

HOUSING STABILITY: AFFORDABLE HOUSING AND HEALTH

Overview

Access to safe, high-quality, and affordable housing is one of the most pressing health-related issues facing Colorado and the nation. When affordable housing is not available, lower-income families are forced to use a variety of strategies to respond to high housing costs, such as limiting expenditures for food and other essential needs, forgoing medical or dental care, and moving multiple times or into unsafe neighborhoods or areas further from jobs and schools. Research has shown these strategies have significant negative impacts on health, particularly among children, such as increased behavioral and emotional problems, violence, drug abuse, lack of access to consistent medical care and preventive services, and impaired ability to manage chronic medical conditions. In addition, the lack of affordable housing exacerbates health inequities by disproportionately impacting low-income populations, communities of color, children, disabled individuals, and the elderly.¹

This paper reviews the current state of affordable housing in Colorado, explores the connection between housing and health, and identifies promising strategies that Colorado communities may use to increase affordable housing and housing stability, improve the health of their communities, and promote health equity.

The State of Affordable Housing in Colorado

As of 2014, over 40 percent of Colorado renters spent more than 30 percent of their income on housing costs,² a common threshold defining affordable housing, with an estimated 25 percent spending more than 50 percent of their income on housing.³ The percentage of working Coloradans struggling with high housing costs increased by 27 percent between 2005 and 2014, exceeding the 22 percent increase nationwide.⁴

While Colorado's population and housing costs have skyrocketed, wages have remained stagnant, contributing to the growing problem of unaffordable housing. Over the next 10 years, estimates from the Colorado Department of Labor show that over 70 percent of new jobs will have starting annual salaries of less than \$36,000.⁵ Based on the current market rate for a two-bedroom apartment, this salary level requires individuals to spend more than 30 percent of their income on housing, leaving little left for other essential expenses. Further, with Colorado's projected population increase of an additional one million residents by 2025, advocates estimate that it will take more than 100 years to develop enough affordable housing to meet the new demand, assuming affordable housing development continues at its current pace.

Meanwhile, limited resources are already stressed. In 2015, the Colorado Housing and Finance Authority received requests for \$28.5 million for federal Low Income Housing Tax Credits, more than double the amount available for allocation. Other major sources of federal funding for affordable housing (HOME

¹ "Evidence Matters: Housing's and Neighborhoods' Role in Shaping Children's Future," *U.S. Department of Housing and Urban Development*, Fall 2014, <https://www.huduser.gov/portal/periodicals/em/fall14/highlight1.html>

² Emilie Rusch, "40 Percent of Working Colorado Renters Spend More Than A Third Of Income On Housing," *Denver Post*, September 16 2016, <http://www.denverpost.com/2016/05/02/40-percent-of-working-colorado-renters-spend-more-than-a-third-of-income-on-housing/>

³ "Nobody's Home Free: A Closer Look at Colorado's Housing Crisis," *Live Affordably Colorado*, 2016, <http://www.liveaffordablycolorado.org/wp-content/uploads/2016/06/PublicOfficialsGuide.pdf>

⁴ Rusch, "40 Percent of Working Colorado Renters Spend More Than A Third Of Income On Housing"

⁵ "Nobody's Home Free", *Live Affordably Colorado*, 2016

Investments Partnerships and the Community Development Block Grant programs) have been cut in recent years by more than 30 percent and 50 percent, respectively. Outside of these federal funding streams, Colorado lacks a permanent source of funding for affordable housing.⁶

What is Affordable Housing

The U.S. Department of Housing and Urban Development (HUD) defines housing as affordable if a household spends 30 percent or less of its income towards housing costs.⁷ Although the term “affordable housing” is often used to refer to publicly subsidized housing, most affordable housing is privately-owned and affordable to low- or moderate-income families without a subsidy.⁸ Affordable housing can take a variety of forms, including:⁹

