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Georgia Health Policy Center’s Groundbreaking Effort Integrates Health Metrics into Affordable Housing Design

ATLANTA—Investment in affordable housing in lower risk and higher opportunity areas can improve the health status of Georgia’s most vulnerable citizens, helping up to 200 individuals per year live longer, healthier lives, according to an assessment by the Georgia Health Policy Center at Georgia State University.

The newly released Health Impact Assessment of the 2015 Qualified Allocation Plan for Low-Income Housing Tax Credits in Georgia identifies how the state’s allocation of low-income housing tax credits can be strengthened to support health-promoting affordable housing development.

“Research shows that having a safe and affordable home can contribute to long-term health and success,” Rebecca Morley, Health Impact Project director at The Pew Charitable Trusts, said. “This is the first health impact assessment in the United States to inform the allocation of tax credits for low-income housing. We are pleased to have supported the Georgia Health Policy Center on the development of this report, which provides practical information for how housing and community development professionals can help improve health outcomes.”

Georgia allocates $22 million in support of affordable housing development each year through low-income housing tax credits (LIHTC), allocated through the Qualified Allocation Plan (QAP). A grant from the Health Impact Project, a collaboration of the Robert Wood Johnson Foundation and The Pew Charitable Trusts, enabled the Georgia Health Policy Center in partnership with the Georgia Department of Community Affairs (DCA) to evaluate how public health perspectives could be more strongly incorporated into affordable housing policy in Georgia.

Through research, analysis and stakeholder input this report identified opportunities to affect health outcomes by altering the scoring criteria used to assign LIHTC, which has been cited as one of the most important resources for creating affordable housing in the United States. The assessment’s key findings focus on strengthening connections between LIHTC properties and their surrounding communities.

Of the nearly 8,300 family housing units developed with LIHTC funding over the past decade, 70 percent have been built in areas the Georgia Department of Public Health identifies as having the lowest socioeconomic status and the highest rates of premature death in the state. Concentrating LIHTC units in low sociodemographic areas hampers efforts to expand health benefits associated with development in communities of opportunity. The 2015 QAP Health Impact Assessment found that steering affordable housing development toward areas identified as lower risk or higher opportunity could help up to 200 individuals per year live longer, healthier lives.
Educational attainment is a critical determinant of lifelong health status. Georgia’s QAP can incentivize access to quality schools by considering proximity and performance in tax credit scoring criteria. Rather than relying on test scores alone, the assessment recommends use of the Georgia Department of Education’s College and Career Ready Performance Index (CCRPI) as a new metric for measuring school quality. Tying school quality, as measured by CCRPI, to tax credit scoring incentives can drive proposed development sites in the attendance zones of above-average schools.

Connection between community design and health promotion is firmly established in scientific literature. These QAP recommendations could potentially improve health through access to active living, healthy eating, improved air quality and reduced injury risk, the report said.

Adoption of a more comprehensive approach to allocating LIHTC would encourage development in communities of opportunity and can aid compliance with the Fair Housing Act. Earlier this summer the U.S. Supreme Court ruled that a state’s allocation of LIHTC could violate the Fair Housing Act if it resulted in segregated housing patterns, even if discrimination was not intended. Since the ruling, the U.S. Department of Housing and Urban Development, like the Georgia Health Policy Center health impact assessment, calls for integrated and balanced living patterns by providing housing in high-opportunity areas and supporting the revitalization of communities.

Input from a cross-section of stakeholders, including government, housing advocates and real estate industry developers, informed the health impact assessment. Some recommendations have already been incorporated into the 2015 version of Georgia’s QAP, while others are still under review by DCA. View the Summary Brief online. The accompanying Technical Report will be released later in this month.

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**About the Georgia Health Policy Center**

The Georgia Health Policy Center (GHPC), housed within the Andrew Young School of Policy Studies at Georgia State University, integrates research, policy, and programs to advance health and well-being. Celebrating 20 years in 2015, the GHPC focuses on solutions to the most complex issues facing health and health care today including insurance coverage, health care reform, behavioral health, and the development of rural and urban health systems. Visit [www.ghpc.gsu.edu](http://www.ghpc.gsu.edu) to learn more.