A Choice with No Options: Atlanta Public Housing Residents' Lived Experiences in the Face of Relocation*

A Preliminary Report

Deirdre Oakley, Erin Ruel and G. Elton Wilson
Georgia State University

I haven't had a bad experience in public housing, but I understand needing to move on. They shouldn't tear it down though 'cause everybody hits a rough patch (Bowen Homes resident)

Contact: Deirdre Oakley, Department of Sociology, Georgia State University, P.O. Box 5020, Atlanta, GA 30303; (404) 413-6511; email: doakley1@gsu.edu, or Erin Ruel, (404) 413-6530, eruel@gsu.edu.

*This research represents an independent effort. It has neither been endorsed nor supported by the Atlanta Housing Authority

Wherever I get moved to I hope I can still see some of the people I know here.
(Hollywood Homes resident)

Acknowledgements

Our research initiative would not have been possible without the dedicated and voluntary help of faculty, graduate students and public housing residents. The Atlanta Jurisdiction-wide Public Housing Resident Advisory Board (RAB), as well as the individual public housing community resident association members provided crucial assistance with recruitment; faculty and graduate students volunteered their time to conduct interviews; the Georgia State University College of Arts and Sciences, Partnership for Urban Health Research, Center for Neighborhood and Metropolitan Studies, as well as the Sociology Department provided needed resources. Assistance was also provided by the Metro Atlanta Taskforce for the Homeless, Atlanta Jobs With Justice, and the Environmental Awareness Foundation. But most of all, this research is the result of the time the residents gave and their willingness to talk to us. We learned a great deal from them and believe that public and low-income housing policy could be improved significantly if their voices, and the voices of other public housing residents across the country facing similar fates, were more fully integrated into its formation.

Faculty and Graduate Student Contributors

Angela Anderson	Robert Maddox
Jessica Avasthi	Murugi Ndirangu
Jack Barile	Josie Parker
Johanna Boers	Christopher Pell
Matthew Cardinale	Reneé Peterkin
Taura Coats	Anita Mathews Pinto
Barbara Combs	Lesley Reid
Hannah Cooper	Don Reitzes
Betsy Crane	Richard Rothenberg
Timothy Crimmins	Wendy Simonds
Allison Edwards	Jennifer Simons
Ashley Edwards	Renee Skeete
Kirk Elfison	Kimberly Stringer
Dina Elimam	John Steward
Michael Eriksen	Monica Swann
Elizabeth Gaylor	Sarah Tennyson
Christy Harvey	Griff Tester
April Ingalsbe	Scott Weaver
Daisuke Ito	Bethany West
Charles Jaret	Terri Wilder
Amanda Jungels	Adia Harvey Wingfield
Heather Kenny	Jamie Woods

Executive Summary

In 1936, Atlanta became the first city in the nation to provide low-income, project-based public housing to needy families; by 2010 it may become the first to eliminate it. The Atlanta Housing Authority (AHA) announced plans in early 2007 to demolish the remaining 10 family public housing communities as well as two senior high rises (senior high rises include disabled persons of all ages as well) in the next several years. Almost 10,000 residents will be relocated to private-market housing with the help of Housing Choice Voucher subsidies (formerly Section 8). Currently there are no plans to build replacement housing. The U.S. Department of Housing and Urban Development (HUD) has approved the demolition applications for all the family communities: demolition is complete at one; relocation complete at two; and relocation in progress at the remaining seven. As of the writing of this report, only one of the senior high rise demolition applications had been approved and relocation had not begun.

These plans reflect on-going national housing policies to deconcentrate the poverty long associated with public housing. In 1992 the HOPE VI (Housing Opportunities for People Everywhere) Program was created by HUD. This program sought to transform public housing by demolishing the large, spatially concentrated developments and replacing them with mixed-income housing. The AHA has been at the forefront of such efforts building 10 nationally acclaimed mixed-income projects between 1994 and 2004, and gaining the reputation as a leader in rethinking public housing and addressing its perceived failures.

Questions remain—in Atlanta and elsewhere—as to how effective these initiatives have been at improving the housing and neighborhood conditions of relocated public housing residents. For one thing, the majority of the original public housing residents have not had the opportunity to move back to the new developments because only a portion of the units are set aside as low income, and eligibility requirements are very strict. It is also unclear whether residents who remain in private-market housing (with or without a subsidy) have experienced improved living conditions in neighborhoods with less poverty. Despite these questions, initiatives to demolish public housing continue.

In late 2007 the RAB met with several faculty members at Georgia State University to discuss conducting a survey of residents' views about relocation and how they feel it will impact their lives and overall well-being. An interdisciplinary team of faculty, graduate students, public housing residents and community organizations took shape with help from the RAB, individual resident associations and University personnel. Between April 26 and July 19, 2008, the team interviewed 387 public housing residents across seven communities in which relocation had yet to begin. We plan to follow these residents after they are relocated for a minimum of two years to examine how relocation impacts their lives: Do they end up in better neighborhoods and have improved living conditions? How is their health and overall well-being affected by relocation? In other words, is there efficacy to current public housing transformation policies or do they need to be reconsidered?

This report presents some of our pre-relocation findings. We found evidence to suggest that public housing serves as an important safety net for a particularly vulnerable group of people, many of whom have chronic health issues. Our findings also highlight the close proximity of current public housing to public transportation in Atlanta, as well as the very different neighborhood conditions of the family and senior public housing communities. Not everybody wants to move: seniors and people with disabilities are far less likely to want to relocate than

families. But even the residents who want to relocate have concerns about moving to subsidized private-market housing.

Key Findings

1. Residents entered public housing through various circumstances, when there were no other options available to them. For example, 26% of senior housing residents entered public housing because of their health. Another 10% of both family and senior housing residents entered because they lost their home or job. For approximately 20% of both family and senior housing residents, public housing is an improvement over their prior living situation. This suggests that public housing serves as an important safety net. Eliminating all of it may inadvertently lead to an increase in homelessness.

2. Compared to the general population, public housing residents are in poorer health. Thirty percent of family housing residents and more than 50% of senior housing residents rate their health as fair or poor. However, health problems overwhelmingly began prior to entry into public housing. For over 60% of the residents, diagnoses of chronic conditions occurred prior to entering public housing.

3. There is financial security in public housing. The majority of residents can live within their means. Public housing residents bring home an average of $750–$763 per month and pay an average of $220–$260 per month in rent. By the end of each month, 50% of residents have been able to make ends meet and another 30% of residents have a little left over at the end of most months, which is pretty exceptional given the low average monthly incomes received. In terms of finances then, public housing is achieving its goal of affordable housing for very low income individuals and families.

4. Public housing is conveniently located. About 80% of residents are dependent on public transportation and can easily get to important destinations in 30 minutes or less.

5. Not everyone wants to move; there is a large discrepancy based on age, tenure and circumstances. While 62% of family housing residents want to move, only 34% of senior housing residents do. Given the option to fix-up their communities versus relocate, almost 60% of senior housing residents and 35% of family housing residents would prefer this option.

6. Senior housing is centrally located near many amenities that benefit the older adults and disabled persons that live there. The neighborhoods have less poverty and the buildings are in better condition than the family housing. Thus, the goal of deconcentrating poverty is not really applicable to the senior public housing in Atlanta. This is also reflected in senior residents' perceptions of their neighborhoods and buildings. Over 60% of senior housing residents rate building and neighborhood conditions as good or better. Twice as many respondents in family housing (81%) view crime in their neighborhood as a problem compared to respondents in senior housing.

7. Even with a housing subsidy, residents are concerned about affording rent and utilities (60% of family and 30% of senior residents). They are also worried that there will not be enough affordable private market housing for all those relocating (60% of family and 40% of senior residents); and having neighbors who can help out in an emergency (68% of family and 66% of senior residents).

Introduction

By the late 1980s, public housing was deemed a failure. It was cited as one of the causes of concentrated urban poverty. This led to new housing-policy formation at the federal and local levels. One of the most prominent, the HOPE VI Program (Housing Opportunities for People Everywhere), was created by the U.S. Department of Housing and Urban Development (HUD) in 1992. Its aim was to transform public housing by demolishing the large, spatially concentrated developments and replacing them with mixed-income housing, thus deconcentrating poverty. The AHA was at the forefront of this effort, using HOPE VI funding as well as other public–private resources to demolish some 17,000 public housing units between 1994 and 2004 and replace them with 10 nationally-acclaimed mixed-income projects.

Such policies are grounded in the well-established notion that concentrated poverty results in a myriad of negative life outcomes: lower educational attainment; joblessness; a disproportionately high share of single female-headed households; social isolation; poorer health; and increased crime. Findings concerning how the consequences of concentrated poverty are directly linked to living in public housing have been mixed due to the difficulty of disentangling the impact of public housing from overall neighborhood disadvantage. Much has been written about the discriminatory practices officials used to decide where to locate public housing. A consequence of such practices is that public housing is for the most part located in very poor, predominantly Black neighborhoods. So the question remains as to whether or not it is public housing itself, or the surrounding neighborhood that contributes to the problems long associated with public housing communities.

