Creating healthy, equitable, resilient communities.

BY HEALTHY COMMUNITIES LAB APR 30, 201712 AUG 2017

# Affordable housing in MHK – Part 1: Local perspectives

Brandon C Irwin

**Part 1 summary**: Is affordable housing a problem in MHK? To answer this, I conduct a scoping review of available local data, including four methodologically rigorous studies, key informant interviews, and data from local housing-related agencies (total  $n \approx 1,290$ ). The lack of affordable housing was consistently identified as a significant problem in the community. In Part 2, I attempt to answer the same question but using national datasets from the US Census and the American Community Survey.

In a previous blog post, I summarized the data from several national studies (e.g., US Census; The American Community Survey) and local sources (e.g., the 2015 Riley County Community Needs Assessment) to describe the current state of affordable housing in MHK (you can find a summary of this data <a href="https://example.com/here/4016/nee/summary-1016/nee/summar

(https://docs.google.com/document/d/1PFCV\_30YzoBlf4Ukd4FipJzKhw3sB1GxhypRDX8oVEk/edit) in the MHK Affordable Housing Community Action Group Google Doc). This document has had some time to circulate through the community and has come up in several formal and informal public dialogues organized around the issue of affordable housing. These dialogues have included various members of the community, including civic leaders, community health advocates, students, and other interested citizens all of whom are trying to make sense of this complicated issue and how we might address it.

A most fruitful product of these conversations has been the challenging of assumptions about this issue, the conclusions drawn from the data, and the quality of the data from which those conclusions are drawn. Several critiques have emerged, including the limitations of using Census data to make conclusions about what is and is not true about affordable housing. At the core of this critique is the concern about the inclusion of college students in the Census data. How do they impact the data? Should students be included in analyses of affordable housing? What does the data tell us if they are excluded? A second critique, related to the first, is that national data does not reflect an accurate picture of the issue at the local level, ignoring the nuances and dynamics of the issue, locally. Lastly, and perhaps most importantly, the question has been raised, given the limitations of the data and/or the belief that people are generally happy with the current housing market, whether or not affordable housing is really a problem at all and, if so, to what extent. Thus, the research questions are:

- Is affordable housing a problem?
  - What do local data indicate?
  - What do national data indicate?
    - Should students be included in this data?
      - What do the data tell us if the students are not included?

In an attempt to help provide some answers to these questions, I am going to write a series of blog posts. In them, I aim to organize and summarize the best available local (Part 1) and national data (Part 2) on this issue, how we might address the effect of the student population (Part 3), and offer some of my thoughts along the way to advance this ongoing discussion. I invite and welcome the opportunity to collaborate with others in this project (e.g., planning, gathering evidence, writing, etc. birwin8@gmail.com).

The explicit purpose of this work is to facilitate productive, civic dialogue on this important issue. By no means do I claim any authority on this matter. As a trained scientist, I have some skills in acquiring and interpreting data. Here, I apply them to what I believe is a worthwhile pursuit – to discover truths about affordable housing in MHK and how to address it. I'm not aware of anyone else doing this work and am volunteering my time and energy to fill this need.

In the true spirit of community, this online space allows for sharing and challenging of ideas and opportunities for others with better, new and/or different information and understanding to contribute to and advance the conversation. As in any pursuit of truth, challenges and critiques are necessary. Your comments and critiques are most welcome. Of course, the most productive form of criticism is one based on facts. We all have the responsibility to support truth claims with such facts.

## **Methods**

Describing problems of affordable housing are complicated by a number of factors, one of which is the level and quality of the data being used. There are a variety of national data sets that tell us a great deal of information about housing, including the US Census, the American Community Survey, and others (to be summarized in Part 2). These data, as all data, have their limitations, typically arising from the ways that questions are asked and the methods used to reach respondents (see <a href="here">here</a>

(https://www.census.gov/prod/1/gen/95statab/app3.pdf), here

(https://journalistsresource.org/studies/government/congress/household-survey-census-population), here (http://www.pewresearch.org/fact-tank/2014/09/22/census-confirms-more-data-problems-insorting-out-the-number-of-u-s-gay-marriages/), and here

(http://web.archive.org/web/20151201080448/https://www.aeaweb.org/articles.php?

doi=10.1257/jep.29.4.199)). Nonetheless, and with a few exceptions, because they capture such large sample sizes, these data sets are particularly well suited for describing trends and phenomena at the state and national levels. They are less well-suited for, although not incapable of, describing trends and phenomena at local and neighborhood levels. That said, the most accurate picture of what is happening at the local level will almost always be provided by methodologically rigorous studies conducted at the local level. For the Manhattan area, we have several such studies and sources of data.

The purpose of this blog post is to organize and summarize the *local* data on the issue of affordable housing.

