million people, a rise of 67 percent from 2007.⁷⁵ Concerted provision of wraparound supportive housing has decreased chronic homelessness 21 percent since 2010 and veterans' homelessness by 33 percent. Connecticut,⁷⁶ New Orleans,⁷⁷ and Salt Lake City⁷⁸ all managed to effectively eliminate chronic veteran homelessness in 2014, demonstrating health-care savings greater than the cost of providing housing. President Obama has proposed \$11 billion in new investment to end family homelessness by 2020.



STRATEGIES FOR ADVANCING HEALTHY HOUSING



Extend affordability term for expiring subsidized housing

Zone for affordable multifamily housing near transit hubs

Dedicate public land to housing affordability

Enact strong tenant protections and move housing offmarket (land trusts, nonprofit ownership)

Condition state/ federal infrastructure investment on increasing housing affordability

Support Nat'l Housing Trust Fund, cap & trade, acquisition funds Mitigate toxic exposures to environmental hazards outside the home

Remove health hazards from inside homes (e.g. asbestos, lead paint, mold)

Offer energy efficiency upgrades

Drive health-care spending to healthy housing

Utilize green building rehabilitation to promote resident health

Map data to track environmental harms that impact disadvantaged communities Connect transit between low and high opportunity communities

Expand workforce training

Invest in top-quality schools preparing students for 21st century economy

Deliver cradle-tocareer services

Leverage AFFH rule to address health equity outcomes

Expand housing mobility programs for families with young children

Housing opportunity fosters health

With people of color on the way to becoming the majority of our population, addressing housing security—and its related health and economic benefits to society—requires focused, urgent action. Housing trends have headed in a negative direction due to deepening stresses born out of the Great Recession, structural economic change, and inadequate political will and policy focus on addressing this fundamental need. However, reforms and new initiatives from federal actions, equity advocacy campaigns, innovative states and cities, and philanthropic leadership offer some pathways forward for addressing the challenges of health and housing—both in substandard physical neighborhoods of concentrated poverty, and in areas where housing-cost burdens are severe. Some of those key movements include:

- Tying preventive health spending to housing interventions
- Addressing housing and health equity in land use and resilience/sustainability planning in the built environment
- Leveraging the new Affirmatively Furthering Fair Housing (AFFH) rule to address health and equity outcomes
- Building antidisplacement campaigns across local coalitions and national networks to win increased tenant protections
- Applying new investment tools to increase housing affordability: National Housing Trust Fund, cap and trade auction proceeds, acquisition funds, mortgage interest deduction reform

This section reviews the progress in health and housing policy and outcomes to outline a case for progressive, equity-focused policy.

Tying preventive health spending to housing interventions

Since improving housing conditions can improve people's health and, in the process, reduce the amounts spent on their medical care, an array of health financing strategies are being explored as ways to address housing problems ranging from homelessness to asthma triggered by poor indoor air quality. In an age of tightened government budgets, these explorations, which incorporate a range of incentives for public and private insurers, managed care organizations, hospitals, and other care providers to address problems on a population-health level, may offer some of the most promising sources of new support for housing. Many of the innovations are at an early stage where foundations can not only make grants for pilots, models, and the accompanying evaluations, but can also make "impact investments" from their own capital to seed the new approaches.

The methods vary, but one way or another, they create the circumstances by which a funder or health care provider has a financial incentive to improve community health. The shift to more risk-based outcomes has achieved better health results at lower costs per capita than the traditional fee-for-service model. Terms such as "value-based purchasing" and "accountable care organizations" signify this shift in health care financing toward population outcomes, and housing can be one of the most important targets for new community-oriented investment.⁷⁹

In 2010, the Affordable Care Act Section 9007 strengthened federal community benefit requirements by requiring all nonprofit hospitals to, among other things, conduct a Community Health Needs Assessment and Implementation Plan. Under this provision, nonprofit hospitals must conduct participatory assessments to determine the health needs of their communities and respond to those needs by developing implementation or community service plans and providing "community benefits" beyond the types of medical services that can also be provided by for-profit institutions. These requirements are intended to encourage comprehensive health planning and innovation by hospitals, health systems, and communities. There are 2,894 nonprofit community hospitals in the United States. The resources that the Community Benefit provision of the ACA could potentially provide for community-based action targeting inadequate housing, toxic environmental conditions, healthy foods, unemployment, and other community improvements are substantial.

