

Research Priorities for Low-Income Housing Policy

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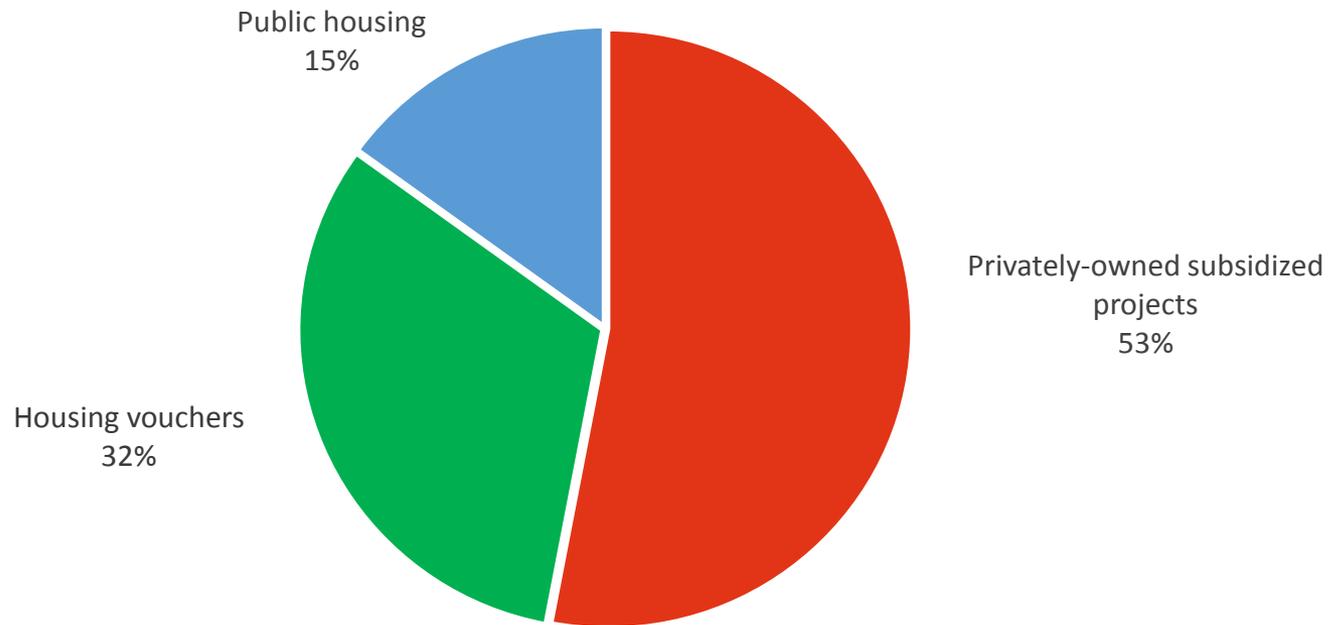
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Overview of Current System

- Federal expenditure is \$50 billion a year
- Doesn't offer assistance to all eligibles
- Most assistance is for renting
- Project-based v. tenant-based assistance
- Percentage of households that receive each type of rental assistance

Percentage of Households That Receive Each Type of Rental Assistance

Figure 1



Effects of Low-Income Housing Programs

- Consumption patterns
- Neighborhood choices
- Recipient health
- Education achievement
- Labor earnings and employment
- Mean recipient benefit and subsidy

Effects of Low-Income Housing Programs

- Participation rates
- Distribution of recipient benefits
- Neighbors
- Market rents
- Crowd-out unsubsidized production
- Cost-effectiveness

Gaps Recently Filled

- Adult outcomes of children in households that receive housing assistance
- Homelessness
 - Cost-effectiveness of alternative approaches
 - Effects of more spending on current system

Cost-Effectiveness

- Cost-effectiveness is largest and most consequential difference in the performance of low-income housing programs

Cost-Effectiveness

- Best evidence pertains to public housing, HUD-subsidized privately owned housing projects, and its housing voucher program
- It indicates that housing vouchers are much more cost-effective than subsidized construction programs for providing housing

Major Unfilled Gap

- LIHTC the largest and fastest growing low-income housing program
- Results for older programs of its type are not unambiguously applicable to it
- Evidence about its cost-effectiveness is of much lower quality

Existing Evidence on LIHTC's Cost-Effectiveness

- It cost 16% more than housing vouchers
- Occupants of tax credit units capture only 24% of the public subsidy

Proposed Research

- Study that compared the CE of housing vouchers with CE of different types of LIHTC projects
 - Tax credit projects involving the renovation of privately-owned subsidized projects
 - Tax credit projects involving public housing redevelopment
 - Tax credit projects that involve neither

Another Major Gap

- Research should address the most influential disagreements in housing policy debates
- One of the most influential is whether different types of housing assistance work better in different types of housing markets
- Proposed CE study of LIHTC v. housing vouchers should be designed to address it