**Procedure**. The best way to describe my strategy for reviewing the local data is as a 'scoping' review (for full description, see <a href="http://ktdrr.org/products/update/v4n1/dijkers\_ktupdate\_v4n1\_12-15.pdfhttps://www.ncbi.nlm.nih.gov/pmc/articles/PMC2954944/">http://ktdrr.org/products/update/v4n1/dijkers\_ktupdate\_v4n1\_12-15.pdfhttps://www.ncbi.nlm.nih.gov/pmc/articles/PMC2954944/</a>)). In short, these are typically used as a quick way to review and communicate evidence on a particular issue. They can produce valuable insights for time-sensitive decisions and sometimes lead to more methodologically rigorous reviews and studies. The steps in a scoping review are listed below, followed by the actions I took and/or outcomes of each step:

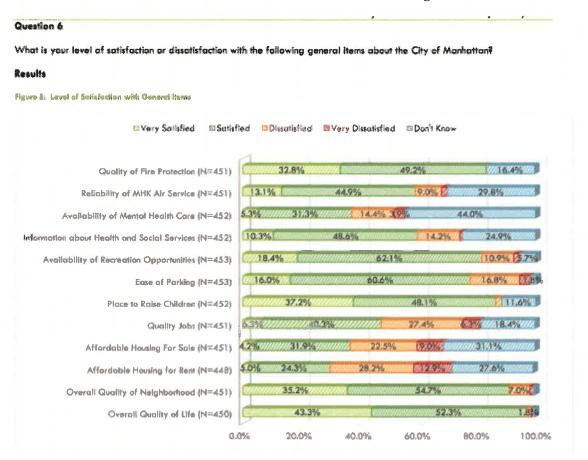
- 1. Identify the research questions: what domain needs to be explored?
  - 1. What do local data tell us about the existence and extent of an affordable housing problem in MHK?
- 2. Find the relevant studies, through the usual means: electronic databases, reference lists (ancestor searching), websites of organizations, conference proceedings, etc.
  - 1. Online search: I used Google for several searches including key words such as "housing", "affordable housing", "Manhattan, KS" and other variations of such terms. I also scanned websites of local organizations with missions related to housing, including Riley County and departments within Riley County (e.g., Riley County Health Department), the City of Manhattan, the Manhattan Housing Authority, Habitat for Humanity, USD-383.
  - 2. Email/other communications: As I also work within the 'housing advocacy' community, I collected any communications that I've had with other housing advocates that include hard data on this issue.
- 3. Select the studies that are relevant to the question(s)
  - 1. Any study or communication that addressed as a primary focus or included data related to affordable housing was included.
- 4. Chart the data, i.e. the information on and from the relevant studies
  - 1. I read all relevant studies and sources of data relevant to the research questions. I actually cut and paste data directly from study reports into this blog post, where possible. I also provide direct links to each study.
- 5. Collate, summarize and report the results
  - 1. The contents of this blog post.
- 6. (Optional) consult stakeholders (clinicians, patients and families, policy makers, or whatever is the appropriate group) to get more references, provide insights on what the literature fails to highlight, etc.
  - 1. Since blogs, like this one, allow for public comments, I expect stakeholders to respond directly to this post to achieve this aim. If warranted, I will update this post with new information, strengths, or limitations based on public comment.

Before digging into the specifics of each and what they tell us, some comments are warranted. First, you'll notice that each study focuses on a different (although overlapping) geographic area. Caution should be used in generalizing the results from one geographic area to another. Second, knowing the methodologies and how the data were collected is important. I will only briefly review the methodologies for each. I encourage readers to inspect the methods for themselves. As with any ideas and conversations of importance, I invite your critiques of these data and conclusions as you see fit. At the end of this post, I identify further limitations with these data, for your consideration.

# City of Manhattan Community Survey (2015) (http://cityofmhk.com/DocumentCenter/View/36702)

A survey was mailed to 2,000 households in the City of Manhattan, KS on behalf of the City Commission to better understand the views of residents about current priorities, satisfaction with city services, and to benchmark trends over time. Of the 2,000 surveys mailed, 457 were returned (22.8% response rate). According to the authors, we can be 95% confident that the results for most questions accurately reflect the views of manhattan area households within a margin of error of +/- 4.54 percentage points. Here, I report only the housing-specific results.

According to this survey, 36.1% of respondents were very satisfied or satisfied with affordable housing for sale. Another 31.5% of respondents were dissatisfied or very dissatisfied. For renting, 29.3% of respondents were satisfied or very satisfied with affordable housing for rent while 42.1% were dissatisfied or very dissatisfied. Interpreting this data is difficult, as we lack a mutually agreed upon reference point for interpreting it. Nonetheless, among all of the variables listed in this table, housing and jobs garner the least satisfaction and the most dissatisfaction among all other variables.