Nevertheless, policies aimed at transforming public housing have been guided by the principle of deconcentrating poverty. Yet in cities around the country—including Atlanta—that have implemented HOPE VI and other related initiatives, there are questions as to whether these initiatives have actually deconcentrated poverty or simply shifted it to other parts of the metropolitan area. Thus, it is unclear whether or not it has really helped the majority of relocated public housing residents. Additionally, when public housing projects are torn down, units are not rebuilt one-for-one and only a small percentage of the new units are designated for very low-income persons, leading to a net loss of low-income housing units.

For example, in Atlanta only 17% of former public housing residents have been able to return to the new mixed-income developments since 1995. The remaining residents are housed throughout the region—many with the help of housing vouchers. But relocation with housing vouchers does not necessarily mean moving to better neighborhoods. Although 83% of the public housing residents relocated between 1995 and 2004 remained either in the city or in adjacent counties, many ended up in other poor neighborhoods, typically in southwest and southeast Atlanta. There is also sufficient evidence to suggest that those relocated with vouchers are not receiving the same level of needed services as they did in public housing.

Despite these questions, housing authorities around the country have continued to embrace these policies and the AHA remains at the forefront. In early 2007, the AHA announced plans to demolish 12 public housing communities by 2010, effectively ending the traditional project-based public housing program for families and dramatically reducing the size of the senior community housing stock. Residents will be relocated with Housing Choice Vouchers. There are currently no plans to build replacement housing. Planned demolitions will affect almost 10,000 public housing residents, many of whom are senior citizens or people with disabilities.

Because Atlanta could become the first city to effectively end project-based public housing (at least for families) other housing authorities across the nation are closely watching this process. If it is declared a success here, they will likely institute the same program in their cities. In light of this, the goal of our study is to document residents' experiences before and after the relocation process, as well as assess residential, socioeconomic and health outcomes.

This report presents some preliminary findings from our pre-relocation survey of 387 public housing residents. We focus on residents' reasons for entering public housing and what implications this has for relocation; tenure, health conditions, level of financial security, building and neighborhood conditions, accessibility of location, moving preferences and concerns about relocation, as well as differences between the family and senior housing. In what follows, we present the results of the family and senior communities separately mainly because there were so many differences.

Survey Methods

Our initial aim was to collect a random sample of 72 residents in six of the public housing communities for a total of 504 participants. In 2007, twelve public housing communities were slated for demolition. Of these, five were almost vacant and one was inaccessible by early 2008 when we began developing the survey. Thus, we targeted only the six communities that would not begin relocation until July 2008.

The communities we targeted include four family developments and two senior high rises slated for demolition. The four family developments are Bankhead Courts, Bowen Homes, Herndon Homes, and Hollywood Courts. The two senior high rises are Palmer House and Roosevelt House. We also interviewed residents at Cosby Spears, a senior high rise currently not scheduled for demolition. However, Cosby Spears is co-located with the U-Rescue Villa family development. Demolition on U-Rescue Villa was completed in May 2008. We included Cosby Spears in our sample so that we would have a non-relocating comparison community for our post-relocation survey. In addition, because relocation and demolition were going on in their environs for almost eight months, the threat of having to move is embedded in these residents' everyday lives. In fact we found that the residents in this community mirrored the demographics, socioeconomic status, reasons for entering public housing, health status, and perceptions concerning neighborhood and relocation of the other senior communities. Because of this we have included these residents in this report.

By July 2008 we had successfully completed interviews with 387 residents, which is a 77% response rate. Due to difficultly in building trust with the residents, particularly with regard to assuaging their fears that they would lose their housing voucher if they talked to us; as well as the related factor of interference from the housing authority, we were not able to collect a completely random sample. After three attempts to gather the random sample in each community, we opened up the study to residents who wanted to participate. Thus, our final sample consists of 226 randomly chosen respondents and 161 non-randomly chosen respondents. We tested for differences between the random and the non-random portions of the sample and found no significant or substantive differences on any variables in family or senior housing. All respondents were age 18 or older and more than 90% were the leaseholder. Sampling weights were used to adjust for the complex sampling design.

Sample Demographics

Table 1 presents the sample demographics. The first column presents counts and percents for the full sample. The next two columns present information broken out by housing type: family communities and senior high rise communities. The majority of respondents are female (80%). In the family communities 96% are female, while there are almost as many men as women in the senior housing communities. Across both types of communities the majority of the residents are Black (94%).

Respondents ages 18–44 make up 32% of the sample, but this differs by type of community, with 58% of family housing and only 6% of senior housing falling into this age bracket. Respondents ages 45–65 made up 47% of the sample (35% of family and 58% of senior community respondents). Finally, respondents aged 65 or older made up 22% of the sample overall (7% of the family and 36% of the senior communities). Just over half (54%) of the full sample have a high school degree or GED. This percentage is similar by type of community with 54% family residents and 53% of senior residents having a high school degree or equivalent.

Almost one third of the sample have lived in public housing for less than two years; 20% have lived in public housing for two to four years; another 23% have lived on public housing for four to eight years; and 26% have lived in public housing for more than eight years. Fifty-six percent of residents living in senior housing have lived there for four or more years while 52% of family residents have lived there for less than 4 years. Very few are married, only 5% in the full sample. Residents in the family sample have an average of two children living in their homes. The number of children in each household ranges from 0 to 8.

Table 1. Weighted Sample Demographics

	Full Sample	Family	Senior
Number of communities	7	4	3
# of cases unweighted	387	192 (50 %)	195(50 %)
# of cases weighted	387	248 (64 %)	139 (36 %)
Female	367 (80 %)	238 (96 %)	71 (51%)
Black	365 (94 %)	240 (97 %)	125 (90 %)
Age 18–44	152 (39 %)	144 (58 %)	8 (6 %)
Age 45–64	169 (44%)	88 (35 %)	81 (58 %)
Age 65 +	66 (17 %)	17 (7 %)	49 (36 %)
Tenure 2 years or less	122 (32 %)	93 (37 %)	29 (21 %)
Tenure, 2–4 years	77 (20 %)	46 (18 %)	31 (22 %)
Tenure, 4–8 years,	88 (23 %)	49 (20 %)	39 (28 %)
Tenure, 8 or more years	100 (26 %)	61 (25 %)	39 (28 %)
Have high school degree or GED	207 (54 %)	133 (54 %)	74 (53 %)
Married	20 (5 %)	12 (6 %)	8 (5 %)
Number of children under age 18 in home	—	Mean 2.0 std err 2.2	—

Pathways into Public Housing

I didn't have any other options. I went on disability and couldn't get into a regular apartment—I didn't make enough to qualify. (Palmer House resident)

Residents enter public housing through several important pathways, which suggests that residents experience various vulnerabilities that may make private-market housing unsustainable. Most cite structural reasons: the inability to afford private-market homes (34% of family and 24% of senior residents). About 13% of family and 9% of senior residents entered due to family dissolution: a divorce, imprisonment or death of spouse, or death of parent forced some respondents to enter public housing. Eighteen percent of family and 22% of senior residents stated that public housing was an improvement over their previous living condition. Some residents used to be homeless, some lived in group homes or shelters and others were in rehab facilities. Twenty-six percent of seniors entered public housing because of a health condition or disability. About 10% of both family and senior residents entered public housing because they lost their home or their job.

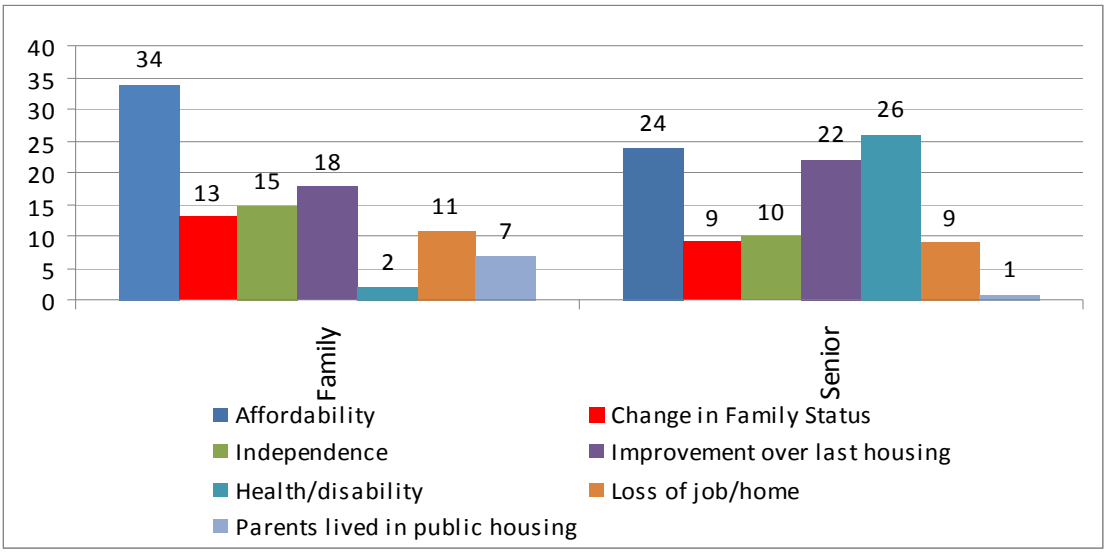


Figure 1. Reason for Entering Public Housing by Type of Community.

