



## ISSUE

# Housing is Health

## Introduction

Research has shown strong evidence characterizing housing as a social determinant of health. Housing affordability, stability, quality and neighborhood have been identified as the key areas that affect our personal health and overall health outcomes.<sup>i</sup> Policy makers, health associations and physicians have become particularly concerned with the impact housing has on health and possible housing interventions. To demonstrate the link between housing and health, and address housing inequities, the Minnesota Medical Association (MMA) has a role to play in advocating for healthy homes for low-income persons, members of our BIPOC communities, people with disabilities and members of the LGBTQ+ communities. This brief aims to (1) examine current research on the key areas affecting health; (2) explore medicine's possible role on the issue; (3) spark conversations to initiate change; and to (4) provide recommendations for the MMA on what their role should/could be.

## Background

### Housing Affordability

The lack of affordable housing has been a prevalent issue in the United States. 'Affordable' meaning that a household spends less than 30 percent of their income on housing costs. However, there are very few studies that examine housing affordability's relationship with health. These studies indicate that access to secure, affordable housing supports people's mental and physical health.

With few options of affordable and available housing, families are forced to limit their choices on

where they prefer to live. This often leads to lower-income families residing in substandard housing in unsafe, overcrowded communities with high rates of poverty and fewer resources for health promotion. On the other hand, those who end up having to pay more for housing are unable to invest in proper health care due to housing costs overtaking most of their income. High housing related costs force them to make difficult choices between paying for housing, versus paying for food, heating, medicine and other basic needs.<sup>ii</sup>

In 2020, a housing scorecard released by Prosperity's Front Door found that Minnesota was experiencing its greatest housing shortage in decades. They also found that homelessness is on the rise, white families are twice as likely to own their own homes than families of color and there's a growing public awareness of and commitment to providing more affordable homes for more Minnesotans.<sup>iii</sup> Without access to secure and affordable housing, thousands of Minnesotans and others suffering from this inequality lose out on opportunity and stability.

### Housing Stability

Among the four pathways affecting health, housing stability is the most fundamental and influential pathway. Housing instability can be defined as a list of challenges, which includes difficulty paying rent, overcrowding, staying with friends and relatives, spending more than 30 percent of income on housing and constantly moving.<sup>iv</sup> These challenges have been found to negatively affect physical health and hinder access to health care.

Research shows that those experiencing housing insecurities are more likely to skip out on hospital

visits and annual check-ups. Therefore, health conditions are usually caught in a late stage and treatments come with higher costs.<sup>v</sup>

For children, residential instability increases the risk of teen pregnancy, early drug use and depression.<sup>vi</sup> Foreclosure and evictions are especially traumatizing for children and adults due to the short notices given in foreclosed homes. This forces families to postpone medical care, skip medication doses, or not fill prescriptions due to cost or inadequate storage. Conditions such as asthma and hypertension are difficult to treat without stable housing.

Former inmates find it especially difficult to access stable housing. They either face heavy discrimination from landlords or they lose out on eligibility for public housing. One study observed that Black individuals who've spent time in prison are more likely to experience housing instability, compared to white individuals who've been to prison.<sup>vii</sup>

Homelessness is the most severe form of housing instability. The homeless tend to have higher morbidity rates in physical and mental health.<sup>viii</sup> Being without a safe, stable home can lead to serious infections, flu and cold exposure and untreated chronic conditions. The stress and chaos of not having a home also puts a strain on mental health and poses risks for substance use conditions. There is a direct link between housing instability and health. Homelessness and housing insecurity either exacerbate medical conditions or contributes to the development new ones.

## **Housing Neighborhood**

The conditions of neighborhoods where homes are located are just as important as the conditions inside of the home. Research has shown that the social, physical and economic characteristics of neighborhoods correlate to health quality. To promote and encourage healthy behaviors, neighborhoods should contain aspects such as good air and water quality, sidewalks, safe places to play and exercise, and grocery stores with nutritious foods.

Those living near highways are more likely to be affected by respiratory diseases and high noise

exposure. The sources of these negative health effects can stem from vehicle exhaust from major roads, bus stops and airports. Improper waste disposal from these sources can also harbor pests, which can infest homes.

Socially, neighborhoods should have trust, cohesion and trust among residents. Segregation widens health disparities and housing discrimination especially among low income and minority families. This separation determines access to proper education, job opportunities, effective transportation and possible increases in violence and crime rates. Bringing the community together can motivate action to improve neighborhoods and in turn improve health.

