



GOOD HOUSING IS GOOD HEALTH

HEALTH CARE ADVOCATES ARE HOUSING ADVOCATES.

Quality affordable housing can be a “vaccine” which prevents long-term health problems and promotes healthy, productive lives.

We all want a good, affordable home in a strong neighborhood. Good housing is good health. But when a family’s housing situation is unaffordable and unstable, chances to lead a healthy life dwindle rapidly.



Young children in families who live in unstable housing are

20%

more likely to be hospitalized than those who do not worry about frequent moves or have anxiety over rent.

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“Families that are behind on rent are more likely than families with stable housing to compromise living expenses to pay medical bills and vice versa, and have greater food insecurities (Children’s HealthWatch, 2011).” - Quoted from [NLIHC, A Place to Call Home](#).

In 2011, families living in affordable housing spent nearly



5x more on healthcare **& 1/3** more on food 

compared to their severely cost-burdened peers

Source: [NLIHC, A Place to Call Home](#)



RESEARCH LINKS HOUSING INSTABILITY AND HOMELESSNESS WITH ADVERSE SHORT AND LONG-TERM OUTCOMES ACROSS THE LIFESPAN

CHILDREN

Behind on rent is associated with increased risk of fair/poor child health and hospitalizations compared to stable housed children ([Sandel et al., 2018](#)).

Young children who move frequently are at increased risk of fair/poor child health, developmental delays, and being under weight for their age compared to peers in families living in stable homes. ([Cutts et al., 2015](#)).

Residential instability during childhood is associated with lack of established, regular preventative and sick care and adverse physical and mental health. ([Fowler, 1993](#)).

Low income children living in substandard housing are more at risk for asthma and hospitalization ([Wu & Takaro, 2007](#)).

“Housing instability and homelessness have been linked to an increased risk of depression and mental illness for adults and children over their lifetimes (Gilman & Kawachi et al., 2003; Children’s HealthWatch, 2011).” Quoted from [NLIHC, A Place to Call Home](#).

Housing assistance has been linked to positive health outcomes for children. Children in families with housing assistance have lower blood lead levels compared to similar children in families without assistance ([Ahrens et al., 2016](#)).

ADULTS



Housing instability during childhood has long-run impacts into adulthood. Adults who moved frequently as children are more likely to report being in poor mental health, including depression and anxiety, and have higher rates of smoking compared to adults who lived in stable homes as children ([Bures, 2003](#)) ([Dong et al., 2005](#)) ([Burgard et al., 2012](#)).

Adults who are unable to afford rent are more likely to report smoking, being in fair or poor health, having mental distress, including depression, delaying doctor visits, and lacking enough sleep compared to those who never or rarely worry about affording housing expenses ([Stahre et al., 2015](#)).

Low-income adults receiving housing assistance are more likely to report better health outcomes and psychological well-being compared to individuals on waitlists for housing assistance ([Fenelon et al., 2017](#)).

SENIORS

Older adults who are housed after experiencing homelessness report fewer depressive symptoms and less acute care utilization ([Brown et al., 2015](#)).

UNAFFORDABLE AND UNSTABLE HOUSING CAUSES AND PERPETUATES HEALTH DISPARITIES WHILE ALSO BALLOONING HEALTHCARE COSTS

CHILDREN'S HEALTHWATCH ESTIMATES \$111 BILLION IN AVOIDABLE HEALTH COSTS OVER TEN YEARS BECAUSE OF HOUSING INSTABILITY.



OPPORTUNITY STARTS AT HOME

“Five percent of hospital users are responsible for half of the health care costs in the US, and most of those patients live below the poverty line and are housing insecure ([Blumenthal & Abrams, 2016](#)).”



“A landmark study found that a homeless, mentally ill person on the streets of New York City costs taxpayers \$40,451 a year. Supportive housing reduces these annual costs by a net \$16,282 per housing unit ([Culhane, 2002](#)).”