Regardless of residency in family or senior communities, reasons for entry into public housing also appear to differ by age. Figure 2 illustrates this difference. For those over age 65 in family housing, residents mainly entered public housing because it was an improvement over their prior living situation or because of the loss of a job or home. For those younger than age 65, affordability is the main reason for entering public housing. For those in senior housing, health and disability reasons for entering public housing are more prevalent for those age 45–64 and for those age 18–44 than those over age 65. In senior housing for those over age 65, there is no dominant reason for entering public housing.

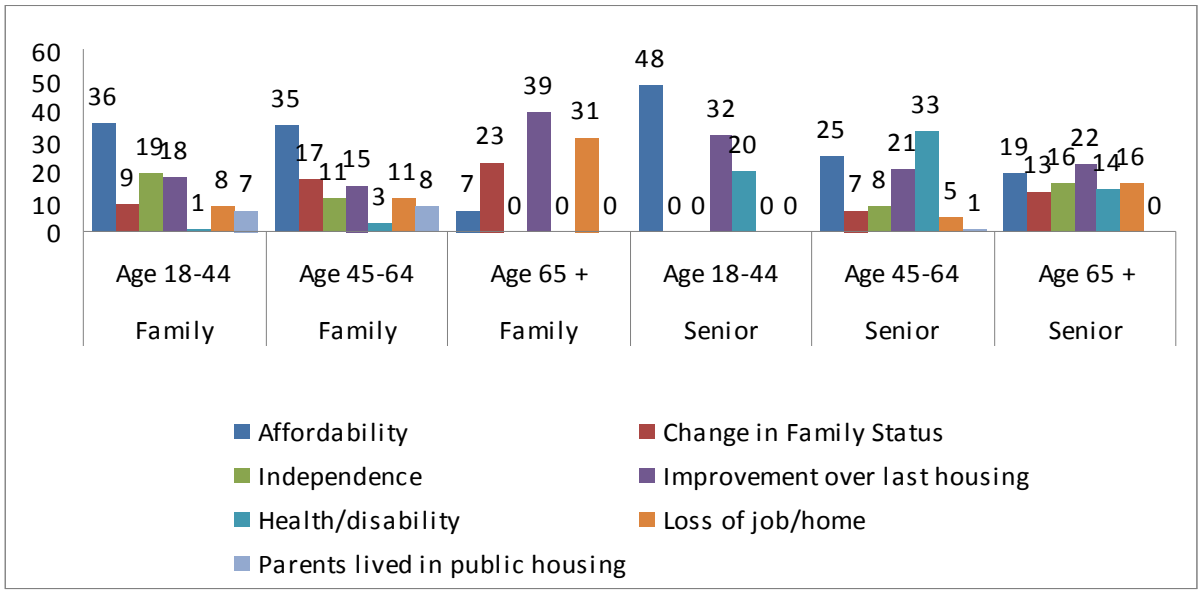


Figure 2: Reason for Entering Public Housing by Type of Community and by Age Group.

Taken together, these findings suggest that public housing serves as an important source of low-income housing when residents have no other options due to a variety of hardships, as well as older age. Thus, eliminating it altogether could inadvertently lead to an increase in homelessness. This is particularly relevant given the current economic situation with unemployment rising, housing foreclosures at an all-time high, and people both poor and middle class having a harder and harder time getting by. In fact, the Bureau of Labor cited Georgia as being second in the nation in loss of jobs as of September 2008, with over 22,000 Georgians losing their jobs in the last year. Thus, housing affordability is becoming a very important issue for many families living at the brink of needing housing assistance. What will happen to these people if they end up needing public housing? Where will these individuals and families go when public housing is gone? Aside from staying with family and friends, without public housing one of the only other options will be emergency homeless shelters, facilities that are already overburdened.

Health Conditions

Went into hospital and stayed there over a year. I had my leg amputated. After that I couldn't pay my rent so I came here to stay with my daughter. We had no other choice; I had no other choice. I was literally going to be homeless. (Public housing resident – community name withheld)

A national study of the HOPE VI project conducted by the Urban Institute found that public housing residents have much worse health than the general population. We replicate those findings in our study. Figure 3 presents the percent of our residents who reported their health as fair or poor, and reported being anxious often in the last four weeks. We also asked the respondents if they had ever been diagnosed with arthritis/rheumatism, heart disease, asthma, diabetes and high blood pressure. We include comparisons for the U.S. Black population for 2007 from the Behavioral Risk Factor Surveillance System (BRFSS) for comparable items. Almost twice as many public housing residents reported their health as fair or poor as did the U.S. Black population as a whole (37% compared to 20%). The residents also exhibit high levels of anxiety. Thirty-three percent of public housing residents said they felt anxious often or very often over the prior four weeks. Across all chronic conditions, public housing residents exhibit much higher rates compared to the U.S. Black population.

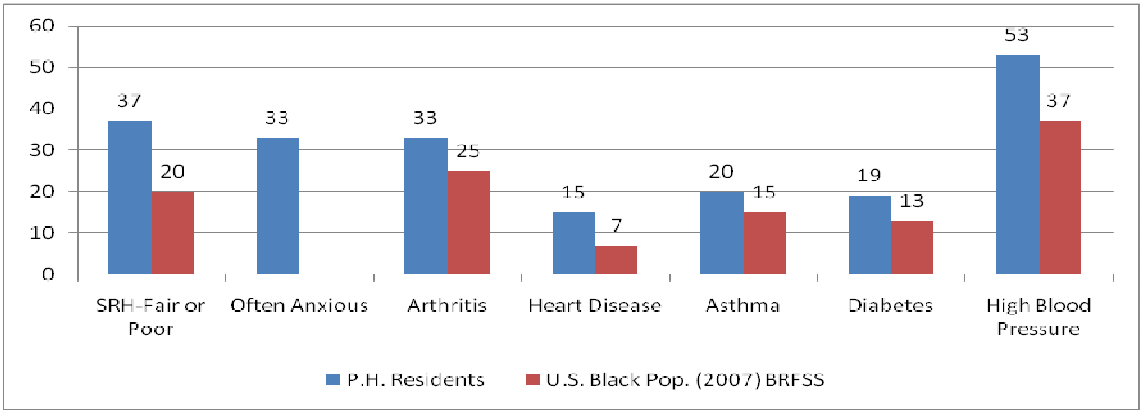


Figure 3. Self-Reported Health for Public Housing Residents & U.S. Black Population

Figure 4 examines these same health measures but decomposes them by type of housing community. Senior housing residents exhibit much worse health than family housing residents, but the poor health is located in both community types. Fifty-four percent of senior housing respondents reported fair or poor health and 28% of family housing residents reported fair or poor health. More family residents than senior housing residents reported being anxious often or very often over the last four weeks (37% vs. 27%). Family and senior residents also have higher levels of asthma (20%). For all other conditions, senior housing residents have considerably higher rates of chronic conditions compared to family housing residents.

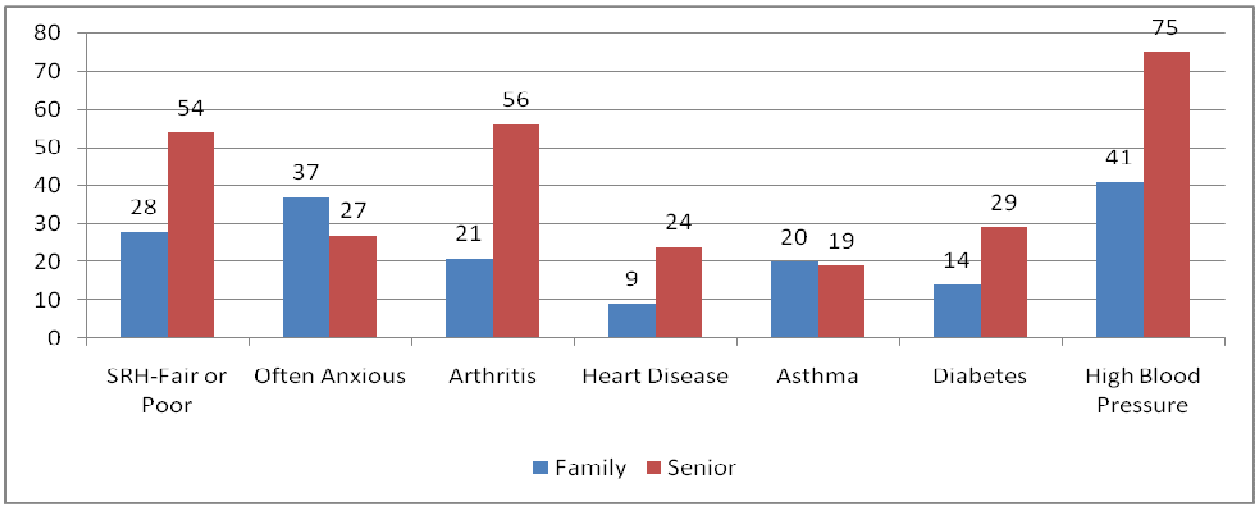


Figure 4. Health and Diagnosed Chronic Conditions by Type of Housing Community.