Expansion and innovations under the Affordable Care Act, Medicaid reform, and the rubric of social impact bonds— those addressing chronic homelessness, housing habitability, and unsafe environmental exposures—have garnered health cost savings and demonstrate that investment in housing security is a key health prevention intervention. Some recent examples of this include:

- Successful efforts to use Medicaid expansion and reform under the Affordable Care Act to help house nearly 600,000 people experiencing homelessness have been piloted in New York⁸⁰ and Los Angeles.⁸¹ Proponents of the plan to channel Medicaid funding toward supportive housing for the chronically homeless point to improved health outcomes with decreased public subsidies per homeless individual.
- The San Francisco Department of Public Health has achieved millions in Medicaid/Medicare savings by subsidizing supportive housing for seniors with high-cost medical needs, achieving savings averaging \$29,000 annually per tenant.⁸²
- When children arrive at hospitals in Alameda County with asthma or elevated blood toxicity levels, the Alameda County Public Health Department inspects their homes. The program then addresses home repairs to reduce allergens and other asthma triggers.⁸³ Programs such as this one that directly tie together health and housing could channel health prevention funding toward housing to achieve systemwide savings.
- The Community Health Needs Assessments, which nonprofit hospitals now need to complete under the ACA, could become a planning tool for housing-related strategies. 84 The American Hospital Association and the Catholic Health Association of America have called on the IRS to specifically recognize as key community benefits the activities hospitals undertake to improve housing in the community, such as removing asbestos or lead paint that harm residents of low-income housing; providing filtered vacuum cleaners or air conditioners to low-income households to reduce asthma triggers; and making grants to subsidize relocation of low-income households to healthy living arrangements.

 Other medical centers are purposefully bringing in housing organizations to achieve better health outcomes.⁸⁵ In order to fulfill its Community Health Needs Assessments under the ACA, the Bellevue Hospital Center in New York released an implementation strategy that included addressing patients' housing needs as part of a coordinated effort to shelter "high-utilizers" of emergency services.⁸⁶ This approach was realized through the participation of housing service providers at the needs assessment table.

Similar systemic savings approaches can be applied to prevention-focused investments for other healthcompromised households that incur higher medical costs. For instance, housing mobility programs should consider expanding the geographic options for families with housing vouchers living in disinvested neighborhoods of concentrated poverty. One such program in Baltimore has enabled thousands of families to move into nearby low-poverty areas.87 These programs are associated with declines in diabetes and obesity, leading to potentially significant medical cost savings if scaled up. A Federal Reserve study found that housing mobility programs could utilize Pay for Success (also known as Social Impact Bonds) financing to achieve significant health savings.88 The 2015 study found that housing mobility programs would generate "significant medical cost savings," concluding that reductions in adult diabetes and obesity could cover the entire cost of moving Medicaid families into healthier living environments.89

Cities and counties focused on stabilizing neighborhoods, and on remediating health-compromising older housing stock and disinvested neighborhoods, have demonstrated track records that can grow to impact other places. Key cities, counties, and housing authorities have focused on stabilizing neighborhoods decimated by foreclosures and declining populations and remediating health-compromising older housing stock and disinvested neighborhoods. Those decimated by foreclosures used Neighborhood Stabilization Program funds to address abandoned housing stock or declining populations. Those that participated in the national Healthy Housing philanthropic initiative 90 and those with demonstrated track records in remediating healthcompromising older housing stock under HUD's Strong Cities Strong Communities Program⁹¹ can all bring experience to bear to expand healthy housing outcomes in other similarly impacted places.

