Public health concerns were the original driver of government intervention in New York City’s housing stock. Historically, creating and enforcing housing quality standards focused on controlling the spread of infectious diseases and improving the health of residents in the city.

**Entirely new housing standards were introduced by understanding that greater public health issues could be addressed at home.**

As medical interventions took precedence, modern housing policy shifted away from a focus on infectious diseases. Nonetheless, housing policy still plays a huge role in addressing chronic illness such as asthma, lead poisoning, and mental health. CHPC’s initial research for Rx for Housing focused on programs and policies that aim to remediate lead paint and mold and provide assistance to individual households in crisis. However, COVID-19 has shown us the need for housing policy interventions that will protect the health of the public at large.

Residents, researchers, housing advocates and health care providers all agree that housing is a social determinant of health. Our current COVID-19 crisis only highlights the link in an even more profound way.

**The housing & healthcare fields must come together to address our current crisis, just as we did in the 1930s.**

New York City’s next housing plan will need to address the health disparities exacerbated by the COVID-19 crisis by prioritizing metrics that measure health outcomes, and harness the power of our housing policy to help support the health of New Yorkers.

New York City’s housing crisis has revealed itself in no uncertain terms to be a public health crisis. In the absence of a vaccine or medical treatment, the ability to shelter in place in is our greatest prevention tool.

Both housing quality and housing affordability can help fight the battle against the economic and health impacts of COVID-19. Housing is part of the essential infrastructure of care for this pandemic.

**Homelessness**

Not all New Yorkers are able to stay home during this crisis. New Yorkers experiencing homelessness are at heightened risk of contracting and transmitting the virus, not having a home impedes access to routine healthcare, the ability to pay for prescriptions or otherwise maintain a healthy life. Homelessness can aggravate any health condition an individual already has and leaves them without protections from infectious disease.

**70,000+ New Yorkers were homeless in the days leading up to the stay-at-home order.**

This includes 58,000 people staying in NYC DHS shelters and an estimated 10,000+ in Domestic Violence shelters, HPD shelters, or individuals staying on the street or other congregate settings.

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1 NYC Department of Human Services, Total Individuals in Shelter, DHS

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**Health & Racial Equity**

The COVID-19 pandemic has highlighted the deeply entrenched social inequalities that put certain communities at greater risk for both an economic and health crisis.

While this disaster has rolled through the entire city, causing thousands of deaths and widespread economic turmoil, its impact is focused on low-income communities of color.

These New Yorkers were already vulnerable to income volatility and health conditions, and this pandemic has compounded years of harmful planning and housing policies into a deadly and tragic crisis.

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**NYC’S A NEW LENS FOR HOUSING PLAN**

CHPC is leading a research initiative to explore how New York City’s next housing plan could look beyond creating and preserving a certain number of affordable housing units, to advance public broader policy goals around issues such as immigration, public health, and race and gender equity. In light of the COVID-19 pandemic, CHPC is exploring the role of housing policy in the crisis and the lessons that New York City policymakers can draw from it.

Read more about the initiative and CHPC’s previous issue brief on a Rx for Housing at: chcpny.org/newlens.
Seniors
Seniors have the highest risk for death from COVID-19. NYCHA provides a critical safety net for this growing population of vulnerable New Yorkers. Seniors living in public housing are exposed to additional risks during a global pandemic, including isolation, reduced access to services and stress from living in a building with crumbling infrastructure. The same is true for seniors across the city. Seniors need safe and healthy homes to stay well.

Domestic Violence
While the ability to remain in your home is a privilege for most, it is not the safest option for everyone. Domestic violence survivors are faced with two life-threatening choices during this pandemic, to stay home with their abuser or leave and risk exposure to COVID-19 somewhere else. If seeking and staying in shelter was a safe option, it would still not address the long-term, post-crisis challenge of keeping survivors and their children violence-free and in stable housing.

Housing Stability
Housing stability is also a predictor of mental health.
For households who are unable to pay rent due to lost wages, there will be a massive swell of volatility as eviction moratoriums are lifted and they are faced with months of overdue bills. The percentage of New Yorkers in tenuous housing circumstances has dramatically increased and this will have ramifications on not only their mental and physical health, but the overall health of the city. Keeping these New Yorkers in their homes might be our best chance at recovering from both an economic and public health crisis.

Housing Design
The design of our housing affects our ability to remain healthy and stop the spread of germs.
Getting from the sidewalk outside your apartment building back into your apartment is a journey full of doorknobs, elevators, buttons, handrails, and shared spaces. We will need to rethink how our stay-at-home lives will now require more space to work, exercise, raise children and ensure that shared spaces protect us from germs. Traditional building design and the zoning and regulatory environments that shape the functions of our homes will need to adjust to reflect the realities of infectious disease.

Healthy Neighborhoods
To help build more housing, promote economic development, and decentralize healthcare delivery in New York City, integrated large-scale developments that are mixed-income, mixed-use, and created in partnership with hospitals could help serve numerous public policy goals. Vulnerable populations could be housed closer to facilities that meet their healthcare needs, essential workers could be freed from long commutes, and all New York City’s neighborhoods could become hubs for the healthcare and housing they need.

Rx for Housing
To help New York City move towards recovery, we must create housing policies that provide an immediate safety net for economically vulnerable households, allowing them to stay in their homes. The city will need to move with more urgency than before to improve the living conditions for residents in public housing and preserve this essential stock of affordable housing. The city should deploy new, innovative ways to connect households experiencing homelessness or domestic abuse to stable, affordable housing. We need to listen to communities whose voices have remained out of policy conversations for decades, but are experts at navigating complex systems, such as disability rights groups or public housing residents.

Our housing policy should protect and improve the health of all New Yorkers.

NYCHA
New Yorkers living in public housing are currently sheltering in place in buildings that frequently go without heat or hot water. At the peak of the pandemic, 6,000 residents were without heat or hot water or both. 2
3,000 NYCHA residents had no water at all, making it impossible for them to wash their hands, an essential task to stopping the spread of the virus. Nearly 50 NYCHA developments have gas outages, preventing residents from cooking at home or forcing them to use unsafe cooking methods. Hundreds of thousands of New Yorkers who live in public housing are in dire need of federal support to ensure their housing is healthy and habitable. As long as stay at home orders are in place, residents will have constant exposure to lead and mold, amplifying their risk for other health complications.

Nearly 40% of families living in NYCHA buildings are senior-headed households. 3
Seniors living in public housing are exposed to additional risks during a global pandemic, including isolation, reduced access to services and stress from living in a building with crumbling infrastructure. The same is true for seniors across the city. Seniors need safe and healthy homes to stay well.

2 Current NYCHA Heat & Hot Water Service Interruptions as of April 20, 2020 at 3:15pm
3 NYCHA Development Data Summaries, Special Tabulation of Resident Characteristics, All Public Housing Programs