Policy and Research Priorities for Supportive Housing

#HousingIsHealthCare

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CSH

The Source for
Housing Solutions



About CSH

Advancing housing solutions that:



**Improve the lives
of vulnerable
people**



**Maximize public
resources**

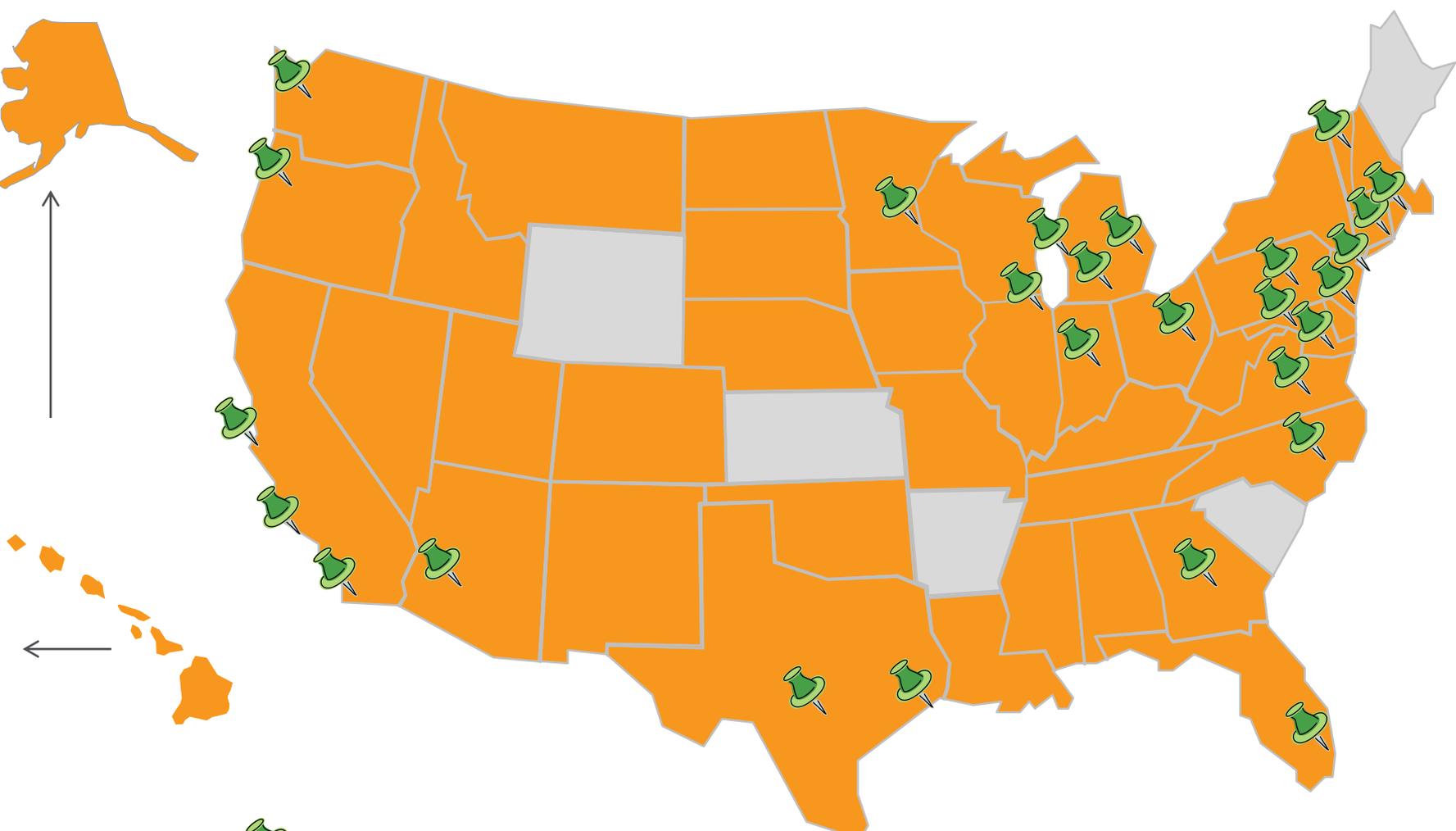


**Build strong,
healthy
communities**

About CSH – 4 Lines of Business



Building Strong, Healthy Communities



Locations where CSH has staff stationed

Locations where CSH has helped build strong communities



Defining Supportive Housing

1
Targets households with barriers

2
Is affordable

3
Provides tenants with leases

4
Engages tenants in voluntary services

5
Coordinates among key partners

6
Connects tenants with community

Principles Guiding Supportive Housing



Who is Supportive Housing For?

People Who:

- ✓ *BUT FOR HOUSING*, cannot access and make effective use of treatment and supportive services in the community;

and

- ✓ *BUT FOR SUPPORTIVE SERVICES*, cannot access and maintain stable housing in the community.

What do we know?