## **Housing Quality & Safety**

There is an increasing body of evidence associating low-quality homes with poor health and safety risks. Substandard housing conditions like lead poisoning, water leaks, poor ventilation, mold, low/high temperatures and more, all lead to poor health. These low-quality homes contribute to health issues such as infectious and chronic diseases, injuries, poor nutrition and mental disorders.

Infectious diseases easily spread when there isn't safe drinking water; insects and rats infect the home; and there is inadequate food storage.<sup>ix</sup> Lead based paint and lead in plumbing systems contribute to lead exposure that damages the brain and nervous system of children. Asthma-related conditions stem from indoor allergens, dirty carpeting and deviation of indoor temperature. Residential crowding is associated with respiratory infections and tuberculosis. Adults and children who suffer from crowding also have psychological distress and tend to be more anxious, stressed and aggressive.

Housing quality varies by social and economic circumstances. Unhealthy and unsafe housing is much more likely to be occupied by families with fewer financial resources. It is also likely that the families are unable to remedy the poor qualities of the home, which leads to health disparities. Studies show that Black and low-income people are 1.7 times and 2.2 times more likely, respectively, to occupy homes with severe physical problems compared with the general population<sup>x</sup>

## Assessment of Key Areas

The evidence linking housing and health provided in this brief stipulates a call for action that targets this issue. Addressing these issues can lead to improvement in health among all Minnesotans. Based on the growing body of evidence, strategies to tackle this issue should be multidimensional. The focus should be on improving the quality of housing, strengthening the conditions in neighborhoods, and increasing access to affordable and stable housing. However, in order to approach this issue, a range of different actors will need to be involved. These actors include policy makers, physicians and health associations/organizations.

Collaboration between health and housing sectors are key to helping people with low incomes obtain and maintain housing they can afford. The health care system has the data needed to highlight the impact that better affordable housing can have. The housing system has the expertise such as inspecting units and covering rent, needed to serve more people and families. Together, they can maximize their resources to call for increased federal affordable housing funding.

There are multiple ways housing quality and safety can be improved for homeowners and renters. The quality of housing should be monitored regularly. Regular inspections should be scheduled among communities who can conduct surveys and report code violations. Post surveying, owners should be made aware of the code violations and work towards addressing them.

In order to address the housing neighborhood and related health issues, public and private sectors should be involved. Examples of possible solutions are bringing retail food markets into disadvantaged communities, conducting environmental justice interventions to reduce toxic exposures in communities and clustering homes near shopping areas, public transport and employment possibilities.

Medicine's strategy should focus on housing stability. Housing the homeless, providing resources for the homeless and/or training physicians on how

to treat those who are homeless or housing insecure, are some possible options. Are our clinics and health facilities trained to take care of all people, so that we can eliminate health inequity?

## Environmental Scan of Key Players

### Alliance for Healthy Homes and Communities

The Alliance for Healthy Homes and Communities is a group of nonprofit organizations who want to provide affordable, green and healthier homes.

### American Medical Association (AMA)

The AMA is a professional association comprised of a group of physicians, residents and medical students based in Chicago, Illinois. Regarding this issue, the AMA is adopting policy addressing health and social needs of persons experiencing homelessness.

The new policy calls for supporting the development of cost-effective, evidence-based plans to safely discharge individuals experiencing homelessness from emergency departments, and the expansion of affordable housing across all neighborhoods. This policy will help ensure that homeless individuals are not criminalized for carrying out life-sustaining activities, such as eating, sitting, or sleeping, in public spaces when no alternative private space is available—particularly when these activities are deemed non-criminal under typical circumstances.

### Greater Minnesota Housing Fund

The Greater Minnesota Housing Fund (GMHF) is Minnesota's leading nonprofit affordable housing lender. GMHF is known for its innovation and creative approaches to Minnesota's affordable housing challenges. They collaborate on projects, programs and system change. They also create investment funds and conduct research and development of best practices.

### Homes for All

Homes for All is a statewide coalition that advances shared policy initiatives that lead to housing stability for all Minnesotans.

## Minnesota Department of Health

The Minnesota Department of Health (MDH) is a public health department striving to protect, maintain and improve the health of all Minnesotans. MDH administers healthy housing grants available on a three-year cycle that are intended to support implementation of programs to those providing education, outreach and training.

## Zumbro Valley Medical Society

Zumbro Valley Medical Society (ZVMS) is a nonprofit professional membership organization serving physicians and physicians in training in Dodge, Fillmore, Houston, and Olmsted Counties and promoting the health and health care of communities in Southeast Minnesota. ZVMS recently launched a series on physicians serving patients experiencing homelessness.