- **Public housing:** Housing operated by local public housing agencies under a state or federally funded public housing program. The housing is built with government subsidies and offered at reduced rents.
- **Subsidized housing:** Subsidized housing is tied to a specific property. Housing units owned by a private owner who receives a subsidy in exchange for offering units at a below market rate. Owners may receive one or both forms of subsidies: capital and operating.
 - Capital subsidies fund the costs to build or renovate the housing. The federal Low-Income Housing Tax Credit (LIHTC) program is an example of capital subsidies supporting the development of affordable housing.
 - Operating subsidies fund ongoing operations. The most common operating subsidies are provided through federal Section 8 “project-based” subsidies.
- **Tenant-based Rental Assistance/ Housing Choice Vouchers:** Qualified renters receive a housing subsidy that they can apply to their choice of housing. This form of affordable housing is often referred to as tenant-based rental assistance since the subsidy travels with the tenant. Federal Section 8 vouchers are a major form of housing choice vouchers.
- **Privately owned unsubsidized housing:** These units make up most of affordable housing in the U.S. This type of housing is also referred to as market-rate affordable units and often is older housing. In high-demand neighborhoods, the affordability of these unsubsidized housing units is tenuous since owners will often raise rents. Housing costs vary substantially across communities. In some markets, households with incomes less than 50 percent of the area median income

⁶ “Nobody’s Home Free”, Live Affordably Colorado, 2016

⁷ “Affordable Housing,” U.S. Department of Housing and Urban Development, Community Planning and Development, 2017, https://portal.hud.gov/hudportal/HUD?src=%2Fprogram_offices%2Fcomm_planning%2Faffordablehousing
Note that the 30 percent standard has some limitations since it doesn’t adjust for varied household incomes levels. However, it is the primary standard used by federal housing programs and many state and local agencies. Housing costs include rent and utilities. An alternative approach for determining affordability is to determine how much money a household needs to afford basic expenses outside of housing (food, health, childcare), and then subtract this amount from the household’s after tax income to determine the amount the household has available for housing. This approach, however, raises complexities in determining standards for the basic expenses, and the 30 percent standard is simpler approach to operationalize. See Allbee, Johnson and Lubell. “Preserving, Protecting, and Expanding Affordable Housing,” *ChangeLab Solutions*, 2015. http://www.changelabsolutions.org/publications/affordable_housing_toolkit

⁸ Allison Allbee, Rebecca Johnson and Jeffrey Lubell, “Preserving, Protecting, and Expanding Affordable Housing,” *ChangeLab Solutions*, 2015, http://www.changelabsolutions.org/publications/affordable_housing_toolkit

⁹ Allbee, Johnson and Lubell “Preserving, Protecting, and Expanding Affordable Housing”

(AMI)¹⁰ can afford quality housing. In other markets, households with incomes that are at or above the AMI will struggle to find affordable housing. Privately owned unsubsidized housing generally encompasses housing in communities that have remained affordable.

Affordable housing programs may be funded through a variety of federal, state, and local resources.¹¹ While federal funding streams are a major source of support for affordable housing in the U.S., there are also a range of state and local affordable housing resources and policy levers to improve the availability of affordable housing, as discussed later in this paper.

Affordable Housing & Health

Over the last decade, major national health initiatives have recognized the relationship between housing and health. In 2011, for example, the National Prevention Strategy – developed by an intersectoral council of federal agencies to advance prevention, wellness, and health promotion – explicitly identified housing as a part of key foundational strategies to improve health in the U.S.¹²

Healthy People 2020 has also identified affordable housing levels as a key health indicator.¹³ This data shows significant and increasing rates of housing cost burden among all populations and particularly for individuals with incomes below 200 percent of the federal poverty level. As of 2013, more than 65 percent of households with incomes below 200 percent of the federal poverty level spent more than 30 percent of their household income. Approximately 25 percent of renter households faced an even more extreme housing cost burden, spending more than 50 percent of their income on housing (See Table 1).

¹⁰ “Area Median Income” (AMI) is federal income standard to determine eligibility and priority for federal housing programs. In contrast to the federal poverty level guidelines, the AMI reflects differences in incomes in rural versus urban areas. The U.S. Department of Housing and Urban Development defines low-income households as those with incomes at or below 80% of the AMI; very low-income households have incomes at or below 50% AMI; and extremely low-income households have incomes at or below the higher of 30% of the AMI or the federal poverty level.

