

Bostic and Lavizzo-Mourey: Housing and Health Care Go Hand in Hand

By Raphael Bostic and Risa Lavizzo-Mourey
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Maryland's Shady Grove Station is just 30 minutes from Union Station on Washington's Metro Red Line, but when it comes to the health of these communities, the distance is worlds apart.

Residents near Shady Grove can expect to live nine years longer than those living near Union Station. The differences are shaped by many factors, but most have little to do with medical care. In fact, health and longevity are more strongly influenced by social, economic and physical environments than by what happens in the doctor's office.

Housing and Urban Development Secretary Shaun Donovan underscored the critical role of neighborhoods and communities in health — and the need for action — at a recent conference in Detroit, noting, “You can predict the life expectancy of a child by the ZIP code in which they grow up. This is wrong.”

Policymakers have spent years improving access to care. And rightly so. But we now know that the social, economic and physical factors that shape our everyday lives are even more important. A critical factor is affordable housing in good neighborhoods. As the research group Children's HealthWatch aptly states: “A safe, decent, affordable home is like a vaccine — it literally keeps children healthy.”

HUD's Moving to Opportunity demonstration project, intended to uncover the effects of neighborhoods on a range of measures, recently published findings in the *New England Journal of Medicine* showing that poor women who were given the opportunity to live in safer, more affluent neighborhoods had lower rates of obesity, diabetes, psychological distress and major depression than those who did not take that opportunity. This suggests long-term investments in improving neighborhoods may help improve the health outcomes of poor families.

Another study, conducted in Southwest Baltimore and published in *Health Affairs*, found that racial differences in hypertension, diabetes and obesity among women either vanished or substantially narrowed when

researchers took into account where people lived. Neighborhoods matter. For years, the health and affordable housing sectors have worked on parallel but separate tracks to improve the lives of low-income people. The affordable housing sector focused on improving neighborhoods suffering from poverty, overcrowded housing and high unemployment. The health sector focused on combating poor health, including high rates of obesity, asthma and chronic disease. We worked side by side in many of the same neighborhoods but have rarely collaborated.

If real progress is to be made toward improving the health and quality of life for millions of Americans, this must change. The evidence makes one point clear: Housing policy is health policy. The affordable housing and health sectors must stop working in silos and work together. We have begun this journey.

Until recently, HUD did not focus on the potential health benefits of its programs, but it now considers improved health outcomes a strategic goal and is creating initiatives designed to transform social, economic and environmental conditions. Signature efforts such as the Neighborhood Revitalization Initiative, Choice Neighborhoods, and Strong Cities, Strong Communities seek to improve places where people live.

Others, including the Housing Choice Voucher and Housing Opportunities for Persons with AIDS, create links between housing, quality educational opportunities and jobs, safer streets and quality health care to help ensure that housing inoculates as many people as possible.

The good news is that there are already successful collaborations and that these efforts yield cost savings.

In Seattle, public health and housing leaders are working together to reduce allergens in low-income homes that can cause asthma, a scourge of low-income children that results in an estimated 13 million missed school days and \$3.2 billion in treatment costs.

Mercy Housing — a nonprofit affordable housing developer — found that its San Francisco Mission Creek Senior Apartments have created a healthier environment for seniors and are saving the city almost \$1.5 million a year, according to another Health Affairs study.

At a time when we must do more with less, creating similar partnerships makes fiscal sense. An unhealthy workforce adds to health care costs and is less productive. Preventing disease is cheaper than treating illness.

Yet while current collaborations are encouraging, we need to do more to make sure health is in all policies. Housing leaders and community developers must make health improvement part of their blueprint. And the health sector must work with them to build healthy communities — where the healthy choice is the easy choice.

How do we move forward? We propose creating an ongoing partnership between the health and housing sectors to make sure housing and community development activities are optimally designed to improve residents' health. The affordable housing sector contributes the ability to develop affordable housing and improve neighborhoods, and the health sector supplies the research and expertise about health impacts. HUD and the Robert Wood Johnson Foundation are ready to move forward, and we hope that others will join us.

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