Previous research has suggested that one outcome of concentrated poverty is poorer health. Because public housing is associated with concentrated poverty, it's assumed in policy circles that living in public housing can lead to poorer health among residents. However, in our sample it appears that this relationship is reversed for a substantial number of residents. Figure 5 presents the percent of residents with a chronic health condition (from Figure 4), that were diagnosed prior to entering public housing. Across all conditions, 61% to 84% were diagnosed prior to entering public housing and the percentages are relatively equivalent regardless of community type.

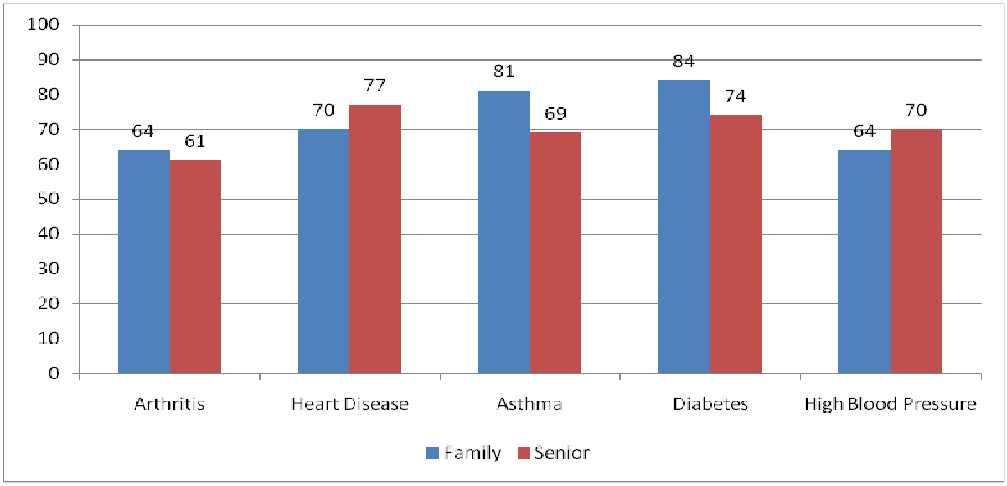


Figure 5. Percent That Were Diagnosed Prior to Entry Into Public Housing.

Hence our findings suggest that poor health is driving some individuals to enter public housing either because they have spent all their assets on treatment or can no longer work. These findings reinforce the efficacy of public housing as a safety net for low-income individuals and families who face chronic health issues.

Financial Security

I don't make much money. It's hard but at least here I know I can get by month-to-month. (Bowen Homes resident)

One of the major benefits of public housing is that it is affordable for people with very low incomes. We asked residents how much income from all sources they received in a month. On average, family residents received $762.00 per month (Figure 6). Residents of senior housing received an average income of $751.00 per month. This is extremely low income, but the rent in public housing is set at a third of resident's income. On average residents pay $267 or $221 per month in rent in family and senior housing respectively. For the most part, residents do not pay for utilities, making public housing even more affordable.

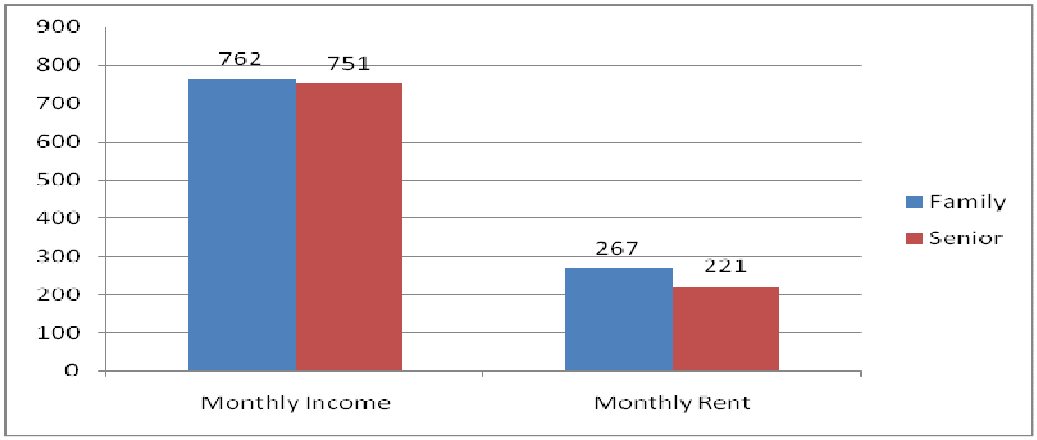


Figure 6. Monthly Income from all Sources and Monthly Rent Paid in Public Housing.

In relative terms, this is on par with what most people expect to pay for housing. However, for families that earn a net of $2,000 per month, after paying their rent or mortgage, they are left with $1,333 to pay for food, clothing, health, entertainment, transportation and savings. After public housing residents pay for their rent, they are left with an average of $530 to pay for food, clothing, health, entertainment, transportation and savings. The amount they pay for rent may be in line with expectations and be relatively similar to what the rest of Americans pay, but on an absolute level, it leaves them with far less money to afford the other necessities of life. If there are unexpected expenses to living in private-market housing, residents are going to be at serious financial risk.

We also asked the residents how their financial situation was at the end of most months: did they have more than enough money left over, some money left over, did they have just enough to make ends meet, or did they not have enough to make ends meet? Figure 7 presents the results, which are surprisingly positive considering the very low income levels. Although very few have more than enough money left over, over 30% have some money left over both in family and senior high rise housing, and about 50% of both family and senior housing residents have just enough money to make ends meet. Still, 12% to 15% of residents are not getting by. These results suggest that public housing provides some level of financial security. However, it does not provide an easy life for residents. Will life be as financially secure in voucher-subsidized private-market housing or will it be more expensive?

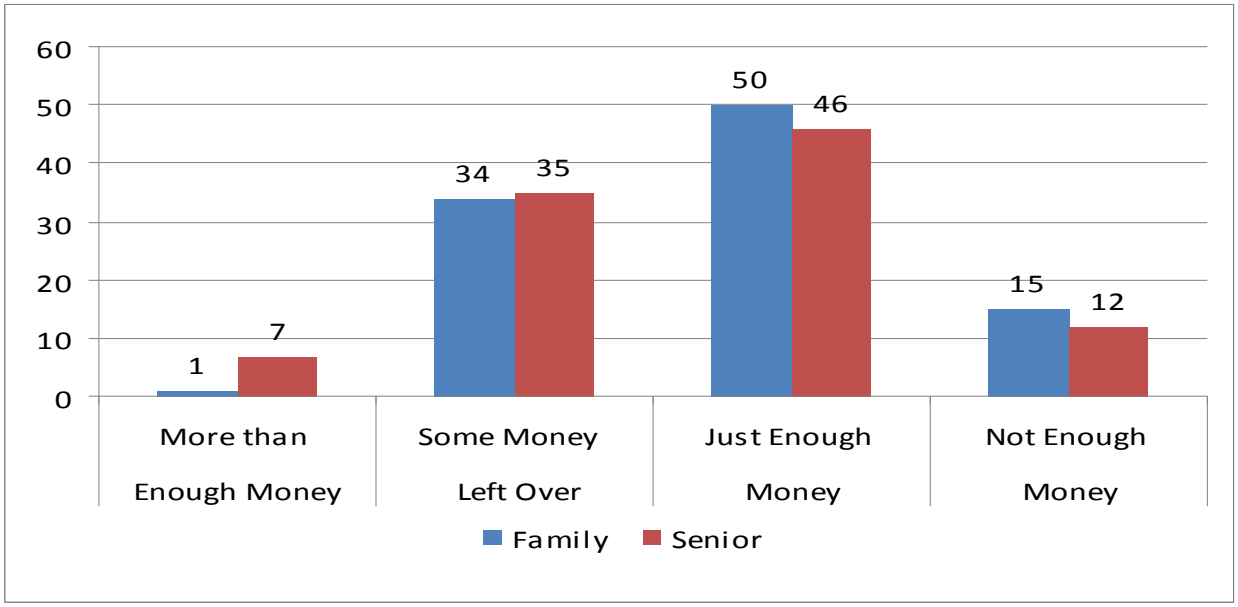


Figure 7. Financial Situation at the End of Most Months by Housing Type.

Figure 8 presents information on work status among those who are physically capable of working. Fifty-nine percent of family residents are working full or part time. Five percent of the respondents living in the family communities were retired. Eleven percent of residents in senior housing are working; with the majority retired (56%). Around 33% to 36% of both family and senior housing residents have another status, such as homemaker, student, or unemployed. Another 40%, not shown in the figure, are disabled and unable to work.

