How Moving to a Higher-Income Neighborhood Impacts Health and Well-Being

A follow-up study extracts key health policy and practice lessons

SUMMARY

In the mid-1990s, the U.S. Department of Housing and Urban Development (HUD) launched Moving to Opportunity, a housing relocation experiment that enabled families from impoverished communities in Baltimore, Boston, Chicago, Los Angeles, and New York City to relocate to higher-income neighborhoods. HUD joined with the Robert Wood Johnson Foundation (RWJF) and other funders and partners to evaluate the impact of the program on educational achievement and the economic and health status of some 4,600 families who enrolled between 1994 and 1998.¹

In this follow-up study, conducted from 2010 to 2013, investigators Jens Ludwig, PhD, McCormick Foundation professor of social service administration, law, and public policy at the University of Chicago, and Greg J. Duncan, PhD, distinguished professor of education at the University of California, Irvine, extracted key health policy and practice lessons from the evaluation and disseminated them to policy-makers and practitioners through articles published in peer-reviewed journals and the popular press.

¹ RWJF Grant ID# 40075 ($748,572, September 1, 2001 through August 31, 2002). See the Program Results Report on study results.
**Key Findings and Policy Implications**

The investigators noted the following impacts of moving from a high-poverty to a low-poverty neighborhood in interviews for this report and articles in the *New England Journal of Medicine* (NEJM)² *Science*,³ and the *Journal of the American Medical Association* (JAMA)⁴ as noted:

- A large reduction in the prevalence of extreme obesity⁵ and diabetes. Given the extreme costs of these conditions, this finding raises the possibility that public health interventions like Moving to Opportunity could generate substantial social benefits. (Interview and NEJM)

- Long-term improvements in adult physical and mental health but no equivalent impact on economic self-sufficiency. These findings highlight the importance of broadening the goals of anti-poverty policies beyond a narrow focus on income to include health and other aspects of well-being. (*Science*)

- Increased depression, post-traumatic stress disorder, and conduct disorder among adolescent boys and reduced depression and conduct disorder among adolescent girls. The findings suggest that girls may benefit more than boys from moving to better neighborhoods and that policy-makers should consider sex differences when planning housing relocation experiments. (JAMA)

**Funding**

RWJF supported this study through its *RWJF Investigator Awards in Health Policy Research* program.⁶ The program supports researchers whose crosscutting, innovative ideas promise to improve U.S. health and health care policy. (See *Program Results Report* for more information.)

**CONTEXT**

In 2012, almost 9 million Americans—a disproportionate number of them minorities—lived in neighborhoods with poverty rates of more than 40 percent. Because public housing policy affects where people live, policy-makers have long been concerned that concentrating youth and adults in impoverished neighborhoods might negatively affect

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⁵ Defined as having a Body Mass Index (BMI) over 35.
⁶ ID# 67769 ($334,956, July 1, 2010 through June 30, 2013).
their health, behavior, and overall well-being. Possible explanations for this adverse impact include:

- Limited exposure to peers and role models who support positive behaviors such as schooling and work
- Neighbors who are unwilling or unable to cooperate and work together to improve community life
- Lack of high-quality local public institutions such as schools, police, health care, and housing
- Elevated exposure to risk factors such as pollution or crime

**Moving to Opportunity: A Bold Housing Relocation Experiment**

In the mid-1990s, HUD conducted and evaluated an ambitious housing relocation experiment called Moving to Opportunity. The program tested whether moving poor families from high-poverty to low-poverty neighborhoods would have an impact on their employment and health, their children’s educational achievement, and the overall well-being of youth and adults.

From 1994 to 1998, some 4,604 families eligible for public housing from five cities (Baltimore, Boston, Chicago, Los Angeles, and New York City) enrolled in the program. A lottery system randomly assigned the families to one of three groups:

- The experimental group of some 1,700 families who received Section 8 housing vouchers they could redeem only if they relocated to private market housing in low-poverty areas. The families received counseling and assistance in finding and renting private units.
- A Section 8 comparison group of more than 1,300 families. These families also received vouchers for private market housing but with no restriction on the poverty level of the area where they relocated and no special counseling on moving.
- The control group of 1,400 families. These families received no special vouchers but continued to receive their previous housing assistance.