Addressing housing and health equity in land use and resilience/sustainability planning in the built environment

Federal agencies, states, regions, and municipalities are addressing housing and health equity in land use and the built environment through sustainability and resilience planning, "health in all policies," comprehensive housing plans, health impact assessments, and environmental justice screening tools. This range of planning and policy imperatives specifically focus on socially vulnerable communities and areas of racially concentrated poverty, with attention to addressing health disparities and connecting disinvested communities to opportunities in the region. These policies fall into two arenas: climate change-oriented land use and infrastructure strategy; and greening and siting of housing for affordability and health.

Climate change-oriented housing policy

Millions of people across the United States live in places that have undertaken sustainability or resiliency planning over the last six years. Under the federal Sustainable Communities Initiative (SCI), 143 communities and regions that are collectively home to 119 million people (over a third of the U.S. population) undertook such efforts; and under California's sustainable communities law 38.8 million people living in such regions did so. These policies held in common a specific focus on socially vulnerable communities and areas of racially concentrated poverty, with attention to addressing health disparities and connecting disinvested communities to opportunities in the region.

These sustainability programs officially codified regional equity approaches that have had significant impact at the nexus of health, housing, and opportunity. Both state and federal efforts require regions to address high-poverty communities' connection to opportunity. The federal program required a 10 percent set-aside of funds for community engagement and outcomes that reduce disparities in health and income. The outcomes from these efforts were manifold. Several highly segregated metropolitan regions established new zoning overlays to promote affordable housing in high-opportunity communities. In addition, many regions made transit connectivity a priority between racially concentrated areas of poverty and regional job centers (with the Twin Cities, Boston, Denver, Sacramento, and the San Francisco metro areas tying future transit investments to affordable

housing zoning and production). Several regions initiated regional housing mobility efforts to support those with rental subsidies to find apartments in neighborhoods with higher-quality schools, food access, and safety. Dozens of regions addressed the spatial mismatch of jobs and housing, explicitly focusing on vulnerable and high unemployment populations. Finally, many regions focused on driving infrastructure investments and job incubators into high-poverty areas. Both programs focused on advancing transit systems and locating affordable housing near transit—to reduce both housing and transportation-cost burdens.

The California Sustainable Communities program set into motion a suite of laws to address carbon emission reduction in 2006 (AB32-carbon emission reductions), in 2008 (SB375—integrated regional planning of housing and transportation), and in 2012 (SB535—cap and trade that capped emissions and charged polluters). Now in its second year, the cap and trade fund has generated \$2.2 billion,92 and is expected to generate as much as \$16 billion through 2020.93 Two critical equity uses of the funds include investment in affordable housing near transit; and investment in the communities most overburdened by poverty and pollution.94 California also set a precedent in setting aside 25 percent of planning and implementation grants for vulnerable communities, and setting priority scoring on all of the funds for addressing disadvantaged communities. The addition of significant environmental justice protections of vulnerable populations presents a strong platform for advancing health and housing goals.⁹⁵ The adopted California Environmental Justice Screen—a data mapping tool to track patterns of environmental harms that disproportionately impact disadvantaged communities—qualifies communities for the funds. 96 This mirrors the EPA Environmental Justice Screening and Mapping Tool to nationally help identify where communities are vulnerable to environmental hazards.97

The EPA (Environmental Protection Agency) has followed suit with its recently issued requirements for all states to develop similar Clean Power Plans that reduce polluting emissions. The agency cites both climate change and health impacts, and could generate the replication of these early Sustainable Communities gains for health and housing impacts, as well as the reduction in emissions, which will have significant air-quality impact on the health of particularly low-income communities. The U.S. Department of Transportation (USDOT) recently announced 27 cities as grant recipients of its pilot Transit Oriented Development program, tying affordable housing to transit access and opportunity.

Finally, HUD is in the final phase of a \$1 billion National Disaster Resilience Competition to address the challenges of climate change and extreme weather events and also calls for addressing the conditions of vulnerable communities.