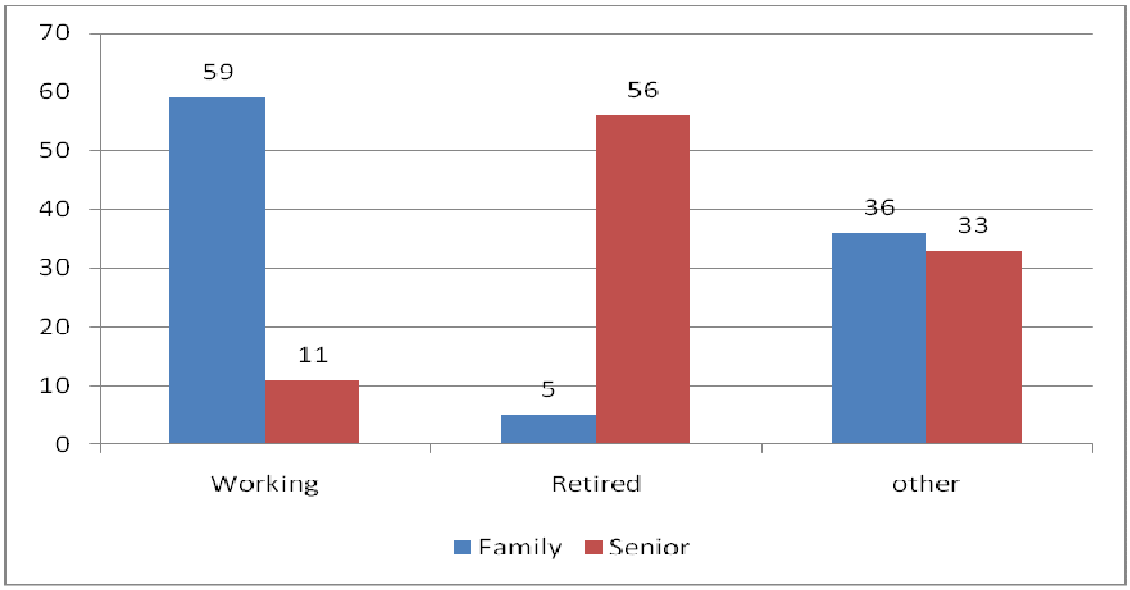


Figure 8 Work Status for Those who are Non-disabled.

While these findings show that the majority of able-bodied residents work across both types of communities, over half of the residents in the senior high rises are retired and therefore living on a fixed income. In addition, the fact that across both communities another 40% are either disabled or unable to work suggests that not only do these residents have special housing needs and that they are living on a fixed income.

The "other" category includes students (20%), full-time mothers (14%), and those who are unemployed (66%). Being a student means one is getting additional education that is likely to improve their employment options. How will relocating affect their ability to remain students and get their degrees? Likewise, a substantial number are unemployed which is not surprising considering the current economic situation. Thus, these individuals are particularly vulnerable to becoming homeless once relocated. And it is not clear as to whether the status of unemployed but able to work will even qualify these residents for a voucher.

Location and Transportation

It's easy to get to Grady, Atlanta Medical— It's easy to get anywhere in the city by public transportation. (Palmer House resident)

Transportation is important anywhere, but it is particularly important in a sprawling, low density city like Atlanta. Only 10% of senior high rise residents and 27% of family residents own a car or truck. This makes public transportation their primary mode of transportation. Currently 91% of senior high rise residents and 76% of family residents are less than 15 minutes from the nearest train or bus line. Thus, public transportation is very accessible for all public housing residents.

Figure 9 presents average transportation times in minutes for seniors and family housing communities by car ownership and public transportation. For family residents who work, transportation times average 42 minutes for those using public transportation compared to those who drive (24 minutes). Senior residents who work and take public transportation average 39 minutes compared to the 48 minutes on average for seniors with cars. For grocery stores, churches, and doctors or medical clinics, owning a car makes travel time only slightly shorter than for those using public transportation. Regardless of mode of transportation, it takes less than 30 minutes to get to most non-work places.

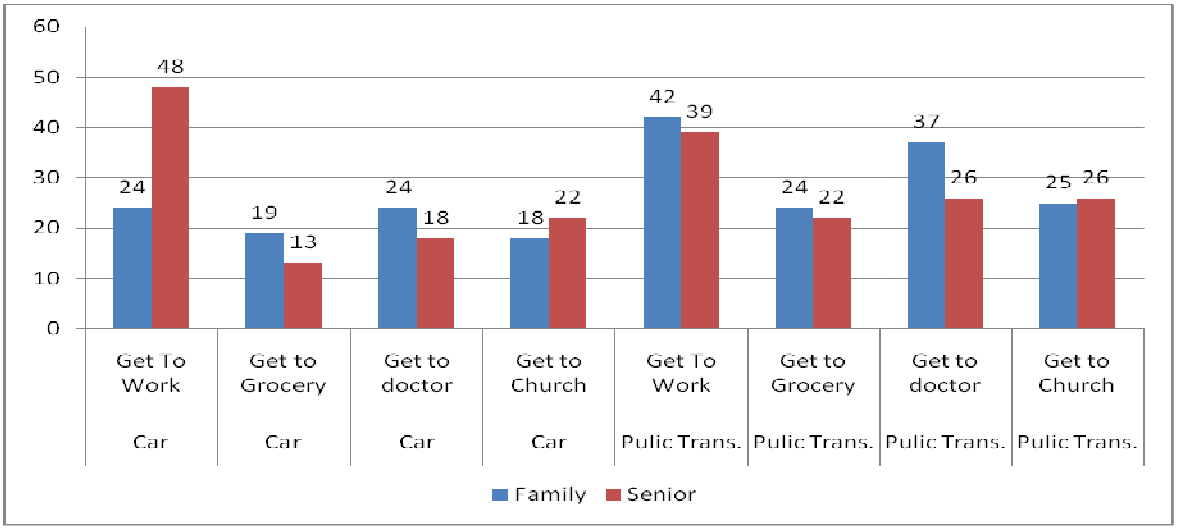
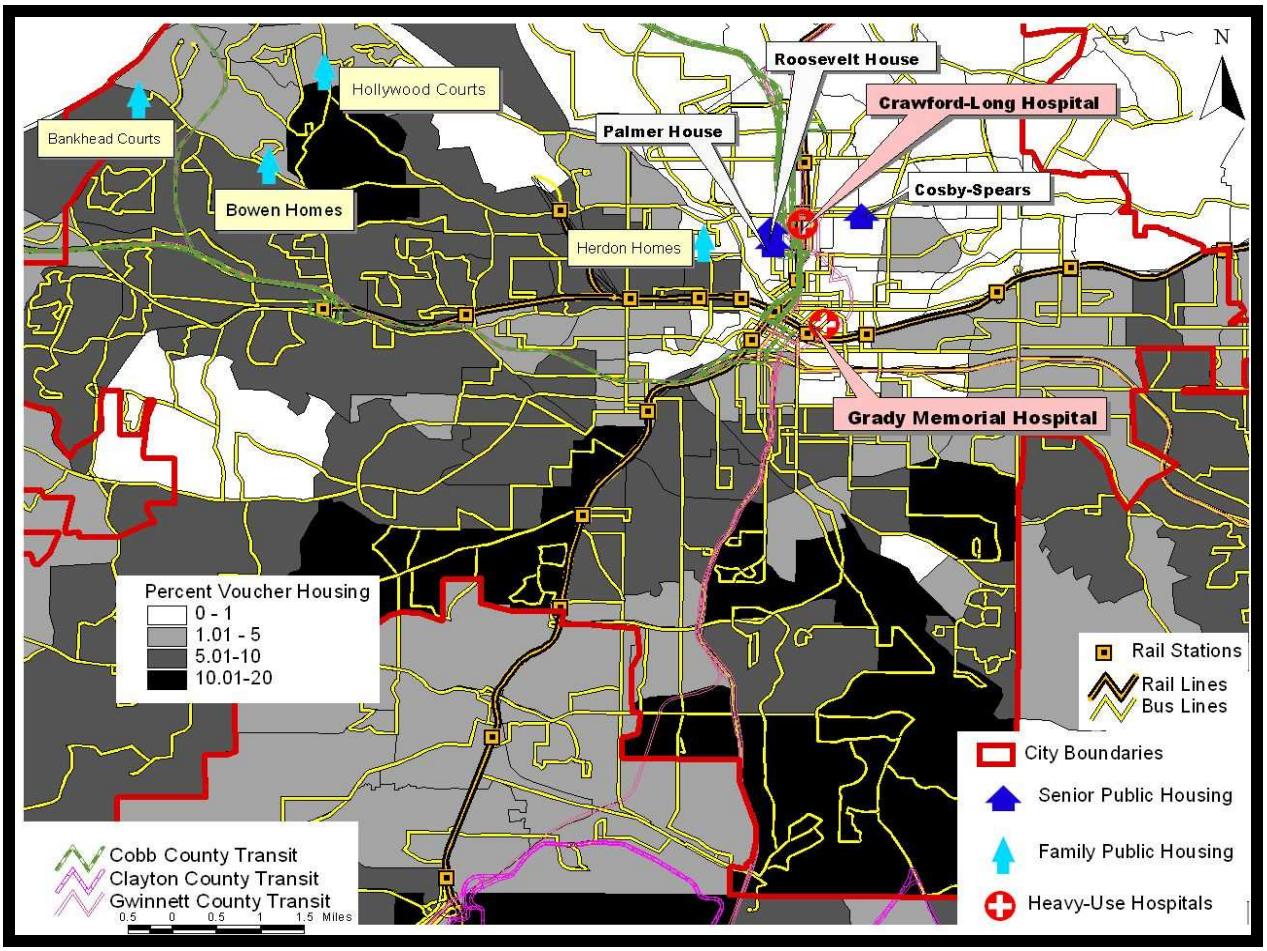


Figure 9. Mean Transportation Times in Minutes by Housing Type and Transportation Type.