The authorizing legislation for Moving to Opportunity charged HUD with evaluating the interim (4–7 year) and long-term (10–15 year) impact of the program. HUD assembled a team of researchers from academic institutions, federal agencies, and policy research

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8 High poverty is defined as 40 percent or more of residents with incomes below the federal poverty threshold; low poverty as 10 percent or fewer residents with incomes below poverty.

9 Section 8 is the title of the federal rental subsidy program for disadvantaged people.
centers around the country to conduct the evaluation. See the Appendix for a list of the researchers. The initial focus was on housing, employment, and educational achievements of the families assisted under program.

With support of other federal government agencies and private foundations, HUD was able to expand the scope of the long-term study to include physical and mental health outcomes. In addition to RWJF,\textsuperscript{10} supporters of the $16 million evaluation included the National Science Foundation, the National Institutes of Health, the U.S. Department of Education, the Bill & Melinda Gates Foundation, the Annie E. Casey Foundation, the John D. and Catherine T. MacArthur Foundation, and others.

For the long-term evaluation, investigators conducted interviews with 3,273 of the adult household heads as well as 5,105 youth who were ages 10 to 20 at the end of 2007. For more on the evaluation, a summary of key findings, and a list of supporters, see the HUD report on Moving to Opportunity

**THE PROJECT**

From 2010 to 2013, Jens Ludwig, PhD, McCormick Foundation professor of social service administration, law, and public policy at the University of Chicago, and Greg J. Duncan, PhD, distinguished professor of education at the University of California, Irvine, extracted lessons learned and policy implications from the Moving to Opportunity evaluation and disseminated them to policy-makers, practitioners, and the general public.

The investigators, who were members of the Moving to Opportunity evaluation team, used funding through the *RWJF Investigator Awards in Health Policy Research* to follow up on the evaluation by exploring how various “place-based” public policies might improve health and other outcomes for some of the nation’s most disadvantaged families.

**FINDINGS AND POLICY IMPLICATIONS**

In a series of articles for academic journals and the popular press, Ludwig and Duncan highlighted overall findings and policy implications with a focus on three key areas:

**Diabetes and Obesity**

In an article in the *New England Journal of Medicine*,\textsuperscript{11} and in separate interviews with Duncan (February 2014) and Ludwig (March 2014) for this report, the researchers reported that:

\textsuperscript{10} See footnote 1, page 1 for information on the original RWJF grant to Princeton University’s Woodrow Wilson School of Public and International Affairs. The Program Results Report details the findings.

\textsuperscript{11} Ludwig J et al. NEJM. See citation in footnote 2, page 2.
• The opportunity to move from a neighborhood with a high level of poverty to one with a lower level of poverty was associated with large reductions in the prevalence of extreme obesity (BMI greater than 35) and diabetes. (Ludwig interview)

• Given the “large social costs of obesity and diabetes,” the researchers concluded that these findings “raise the possibility that clinical or public health interventions that ameliorate the effects of neighborhood environment on obesity and diabetes could generate substantial social benefits.” (NEJM)

“*These results suggest the possibility that the growing exposure of Americans to distressed neighborhoods could be one reason why obesity and diabetes prevalence have been increasing in the U.S. Our results might also help explain why we see disparities in obesity and diabetes prevalence between Whites and minorities in the U.S., given that minorities are more likely than whites to live in high-poverty areas.*”—from a blog by Ludwig and Duncan

**Adult Mental Health and Health**

• In an article in *Science*, the researchers noted that moving from a high-poverty to lower-poverty neighborhood leads to long-term improvements in adult physical and mental health and subjective well-being, even though it does not affect economic self-sufficiency.

• In the article, the researchers concluded that these findings “suggest that changes in neighborhood poverty are more important than racial segregation in affecting the subjective well-being as well as the physical and mental health of low-income adults.” This is “important because racial segregation has been declining since 1970, but income segregation has been increasing.”