¹¹ “Advocates’ Guide 2017: A Primer on Federal Affordable Housing & Community Development Programs,” *National Low Income Housing Coalition*, 2017, http://nlihc.org/sites/default/files/2017_Advocates-Guide.pdf

¹² “National Prevention Strategy - America’s Plan For Better Health and Wellness,” *U.S. Department of Health and Human Services*, 2011, <https://www.surgeongeneral.gov/priorities/prevention/strategy/report.pdf>

¹³ Currently, these measures are being tracked for informational purposes. In future decades, targets may be set.

Table 1. Healthy People 2020 Affordable Housing Measures

Healthy People 2020 Measure	2007 (baseline)	2009	2011	2013
Proportion of all households that spend more than 30% of income on housing (SDOH-4.1.1)	34.6%	36.9%	38.4%	34.2%
Proportion of households earning less than 200% of the poverty threshold that spend more than 30% of income on housing (SDOH-4.1.2)	65.1%	68.0%	69.5%	65.4%
Proportion of all households that spend more than 50% of income on housing (SDOH-4.2.1)	15.5%	17.4%	18.3%	16.2%
Proportion of renter households that spend more than 50% of income on housing (SDOH-4.2.2)	22.2%	25.4%	26.8%	24.2%

Source: *Healthy People 2020*

Ways that Affordable Housing Impacts Health

To develop strategies to address affordable housing, it is important for communities to understand the various ways through which housing affects health. There is a significant body of research that supports the critical link between affordable housing and health. This research has identified numerous ways that lack of affordable housing impacts health, including:^{14, 15}

- **Limiting expenditures for health care, food, and other essential needs.** Families spending a significant amount of their income on housing costs often lack sufficient resources for other essential needs, such as food and health care. Research has found that families lacking affordable housing are 84 percent more likely to delay necessary medical care and 116 percent more likely to postpone purchasing needed medications. More than three-quarters of individuals experiencing housing insecurity also report food insecurity. Children in families with access to housing subsidies are more likely to have access to an adequate amount of nutritious food and meet “well child” criteria, including absence of developmental concerns, maintenance of a healthy weight, and classification of being in good or excellent health. Families spending greater than 30 percent of their income on rent, however, experience increased adverse health effects, such as reduced cognitive development in youth.
- **Moving multiple times:** To afford housing, families may move multiple times. Residential instability may lead to numerous negative health outcomes, particularly among children and youth. Research has shown that children in families that move multiple times during childhood are at increased risk for mental and behavioral health problems, substance misuse, teen pregnancy, lower global health ratings in adulthood, and poor school performance. Multiple moves can also lead to delayed and inconsistent medical care. Among adolescents, research has found an association between multiple moves (four or more times before the age of 16) and use of

¹⁴ Nabihah Maqbool, Janet Viveiros, and Mindy Ault, "The Impacts of Affordable Housing on Health: A Research Summary," *Insights from Housing Policy Research*, 2015, http://www2.nhc.org/HSGandHealthLitRev_2015_final.pdf

¹⁵ Allbee, Johnson and Lubell "Preserving, Protecting, and Expanding Affordable Housing"

illicit drugs. Youth transitioning out of the foster care system are particularly at risk for the health impacts associated with housing instability and multiple moves.

- **Less safe neighborhoods:** Research shows that families unable to find affordable housing are more likely to relocate to neighborhoods with higher crime rates and social instability. These neighborhood environments have been associated with higher rates of homicide, suicide, infectious disease, cancer, and diabetes.
- **Living further away from jobs and schools:** Families unable to afford housing may be forced to find housing that requires longer commutes and with limited access to public transit, bicycle, or walking paths. The neighborhood environments can have a detrimental impact on health and well-being, with increased stress and more hours and money required to travel to jobs and schools.
- **Limited quality affordable housing:** With limited affordable housing options, low-income families are more likely to live in housing with rodents, mold, and/or structural problems. Substandard housing conditions have a particularly severe impact on children, with increased exposure to lead poisoning and asthma attacks triggered by mold and other irritants. (We note a separate research paper, *Housing Quality and Health*, for a further discussion of the impact of housing quality on health and strategies to improve housing quality.)
- **Overcrowded housing:** Individuals unable to afford housing costs may consolidate housing with others, which results in overcrowded living conditions. In 2012, nearly 7.5 million individuals lived in overcrowded housing conditions, which are associated with numerous negative health impacts, including respiratory diseases, poor mental health, elevated stress levels, increased rate of infectious disease, and high blood pressure.
- **Women and children living in abusive homes:** With limited affordable housing options, many women choose to remain or return to abusive situations rather than become homeless. Living in abusive relationships puts both women and children at risk for physical injury, as well as psychological distress and trauma. For those in abusive situations, challenges to finding affordable housing are compounded by limited access to financial resources, erratic employment histories, and poor landlord references related to property damage or disturbance.
- **Individuals with disabilities or chronic illnesses:** Lack of affordable housing can exacerbate the health concerns of individuals living with disabilities or chronic health conditions, such as cancer, HIV/AIDS, diabetes, and hypertension. With increased medical costs, low-income individuals with disabilities or chronic conditions may face significant challenges in maintaining housing stability, negatively impacting their ability to maintain their health or manage treatment regimens to achieve better health outcomes.
- **Homeowners and housing foreclosures:** Studies have shown that homeowners generally have better physical and mental health outcomes than renters, even when homeowners are spending a significant portion of income on housing. An unsustainable mortgage payment and home foreclosures, however, are related to significant health consequences, including hypertension,