- **Supportive Housing Improves Lives**
- **Supportive Housing Generates Significant Cost Savings to Public Systems**
- **Supportive Housing Benefits Communities**

<http://www.csh.org/supportive-housing-facts/evidence>

Improves Lives

- **Greater social networks, contacts and supports**
 - Rosenheck et.al., 2003, N=460
- **More Choice in Services**
 - Tsemberis et.al., 2005, N= 225
- **Youth increased employment income by 50%, more positive outlook on life**
 - Latham, et.al.,2008, N=586
- **Better life, health and housing satisfaction**
 - MHSA PFS program, N= 555
- **Improved community functioning and Quality of Life**
 - MH Commission of Canada, Chez Soi study, N=1158



Cost Savings to Public Systems



- **Average savings \$31,000 a person**
 - Perlman and Parvensky, 2006, N=19

- **Cost Savings of \$935 per person, per year**
 - NYC Department of Health and Hygiene, 2013, N= 1695

Research and Evaluation showing cost savings for Medicaid

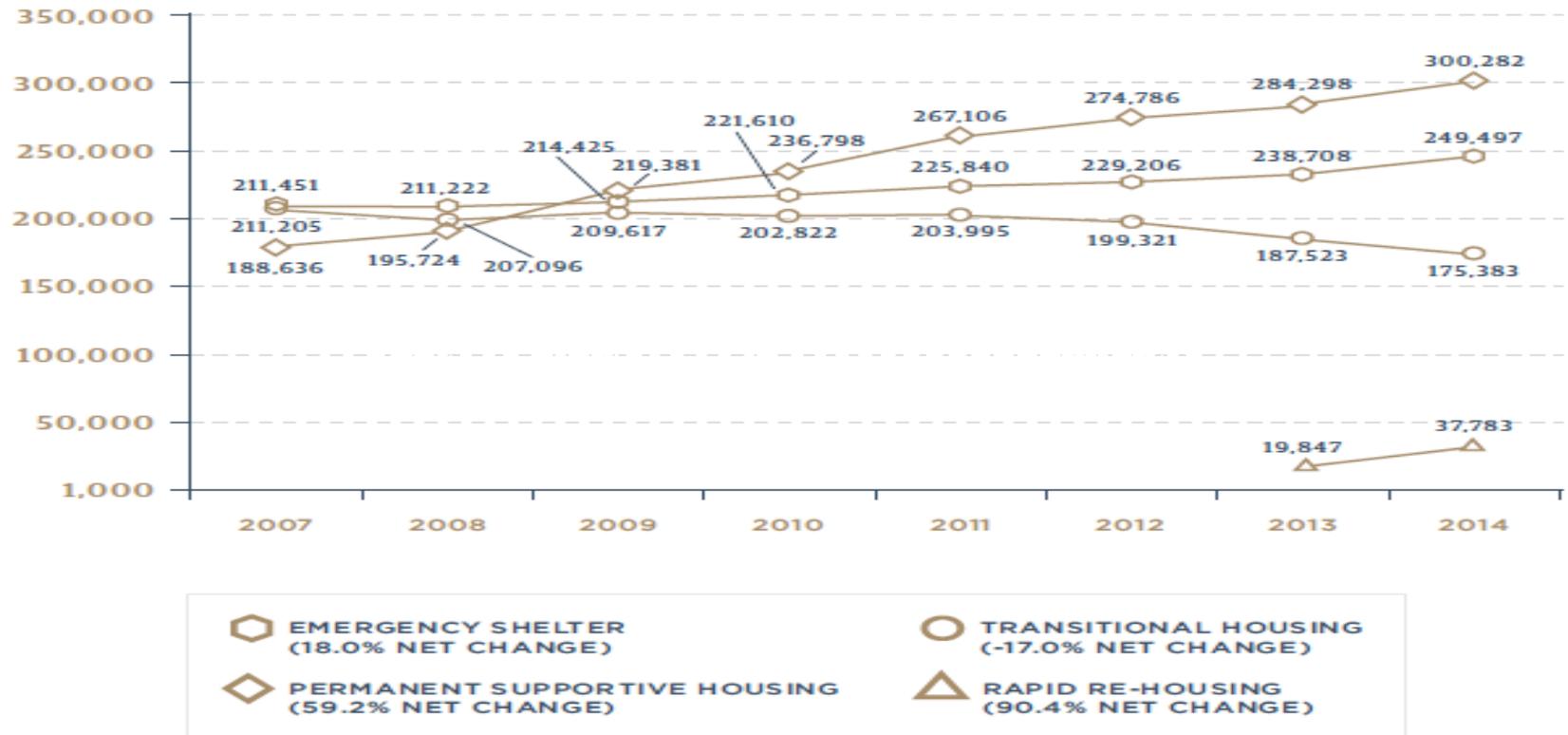
- **NY's Medicaid Redesign Team**
 - On an annualized basis, the 2,071 individuals studied saw their Medicaid expenses fall by 15%, from \$85,154,898 to \$72,459,687.
 - Cost decreases were highest for the highest users of care- For enrollees with pre-period expenditures in the top 10% of their program, average Medicaid expenses fell by \$22,814 – \$52,469 per person.