## Riley County Community Needs Assessment (2015) (http://www.rileycountycommunityneedsassessment.org/upl oads/4/1/4/2/41422627/final\_riley\_county\_community\_need assessment january 2015.pdf)

Questions from this study were specifically targeted to learn from residents about the following aspects of community life in MHK: Quality of Life, Physical Health, Mental Health, Social Issues, Children and Youth, Education, Aging, Housing, Transportation, Infrastructure, and Economics and Personal Finance. Data were collected via survey and key informant and focus group interviews. For the purposes of this post, I include the summary of the housing findings (below) as well as the housing data that emerged in other sections (e.g., Aging).

#### Survey data

#### Housing

#### SUMMARY OF FINDINGS

A number of indicators show housing in Riley County to be in the midst of a boom while also being an area of extreme concern. The 2015 Manhattan Housing Forecast from Wichita State University's Center for Real Estate indicates that construction of new homes in Manhattan should increase by 4.3% while sales should increase by 5.5% (versus 2.6% for Kansas). At the same time, the inventory of active listings is relatively low. Additionally, average home values are expected to rise by 2.5%. Census data show that the median value of owner-occupied housing is already notably higher than the state average (\$174,900 versus \$129,500, respectively). Residents in Riley County are also less likely than average to own their home and are more likely to live in a multi-unit structure. These pieces of secondary data help support the feedback from survey respondents that the lack of affordable housing is a primary concern. Other key findings from the survey are:

- Over 75% of respondents reported owning their own
   The top five identified needs regarding housing are: home. This is not consistent with Census data that shows just over 40% home ownership in Riley County.
- Of those who do not own their home, over 70% would prefer to own it.
- Over 79% of those who responded to the question indicated that there is a lack of affordable housing. This is echoed in the list of needs related to housing in the community with "variety of affordable housing options" being selected by over See Tables 110 through 117 for specific data related 50% of the respondents.
- - Variety of affordable housing options
  - 2. Assistance with property repair and maintenance
  - 3. Higher quality rentals
  - 4. Code enforcement (e.g. overgrown lawns, broken windows, trash, etc.)
  - 5. Neighborhood improvement programs

to housing

## Affordable Housing



## Independent living in the home



Transportation



(https://healthycommunitieslab.org/2017/04/30/affordable-housing-in-mhk-part-1-local-perspectives/screen-shot-2017-04-28-at-11-36-15-am/)

Table 103. Choose the top three needs for older adults in your community?

Answer	Frequency	%
Affordable housing	245	21.8
Independent living in the home	210	18.7
Transportation	181	16.1
Ease of mobility in the community	150	13.3
Affordable prescriptions	141	12.5
Home healthcare options	132	11.7
Caregiver support	130	11.5
Medical care	100	8.9
Finances/Income	100	8.9
Access to daily meals	94	8.3
Assisted living options	90	8.0
Long term care options	81	7.2
Respite services for caregivers	75	6.7
Day programs	73	6.5
Memory care options/dementia support	69	6.1
Health insurance	69	6.1

(https://healthycommunitieslab.org/2017/04/30/affordable-housing-in-mhk-part-1-local-perspectives/screen-shot-2017-04-28-at-11-33-48-am/)

Table 116. What are the top three needs related to housing in your community?

Statement	Frequency	%
Variety of affordable housing options	584	51.9
Assistance with property repair and maintenance	294	26.1
Higher quality rentals	287	25.5
Code enforcement (e.g. overgrown lawns, broken windows, trash, etc.)	275	24.4
Neighborhood improvement programs	230	20.4
Low-income housing assistance (Section 8)	193	17.1
Education about financing options for homeownership	172	15.3
Senior housing	163	14.5
Education about responsible homeownership	123	10.9
Historic Preservation	102	9.1
Other	53	4.7
Note: Percent based on total N (1126), selected more than one option. Totals		

(https://healthycommunitieslab.org/2017/04/30/affordable-housing-in-mhk-part-1-local-perspectives/screen-shot-2017-04-28-at-11-38-15-am/)

Table 115. Do you think there is a lack of affordable housing in your community?

Answer	Frequency	%
Yes	703	79.3
No	184	20.7
Not Answered	239	

 $\underline{\text{(https://healthycommunitieslab.org/2017/04/30/affordable-housing-in-mhk-part-1-local-perspectives/screen-shot-2017-04-28-at-11-39-32-am/)}$ 

Housing theme that emerged from key informant interviews:

## Lack of affordable housing and low wages

These themes were often mentioned together, as interviewees saw a tight connection between the two. The value of housing, both owner-occupied and rental, is high in Riley County while the median income is lower than average for the state. This combination makes it difficult for residents to make enough to reasonably afford to live in Riley County. Also, interviewees indicated that the lack of affordable housing and low wages are intertwined with community growth. Specifically, the boom in the economy contributes to new housing construction, which in turn drives up costs and creates a surplus of places that many community members cannot afford. At the same time,

very few lower income housing options are being created or even maintained. The strain on housing resources created by the influx of students is an additional contributor to the problem. Interviewees noted that it has become accepted that students will live in substandard housing, which is problematic, but this issue affects the larger community as well.

