

The Answer

SHELTERFORCE

Q: Can supporting community development improve outcomes for the health care sector?

A: Yes!

Over 50 percent of premature deaths in the U.S. can be attributed to preventable nonmedical factors, specifically behavioral, environmental, and social conditions.ⁱ Life expectancy can vary as much as 25 years in communities only a few miles apart.ⁱⁱ Through its work in areas such as affordable housing, neighborhood quality, and safety, the community development field reduces the need for many high-cost health care interventions, improving the triple bottom line—better care for more people at a more efficient cost.

Low-income adults receiving housing assistance are more likely to report better health outcomes and psychological well-being than those on waitlists.^v

Kids missed 12 fewer days of school each year when social workers helped identify asthma triggers.^{viii}

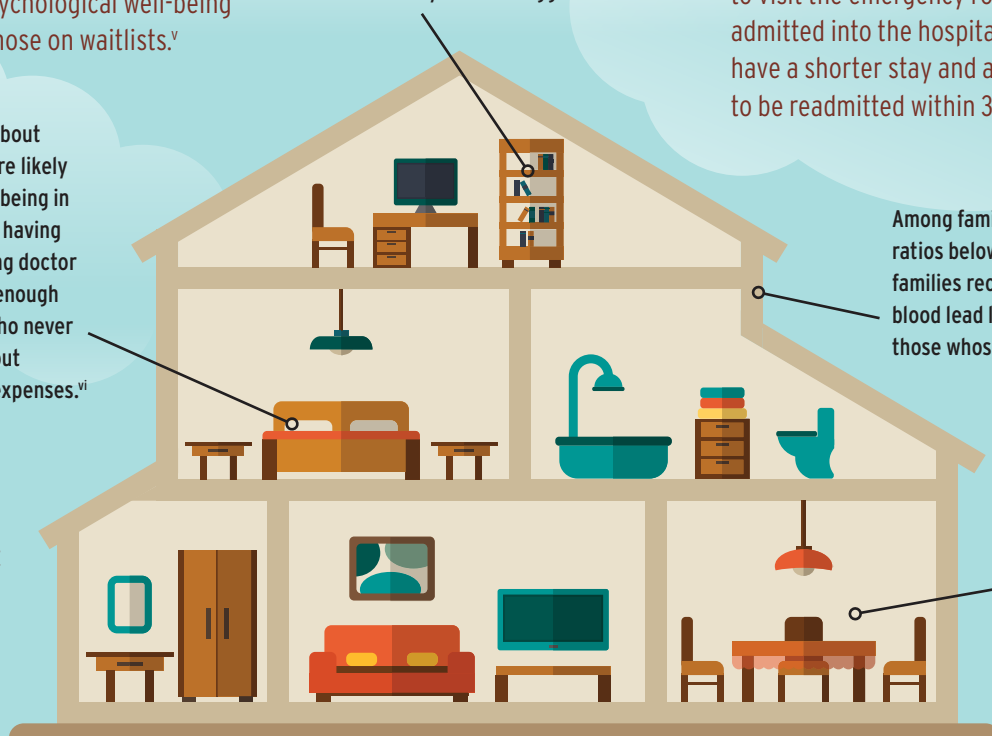
People who are stably housed are less likely than people who are homeless to visit the emergency room. If they're admitted into the hospital, they typically have a shorter stay and are less likely to be readmitted within 30 days.^{viii}

Adults who worry about paying rent are more likely to report smoking, being in fair or poor health, having depression, delaying doctor visits, and lacking enough sleep than those who never or rarely worry about affording housing expenses.^{vi}

Among families with income-to-poverty ratios below 200 percent, children whose families received housing assistance had blood lead levels 20 percent lower than those whose families did not.ⁱⁱⁱ

A 5 percent jump in foreclosures was linked to a 25 percent rise in suicides among middle-aged homeowners.^{vii}

Among food-insecure families eligible for rental assistance, infants whose families received rental assistance during the prenatal period were less likely to be hospitalized.^{iv}



ⁱ "Fast Fact: Health > Healthcare," by Joshua Fisher, Sept 23, 2015, Build Healthy Places Network, bit.ly/2rdoJx

ⁱⁱ "Metro Map: New Orleans, Louisiana – Infographic," June 19, 2013, Robert Wood Johnson Foundation, bit.ly/LifeExpectancyMap

ⁱⁱⁱ "Housing Assistance and Blood Lead Levels: Children in the United States, 2005-2012," by Ahrens KA, Haley BA, Rossen LM, Lloyd PC, and Aoki Y, November 2016, American Journal of Public Health, bit.ly/2rh9P3q

^{iv} "Residential Mobility in Childhood and Health Outcomes: A Systematic Review," by Jelleman T, and Spencer N, July 2008, Journal of Epidemiology and Community Health, bit.ly/2D9UV08

^v "Housing Assistance Programs and Adult Health in the United States," by Fenelon A, Mayne P, Simon AE, Rossen LM, Helms V, Lloyd P, Spertling J, and Steffen BL, April 2017, American Journal of Public Health, bit.ly/2FJ2Wex

^{vi} "Housing Insecurity and the Association With Health Outcomes and Unhealthy Behaviors, Washington State, 2011," by Mandy Stahre, Juliet VanEenwyk, Paul Siegel, and Rashid Njai, July 2015, Washington State, bit.ly/2Dh8zmt

^{vii} U.S. Housing Insecurity and the Health of Very Young Children, by Cutts DB, Meyers AF, Black MM, Casey PH, Chilton M, Cook JT, Geppert J, Ettinger de Cuba S, Heeren T, Coleman S, Rose-Jacobs R, and Frank DA, August 2011, American Journal of Public Health, bit.ly/2Di683j

^{viii} "The Evidence Is In: 5 Ways Community Development and Health Are Linked," Build Healthy Places Network, Oct. 14, 2014, bit.ly/2mO1Cz9

^{viii} Housing Is A Prescription For Better Health," by Kathy Moses and Rachel Davis, July 22, 2015, Health Affairs, bit.ly/2mLmCd