Greening and siting of housing for affordability and health

While these sustainability efforts have operated at the land use and infrastructure level, green building rehabilitation and energy efficiency retrofitting of housing extended the lives of buildings and also the lives of people living in them. ⁹⁸ Jump-started by the American Recovery and Reinvestment Act, developers and owners of affordable housing nationwide now employ green rehabilitation as a cost-effective way to restore dilapidated buildings while promoting residential health, improving air quality, and reducing asthma triggers. ⁹⁹

City planners and some states increasingly utilize geospatial mapping tools to identify environmental hazards at potential affordable housing sites. In Florida, researchers employ geospatial mapping tools to measure environmental risks associated with potential sites, including the corrosiveness of soil and respiratory dangers. ¹⁰⁰ In 2014, San Diego planning agencies developed a community zoning plan to disentangle residential housing in a low-income, primarily Latino neighborhood from pollutant-heavy industrial areas, contending that nearby commercial shipping activity placed residents at greater risk for cancer and asthma. ¹⁰¹

Just as frameworks for addressing climate change and emission reductions can squarely address health and housing, so too can a "health in all policies" framework that can be advanced through both local comprehensive plans and statewide mandates. Health in all policies is a strategy that calls for viewing a broad range of policies through a health lens to ensure that they either enhance health or mitigate the negative health consequences of previous policies and investments. ¹⁰² California has adopted health in all policies as a strategic framework, and its 10-year housing plan is being built on this principle.

Leveraging the new Affirmatively Furthering Fair Housing (AFFH) rule to address health and equity outcomes

HUD's new Affirmatively Furthering Fair Housing (AFFH) | rule is now requiring states, municipalities, and housing authorities to utilize equity measures and fair housing assessments to inform housing strategy and deliver environmental health outcomes by driving infrastructure investment, addressing racially concentrated poverty, and enhancing housing choice and opportunity. Together with the Supreme Court decision on disparate impact, which upheld that any policy that segregates minorities into poor neighborhoods is a violation of the Fair Housing Act, the rule presents a ripe, and rare, opportunity to advance health and housing outcomes in communities nationwide.

In July 2015, the U.S. Department of Housing and Urban Development (HUD) released the Affirmatively Furthering Fair Housing (AFFH) rule¹⁰³ —a long-awaited clarification of fair housing law that will support local leaders in correcting longstanding patterns of discrimination and in investing in strategies that will build opportunity for all residents. Developed with significant input from local-level innovators and experimenters, the release of this rule equips local leaders and advocates with resources and guidance to build stronger, more vibrant communities, where all residents can reach their full potential.

Under AFFH, communities that receive HUD grants will examine, publicly report, and develop strategies to address not only discrimination in housing, but also disparities in neighborhood conditions that have negative health, education, and economic impacts. HUD will provide communities with extensive geographic data covering areas such as racial demographics, poverty levels, access to transit, jobs, exposure to toxics, and school quality. In addition, HUD will provide communities with guidance and technical assistance to support the local planning of fair housing opportunityfocused investments. This information and guidance allows communities to better track where poverty and segregation overlap, which neighborhoods have limited job opportunities, and where affordable housing is located relative to reliable transportation. Armed with this knowledge, local leaders can then develop and implement tailored planning and investment solutions through their Consolidated Plans that comprehensively address the needs of their residents.

The AFFH methodology was piloted in 74 metro regions with Sustainable Communities projects to powerful effect. It helped expand housing mobility pilots from Chicago into 10 other metropolitan areas, better aligned transit service between low-income neighborhoods and job centers, and advanced affordable housing development near transit. In 2016, 23 local jurisdictions or regions will be the first implementers. In 2017, almost a hundred jurisdictions will comply. And over the next five years, over 1,400 cities, counties, states, and housing authorities will comply with the rule's provisions. As HUD rolls out its rule and planning tool on AFFH, its partners in the Department of Transportation and the Environmental Protection Agency will identify areas of alignment with transit connectivity and environmental justice efforts.

