

Since 1986, the Low-Income Housing Tax Credit (Housing Credit) has been our nation's most successful tool for encouraging private investment in the production and preservation of affordable rental housing, helping to finance more than 3 million apartments for roughly 7 million low-income families.

A growing body of evidence shows that **quality, affordability, and stability of housing, as well as the surrounding community**, are directly linked to positive health outcomes and well-being. As the primary tool for increasing our nation's supply of affordable homes, the Housing Credit can improve health outcomes for low-income families and communities.

In fact, a report from the Bipartisan Policy Center concludes that, **"the Low-Income Housing Tax Credit contributes positively to the nation's public health."**ⁱ

Affordable Housing Improves Health Outcomes

- A lack of affordable housing limits families' ability to make healthy choices and meet other basic needs. Housing instability, caused by lack of affordability, often forces families to choose between paying for rent, utilities, food, or medical care, affecting families' mental and physical health.
- Children in low-income families without access to affordable housing often experience significant health challenges. Research shows that these children have higher rates of mental health problems, lack basic access to primary pediatric care, suffer from behavioral or emotional problems due to frequent moving, and experience other health conditions due to unsafe housing conditions.
- The design and quality of housing and surrounding neighborhoods has health implications as well. Unhealthy homes and communities can contribute to preventable health issues, such as asthma and cardiovascular disease.



High housing cost burdens are linked to **poorer health outcomes**, increased **cost-related healthcare nonadherence**, and higher **food insecurity**.ⁱⁱ



Children aged four and under living in unstable housing have almost a **20 percent** increased risk of hospitalization, and over a **25 percent** increased risk of developmental delays.^{iv}



Caregivers of young children in low-income unstable housing were found to be **2 times** more likely to be in fair or poor health, and **almost 3 times** more likely to report depressive symptoms.ⁱⁱⁱ



In families that move from a high-poverty to a low-poverty neighborhood, adults have **lower obesity rates**, lower prevalence of **anxiety and depression**, and lower **diabetes rates**.^v

Affordable Housing Saves Public Health Care Costs

Investing in affordable housing has been shown to reduce spending in other areas of government, including Medicare, Medicaid, and overall healthcare spending. Housing tied to supportive services, in particular, has been shown to reduce costs for both patients and healthcare systems.

- A study conducted by the North Carolina Housing Finance Agency found that every \$1 in Housing Credits saved as much as \$3 in healthcare costs. Altogether, they found the Housing Credit may be responsible for up to **\$21 million per year in public health care savings**.^{vi}
- A Chicago pilot program that created a partnership between a local hospital and a nonprofit supportive housing provider for the homeless resulted in average monthly **healthcare costs dropping by 18 percent per patient**.^{vi}
- Another study found that combining affordable housing with intensive services for chronically ill homeless adults **saved an average of \$6,000 per person annually in healthcare costs**.^{vii}

Health begins at home, and without appropriate investment, unstable housing among families with children will cost the United States an estimated **\$111 billion in avoidable health and education expenditures** over the next ten years.^{viii}

The Affordable Housing Credit Improvement Act (S.548), bipartisan legislation sponsored by Senator Maria Cantwell (D-WA) and Finance Committee Chairman Orrin Hatch (R-UT), would strengthen and expand the Housing Credit so that more families could have access to affordable homes and its associated benefits. The bill would increase the allocation of Housing Credits by 50 percent, which would help up to 400,000 more families over the next ten years access healthy, stable housing. It also includes many common-sense provisions that would help the program continue to contribute to improved health outcomes for families and communities – for example, provisions that support the development of supportive housing for the chronically homeless.

There are also many **innovative initiatives already underway** to improve health outcomes in affordable housing financed by the Housing Credit. State Housing Credit allocating agencies are increasingly establishing criteria for allocating Housing Credits that promotes the development of housing with set-aside units for individuals with special health needs, have on-site or nearby health related facilities, and/or incorporate supportive services into their projects.

Some states also encourage Health Impact Assessments, which use data, stakeholder comments, and subject matter expertise to evaluate the potential public health consequences of policies and provide recommendations for minimizing negative health impacts and amplifying positive ones.

ⁱ Anand Parekh and Caitlin Krutsick, "Building the Case: Low-Income Housing Tax Credits and Health" (Washington, DC: Bipartisan Policy Center, November 2017), <https://bipartisanpolicy.org/wp-content/uploads/2017/11/BPC-Health-Building-the-Case-Low-Income-Housing-Tax-Credits-and-Health.pdf>.

ⁱⁱ Craig Evan Pollack, Beth Ann Griffin, and Julia Lynch, "Housing Affordability and Health Among Homeowners and Renters," *American Journal of Preventive Medicine* 39, no. 6 (December 2010): 515–21, <https://doi.org/10.1016/j.amepre.2010.08.002>.

ⁱⁱⁱ Megan Sandel et al., "Unstable Housing and Caregiver and Child Health in Renter Families," *Pediatrics*, January 22, 2018, e20172199, <https://doi.org/10.1542/peds.2017-2199>.

^{iv} Sandel et al.

^v National Bureau of Economic Research, "Moving to Opportunity for Fair Housing Demonstration Program - Final Impacts Evaluation" (Washington, DC: U.S. Department of Housing and Urban Development, November 2011), https://www.huduser.gov/publications/pdf/mtofhd_fullreport_v2.pdf.

^{vi} Alexia Elejalde-Ruiz, "Saving Lives, Saving Money: Hospitals Set up Homeless Patients with Permanent Housing," *Chicago Tribune*, January 12, 2018, <http://www.chicagotribune.com/business/ct-biz-hospitals-house-homeless-0114-story.html>.

^{vii} Ehren Dohler et al., "Supportive Housing Helps Vulnerable People Live and Thrive in the Community," Policy Futures (Washington, DC: Center on Budget and Policy Priorities, May 31, 2016), <http://www.cbpp.org/research/housing/supportive-housing-helps-vulnerable-people-live-and-thrive-in-the-community>.

^{viii} Ana Paloblacion et al., "Stable Homes Make Healthy Families," (Children's HealthWatch, July 2017), <http://childrenshealthwatch.org/wp-content/uploads/CHW-Stable-Homes-2-pager-web.pdf>.