How will relocation affect access to public transportation and travel times? Although we do not know yet where the residents we interviewed will end up, we do know where voucher housing is located. Map 1 shows the percent of voucher housing by census tract in relationship to public transportation lines and public housing location. The data source for voucher housing is HUD's Picture of Subsidized Housing, 2000.



Map 1 – Location of Public and Voucher Housing in Relation to Public Transit by Census Tract.

This map reveals some disparities between voucher-housing location and access to public transportation. While the tracts with larger percentages of voucher housing to the northwest have dense public transportation networks, tracts to the southeast and southwest with larger percentages of voucher housing do not. In fact public transportation lines appear to decrease substantially going south from the city center where many of the tracts contain more than 5% voucher housing. This raises concerns about whether public housing residents will have the same access to public transportation once relocated.

Lack of ready access to public transportation for a population dependent on it could negatively affect residents' lives in terms of their ability to get to work, needed services, and other destinations of importance. This could also add to monthly living expenses.

Desire to Relocate

I just love my home, love my neighbors, feel comfortable, people come over and feel welcome. I like to sit out on the porch with neighbors and friends and talk. The neighbors respect me. (Bowen Homes resident)

Not everyone wants to move. This may not matter to those involved in the policy decisions, but for many public housing residents their homes and where they live grounds them in their everyday existence. We asked for their opinions about whether they would like to fix-up their current building structures or be relocated. We also asked them if they were ready to move now. Figure 10 presents their responses. More than 60% of senior residents and 32% of family residents would prefer to fix-up their current public housing building structures rather than relocate. Seniors are twice as likely to want to stay in their current homes rather than be relocated. This is evident in the "ready to move now" question as well. About 62% of family residents are ready to move now while only 34% of senior housing residents are ready to move now. This suggests that there may be important differences in living situations, service needs and attachment to home between senior and family communities.

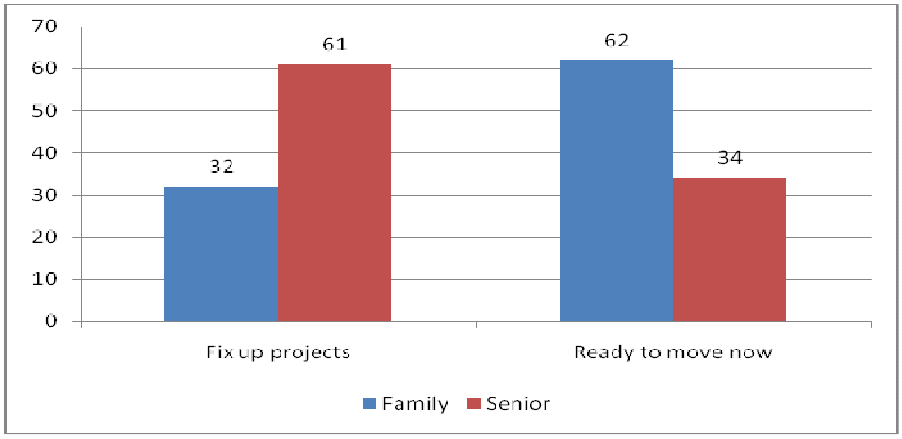


Figure 10. Percent Desiring to Fix Project and Percent Ready to Move.

To understand the meaning of home, we asked an open ended question, "What is special to you about your home?" A few claimed there was nothing important about their home (first category, Figure 11). The second category, *physical structure*, refers to people being thankful that they and/or their children have a roof over their heads, indicating minimal attachment. The next category, *abode*, indicates that residents appreciate the physical features of their apartment. For example, several residents mentioned liking their balcony or their washing machines, or having separate bedrooms for their children. The third category, *heart*, indicates that residents feel ownership and emotional attachment. The fourth category, *privacy or security*, indicates that residents feel safe in their homes. The fifth category, *rootedness or community*, means that residents feel rooted in their communities. The final category, and most attached level, is called *paradise*, which is a particularly middle class sentiment and none of our respondents fit in that category.

Figure 11 shows how residents responded to this question sorted by housing type. About 8% of senior high rise residents and 13% of family residents felt no attachment at all; 14% to 17% across both community types indicated *physical structure*; and 26% of senior high rise residents and 22% of family residents indicated *abode*. But the largest response rates across both community types was for the category *heart*, indicating relatively strong attachment. Thirty-two percent of family and 26% of senior high rise residents are emotionally attached to their homes. Almost 17% of senior high rise residents and 8% of family residents feel a sense of *security* or *privacy* in their apartments, and 7% of senior high rise and 10% of family residents feel a sense of *rootedness* or *community*, which is a very strong attachment. This means that to uproot and relocate residents could result in emotional harm.

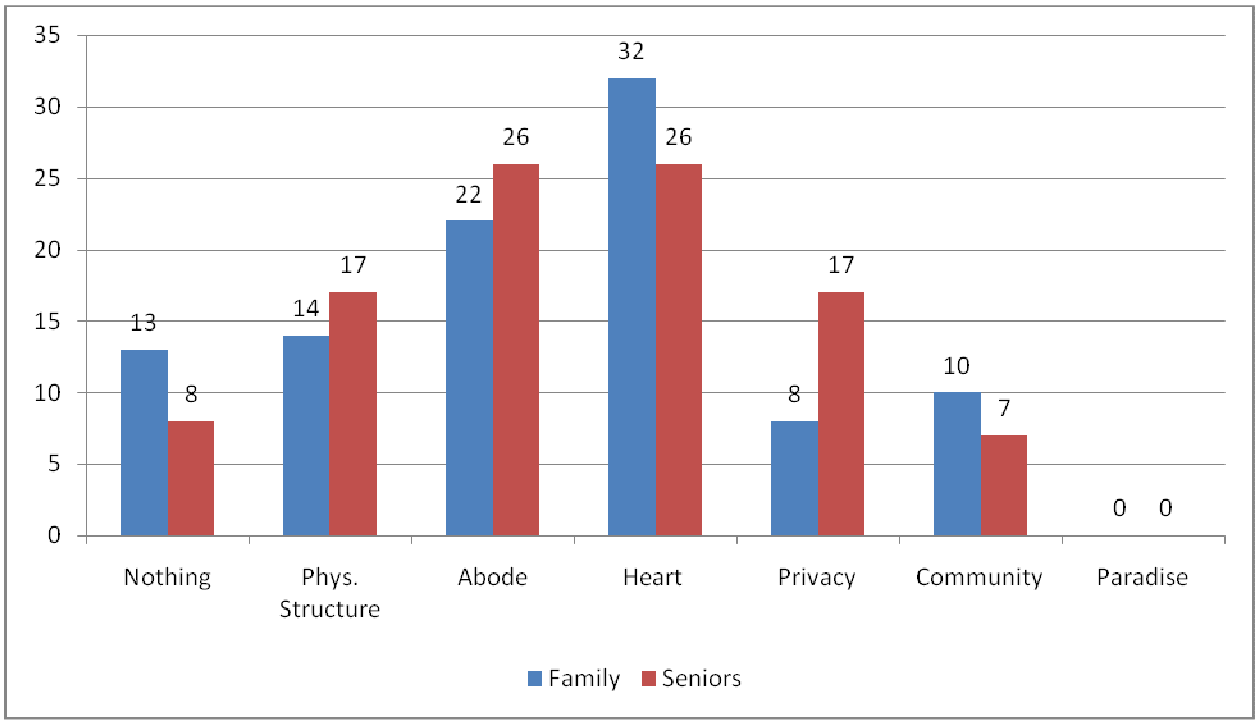
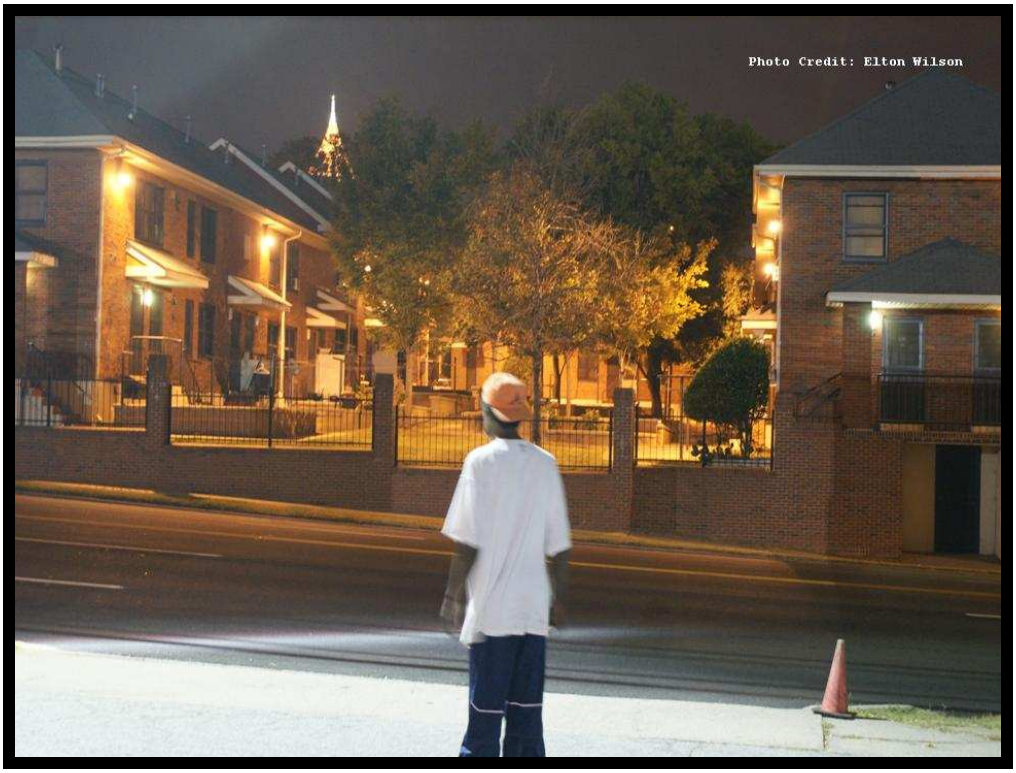