heart disease, anxiety, and depression.

- **Loss of housing entirely.** At its extreme, lack of affordable housing results in increased homelessness. More than one-third of people experiencing homelessness are in families, and approximately eight percent are youth. Homelessness is associated with numerous ill health effects, including chronic disease, infectious disease, hunger, injuries, stress, violence, disruption of medical and mental health care, and malnutrition. (We note a separate research paper, *Homelessness and Health*, for a further discussion of the relationship between homelessness and health and strategies to improve housing options for homeless populations.)

Gentrification

Gentrification and displacement are longstanding concerns in areas where there is a new influx of resources and renovation of deteriorating neighborhoods. While new investments and developments can bring in much needed resources and improve the economic vitality of a community, these investments can result in the displacement of existing community residents by higher-income households.¹⁶

It is important to consider the impacts of investments to improve the quality of neighborhoods on existing community members. New investments – such as new public transportation hubs, grocery stores with healthy foods, retail stores, restaurants, parks, and walking, biking, and running paths – often increase the demand for houses within a neighborhood and drive up housing costs. Many existing residents are then no longer able to afford housing within their community, resulting in displacement into new areas and disruption of former neighborhood networks and support systems. New restaurants or stores may also be financially out of reach for existing residents or may not align with their cultural values, which leads to alienation and an inability to enjoy the benefits of the new investments. It is therefore important to consider the impact that new investments will have on existing community members, the availability of affordable housing, and effects on health.¹⁷

Strategies to increase affordable housing at community and societal levels

Communities are recognizing that strategies to address affordable housing require a multi-pronged and comprehensive approach that preserves and protects existing affordable housing while also incentivizing the development and expansion of new affordable housing. Below is a review of major strategies to address affordable housing and key research evaluating the impact of these strategies on health outcomes, particularly substance use, misuse, and abuse, mental health, violence, and chronic disease.

Tenant-based Rental Assistance Programs

Tenant-based rental assistance programs use vouchers to subsidize the cost of housing selected by low-income households in the private rental market. Because these programs give participants a range of rental options, participants are less likely than residents of public housing projects to live in high-poverty neighborhoods.

The Community Preventive Health Services Task Force recommends tenant-based rental assistance programs to allow families a choice in residential location. Based on a systematic review of evidence conducted in 2003, the Task Force found sufficient evidence of effectiveness of tenant-based rental assistance programs in reducing victimization of household members (e.g, being mugged, beaten or

¹⁶ "Health Effects of Gentrification," *Centers for Disease Control and Prevention*, 2013, <https://www.cdc.gov/healthyplaces/healthtopics/gentrification.htm>

¹⁷ Allbee, Johnson and Lubell "Preserving, Protecting, and Expanding Affordable Housing"

assaulted, stabbed, or shot) and improving neighborhood safety (e.g., reduction of public drinking, public drug use, seeing person carrying weapon, or hearing gunfire). Effectiveness of rental voucher programs on youth health risk behaviors, mental health status, and physical health status could not be determined because too few studies of adequate design and execution reported these outcomes.¹⁸ In total, the review of tenant-based rental assistance programs included 12 studies representing four areas of federal housing evaluation efforts (Housing Allowance Experiment, HUD Section 8 Voucher Program, Gautreaux Program providing rental vouchers to African-American families in Chicago, and Moving to Opportunity for Fair Housing research). The programs were implemented in urban areas, and populations studied included families with children.¹⁹