#### Housing-related themes that emerged from focus group interviews (by population; click to enlarge)



Hispanic/latino



Participants with low incomes



18-24 year olds



Across all focus groups

Mounting
The sop nands related to howard or all three samples, but not in the serie order, were Higher Guestly.
Hencels, Wester; of Altonable Heceling Options, Code britaneward, and Assistance with Property Reperance Hardward.

Top housing needs across all 3 samples

To summarize, these data reflect a general dissatisfaction with housing in the community. When specifically prompted through the survey to reflect on the issue of housing, there was strong sentiment that lack of affordable

housing was a problem. When prompted to reflect on issues faced by the aging population, respondents indicated that this problem was particularly prevalent among the aging population. Housing also emerged as a key issue in all focus group and key informant interviews.

## Community Health Improvement Plan (2015)

## (https://datacounts.net/rcchip/)

Riley County's health improvement plan was an iterative process involving over 200 community stakeholders in reviewing data, discussing needs, and identifying priorities for improving the community's health. The process included meetings with key stakeholders and organizational partners, community listening sessions, and planning team work sessions. Here were the priorities that emerged from those meetings:

Based on the series of community and stakeholder meetings, thirteen priorities were identified:

- Mental Health
- Healthy Lifestyle (Physical Activity, Nutrition)
- Transportation
- Housing
- Communication and Coordination of Systems and Services
- Access to Critical Services Outside Manhattan
- Child Care and Before/After School Care
- Substance Abuse:
- Employment
- Binge Drinking
- Environment and Infrastructure
- Special Needs
- Poverty and Economic Challenges

Of those, three were selected as having the most potential for collective impact in improving the health of Riley County:

- 1. Communication and Coordination of Systems and Services
- 2. Transportation
- 3. Mental Health

Of note is that housing did not make the final list of issues (3) deemed to have the most potential for collective impact. Interestingly, however, in every summary of community meetings, housing was in the top 4 (1/3 meetings) or top 3 (2/3 meetings):

Summary of Top Issues	# of Meetings Identified	# of Meetings in Top 3 Priorities	Total "Voles"
Meniof Health	7	5	106
ifealthy Lifestyle (Numition, Physical Activity)	10	3	101
Transportation	9	5	99
Housing	10	3	87
Communication & Coordination of Systems & Services	5	1	64

Housing also received among the highest levels of validation and commitment among community leaders and community meeting participants. Attendees responded to the following statement, the results summarized in the table below:

This was accurately identified as a TOP health priority and should be addressed in a coordinated, concerted effort over the next 3 years with focused attention, time and resources.

Attendees were also asked to consider the following criteria in their validation.

- Concern: Level of community concern, social outrage, or desire/acceptance of change?
- Magnitude: Proportion of population and/or communities affected?
- Seriousness: Level of health impact
- Feasibility of Solutions: Known and proven strategies to address? Resources available to implement strategies?

151) 6	rs Ranked by Total % "Strongly Agree" and "Agree"	95	Avg. Score
1	Mental Realth	90.2%	4.57
2	Transportation	87.8%	4.35
3	Housing	85.4%	4.21
4	Healthy Lifestyles	83.7%	4.12
5	Poverty and Economic Challenges	80.4%	4.22
6	Access to Critical Services Outside Manhattan	78.0%	3.82
7	Substance Abuse	63.3%	3.71
8	Child & Before/After School Care	82.7%	3.84
9	Special Needs	59.2%	3.57
10	Communication and Coordination of Systems & Services	58.0%	3.82
11	Employment	52.1%	3.46
12	Binge Drinking	46,0%	3.26
13	Environment and Infrastructure	32.7%	3.24

Housing also received strong support from respondents as an issue they were willing to commit time to addressing:

Finally, participants were asked which (if any) issues they were willing to commit time to addressing. Below are the numbers of individuals and unique organizations expressing an interest in working on each issue.

	Individuals		Unique Organizations	
tssue	"Yes"	"Maybe"	"Yes"	"Maybe"
Mental Health	18	7	14	. 7
Transportation	17	7	14	6-
Housing	11	8	10	5
Healthy Lifestyle	16	12	12	7
Poverty and Economic Challenges	11	8	9	7
Access to Critical Services Outside Manhattan	15	4	11	3
Child and Before/ Affer School Care	12	4	6	3
Substance Abuse	7	10	4	8
Communication and Coordination of Systems & Services	12	10	10	6
Special Needs	1 10	6	7	3
Employment	10	7	10	5
Binge Drinking	6	7	5	7
Environment and Infrastructure	8	3	6	2

On the specific issue of housing, the meetings (14, total) resulted in the following data:

#### Housing

#### Community Meeting Results

Number of Meetings mentioned as a main concern: 10

Number of Meetings voted as a Top 3 issue: 3

Housing Subtopics Identified in Community Meetings

- Affordability
- Better affordable, law income housing options
- Quality
- Family & senior housing (not student housing)
- Rental issues
- Assisted fiving, independent fiving, ability to stay in own home.
- Homelessness
- Home care, home maintenance

"I have too much money to qualify for housing assistance but too little to feel secure."