## Recommendations for the Minnesota Medical Association (MMA)

As a medical association, the MMA should focus their impact on the housing stability sector, specifically homelessness. First, it is important to advance the conversation and bring awareness to the inextricable link between housing insecurity and health. Possible strategies can be forming a coalition of physicians who treat homeless persons regularly, creating a webpage featuring what's happening in the urban or rural areas regarding homelessness or featuring a list of 25 common questions asked regarding housing is health. Although education is essential, taking action is vital. The MMA should be sure to collaborate with other entities who are directly involved in the housing sector. Physicians can visit shelters and connect homeless people directly to resources that afford them stable housing, all of which can be impactful.

Another possible strategy is to hold a training for physicians on coordinated and specialty care for homeless people. The evidence of this brief merited housing stability as highest priority, however there

are several other examples of approaches in the other key areas. For example, sustaining and expanding Healthy Homes initiatives, increasing resources and expanding the role of public health agencies in housing education, inspections and enforcements. Initiatives to expand affordable housing options should also be developed. Finally, to make an impact in each key area, collaborations should increase across government agencies, community groups, public health agencies, private groups, to ensure a coordinated approach to the housing is health issue. Also, the MMA should be at the forefront of conversations regarding state and federal laws.

## Talking points

- Housing affordability, stability, quality and neighborhood have been identified as the key areas that affect our personal health and overall health outcomes.
- Homelessness is a systemic issue that requires a multidimensional approach from different actors such as the government, non-profit organizations and healthcare.
- By becoming aware of the unique health hazards unsheltered patients face, effective treatment plans can be developed.

## Conclusion

The evidence on the link between housing and health is complex, but compelling. There are many unique roles to be played in improving housing conditions in Minnesota. Housing affordability, stability, quality and neighborhood have been identified as the key areas that affect our personal health and overall health outcomes. The weight of evidence is unevenly distributed among the four pathways, but work can be done in each. Finally, there are a few gaps in research which weaken the literature. Research is more concentrated in urban areas than in rural areas, Studies do not include control groups- only those who utilize health care regularly and researchers reported health impacts more frequently than cost impacts for health systems, payers, or society. The MMA can make a huge impact in this space through education, collaboration and training.

## Endnotes

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<sup>i</sup>Taylor, L. (2018, June 07). Housing and Health: An Overview of The Literature: Health Affairs Brief. Retrieved June 7, 2021, from <https://www.healthaffairs.org/doi/10.1377/hpb20180313.396577/full/>

<sup>ii</sup> What is Affordable Housing? (2021, June 03). Retrieved June 8, 2021, from <https://www.localhousingsolutions.org/housing-101-the-basics/what-is-affordable-housing/>

<sup>iii</sup> Salisbury, B. (2020, February 26). First Minnesota 'housing scorecard' finds greatest housing shortage in decades. Retrieved August 1, 2021, from <https://www.twincities.com/2020/02/25/first-minnesota-housing-scorecard-finds-greatest-housing-shortage-in-decades/>

<sup>iv</sup> Housing Stability: Medicaid's Potential for Addressing a Powerful Determinant of Health. (n.d.). Retrieved July 5, 2021, from <http://www.amchp.org/AboutAMCHP/Newsletters/Pulse/NovDec17/Pages/Medicaid's-Potential-for-Addressing-a-Powerful-Determinant-of-Health.aspx>

<sup>v</sup> Kushel, M. B., Gupta, R., Gee, L., & Haas, J. S. (2006, January). Housing instability and food insecurity as barriers to health care among low-income Americans. Retrieved July 8, 2021 from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1484604/>

<sup>vi</sup> Housing and Health: An Overview of the Literature. (2020, May 13). Retrieved June 10, 2021, from <https://www.rwjf.org/en/library/research/2018/06/housing-and-health--an-overview-of-the-literature.html>

<sup>vii</sup> Housing Instability. (n.d.). Retrieved from <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources/housing-instability>

<sup>viii</sup> Taylor, L. (2018, June 07). Housing And Health: An Overview Of The Literature: Health Affairs Brief. Retrieved June 7, 2021, from <https://www.healthaffairs.org/doi/10.1377/hpb20180313.396577/full/>

<sup>x</sup> Krieger, J., & Higgins, D. L. (2002, May). Housing and health: Time again for public health action. Retrieved August 5, 2021 from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1447157/>