- **Oregon- CORE study from**
 - Health Care costs were lowered
 - Primary Care visits increased, ED visits decreased
 - Residents reported access to care and quality of care improved

- **MA and the Community Support Program for People Experiencing Chronic Homelessness**
 - Within groups decreases of \$2,291 when compare two years pre and post program entry
 - With a matched control group \$7,013 1 year pre/ post savings.
 - Increases in Pharmacy costs and LTSS, all other levels of care showed decreases.

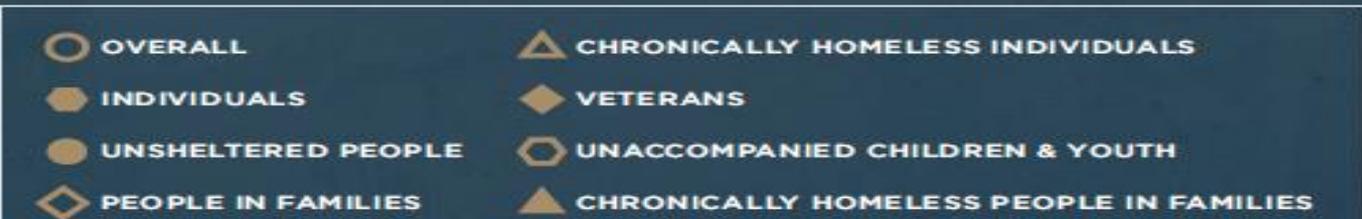
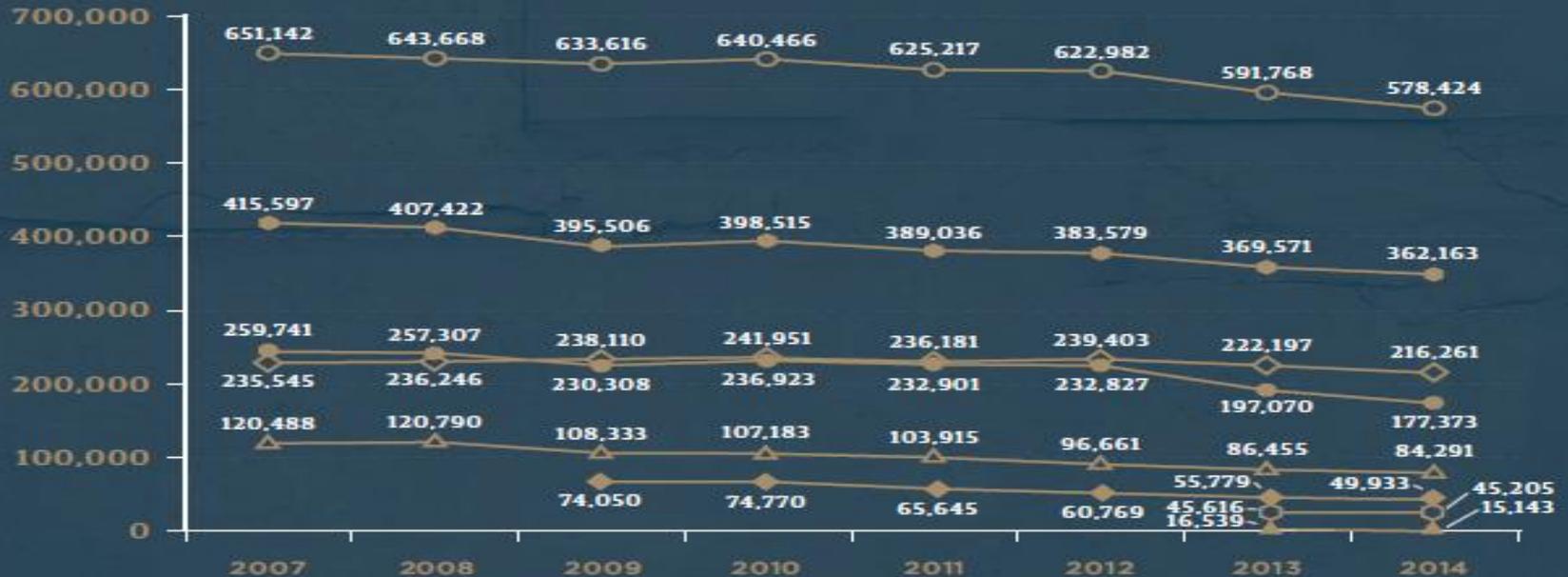
Benefits to communities