In the February 2014 interview, Duncan reflected further on these findings: “Neighborhoods by themselves don’t seem to be a strong determinant of a number of outcomes that we think should matter—like employment and achievement and welfare receipt.” However, he noted, “they do seem to matter quite a bit along dimensions like safety and mental health, and physical health to some extent.”

Ludwig added in the March 2014 interview that “there may be numerous barriers to improving one’s economic status in a new neighborhood: a lack of education or work experience needed to get a better job, transportation issues, and child care challenges among them.”

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“These findings help highlight for policymakers the importance of broadening their conception of the goals of anti-poverty policy, to include health and other aspects of well-being rather than just focusing narrowly on income poverty.”—report to RWJF

**Youth Mental Health**

In an article in the *Journal of the American Medical Association,*\(^\text{13}\) the researchers found that:

- Interventions to encourage moving from high-poverty neighborhoods were associated with increased depression, post-traumatic stress disorder, and conduct disorder among adolescent boys.
- Among adolescent girls, moving was associated with reduced depression and conduct disorder.
- “Better understanding of interactions among individual, family, and neighborhood risk factors is needed to guide future public housing policy changes in light of these sex differences.”

**Communications Results**

The *New England Journal of Medicine* article received coverage by mass media across the United States and internationally, including Reuters, *USA Today,* *Los Angeles Times,* *San Francisco Chronicle,* CBS News, CNN, the *Daily Mail* (UK), and NPR Marketplace. HUD featured the results as part of the 2011 HUD/MacArthur Foundation “How Housing Matters” conference in Washington. HUD Secretary Shaun Donovan and then-Secretary of Health and Human Services Kathleen Sibelius were keynote speakers.

The *Science* article received nationwide news coverage, including by the *New York Times,* *Wall Street Journal,* CNN, the *Atlantic,* and the *Boston Globe.*

A comprehensive summary of major news coverage of Moving to Opportunity findings through 2014 are online.

To reach audiences in housing, economics, and poverty law, the investigators also disseminated findings in:

- A HUD technical report, Fall 2011

POLICY LESSONS LEARNED

1. **Don’t rely on housing relocation interventions alone to help low-income people.** According to Ludwig in his interview, the “real goal” of their research was “to figure out what it is about neighborhood environments that matters for people so that policy-makers can also enact place-based policies to help low-income families, and not just rely on mobility interventions. Moving to Opportunity provides an important first step in this regard.”

   Greg Duncan added in his interview: “People are rethinking what it might take in the way of a neighborhood-related intervention to really produce more general improvements.” Moving to Opportunity is “attractive” because “all you have to do is keep paying for vouchers for families to afford their rent. It is much more difficult to set up some kind of service provision on an ongoing basis. But maybe that is required. Neighborhood improvement is not the magic bullet some people thought it might be.”

2. **Design a dissemination strategy that will get findings into the hands of policy-makers and practitioners as well as the broader public.** The investigators originally planned to write a book about the health policy implications of Moving to Opportunity. However, after consulting with RWJF, the researchers decided they could achieve a greater impact by disseminating key health findings and their policy implications through mass media and through scientific publications in top-tier peer-reviewed journals, which often reach policy-makers and practitioners. (Duncan, Report to RWJF)

AFTERWARD

The investigators continue to disseminate findings and policy implications from Moving to Opportunity. They are preparing an article that uses Moving to Opportunity data to revisit the debate on the health impact of absolute poverty status versus the effects of relative standing within the income distribution spectrum.

According to the researchers, this debate has important policy implications because, if relative income standing matters more than absolute material conditions, it means that economic growth or even anti-poverty policies by themselves will not remediate the adverse health consequences of being at the bottom of the distribution.
APPENDIX

Researchers Assembled by HUD to Conduct the Evaluation

(As provided in Cityscape: A Journal of Policy Development and Research)

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BIBLIOGRAPHY

(Current as of date of the report; as provided by the grantee organization; not verified by RWJF; items not available from RWJF.)

Articles


Books and Chapters

Reports