What Do Public Housing Residents Think About Their Health?


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WHAT IS THE PURPOSE OF THIS STUDY?

• In this study, we were interested in learning more about the health issues and concerns of residents of public housing. We also wanted to learn about the barriers and challenges to health improvement that public housing residents face.

• We used two different methods of collecting data to learn more about differences and similarities in perspective and viewpoint of “key informants” like resident leaders and a large sample of residents who took part in a survey about health.

• We wanted to know how environmental characteristics of public housing developments impacted the concerns that residents had about their health.

WHAT IS THE PROBLEM?

• As a group, people who live in public housing have more health problems and worse overall health than people with similar resources who do not live in public housing.

• Residents of public housing face important barriers to opportunities for health improvement and chronic disease prevention.

• Involvement in the solutions for those barriers is important for residents of public housing and for researchers.

WHAT ARE THE FINDINGS?

• The health concerns of public housing residents are affected by environmental characteristics of public housing developments, such as development size, percentage of Spanish speaking residents and whether or not there is a Tenant Task Force. (A Tenant Task Force is an elected group of residents representing the concerns of residents in a specific development.

• The formal and informal leaders of housing developments often identified a lack of community engagement as a barrier to resident health and resident participation in programs and opportunities for health improvement. However, they felt that this challenge could be overcome and saw engaging residents as part of their role.

• Residents of public housing who completed a survey about health thought about challenges and barriers to health differently than leadership. Though leadership saw the lack of community engagement as a key problem, residents often thought of health problems as related to individual-level concerns, such as not having enough money.

• Leadership also felt that many public housing residents have little knowledge about their health, and about the relationship between risk behaviors (for example smoking) and development of disease. This gap might make disease prevention in general a low priority.

• Residents of public housing often identified safety as their most important health concern; leaders were less likely than residents to identify safety as a major concern.
• There was a great diversity of health related issues and concerns that need to be addressed from both leaders and residents.
• Two methods of collecting data (talking with 6-8 “key” people per development and conducting a large survey of residents) gave us two different and important perspectives. Looking at the differences and similarities between the data yielded important information.

WHO SHOULD CARE MOST?
• Residents of public housing.
• Tenant Task Forces and other leaders in public housing developments.
• Policy makers, city planners and housing authorities interested in environmental factors that impact the health of public housing residents.
• Public health and other professionals planning health promotion programs and health improvement opportunities with residents of public housing.

RECOMMENDATIONS FOR ACTION
• Future research, programs and policies should involve residents of public housing in identifying the health issues of importance to themselves and their communities.
• Health promotion programs aimed at residents of public housing should take place in the housing development, be consistent (and be careful to inform residents of the reasoning behind changes and endings, if funding or other considerations necessitate change) and have sufficient resources to provide incentives to participating residents.
• Health promotion programs should begin by increasing awareness of the health issues driving chronic disease, rather than simply offering programs to address the behaviors that may increase one’s risk of developing disease.
• Due to the diversity of health issues, policymakers and others should consider a systems approach, rather than focusing on a single disease.
• People planning health-related programs in public housing are strongly urged to consider safety as an important health concern.
• Policy-makers, planners, resident leaders and tenant task forces should consider the impact of environmental characteristics of housing developments (for example, size, language and existence of a Tenant Task Force or other resident leadership organization) on the health of residents of public housing.
• Researchers should consider using more than one method of data collection in order to more fully understand the health issues, concerns and barriers to health facing residents of public housing.