In 2010, a panel of subject matter experts reviewed evidence evaluating the impact of neighborhood housing interventions on health outcomes. Among the 10 interventions reviewed, one intervention – the Housing Choice Voucher Program (i.e., tenant-based rental assistance) – had sufficient evidence showing that voucher holders are less likely than non-voucher holders to suffer from overcrowding, malnutrition due to food insecurity, and concentrated neighborhood poverty. The remaining nine interventions showed evidence of positive impacts on other areas of social, economic, and environmental well-being. The assessment of the interventions with respect to health outcomes were inconclusive, however; two interventions needed more field evaluation and seven needed more formative research (see Table 2).²⁰

Research evaluating the Moving to Opportunity program found overall better health among low-income families who received Section 8 housing vouchers that could be used only in low-poverty neighborhoods. Health improvements included reduced adult obesity and increased perceived safety as compared to low-income families who did not receive vouchers but remained eligible for public housing. Females ages 12 to 19 also reported improved mental health, including reduced psychological distress, depression, and generalized anxiety disorder and lower rates of smoking and marijuana use. At the same time, the study showed negative impacts for adolescent males ages 12 to 19, with higher rates of injuries and substance use than those in the group not receiving vouchers. The panel of experts reviewing the evidence noted the need for further studies to evaluate the full impact of housing mobility programs on specific subgroups, such as adolescent boys.²¹

¹⁸ "Promoting Health Equity: Housing Programs and Policies, Tenant Based Rental Assistance Programs - Task Force Finding," *Community Preventive Services Task Force*, 2014, <https://www.thecommunityguide.org/sites/default/files/assets/HealthEquity-Tenant-Rental-Assistance.pdf>

¹⁹ Anderson, St. Charles J, Fullilove M.T., Scrimshaw S.C., Fielding J.E., and Normand J., "Providing affordable family housing and reducing residential segregation by income: a systematic review," *American Journal of Preventive Medicine*, 2003, <https://www.thecommunityguide.org/sites/default/files/publications/he-AJPM-evrev-housing.pdf>

²⁰ Ruth A. Lindberg, Edmond D. Shenassa, Delores Acevedo-Garcia, Susan J. Popkins, Andres Villaveces, and Rebecca Morley, "Housing Interventions at the Neighborhood Level and Health: A Review of Evidence," *Journal Public Health Management Practice*, 2010, http://journals.lww.com/jphmp/Fulltext/2010/09001/A_Systematic_Review_of_Housing_Interventions_and.8.aspx

²¹ Lindberg, et. al., "Housing Interventions at the Neighborhood Level and Health: A Review of Evidence"

Table 2. Review of Evidence: Housing Interventions and Health (2010)

Intervention	Panel Recommendation
Rental vouchers	Sufficient evidence
Relocation to low-poverty neighborhoods	Needs more field evaluation
Demolition of distressed public housing and relocation of tenants	Needs more field evaluation
Universal design	Needs formative research
Crime prevention through environmental design	Needs formative research
Smart growth and connectivity designs	Needs formative research
Residential siting away from highways	Needs formative research
Zoning	Needs formative research
Density bonuses	Needs formative research
Green space around housing	Needs formative research

Source: Lindberg, et. al., "Housing Interventions at the Neighborhood Level and Health: A Review of Evidence", 2010

Health Impact Assessments

Health impact assessments (HIAs) employ a variety of data sources, including qualitative and quantitative analyses, and input from stakeholders to identify health concerns (positive or negative) related to a variety of the proposed laws, regulations, projects, and programs. An HIA can also help determine how these impacts may be distributed among the population, especially vulnerable groups and health disparities.

Increasingly, HIAs are being used in federal, state, and local housing policy development.²² HIAs can bring together scientific data and community input to consider the potential health impacts of proposed housing policies and programs. Between 2012 and 2014, 17 housing HIAs were completed or in progress, a dramatic increase from just one between 2002 and 2004. These HIAs evaluate the health implications in relation to a range of housing topics, including affordability, zoning and planning decisions, energy assistance, inspections, building codes, and community design elements.