FIGURE 3.1
HOUSING INVENTORY, 2007-2014



Benefits to communities

FIGURE 1.3
SUBPOPULATION TRENDS, 2007-2014



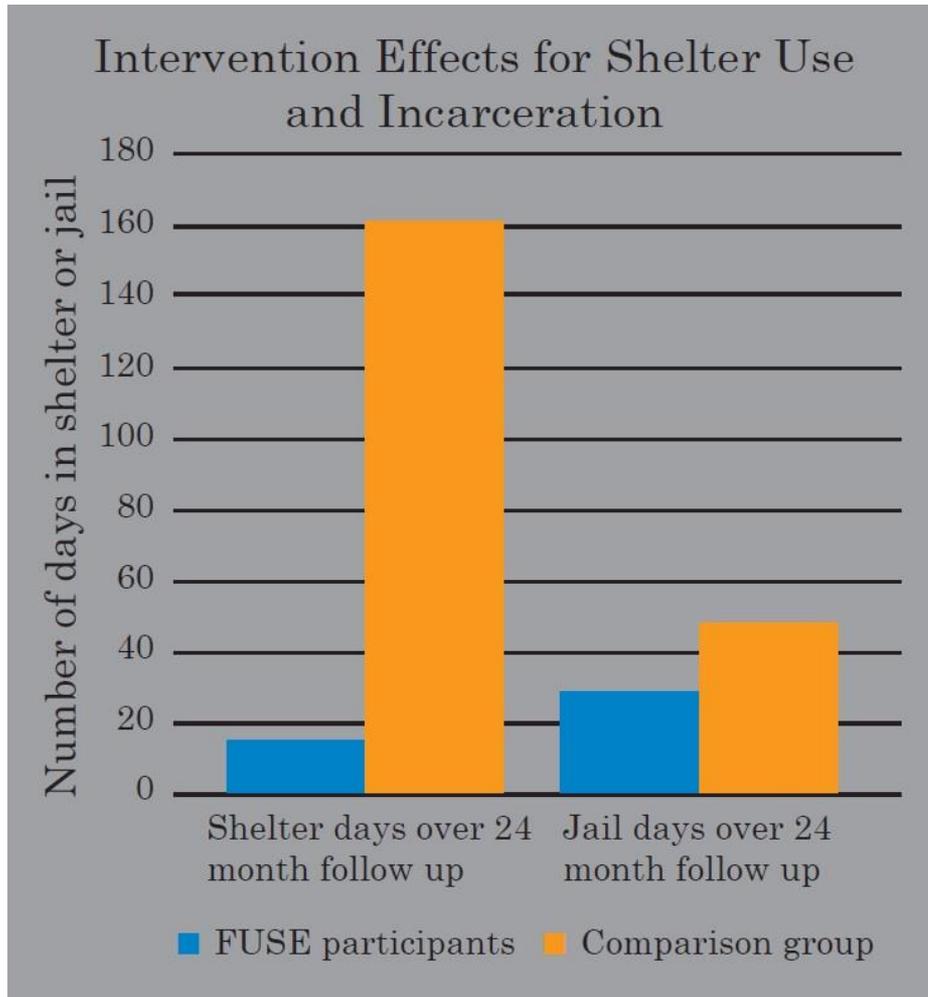
Methodological Challenges

- **Preponderance of Pre and Post Studies**
- **Limited definitions of populations served beyond recent definitions around homelessness**
- **Limited definitions of the services offered**
- **Consistency in the housing outcome data definitions. Not so in other outcome measures.**
- **Regression to the mean.**

What do we need to know- Populations

- **Who are we serving in Supportive Housing? What disability categories? What combination of disabilities?**
- **Engagement with the health care sector? With other public sectors?**
- **Impact on health outcomes?**
- **Supportive Housing is always a limited resource. How do we target and prioritize who receives this precious resource.**
- **What dosage? How long do people need supportive housing? How best to transition?**
- **Pathways into homelessness? How to move upstream for our interventions?**

....for high utilizers



Results from Columbia University's evaluation of the New York City FUSE program, released in November 2013

- 40% fewer jail days
- 91% fewer shelter days
- 50% fewer psychiatric inpatient hospitalizations (not shown)

What do we need to know- Services

- **Clinical services vs connective services**
- **Dosage? How much of what service? For how long?**
- **Impact on outcomes**
- **Cost benefits, Return on Investment for various service models**
- **Access to services, transition to lower levels of care, when and do people need to ‘come back’? For the same services? For different services?**
- **Quality of Services**