In tandem with AFFH, cities and states can prioritize Low Income Housing Tax Credits (LIHTC), state housing resources, and HUD investments strategically to create access to high-opportunity neighborhoods, to stabilize households in gentrifying neighborhoods, and to rehabilitate health-compromised communities. Civil rights coalitions are calling on the Treasury Department to also issue guidance to align its tax credit administration with fair housing goals, ensuring ties to opportunity in all communities that receive LIHTC support.

Building antidisplacement campaigns across local coalitions and national networks to win increased tenant protections

"Development without displacement" has become a rallying call for local advocates in cities across the nation where escalating housing costs, new luxury developments, and new infrastructure investments are having large-scale displacement effects. A baseline set of strategies for combating displacement in gentrifying neighborhoods is key to achieving the goal of healthy communities of opportunity for all.

Tenant protection initiatives

Antidisplacement policy is being advanced by formal local and regional coalitions, comprehensive municipal housing plans, and national antidisplacement networks across hot market areas where job growth and real estate speculation are most severe. 104 With a focus on the public health impacts of rising rents, displacement, and loss of cultural communities, tenants' rights organizations and their allies in over 30 cities are addressing a broad inventory of reforms to mitigate gentrification. Documented by the national affiliate network, Right to the City, campaigns include strengthening tenant protections, taxing corporate landlords on excessive profits, moratoria on evictions or new luxury development, and expansion of off-market housing to land trusts or nonprofit management.¹⁰⁵ To protect tenants from the threat of being displaced due to landlords who want to turn over their property for a profit, jurisdictions have developed just cause evictions policies to ensure that they follow certain guidelines and limit profit-driven evictions. San Francisco recently expanded policies that limit reasons landlords can evict tenants and disallow rent increases after no fault evictions. To properly enforce such policies, campaigns focus on strong tenant counseling with stable funding sources to ensure that tenants know their rights and have help when faced with landlord pressures.

To combat unscrupulous landlords who use more subtle means of evicting by not maintaining their properties or harassing their tenants, jurisdictions have adopted tenant antiharassment policies and have taken more proactive approaches to code enforcement. New York City recently strengthened its antiharassment policy that prohibits landlords from interrupting utilities and other tactics used to push tenants out. In 2014, the city went one step further

and began requiring the Department of Housing to post on their website a list of landlords found to have harassed tenants. ¹⁰⁶ To give tenants a chance to stay in their units even if a landlord wants to cease being the owner, a number of places have developed policies to give the tenants the first right of refusal for purchasing the property. Perhaps the best known and successful of these is Washington, DC's Tenant Opportunity to Purchase Act, which has been the catalyst of preserving thousands of affordable homes in the rapidly gentrifying city. ¹⁰⁷ Rental assistance programs can also help residents stay in their units even as rent goes up or other life circumstances prevent them from paying their rent.

Policy frameworks to address development without displacement

Hot market cities tend to overlap with expanding knowledge sector and technology industries that bring in large influxes of new workers into largely static housing markets. To an unprecedented degree, public agency leaders and community stakeholders are working in concert to address the pressures. The cities of Oakland, ¹⁰⁸ New York, Denver, and Seattle are advancing comprehensive plans to increase housing supply, prevent displacement, reduce inequities in health and housing, and address substandard housing conditions. They have all moved or are working to strengthen existing complementary tools in their toolboxes, such as inclusionary housing policies, impact fees, housing trust funds, code enforcement, housing production goals, and housing preservation strategies—all with an eye toward health outcomes.

Inclusionary housing policies can be found today in nearly 500 local jurisdictions across 27 states and Washington, DC.¹⁰⁹ As opposed to requiring affordable units (either directly or through in-lieu fees), some cities choose to incentivize them through density bonuses, which allow developers to build at higher density in exchange for affordable units.¹¹⁰ For built-out areas that may lack sufficient developable land for new units, jurisdictions may consider allowing homeowners to create secondary or accessory dwelling units on their property.

Affordable housing impact fees that charge per square foot of market-rate housing development harness funds that can be used to build affordable homes, as demonstrated in the recently adopted fees in San Jose, California. The fees are based on the idea that every person who moves into a market-rate home will generate a need for services typically provided by employees paid less than the median income.