Consistent with HIAs, federal, state, and local policy makers are increasingly adopting a “Health in All Policies” approach to developing a wide range of public policies, including housing. This approach emphasizes cross-sector collaboration and incorporates health considerations into decision-making and policies.²³

Case Studies: Applying a Health Lens to Affordable Housing

- In 2009, the Denver Housing Authority conducted an HIA that measured the baseline health of tenants in the South Lincoln Homes public housing development and, recommended actions to reduce potential negative health impacts and maximize opportunities for positive health benefits.
- In Curry County, Oregon, county officials conducted an HIA to inform a proposed pilot to repair or replace aging manufactured homes, allowing residents to update their homes and remain in their neighborhoods. The HIA found that replacing older manufactured homes could significantly improve residents’ physical and mental health by improving quality and safety of their indoor environments and maintaining housing affordability.²⁴
- In 2011, the San Francisco Planning Department developed a neighborhood plan for the Central

²² "Health Impact Assessment and Housing Opportunities for the Housing Sector," *Health Impact Project*, March 2016, http://www.pewtrusts.org/~media/assets/2016/03/opportunities_for_the_housing_sector.pdf

²³ Linda Rudolph, Karen Ben-Moshe, Julia Caplan, and Lianne Dillon, "Health In All Policies - A Guide for State and Local Governments," *Public Health Institute*, 2013, http://www.phi.org/uploads/files/Health_in_All_Policies-A_Guide_for_State_and_Local_Governments.pdf

²⁴ Rudolph, et. al., "Health In All Policies - A Guide for State and Local Governments"

Corridor, a previously industrial area around the new Central Subway stations. Prior to drafting the plan, the Planning Department asked the San Francisco Department of Public Health (SFDPH) to conduct an HIA to identify potential health impacts on Central Corridor residents. To collect data for the HIA, SFDPH assessed the neighborhood using the Sustainable Communities Index (SCI), a list of more than 100 social and environmental indicators that can shed light on the physical, mental, and social health status of a community.²⁵ This work informed the development of San Francisco’s Central SoMa Plan, which seeks to develop a socially, economically, and environmentally sustainable Central SoMa neighborhood by 2040. The Plan was created through an intensive review and public engagement process and would enable the development of up to 50,000 jobs and 7,500 housing units. Such development would result in up to two billion dollars in public benefits to serve the neighborhood, including affordable housing that will comprise 33 percent of total housing units.²⁶

Comprehensive Multi-Pronged Strategies

Communities addressing affordable housing will likely need a comprehensive and multi-pronged strategy that leverages federal, state, and local policy levers and funding streams. Experts have highlighted a number of strategies that communities may consider as they tailor local approaches to addressing the specific affordable housing concerns within their communities. These strategies may be classified in six major policy domains:²⁷

1. **Preservation** of existing affordable rental units (including use of the right of first refusal to ensure the ability to purchase and maintain subsidized rental property, property tax incentives, moving properties into subsidy programs, and preserving public housing).
2. **Protection** of longtime residents to improve housing stability (including “good cause” eviction policies, condominium conversion protections, and rent stabilization).
3. **Inclusion** to ensure that low- and moderate-income households can afford to live in neighborhoods with rising rents (including mandatory inclusionary zoning, density bonuses and other voluntary inclusionary policies).
4. **Revenue generation** by leveraging financing mechanisms to capture capital associated with projected increased property values. This financing builds upon other federal, state, and local affordable housing funding streams (including tax increment financing, linkage fees, and housing trust funds).
5. **Incentives** to stimulate development of affordable housing (including maximizing federal, state and local housing funding sources, local and state tax incentives, parking incentives, expedited permitting, impact fees, and transfers of development rights).
6. **Property acquisition** of desirable sites for development or redevelopment at affordable prices (including use of publicly-owned land, and establishing property acquisition funds).