Supportive Services



Supportive Housing Types

- **Single Site**

- Consists of one or more buildings or apartments at one location



- **Scattered Site**

- Consists of two or more buildings or apartments at multiple locations



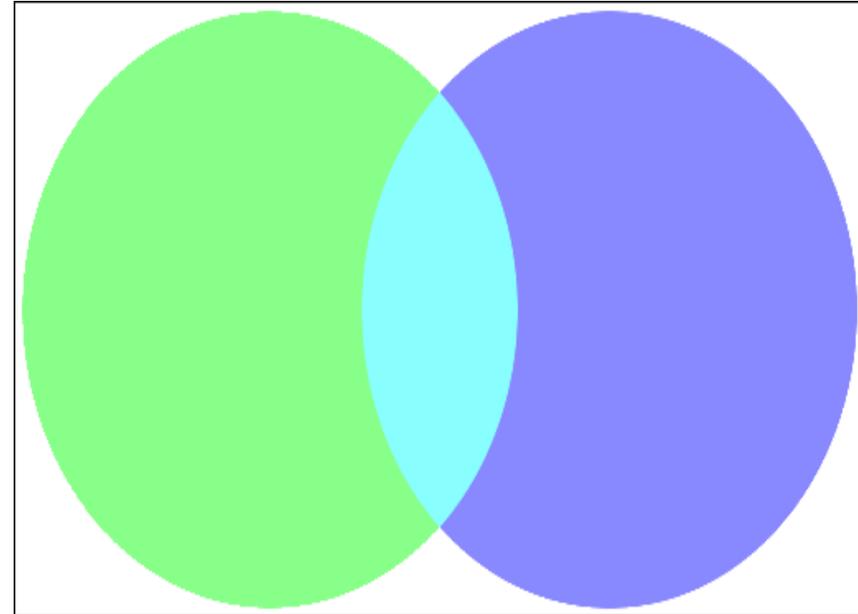
Service Delivery

- **What is the Overall Strategy for the Delivery of Supportive Services?**

Service Delivery Strategy	Scattered -Site Models	Single-Site Models
On-Site Services		X
Community-based Services	X	X
Mobile Services	X	

Alignment with Health Systems

- **Health Systems need to increase their reach into the community**
- **Social Determinants of Health**
- **Health systems have complex care populations who are often homeless. The point of intersection is an opportunity.**
- **Each system now has data that can be matched to highlight joint priorities.**



Promising Practices – Tenancy Supports in Medicaid

Sustainable Services Funding for Supportive Housing



Affordable Housing

- 16 states with either approved waivers or in process



Healthcare

- WA and MD's are furthest along with CMS.



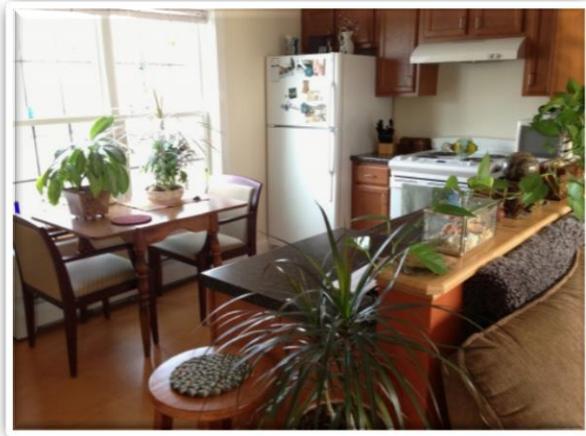
Education and Employment Supports

- IN's is focused on persons suffering from Addiction related challenges.
- SH providers need significant capacity building resources

Stay tuned

- **National Academy of Sciences Study Panel to release their report over the next few months**
 - <http://www.nationalacademies.org/hmd/Activities/PublicHealth/HousingHealthandHomelessness.aspx>
- **Social Innovation Fund research- Large RCT that targeted high utilizers in 4 sites (rural MI, statewide in CT, Los Angeles and San Francisco) will release results over the summer as well.**
 - <http://www.csh.org/sif>

Why are Services Important?



Affordable Housing

Supportive Services

Platform

Health, Recovery and Personal Growth



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Juvenile Detention Alternatives Initiative