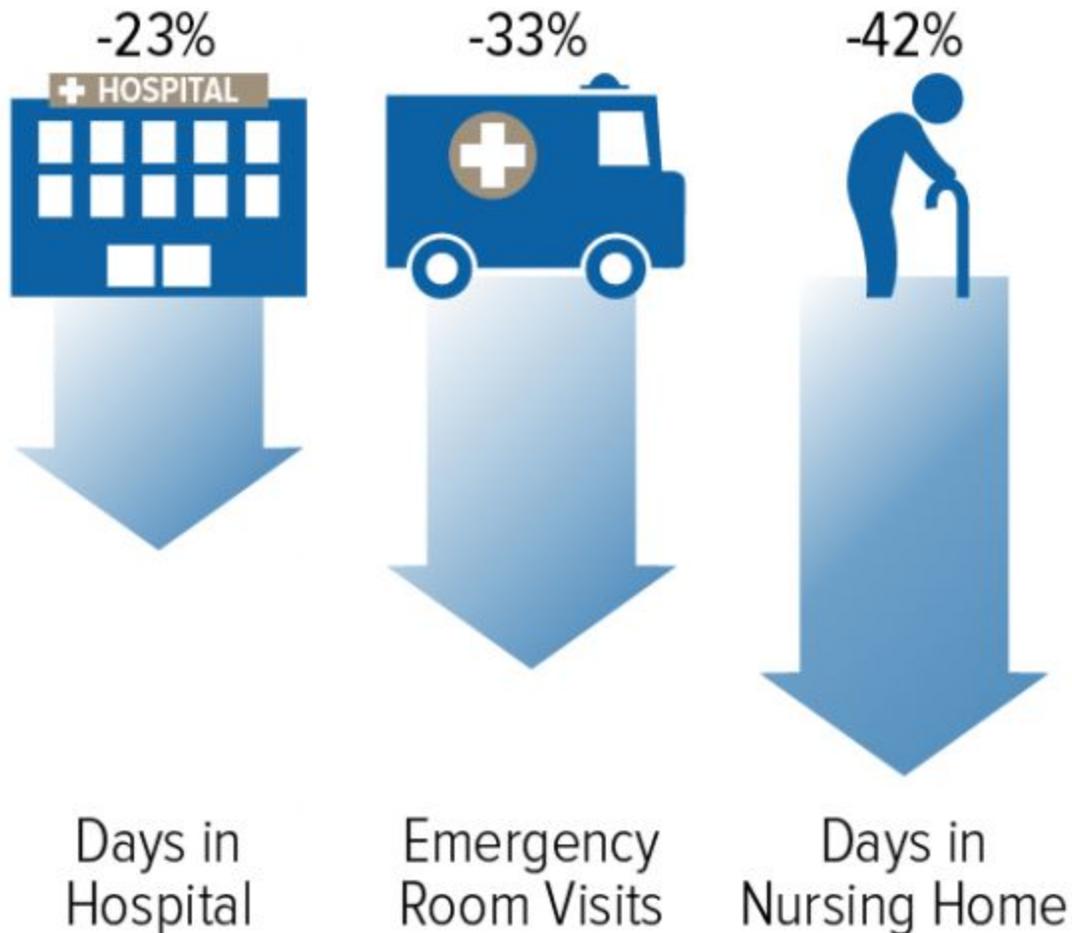
OPPORTUNITY
STARTS AT HOME

Quoted from [NLIHC, A Place to Call Home.](#)



Supportive Housing Can Produce Health Care Savings

Combining affordable housing with intensive services for a high-needs group saved an average of over \$6,000 a year per person in health care



Note: Intensive services include help finding housing, working with a landlord, physical and behavioral health care, assistance finding employment, and others.

<https://www.opportunityhome.org/>

Source: Anirban Basu, *et al.*, "Comparative Cost Analysis of Housing and Case Management Program for Chronically Ill Homeless Adults Compared to Usual Care," *Health Services*