#### Level of Validation from Results and Next Steps Meeting

Housing	Votes	% by Level
Strongly Agree	22	45.8%
Agree	19	39.6%
Neutral	2	4.2%
Disagree	S	10.4%
Strongly Disagree	0	0.0%
Undecided/Don't Know	0	0.0%
Totat	46	100%
Average Weighter	Score:	4.21
Toloi % "Strongly Agree" and	"Acree"	A5 4%

Together, these data seem to communicate that respondents (community leaders and community meeting attendees) perceive housing to be a high-priority community health problem.

At the same time, housing was not identified as an issue to be best addressed through a concerted, collaborative effort of multiple organizations and representations (also taking into account work that was already being done on the issues and selecting only those that could most benefit from collective impact and would not duplicate efforts). It may be worth pursuing additional information on the process behind the decision to not focus on housing, given its prominence in all of these lists, so as to avoid speculation (e.g., conflicts of interest, perceived as too difficult, another organization(s) are working on it already, etc.).

Flint Hills Fair Housing Equity Assessment and Regional Analysis of Impediments to Fair Housing (2015)

(http://flinthillsregion.org/sites/default/files/fair\_housing.pdf)

The purpose of this study was to engage community stakeholders to analyze the extent of impediments to fair housing for all people and identify strategies to reduce or eliminate those barriers. Data were collected through opinion surveys, a steering committee (n=30), and focus group interviews (KState students; Section 8 voucher holders; real estate professionals and lenders; two with representatives of area employers). Below are the results regarding affordable housing in the region and, when possible, data specifically about Manhattan and Riley County.

**Opinion survey**. In total, 554 responses (of which 75% were from Riley County). The cost of renting was listed as a weakness of the area by 68% of respondents. Respondents listed poor condition of homes as one of the top reasons (after cost) that people could not find a place to rent.

Excerpts directly from the report summarize the findings on affordable housing:

"A recurring issue in focus groups, the opinion survey and within the discussion with the Steering Committee is the poor physical state of rental housing. While the cities and counties in our region generally employ average building standards at the point of construction, there is weak post-occupancy control of standards and poor code enforcement...There is no use of inclusionary housing techniques and, overall, poor support for the construction of affordable housing."

"In Manhattan, land zoned for mobile homes is in or adjacent to flood plains and on the outskirts of town. This puts vulnerable populations at higher risk of property loss and personal injury and disconnects them from opportunities that households with more means and therefore more choice enjoy"

"In general, the public and assisted housing stock is a very small proportion of regional housing units, and much of it is old. According to regional stakeholders interviewed, subsidized units have long waiting lists and are unable to meet local demand for affordable units. Low incomes and rents, plus inadequate federal capital and operating funds means there is not enough funding for adequate repairs and modernization upgrades in existing public housing"

#### K-State Student Health Needs Assessment

In the Fall of 2016, the Wildcat Wellness Coalition, including the Lafene Health Center, conducted a survey to assess the health needs of Kansas State Students. Most measures were aimed at measuring health behaviors. However, several measures targeted the 'social determinants' of health, including employment, housing, and others. Below are the responses to these questions.

#### 1. In your opinion, what are the top three (2) social issues that are of most concern to you at K-State?

*	Answer		Bor	Phosperon	156
1	Errag seed alcohol uses			191	43,219
2	Sexual violest coloneaut			213	48,199
3	Cybercrime (e.g., identity theft, online scene, phishing, etc.)			53	11.991
ļ.	Discrimination	4748		121	27.385
5	Orlving under the influence of drugs and/or alcohol	_		167	57.789
í	Modernations			16	3.62%
	Hungar			-64	9.95%
i	Manufacturing of or setting of drugs			15	3.39%
ı	Marshal Hispan			130	29.41%
0	Powerty			23	7.47%
¥	Suitaide			48	10.86%
2	Bingu drinking		1	149	33.71%
3	Prescription drug abuse			53	11.99%
4:	Violent crime (e.g., murder, semed robbery, apprincised sessuits, etc.)	-		30	5,79%
5	Geng violence	1		6	1.36%
B	Other			9	2.04%
	Trabal			1278	100.00%

Homelessness was identified by 3.62% (n = 16 of 1,278) of respondents as a social issue of major concern. This was among the lowest of any social issue.