HEARTLAND ALLIANCE

ENDING POVERTY



127

years at work



12

countries



100

communities



400K

served yearly

HEARTLAND
ALLIANCE
INTERNATIONAL

HEARTLAND
ALLIANCE
HEALTH

HEARTLAND
ALLIANCE
HOUSING

HEARTLAND
ALLIANCE
HUMAN CARE

HOUSING

HEALTH

JOBS

JUSTICE

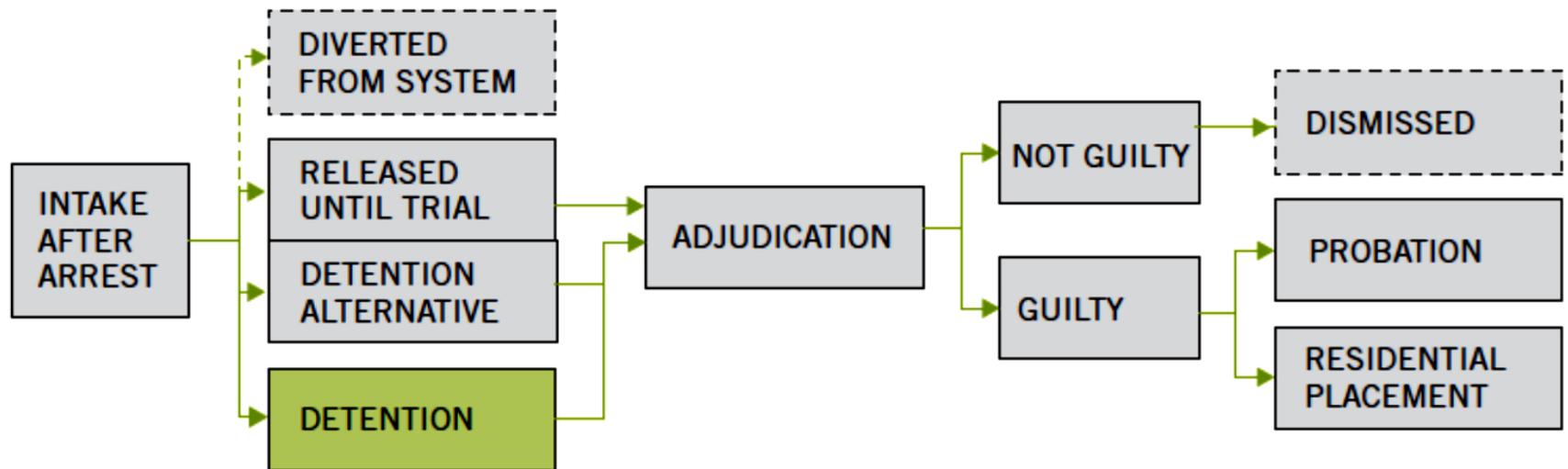
- Homeless system housing: PSH, RRH, SSVF, Safe Haven, etc.
 - Veterans
 - Families
 - Chronic
 - Dually diagnosed
 - HIV+
- Housing pilots for survivors of trafficking
- Public housing partner on mixed income projects
- Affordable housing development and redevelopment
 - LGBT Seniors
- **Housing alternatives to detention for juveniles and unaccompanied immigrant children**



Juvenile Detention Alternative Model

- Collaboration between juvenile court, probation and Heartland
- Objective admissions criteria and risk-assessment instruments to determine placement
- Community-based housing
- Alternative school in the community
- Case management
- Counseling and behavior management
- Weekly visits with parents or legal guardians, and family counseling to assist in return home

Youth Detention Pathway



The Youth

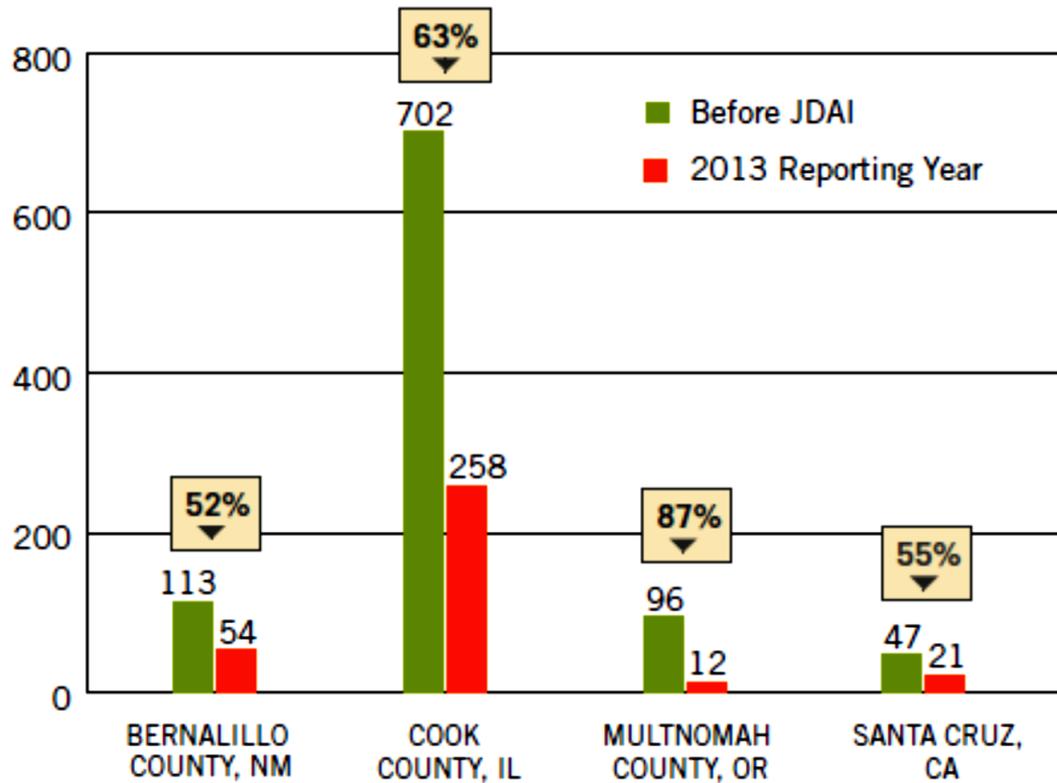
- 10-17 year olds
- male and female
- court-involved – on probation or receiving services through the Cook County Juvenile Probation and Court Services department
- referred in lieu of detention, based on their current charges and history of delinquency
- majority are referred for non-violent crimes, such as violations of probation, drug sales/possession, and domestic disturbances

Basic Stats

- Served 14,500 since program opened in 1995
- On average we serve about 500 youth per year
- There is no waiting list
- Average length of stay is about 14-21 days
- The vast majority of those referred are eligible

Core System Outcome

DETENTION REDUCTIONS IN JDAI MODEL SITES



What Do We Want to Learn?