Case Study: Get Healthy San Mateo County “Five P’s” of Housing Stability

The “Get Healthy San Mateo County” initiative is a multisector, collaborative effort launched in 2004 to develop community-level strategies to improve residents’ health. The initiative is facilitated by the San Mateo County Health System and includes a broad range of partners representing community-based

²⁵ “The San Francisco Indicator Project,” *San Francisco Indicator Project*, 2014, <http://www.sfindicatorproject.org/>

²⁶ “The Central SoMa Plan,” *City and County of San Francisco Planning Department*, 2017, <http://sf-planning.org/central-soma-plan>

²⁷ Allbee, Johnson and Lubell “Preserving, Protecting, and Expanding Affordable Housing”

organizations, county agencies, cities, schools, and hospitals.

In 2015, Get Healthy San Mateo County identified affordable housing as one of 10 key components of the initiative's 2015-2020 strategic plan to create healthy, equitable communities.²⁸ To achieve this goal, the initiative developed a comprehensive and multi-pronged "5 P's" framework:²⁹

1. **Protection** of existing residents to ensure that they can remain in their homes and do not experience the health impacts of housing instability.
2. **Preservation** of existing housing at all affordability levels whenever possible despite changing economic conditions, or replacing lost units at the same affordability levels for current residents.
3. **Production** of new housing units at diverse affordability levels in line with housing needs through regulations and incentives for developers, as well as through a commitment to using public resources for housing.
4. **Participation** of residents and community leaders in decision-making processes that impact their housing stability.
5. **Placement** of new housing near amenities, jobs, transit, and healthy food and away from sources of pollution.

These principles are the starting point for cities and communities in San Mateo County to improve housing stability and improve affordable housing for all community residents. To develop resources and tools for communities to implement this framework, the San Mateo County Home for All community collaborative has developed a detailed action plan with goals, strategies, action, and status updates.³⁰ This action plan is organized around six overarching priorities:

1. Build more housing at all income levels.
2. All 20 cities in the county meet or exceed their Regional Housing Needs Allocation.
3. Jurisdictions utilize a variety of policy and funding tools to produce new housing.
4. New sources of funding for affordable housing are identified and secured.
5. Government, businesses, and communities view housing development as central to jurisdictions' economic development.
6. Community members are engaged in housing conversations on solutions.

San Mateo County's Home for All initiative's [website](#) offers extensive resources and tools to assist communities in taking a comprehensive, community-level approach to understanding and improving the availability of stable, affordable housing.³¹

Case Study: Denver Regional Transit-Oriented Development Fund

The Denver Transit-Oriented Development (TOD) Fund (the Fund) was launched in 2010. It was the first of-its-kind program in the country to support the development and preservation of affordable housing units through strategic property acquisition in current and future transit corridors. Increasing access to affordable transit-oriented housing allows for more families to reduce their housing and transportation costs, spend money on other essentials, and live in areas that are well connected to employment and

²⁸ "Strategies for Building Healthy, Equitable Communities," *Healthy Community Initiatives*, 2015,

http://www.gethealthysmc.org/sites/main/files/file-attachments/get_healthy_smc_strategic_plan_2015-2020_final.pdf

²⁹ "Housing Stability and Health," *San Mateo County Get Healthy*, 2015, http://www.gethealthysmc.org/sites/main/files/file-attachments/housing_health_relationship_lit_review.pdf

³⁰ "Home For All San Mateo County Action Plan - September 2016," *Action Plan San Mateo County*, 2016, http://homeforallsmc.com/wp-content/uploads/2016/09/Action-Plan-for-HFA-Website_9-16.pdf

³¹ "Home For All - San Mateo County," *Home For All SMS*, 2017, <http://homeforallsmc.com/>

educational opportunities, health care, and other community resources. Investors in the Fund include the Urban Land Conservancy, Enterprise Community Partners, and the City and County of Denver. Major accomplishments include:³²

- Acquisition of eight properties, preserving or creating 626 affordable homes and 120,000 square feet of commercial space for community assets such as a new public library, a child care program, a theater company and affordable space for nonprofits.
- The program funded this expansion by drawing down Denver TOD funding by only \$15,275,650; leveraging almost \$200,000,000 from public, private, and nonprofits partners in only three years.
- Creation of over 700 jobs from Denver TOD Fund property development and redevelopment.