Similarly, jobs-housing balance or commercial impact fees charge per square footage of commercial or retail space developed, with the logic that these developments create low-wage jobs for people who need affordable housing. Both affordable housing and commercial impact fees are proliferating in high-cost, low-vacancy cities as affordable housing advocates seek out other sources of funding. 112

A number of cities have set target goals for affordable housing preservation and production, and codified them in comprehensive housing plans or "roadmaps." New York set a goal of building or preserving 200,000 units in the next decade. Seattle is aiming for 50,000 in 10 years. And San Francisco hopes to build or rehabilitate 10,000 units by 2020. And Oakland has set a goal of 34,000 preserved or new homes and the City Council has unanimously adopted the framework articulated in *A Roadmap toward Equity: Housing Solutions for Oakland, California*. These comprehensive plans reflect the urgency that city leaders are placing on addressing the housing affordability crisis, and provide a locally tailored blueprint for cross-agency alignment to effectively channel resources toward housing.

Applying new investment tools to increase housing affordability: National Housing Trust Fund, cap and trade, acquisition funds, mortgage interest reform

New revenue and investment tools are coming on line to reverse austerity trends including the National Housing Trust Fund; state housing trusts, bonds, and tax credit programs; new cap and trade revenues generated from greenhouse gas emission reduction goals; and local governments adopting tested tools such as impact fees, inclusionary housing, and others. The advancement of the National Housing Trust Fund promises a modest new infusion of dedicated funding to extremely low-income households, with an estimated \$250-500 million¹¹⁷ in annual funding slated to start in 2016, derived from Fannie Mae and Freddie Mac profits.¹¹⁸

Expanding housing choice vouchers as a right for all who qualify is gaining bipartisan support as a way to address housing stability. Additionally, new state-level affordable housing funds such as those generated by the cap and trade

initiative in California offer vital new tools that have a role to play in tying investment in health and housing to climate change goals.

There is a renewed focus on off-market preservation of affordable homes—both those with expiring subsidies, as well as new efforts to purchase market-rate apartments and move them into permanent affordability. Private sector investors have partnered with 12 of the nation's largest community development nonprofits to form the Housing Partnership Equity Trust, a social-purpose real estate investment fund investing in multifamily properties. The partnership is capitalized with a \$100 million fund to enable competitive acquisition of lower-rent, market-rate properties to preserve affordability in off-market nonprofit management.

Cities and regions that have capitalized transit-oriented development funds—through partnerships with financial institutions' Community Reinvestment Act obligations, philanthropic program-related investments, and layered public funding—are now considering expansion into more off-market acquisition of multifamily housing. These two efforts—place-based funds and nonprofit-based funds—promise to expand permanent affordability into a new sector of the market with potential significant affordability and health benefits.

Efforts to demonstrate co-investment in health and housing are demonstrated in another \$100 million philanthropic-community development fund, 120 the Healthy Futures Fund, focused on building 500 new healthy homes and 75 community-based health clinics serving 75,000 low-income people—together generating 1,400 new jobs in higher-poverty neighborhoods.

Finally, while it is not currently an "investment" in the literal sense, the federal home mortgage tax deduction remains the largest de facto housing policy in the federal budget, one which privileges wealthier homeowners. Proposals on the table to reform the mortgage interest deduction would cap deductions on mortgages above \$500,000, and utilize savings to support low- and moderate-income homeowners and new investments in below-market affordable rental housing.

These promising innovations deserve expansion to scale, with focused targeting of cost-burdened and neighborhood-impacted households.