#	Anauss	Response	%
1	Employment	207	47.819
2	Availability of mortal health services	147	33.95
3	Availability of eupport groups/peer support	143	33.035
4	Intreased enforcement of laws	79	18,241
5	Childrane	47	10.851
6.	Housing options	148	34.18
7	Optional for arts and entertainment activities	96	22,17
Đ.	Services for domestic/sexual victorion survivoes	115	26.79
9	Services for persons with disabilities	61	14.09
10	Services for veterans/relitary	56	12.93
11	Substance abuse prevention or treatment	117	27.02
12	Other	E 16	3.23
	Total	1231	100.00

Housing was identified by 34% of respondents as one of the top 3 social issues. At 148 responses, it was the 2nd most frequently reported social issue, behind employment. It differed from 'availability of mental health services' by only 1 response and availability of support groups/peer support by 5 responses, so distinguishing between the three social issues is likely not warranted.

## <u>Manhattan Housing Forecast (http://realestate.wichita.edu/data-research/housing-markets-forecast/2017-forecast/2017-manhattan/)</u>

Produced by the Center for Real Estate within the W. Frank Barton School of Business as Wichita State University, the purpose of this report, as the name suggests, is to describe and predict the health of the local housing market. The forecast considers a variety of economic and market factors including employment growth, unemployment, mortgage rates, and home sales and construction.

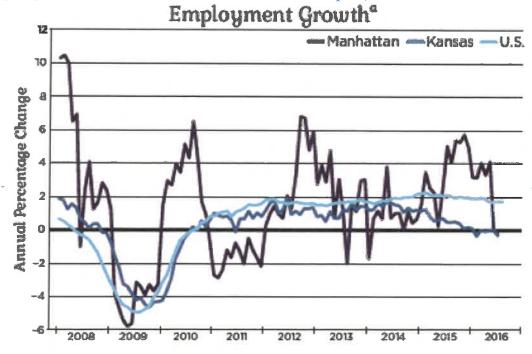
According to pretty much every metric in the report, with perhaps the exception of a small uptick in the unemployment rate in 2016, the local economy and the housing market are experiencing strong growth and are projected to continue to do so for the upcoming year.

Kansas	2013	2014	2015	2016	2017
Total Home Sales Building Permits Home Price Appreciation Sales Volume (in millions) Average Price	33,580 4,459 1.0% \$5,817 \$173,223	34,017 4,334 3.4% \$6,093 \$179,128	36,992 5,257 4.1% \$6,948 \$187,814	38,680 5,400 5.0%	41,090 5,745 3.8%

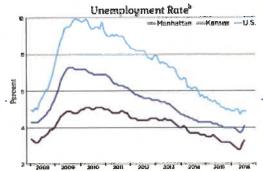
(https://healthycommunitieslab.org/2017/04/30/affordable-housing-in-mhk-part-1-local-perspectives/screen-shot-2017-05-01-at-3-23-51-pm/)

Manhattan				1	
Total Home Sales	763	790	921	990	1,050
<b>Building Permits</b>	307	317	315	310	320
Home Price Appreciation	0.4%	4.0%	-0.7%	4.8%	4.7%
Sales Volume (in millions)	\$153	\$163	\$189		777 77
Average Price	\$200,328	\$206,163	\$205,483		
		l.	1	1	

(https://healthycommunitieslab.org/2017/04/30/affordable-housing-in-mhk-part-1-local-perspectives/screen-shot-2017-05-01-at-3-18-17-pm/)



 $\underline{\text{(https://healthycommunitieslab.org/2017/04/30/affordable-housing-in-mhk-part-1-local-perspectives/screen-shot-2017-05-01-at-3-22-37-pm/)}$ 



(https://healthycommunitieslab.org/2017/04/30/affordable-housing-

in-mhk-part-1-local-perspectives/screen-shot-2017-05-01-at-3-22-48-pm/)



(https://healthycommunitieslab.org/2017/04/30/affordable-housing-

in-mhk-part-1-local-perspectives/screen-shot-2017-05-01-at-3-16-22-pm/)

## Internal data from local agencies

### USD-383 (http://www.usd383.org/manhattan-ogden)

According to the USD-383 Grant Administrator, <u>Dr. Stan Ward</u>
<a href="http://www.usd383.org/Home/Components/StaffDirectory/StaffDirectory/2012/249">http://www.usd383.org/Home/Components/StaffDirectory/StaffDirectory/2012/249</a>), there are approximately 350 homeless children in the USD-383 school system on any given night. Below is an email from Stan:

"Our current homeless student population is 351 students (5.38%) of an official student population of 6,519. This number does not include children in families who are not enrolled in school because they are too young or those who have dropped out.

We are going to try to do a count on those youth in a couple of weeks."

According to a <u>recent article (http://themercury.com/articles/health-dept.-aims-to-help-homeless)</u> in the Manhattan Mercury, this number could be upwards of 375 students.