Based on the success of the program, the Fund was expanded in 2014 to provide a \$24 million regional fund to finance property acquisition and pre-development loans for developers creating and preserving affordable homes along transit corridors in seven Denver metro area counties including Adams, Arapahoe, Boulder, Broomfield, Denver, Douglas, and Jefferson counties.

The expanded Fund will focus on affordable housing preservation and development within a half mile of light and commuter rail and a quarter mile of high frequency bus routes. By 2024, the Fund aims to create 2,000 new affordable homes and other supportive community facilities near transit. Community developments financed through the Fund will provide affordable for-sale homes for families earning below 95 percent of area median income (AMI) and affordable rental homes that will serve families earning below 60 percent of AMI.³³

As part of this effort, the Denver Mariposa District has been highlighted as a model example of inclusive community engagement to ensure that redevelopment of the neighborhood would fit the community's needs and values. In addition, the initiative leveraged federal funding to support a health-conscious design for revitalizing the areas that included buildings using 50 percent less energy than comparable buildings and more than 800 units of mixed income housing.³⁴

Case Study: Boulder, Colorado – 2016/17 Housing Action Plan

In 2016, the Boulder City Council identified key priorities for addressing affordable housing challenges in its 2016/17 Action Plan.³⁵ This Action Plan outlines a comprehensive approach and key strategies that the city has identified for preserving and expanding affordable housing. These strategies include the following elements:

- **Addressing housing issues as part of comprehensive city plan updates:** Including job/housing growth figures, land use map adjustments, zoning regulation to support diversity of available housing products, and updates to housing and neighborhood policies.

³² "Denver Transit Oriented Development Fund," *Urban Land Conservancy*, 2017, <https://www.urbanlandc.org/denver-transit-oriented-development-fund/>

³³ "Denver Transit-Oriented Development Fund Expands Regionally," *Denver Office of Economic Development*, 2014, <https://www.denvergov.org/content/denvergov/en/denver-office-of-economic-development/newsroom/2014/denver-transit-oriented-development-fund-expands-regionally.html>

³⁴ "Partnership For Sustainable Communities - Creating a Sustainable and Inclusive Neighborhood," *Sustainable Communities*, 2012, https://www.sustainablecommunities.gov/sites/sustainablecommunities.gov/files/docs/PAR_case_studies_denver_co.pdf

³⁵ "Housing 2016 – 2017," *City of Boulder Colorado*, 2016, https://www-static.bouldercolorado.gov/docs/Housing_Workplan_2016_17-1-201703131457.pdf?_ga=2.186192623.713292177.1494282815-1296670780.1494282729

- **Inclusionary housing program:** Boulder’s inclusionary housing program requires all new residential developments to make 20 percent of all new homes permanently affordable to low-and moderate-income households.³⁶ The program is currently being updated to address middle-income housing, as well as explore options to incentivize more affordable homes on-site with new market rate homes.³⁷
- **Preserve existing affordable housing:** Boulder has several programs that support affordable housing, including funding to support construction and renovation of affordable housing, ongoing assistance for mobile parks, and a tenant and city purchasing program that gives first right of refusal to tenants and/or the city prior to the sale of market rate affordable rental units. Boulder’s Housing Fund Program distributes more than \$3 million annually to support development and preservation of affordable housing.³⁸ This program is funded by federal and local dollars and includes binding covenants that place a cap on the incomes of future renters and buyers of identified properties to maintain long-term affordability.
- **Achieve the 10 percent goal:** In 2016, Boulder completed the implementation of a city-wide Affordable Housing Linkage Fee, which generates funding to further the city’s progress in reaching its affordable housing goal of 10 percent of all residential property being permanently affordable to low- and moderate-income families.
- **Projects, partnerships, governance:** Several projects are underway to expand affordable housing, including development of family housing, neighborhood pilot efforts to increase “gentle infill” such as Accessory Dwelling Units, and addressing code issues relating to “tiny homes” and “microunits.”

³⁶ Affordability and income eligibility for home buyers are defined in terms federal income standards in relation to Area Median Income.

³⁷ “Inclusionary Housing Update,” *City of Boulder Colorado*, 2017, <https://bouldercolorado.gov/housing/inclusionary-housing-update>

³⁸ “Boulder Housing Fund Program,” *City of Boulder Colorado*, 2017, <https://bouldercolorado.gov/housing/housing-fund-program>