A Policy Framework to **Advance Equity in Health and Housing**

I BELIEVE IN HOMES FOR ALL TODOS TENEMOS EL DERECHO A LA VIVIENDA

我支持"全民安居"运动

Addressing Core Housing Vulnerabilities

Housing-Cost Burden	Build and Subsidize More
	•
Substandard Housing	Rehab More
Gentrification & Displacement	Protect and Preserve More

Ten key equity housing policy priorities that can address racial equity, health, climate, and economic opportunity outcomes

The following recommendations draw from the promising movements in the field, and provide a response to the challenging housing and neighborhood circumstances documented in this paper that contribute to poor health outcomes faced by people in communities across America. The relationship between housing affordability and housing quality and health is undeniable. It makes necessary the harnessing and aligning of the collective resources of every level of government, and the private and nonprofit sectors, to achieve population-level change.

The key to aligning public policy tools to advance equity in these areas is to focus on the intersection of race and place on health and housing. The following policy opportunities hold promise for addressing housing challenges at all levels over the next two to 10 years.

Launch national and state campaigns to reduce the housing-cost burdens of 14.5 million low- and extremely low-income households experiencing homelessness or paying over 30 percent of their income on housing.

Addressing the housing affordability crisis for the most vulnerable households should be a top priority to prevent the devastating vulnerabilities of homelessness or housingcost burdens and their cascading individual, family, public health, and social costs. At the top level, the federal government should define housing as essential infrastructure vital to long-term economic growth and adopt new housing goals to address all severely cost-burdened households by awarding housing choice vouchers to every household that qualifies. Further, by aligning federal funding resources and attaching incentives to non-housing investments to strengthen neighborhood opportunity, health equity outcomes can be met. If every city, county, region, and state additionally set five-year targets and collaborated to address each jurisdiction's share of the population, health and economic opportunities would be vastly improved.

Invest in equity-focused organizations' engagement in the first Affirmatively Furthering Fair Housing jurisdictions to ensure strong goal setting and consolidated plans to address healthy homes, cost burdens, infrastructure investment, and antidisplacement. The rollout of the long-awaited fair housing rule from HUD presents a ripe opportunity to showcase best practice partnerships between local jurisdictions and their partners in lowering barriers to fair housing and a more inclusive economy. In 2016, the first 20 jurisdictions will conduct Assessments of Fair Housing and set forth investments in their Consolidated Plans. In 2017, about 40 more will do so. In 2018, hundreds of jurisdictions will utilize the new tool and process. Success in the early adopters will be critical to health and housing equity.

Launch campaigns in up to 10 states that have expanded Medicaid to apply ACA prevention funds to healthy housing rehabilitation, housing protections for those facing displacement, and rehousing for those facing loss of housing. Nevada, Arizona, Colorado, California, New York, Illinois, Washington, Pennsylvania, Michigan, and Kentucky are ripe for building on the most promising practices of achieving health-care savings and enhancing overall opportunity by investing in healthy housing in transit-accessible neighborhoods. Utilize demonstrations in these states to broadly inform all national Medicaid and ACA practice.

Invest in tenant protection organizations to advance local and state policies that address healthy housing and housing security. There are currently approximately 100 active housing justice campaigns taking place across the United States, advancing renter protections, alternative housing models, and antidisplacement work in a variety of jurisdictions. Their advocacy is critical to building the political will for action. Philanthropic, fair housing, community development, and housing trust fund resources can ensure their effective engagement and counseling support.

Expand housing mobility programs across every metropolitan region with a focus on families with young children and access to good schools, transit, job centers, and healthy environments. Invest in the creation of regional consortia of housing authorities with nonprofit and for-profit developer partners to restructure voucher use in high-opportunity areas as Chicago has done. In places where gentrification is pushing voucher holders out, use the promise of vouchers to capitalize new affordable development in the improving and high-opportunity neighborhoods of the city.

Tie priority funding of infrastructure investments to address overburdened communities. Set aside and target 25 percent of all capital improvement funds to invest in disinvested, people-of-color communities with higher health disparities, and establish priority scoring for the remaining 75-percent funds that target these communities. Define housing as infrastructure, as Washington State has done, to allow infrastructure bond financing to invest in housing; and ensure targeted infrastructure capital investment in overburdened communities with school facilities, parks, active transportation, transit, water, waste water, broadband, and energy efficiency sectors.