## Manhattan Housing Authority (http://www.mhaks.com/)

The Manhattan Housing Authority is a HUD funded agency that assists income qualified persons with decent, safe and affordable housing in an efficient, ethical and professional manner. They offer a variety of programs to achieve this mission. Clients access these programs by contacting the housing authority directly and are paired with the right program to suit their needs. As the housing authority's resources are not infinite, they can not serve everyone who comes through their door. In such cases, potential clients are put on a waiting list. Knowing how many people they serve and how many people are on their waiting lists can be used as an indicator of the need for affordable housing in the community.

According to JoAnn Sutton, Executive Director of the Manhattan Housing Authority, and the most recent HUD data for the Manhattan Housing Authority, they serve roughly 1106 clients through their various programs. Depending on the program, there is between a 9- and 18-month waiting list to receive benefits through those programs (average wait time is 13 months). Clients are varied, demographically, but are 62% white (non hispanic) and make \$16,267/yr (household). Among all households, 74% have a female as the head of household, with children. There is about a 20% turnover rate/yr and clients are largely the 'working poor', with either part- or full-time employment. Among subsidized households, 93% have 'wages' or 'other' as a major source of income (includes ~33% of folks who receive Social Security). Only 1% of households have welfare (e.g., TANF) as a major source of income (HUD (https://www.huduser.gov/portal/datasets/assthsg.html#2009-2016\_query)). As of January 9th, 2017, 0.0% of households received unemployment benefits.

See <u>HUD's Picture of Subsidized Households</u> (<a href="https://www.huduser.gov/portal/datasets/assthsg.html#2009-2016\_query">https://www.huduser.gov/portal/datasets/assthsg.html#2009-2016\_query</a>) for more information or to download Excel data file.

## Shepherd's Crossing (http://www.shepherdscrossing.info/)

Shepherd's Crossing, a 501c3 organization, is an ecumenical ministry of 35-40 local churches which assists families in financial emergencies. This assistance comes in several forms including financial counseling and the provision of money (sent directly to utility companies, landlords, or pharmacies) to help with utilities, rent, and prescription medications. Thus, measures of how many people they serve and the amount of resources provided can help identify and describe the existence and extent of affordable housing, or lack thereof, in Manhattan, KS.

#### The clientele:

- o 1100 families served in 2016
- 56% have children
- 46% are employed
- o 80% or more below poverty level, as defined by the Federal government

• 1 in 5 adults classified as disabled and cannot work

#### Services provided:

- o Served 1,200-1,400 households each year, with an average of 2.3 persons per family
- o Distributed over \$286,000 in 2016 to over 1,000 families over 2,400 individuals

According to the Executive Director, the amount of funding and services provided over the past few years has grown, indicating an upward trend in either access to and/or demand for these services.

## Manhattan Emergency Shelter, Inc. (http://www.mesikansas.org/)

The following comes directly from the MESI website:

"MESI provides three main programs to the community—emergency shelter, supportive housing, and homelessness prevention. The <u>Caroline Peine Transitional Shelter (http://www.mesikansas.org/caroline-peine-transitional-shelter.html)</u> provides emergency shelter for the Manhattan and Riley County area. This includes any individual or household relocating to the community from surrounding areas. These counties may include Clay, Geary, Pottawatomie, Marshall, and Wabaunsee. The <u>Supportive Housing Programs</u> (<a href="http://www.mesikansas.org/permanent-supportive-housing-programs.html">http://www.mesikansas.org/permanent-supportive-housing-programs.html</a>) provide supportive and permanent housing to homeless individuals and families in Riley County. The <u>Homeless Rental Assistance Program (http://www.mesikansas.org/homeless-rental-assistance-program.html</u>) assists households in Riley County or Manhattan that are transitioning from homelessness and/or housing crisis to stable living environments.

MESI continually responds to several hundred incidents of homelessness and requests for emergency services every year. During 2016, 571 homeless individuals, including 115 children, stayed in the Caroline Peine Transitional Shelter. In addition to providing emergency shelter, MESI provided homelessness prevention services, rapid rehousing assistance, and supportive housing programs—serving a total of 707 unduplicated adults and children in 2016.

MESI provides a unique service in Riley County, as it is the only emergency shelter available to homeless men, women and families. In addition, MESI is the only agency in the region offering supportive housing and rapid rehousing programs.

Manhattan Emergency Shelter, Inc. has witnessed several factors that have contributed to a lack of affordable rental units for the low income individuals MESI serves. Public housing waiting lists can be up to one year for single individuals. Additionally, public housing authorities have strict acceptance guidelines, potentially disqualifying individuals with a criminal history, poor landlord references, or a history of eviction. These barriers are applicable to the majority of MESI's clients—eliminating their ability to obtain traditional subsidized housing. The guidelines for tax credit housing are as stringent and the units are less affordable. Private landlords are now using leasing applications, requiring an application fee up to \$50, and running credit and criminal background checks. Homeless individuals typically have poor credit due to their many financial struggles and lack the immediate resources to pay application fees only to be repeatedly denied. In addition, there is fierce competition for these units from university students and Ft. Riley soldiers. Landlords are reluctant to take the risk of leasing to a homeless individual or family when more fiscally sound renters are available. As a result, MESI clients often rent overpriced, sub-standard units which perpetuate instability and homelessness."

