

Young children receiving housing vouchers had lower hospital spending into adulthood

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Young children whose household received a housing voucher were admitted to the hospital fewer times and incurred lower hospital costs in the subsequent two decades than children whose households did not receive housing vouchers, according to a new study from researchers at

Johns Hopkins Bloomberg School of Public Health. The study was published online December 3 in *JAMA*.

The findings, which tracked hospitalizations over time after households participated in a voucher program, are potentially relevant for the approximately four million children living in [low-income households](#) receiving Housing and Urban Development assistance, the researchers say.

The study found that children age 12 or under whose household received a housing voucher had 27 percent lower spending on hospitalizations—nearly \$200 per year—than children whose household did not receive a housing voucher. Children 12 or younger whose family received a housing voucher were hospitalized 18 percent less than children whose family did not during the follow-up period. Moving to a lower-poverty neighborhood was linked with lower health care spending and fewer [hospital](#) admissions for [younger children](#). The study did not find comparable savings or fewer hospitalizations in [older children](#) or in adults whose households received housing vouchers to move to lower-[poverty neighborhoods](#).

The study used data collected by the U.S. Department of Housing and Urban Development in an experimental program—the Moving To Opportunity for Fair Housing Demonstration Project—that gave low-income families living in public housing the chance to move with a housing voucher. Researchers linked households with insurance and hospital data representing 11 years to 21 years after enrollment in the program.

"While the long-term financial benefits of helping young children move out of high-poverty neighborhoods has increasingly been recognized, these findings underscore the potentially significant health impacts," says lead author Craig Evan Pollack, MD, associate professor in the

Bloomberg School's Department of Health Policy and Management.

"The fact that we see lower hospital spending over such a long follow-up period suggests the enduring importance of helping young children live in opportunity neighborhoods."

The Moving to Opportunity for Fair Housing Demonstration Project enrolled 4,604 families living in public housing developments or in high-poverty neighborhoods in Baltimore, Boston, Chicago, Los Angeles, and New York from 1994 to 1998. Families were randomly selected to 1) receive a housing voucher that needed to be used in a low-poverty neighborhood, 2) receive a housing voucher without neighborhood restrictions, or 3) were assigned to a control group.

The study sample focused on 4,072 adults and 9,118 children ages 18 years or younger at the time of receiving the housing voucher. Children under 18 were then divided by age, 13 years and older and 12 and under, and by gender. Households were followed up to 21 years after enrolling in the Moving to Opportunity for Fair Housing Demonstration Project.

Researchers linked participants to hospital discharge and Medicaid data to evaluate the association of housing vouchers with hospital utilization and spending among children and adults from 1995 to 2015, depending on city and health records. The study focused on the number of annual hospitalizations, the number of inpatient hospital days per year, and total annual hospital spending for adults, children under 18, and children under 13.

Researchers found that children under 18 whose family received a housing voucher had an 18 percent reduction in annual hospital spending compared to children who did not receive a housing voucher (\$633 dollars compared to \$785). They also found that there was a 15 percent lower rate of hospitalizations for children under 18 who received a housing voucher. For every 10 percentage point reduction in

neighborhood poverty—e.g., moving from a neighborhood where 40 percent of the households lived below the poverty line to one with 30 percent below the [poverty line](#)—households, on average, spent \$152 less per year in the hospital on children under 18.

There were no significant associations with rates of hospitalizations, number of hospital days, or annual spending in adults.

On average, adults were 32 years old at the time they received a housing voucher. Sixty-four percent were black, and 32 percent were Hispanic. About a quarter of the adult study sample were employed and about a third (37 percent) had a high school diploma. Children were 8 years old on average at the time the household received a [housing voucher](#). Sixty-five percent identified as black and approximately 31 percent were Hispanic.

"Reducing the level of poverty that [children](#) are exposed to in the [neighborhoods](#) where they grow up may be one way to lower health care costs," explains Pollack. "Housing policies should take into account the potential implications for health care use over the long run."

More information: Craig Evan Pollack et al. Association of Receipt of a Housing Voucher With Subsequent Hospital Utilization and Spending. *JAMA*. 2019;322(21):2115-2124. [DOI: 10.1001/jama.2019.17432](#)

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