- What are the outcomes of youth who are referred to Saura, relative to youth in juvenile detention?
 - Housing stability
 - School attachment/retention
 - Recidivism
 - Family stability
- Could some youth who are currently in detention be better served by placement at Saura?
- What impact would longer-term supports post-program have?

Building Evidence to Promote Stable Housing
Wilson Sheehan Lab for Economic Opportunities
(LEO) Matchmaking Conference

Eric Chyn

University of Virginia and LEO

June 7, 2017

Introduction

- ▶ Heartland Alliance
 - ▶ A leading anti-poverty organization offering services including housing support and alternative detention for juveniles (JDAI)
- ▶ Today: Review research on juvenile detention, peers and neighborhoods

Juvenile Detention

- ▶ What is the impact of incarcerating youth?
 - ▶ Widespread interest given high rates of incarceration in the U.S.
 - ▶ Emerging literature on long-run effects
 - ▶ Latest research improves on analytic weaknesses from prior studies

Aizer and Doyle (2015)

- ▶ Study the impact of detention/incarceration on youth
 - ▶ **Problem:** Detained children are very different from their peers who are never detained
- ▶ Aizer and Doyle (2015):
 - ▶ Compare similar children assigned to juvenile judges that have different tendencies to incarcerate (strict vs non-strict)
- ▶ Results:
 - ▶ Find children detained in Cook County are (1) less likely to complete high school and (2) more likely to be arrested as adults

Peers

- ▶ Substantial interest in studying whether changing peers affects individual outcomes
- ▶ What do we know?
 - ▶ Bayer et al. (2009)
 - ▶ Study relationship between juvenile offender post-release behavior and exposure to incarcerated peers with a given criminal history
 - ▶ Chyn (2017)
 - ▶ Study relationship between an individuals criminal behavior and neighborhood peers

Chyn (2017)

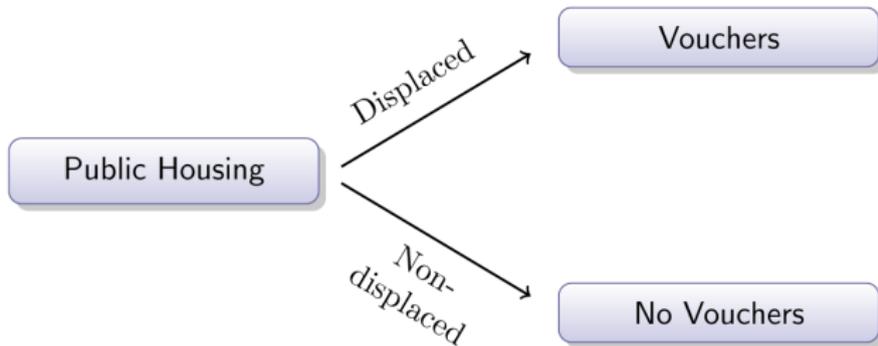
- ▶ New evidence on long-run effects of having disadvantaged peers
- ▶ Based on a natural experiment created by a major policy shock: public housing demolition
- ▶ Compare children in areas where displaced households relocated
 - ▶ Treated: Children from the *same* city block as a displaced household
 - ▶ Control: Children from nearby non-resettlement city blocks
- ▶ Preliminary result: Children from the same block as a displaced household have 15 percent more arrests for property crime

Neighborhoods

- ▶ What is the impact of growing-up in a poor neighborhood?
- ▶ **Problem:** Children living in disadvantaged neighborhoods are very different from their peers living in better areas
- ▶ Select studies addressing selection bias:
 - ▶ MTO Studies (Chetty et al., 2016; Sanbonmatsu et al. 2011; Kling et al. (2007))
 - ▶ Chyn (2016)

Chyn (2016)

- ▶ Study public housing demolitions
- ▶ Compare displaced and non-displaced children



Chyn (2016)

- ▶ As adults, children who are displaced by demolition are:
 - ▶ More likely to work (9 percent)
 - ▶ Higher annual earnings (17 percent)
 - ▶ Fewer violent arrests (14 percent)
 - ▶ No detectable difference in effects for older versus younger children

Conclusion

- ▶ Active research on policies and programs that affect disadvantaged youth
- ▶ Notably, recent work shows
 - ▶ Incarceration has long-run negative impacts
 - ▶ Moving to better neighborhoods has long-run benefits
- ▶ These findings can inform development of new policies and services