Encourage housing equity roadmaps and new housing production in all major cities and 10-year state housing plans to establish a comprehensive policy framework that identifies resources and policies to robustly address healthy homes, cost burdens, and antidisplacement. Jurisdictions at all levels should tailor and build off the forward-looking plans recently released by the cities of New York, Oakland, Seattle, and Denver. States and cities should focus on expediting new affordable multifamily housing to align demand with supply.

Reform land use and zoning regulations to promote high-opportunity housing and affordable TOD locations, and tie transit investments to progress in this arena. Land use and zoning regulations need to be modernized to encourage high-density, inclusionary, transit-oriented development. The era of single-family, residential zoning dependent on unsustainable car-based transit harms lowincome residents, the climate, and our future prosperity. A new model aligned with current population trends will include a balanced spectrum of housing units from microapartments to family-friendly three-to-four units. Simple steps like encouraging affordable housing with reduced parking minimums paired with transit access to advance the "triple bottom line" can result in reduced greenhouse gas emissions, in increased health, equitable development, and address the threat of climate change.

Expand financing and focus on acquisition of market-rate multifamily housing for below-market operation by **nonprofits.** Streamlining the financing, regulatory hurdles, and coordination for acquiring affordable housing can help deliver more affordable housing with greater efficiency. Affordable housing preservation and dedicating 30 percent of total housing stock to permanent affordability can be more cost effective than building brand new units. It can also improve health for those living in older, undermaintained housing, and enable resource-limited jurisdictions to serve more eligible households. Creating capital acquisition funds through philanthropic investments, federally mandated investment by banks to underserved customers' neighborhoods (required under the Community Reinvestment Act), and public sector contributions can enable the growth of off-market affordable and healthy homes.

Link climate, health, and housing outcomes in diverse federal and state agencies to advance equity outcomes in all three arenas. Expand the HUD and USDOT focus on communities of racially concentrated poverty within federal and state climate plans and regulatory goals. Utilize the EPA Clean Power Plan climate and emission reduction goals required of every state in the next three years to expand housing opportunity for extremely low to low-income households. Building upon HUD's Sustainable Communities' experience, its current Resilience competition, and the recently released AFFH rule, as well as the Department of Transportation's pilot Transit Oriented Development Planning Program in 21 cities, the executive branch is poised to align federal spending to maximize health and opportunity outcomes through every policy intervention. From the Departments of Housing and Urban Development, Health and Human Services, Education, Transportation, Treasury, and the Consumer Financial Protection Bureau, all arms of the federal government should coordinate efforts to maximize housing affordability and resiliency planning to build opportunity-rich communities for all.

In addition to the above strategies, the 2016 presidential campaign should be leveraged to raise housing challenges into national debates and platforms for action. With the next president on the horizon, now is a critical time to encourage candidates to commit to specific policies to address the ongoing housing crisis.





The links between health and housing inequities are unmistakable, and the challenges faced by vulnerable communities struggling to afford housing in opportunity-rich communities undermine our public health and collective prosperity. Prioritizing low-income communities and communities of color to receive new housing investments as a platform for expanding opportunity and improving health outcomes will secure our nation's prosperous future.

Despite challenging circumstances, there is much to build on. Millions of Americans have new access to health coverage. The ACA has unleashed new homelessness prevention strategies tied to healthy housing. Advocates achieved a pivotal victory when the Supreme Court recently preserved the use of disparate impact to challenge exclusionary housing policies. From the newly released Affirmatively Furthering Fair Housing rule; the rise of robust tenants' rights networks; the growing attention to sustainability and resilience; to new philanthropic and community development investment pools—together these provide a strong platform for integrated planning across housing, transportation, education, and economic sectors.

Absent comprehensive and bold investment in our nation's housing infrastructure, the inequities in access to affordable, healthy housing will continue to grow. As policymakers turn their attention to this rising national crisis, it is imperative that plans and strategies mirror the scale of the challenge and are anchored in equity: just and fair inclusion for all.

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