Figure 11. Meaning of Home by Housing Type.

Building and Neighborhood Conditions



It's a nice place to live—I feel safe. If they could just update it with A/C, carpet, and maybe the bathrooms could be upgraded and the kitchens need a facelift. But the buildings are solid. (Roosevelt House resident)

There are people here stealing cars, robbing people, been in jail 3 or 4 times and they still don't care. And the cockroaches are all over the place. They're big and crawl everywhere. (Herndon Homes resident)

By and large residents across both communities think their buildings just need upgrading. Pests, particularly cockroaches, appear to be the biggest problem. We asked residents to rate the condition of their current home as excellent, good, fair or poor. Figure 12 shows that 43% of family residents and 62% of senior high rise residents rated their homes as good or excellent. We also asked if the residents thought their buildings were run down beyond repair. About one-third (32%) of family and 14% of senior high rise residents, thought the buildings were beyond repair.

Next we asked about a number of problems that the residents may have experienced in their homes such as a leaky roof, plumbing that does not work, broken windows, electrical problems, pests such as cockroaches and mice, water damage and if the water damage was corrected quickly, broken appliances such as stoves and refrigerators, peeling paint, and if the furnace worked poorly. Figure 12 shows that for the most part, few of the residents experienced any of the problems. The major problem appears to be pests (59% in the family communities and 71% in the senior high rises) and as we are in the South, cockroaches more than mice are the main pest found in public housing. Water damage was the next most reported problem (17% and 30% respectively), but it seems as if the housing authority does a decent job of repairing water damage in a timely manner (53% and 82% respectively). Overall, the high positive rating and the low percentage of belief that the buildings are decrepit suggests that the public housing living situation is adequate.

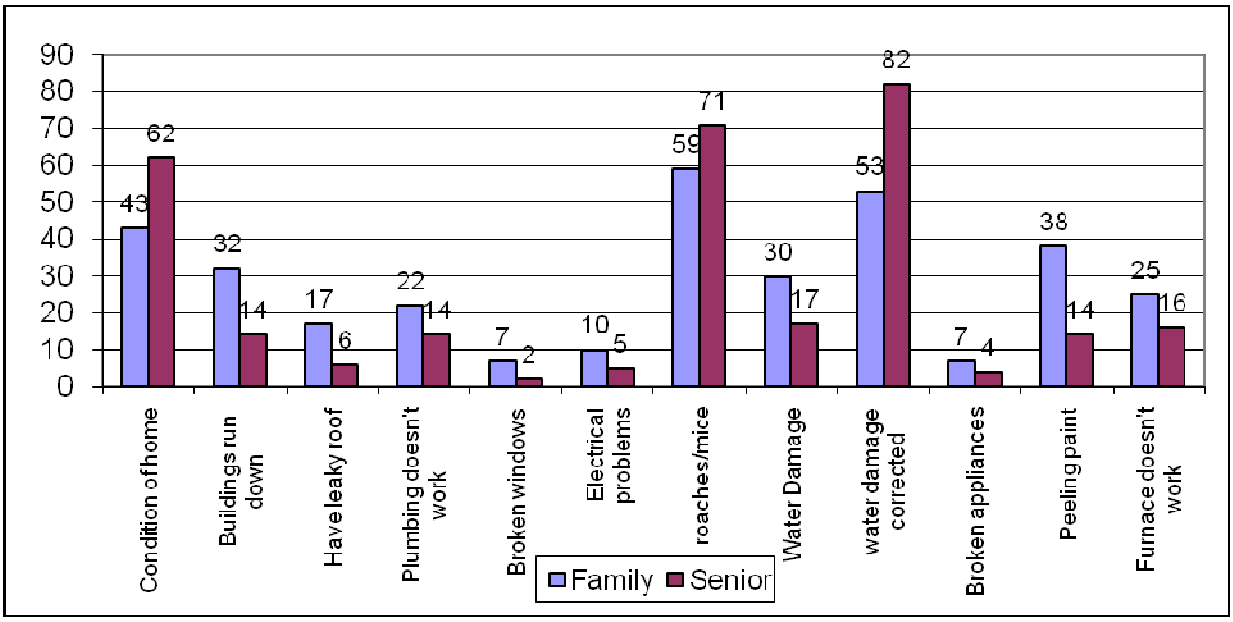


Figure 12. Perceptions of Current Apartment.

Perceptions of neighborhoods differ by community type. Figure 13 presents several dimensions of neighborhoods. The graph shows the percent that agree or strongly agree with the statements presented. The first half of the figure consists of positive statements and the second half consists of more negative statements. Overall, residents of senior housing were more likely to agree with the positive aspects and less likely to agree with the negative aspects compared to family housing residents. Sixty percent of senior residents compared to 30% of family residents are satisfied or very satisfied with their neighborhoods. Senior high rise residents are also more likely to think their neighborhoods are good places to raise children (55%); feel that people are willing to help others (63%); and that people in their neighborhoods can be trusted (55%) compared to family residents. Likewise senior high rise residents feel more attached to their neighborhoods compared to family residents. For example, seniors are more likely to feel like they are at home

in their neighborhoods (84%) compared to family residents (50%); are more likely to miss it if they have to move (70%); and 80% feel that their neighborhood is important to them.

As for the negative attributes of neighborhoods, family residents are twice as likely to say there is too much crime and violence (83%) compared to senior high rise residents (42%). Family community residents are also more likely than senior high rise residents to say that there are too many abandoned buildings in the neighborhood (46%); police are not available when you need them (63%); there is not enough public transportation (26%); parents not supervising their children (77%); and residents are unable to find jobs in the neighborhood (62%).