## Key informant interviews

The Healthy Community Laboratory interviewed several community members on the issue of affordable housing including Karen McCulloh (City Commissioner), Deb Nuss (Riley County Seniors' Service Center), John Ball (Manhattan Area Urban Planning Board), Phil Andersen (Manhattan Area Urban Planning Board), Beverly Olsen (Shepherd's Crossing), Emily Wagner (Manhattan Emergency Shelter, Inc), Stan Ward (USD-383), JoAnn Sutton (Manhattan Housing Authority), Loren Pepperd (G&A Real Estate), and Rod Harms (Civitas Group).

While these data are still being analyzed for themes, a conservative, preliminary conclusion is that the interviewees perceive affordable housing to be a problem in the community. The beliefs about the extent to which it it a problem, who experiences this problem, and the underlying causes of this problem varied (to be addressed in a future blog post). These interviews were recorded and, once we analyze them and learn more about the issue, we will publish the interviews in a podcast or series of podcasts so that you may hear the interviews for yourself (estimated release Summer '17).

## Discussion

The purpose of this post was to organize and summarize the available local data on affordable housing. A consistent theme across all local sources of data is that affordable housing is perceived as a significant problem in the community. Data from local organizations that serve those with housing-related needs indicate that there is a demand for such services and, in most cases, demand for these services is rising. In many cases, resources cannot keep up with demand.

A key question that emerges from these data involves the incongruence between the Manhattan Housing Forecast and just about every measure of satisfaction (or lack thereof) with the current state of affordable housing. The economy is growing, the housing market is growing, and yet other data suggest that affordable housing is a significant issue.

A simple and plausible explanation is that growth in the housing market is not meeting the needs of, nor accessible to, a strong proportion of residents in the community (73% of respondents of the Community Survey identified affordable housing as a problem). This explanation is also corroborated by the Flint Hills Fair Housing Assessment which found that little to no new affordable housing is being built in the region. Key informant interviews also suggested that the bulk of new construction is higher priced homes. A study to quantify demand according to income quartiles/price bands (purchase price or rental rates) and housing types (detached, attached, multi-story, multi-tenant, mobile home, etc.) may be warranted. Lastly, I may have missed other relevant datasets and reports and therefore they would not

be included in this post. It seems, however, that given the number and quality of reports included in this analysis that, to significantly impact the conclusions drawn, any new information would have to be extremely robust in suggesting any other conclusions.

**Strengths**. This review has several strengths. First, it includes data from a variety of sources, including 5 in-depth, comprehensive studies conducted with rigor by local experts. It also includes raw data from several housing-related organizations.

Limitations. First, it is not clear what definitions of 'affordable housing' were used and whether they were consistent across studies. Second, some of these survey data, but not all, quantify subjective experiences of residents. Nonetheless, with large sample sizes, subjective experiences are likely to accurately reflect and describe the phenomenon in question. Also, the incentives for inaccurately responding to or intentionally misleading the investigators in these studies seem to be negligible. Third, as much of this data is from surveys, they do not directly communicate objective data on the issue (although in a subsequent blog post, I will attempt to do so, using US Census data and the American Community Survey). Such data might include statistics on availability of housing, cost of housing, quality of housing, and income/employment.

Lastly, the primary instrument for data collection and interpretation (i.e., me) is subject to its own biases and this publication, as of the time of publication, did not go through a thorough peer-review process, as is customary in the scientific community. Nonetheless, the article was reviewed by several colleagues and community members who provided comments. Also, as stated, since this is a blog post, is published in the public domain and allows for comments (below), the peer review process is 'crowd-sourced' to you, the public. Review away.

**Conclusions.** Affordable housing, or lack thereof, is consistently regarded by residents, community leaders, and other stakeholders as a key issue in the community.

In Part 2, I intend to review the available data from federal sources, including the US Census and the American Community Survey, to further describe the local state of affordable housing.

What do you think? Is affordable housing a problem?

Acknowledgements: Thank you to Debbie Nuss, Ellen Urton, Kerry Priest, and Rod Harms for their comments on early drafts of this post. The methods, information and conclusions drawn in this post do not necessarily reflect the beliefs of or endorsements by the reviewers.

CATEGORIES: Health, Housing & development

## Published by Healthy Communities Lab

VIEW ALL POSTS BY HEALTHY COMMUNITIES LAB

# One Reply to "Affordable housing in MHK – Part 1: Local perspectives"

1. Pingback: Affordable housing in MHK – Part 2: The hard facts – Healthy Communities Lab

BLOG AT WORDPRESS.COM.