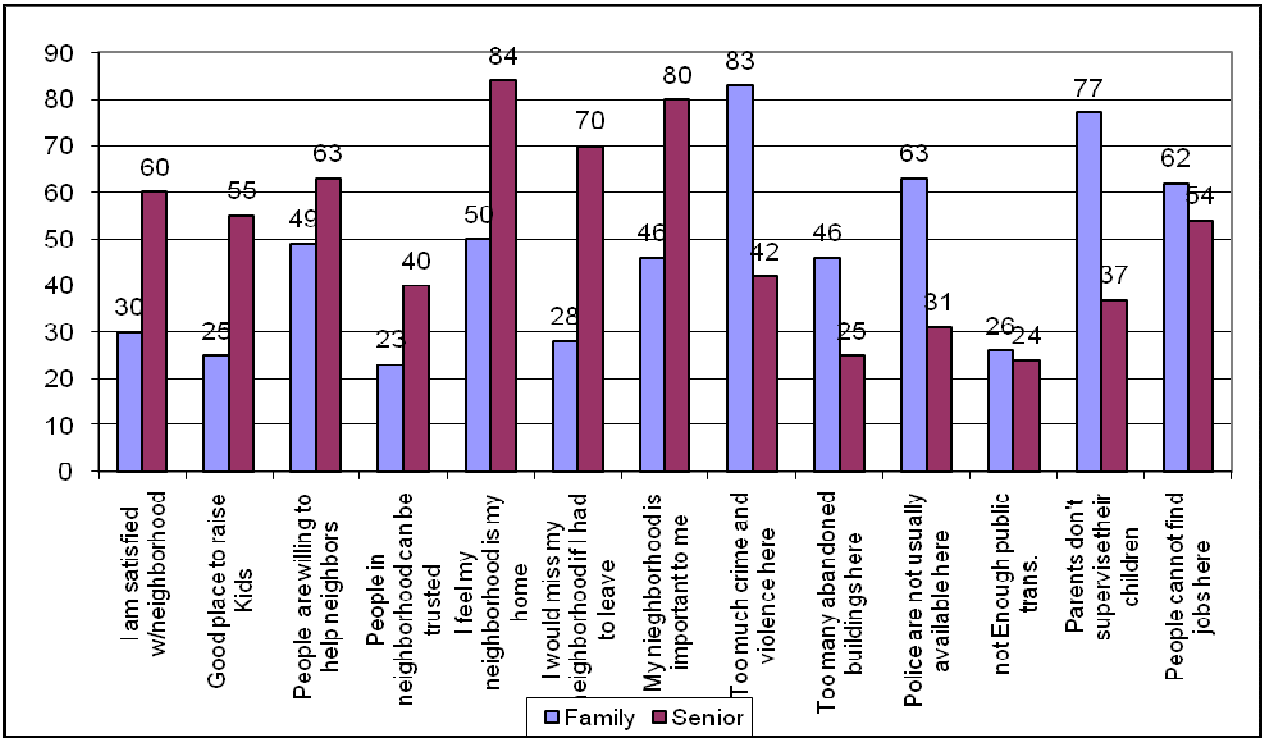
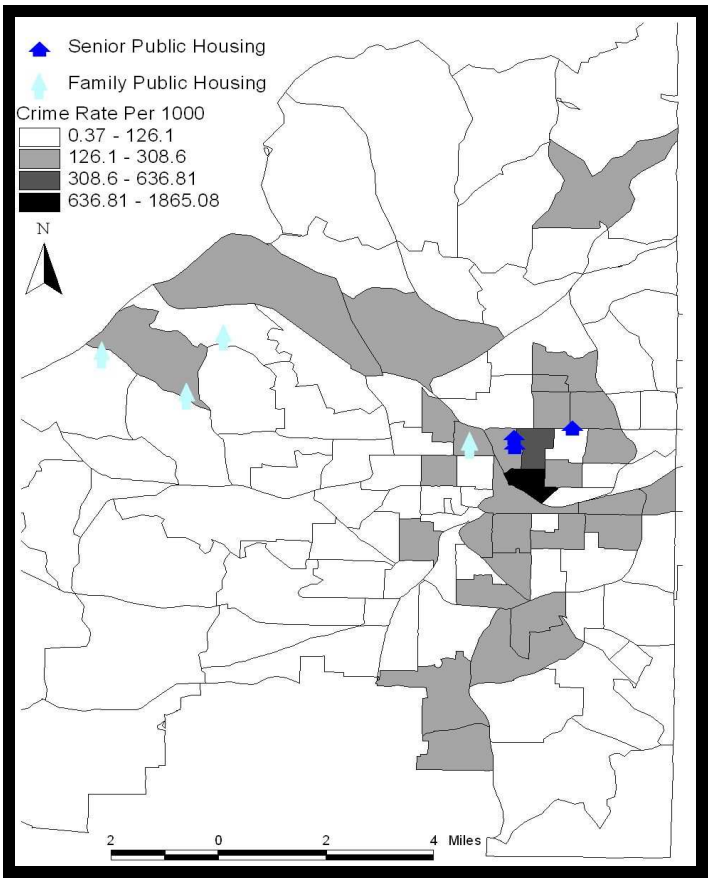


Figure 13. Perceptions of Neighborhood by Housing Type.

High crime is frequently cited in policy circles as one of the results of concentrated poverty and justification for public housing demolition and relocation. So we wanted to examine how residents' perceptions about crime in their communities compared to the actual overall crime rate. Map 2 shows the location of public housing in relation to the overall crime rate (per 1,000) for 2007. The crime data was drawn from the Atlanta Police Department incident reports, which are publicly available. Interestingly the map shows that the overall crime rate is lower (37 to 126 per 1,000) in the family community neighborhoods than the senior high rise ones (126–309 per 1,000). Several census tracts near the family communities have a crime rate of 126 to 309 per 1,000 but there are no census tracts with a crime rate higher than that anywhere near the family communities. Near the senior high rises, however, there is one tract with a crime rate of 309 to 636.81 per 1,000 and another with a rate even higher than 636.81. This last category represents the highest crime rate by census tract in the city. Thus, despite the fact that half as many residents in the senior high rises as those in the family communities say there is too much crime, it is the senior communities that are located in closer proximity to the higher crime areas.



Map 2. Overall Crime Rate In Relation to Public Housing Location by Census Tract.

What accounts for these discrepancies? It could be that many incidents in and around the family communities go unreported, although we have no way to substantiate that this is the case. Another reason may be that Bowen Homes has had a disproportionate number of the city's homicides over the last several years, and this has received a great deal of media attention. This in itself may affect residents' perceptions. A young teenage boy, an innocent bystander, was shot and killed on the Bowen Homes premises. This was seen as a great loss within the community and the residents constructed a memorial for the teenager at the site of the incident (see the photograph on the next page). The residents talked a lot about how the source of the crime comes from people who do not reside at Bowen.

Bowen Homes is located in relatively close proximity to the Bankhead and Hollywood Courts communities. Whether legitimate or not, Bankhead Courts has a reputation as being a high crime area as well even among nonresidents. Hollywood Courts is virtually crime free and seems to have escaped the high crime perceptions attached to the other family communities.

Senior high rise communities, on the other hand, are more centrally located where the density of residential and commercial buildings is very high. In addition, until a few months ago the Atlanta Police Department headquarters was located in very close proximity to the high rises. Thus, the police presence is very apparent and it could be that more incidents are reported and more offenders caught.

Bowen Home residents made this memorial for the young teenager, an innocent bystander, who was shot and killed there.

It makes no sense, he was just there. He was a good kid. Why did they take this young life from us? Most of the residents here are good citizens but some real bad people come in here. I wish they'd stay away.

(Bowen Homes resident)

Senior Housing

It's in midtown and I love that. There's lots of green grass and flowers. It's a really nice neighborhood and it feels good to walk through it. I feel safe in my apartment. (Cosby Spears resident)

Senior housing communities are centrally located near many amenities and services that benefit the older adults and disabled persons who live there. These are very desirable neighborhoods that are rapidly gentrifying. This is reflected in residents' perceptions of buildings and neighborhoods. Table 2 shows the average characteristics of the neighborhoods surrounding the family and senior high rise communities. The senior high rises are located in neighborhoods that are racially diverse while the family communities are racially segregated. The unemployment rate is high in both neighborhood types at 13% in neighborhoods surrounding senior high rises and 18% in neighborhoods surrounding family communities. Family communities are located in neighborhoods with concentrated poverty (defined as 40% or more families under the poverty line) while senior high rises are located in neighborhoods with somewhat less poverty (32%). Senior high rises are located neighborhoods with considerable high end residential and commercial construction. This partially explains the higher median income of the neighborhood; the level of racial diversity; and the greater percent of vacant housing compared to the neighborhoods of family communities.

Table 2. Average Census Tract Characteristics of Neighborhoods Surrounding Senior and Family Projects in Atlanta		
	Senior	Family
Percent White	38.7	0.7
Percent Black	55.6	98.2
Percent Hispanic	1.2	0.7
Percent Asian	3.6	0.2
Percent Unemployment	13.1	18.1
Percent Poverty	32.2	44.1
Median Household Income	$27,891	$20,033
Percent Vacant Housing Units	11.5	6.7

Source: U.S. Census, 2000.

These neighborhood conditions suggest that the goal of deconcentrating poverty does not apply to the senior high rises in Atlanta. In addition, the total number of senior public housing residents is only a very small portion of the total population of the area. What will demolishing these communities and relocating the residents accomplish in relation to the stated policy goals of public housing transformation?

Likewise, the fact that the majority of the senior high rise residents like their neighborhood and would rather stay than move begs the question: How will relocation improve their lives?

I say they are pushing us poor old folk out of town, they just don't want us here. They think all these new richer ones don't want us around. But we don't cause any trouble. (Palmer House resident)

Concerns about Relocation

I feel like I will be isolated when I move. But I don't worry, I just pray. (Roosevelt House resident)

We asked residents about the upcoming relocation (all results appear in Figure 14 on the next page). First we asked if the residents were confident they would find a place to live that is as good as or better than the home they are currently living. Half of the family residents (55%) and 40% of senior high rise residents are confident their new homes will be as good or better. However, we also asked if any of the following would be a problem after relocation: paying the security deposit; getting to and from their jobs; getting help from a neighbor in an emergency; and getting to their doctor. Answers to these questions reveal that the level of concern about how relocation will impact their everyday lives is quite high.

Coming up with the security deposit (down payment) appears to be of greatest concern (70%) across both types of communities, although it is our understanding that the AHA covers this expense. Likewise, receiving help in an emergency from neighbors was also a major concern across both types of communities (62%). Residents were also concerned about being able to get to their doctor with over 40% of family residents and 59% of senior high rise residents citing this as an issue. Being able to get to their jobs was the least problematic with 38% of family and 55% of senior high rise residents citing this as a major concern.

Finally we asked how they felt about the upcoming relocations. We asked if their future felt uncertain and insecure since hearing about the relocations; if they've been having trouble sleeping since hearing about the relocations; if they were excited to move to subsidized housing; if they were worried about being able to pay both rent and utilities; if they felt subsidized

housing would not be very stable; and if they were worried that there were not enough subsidized homes available for everyone.

Results presented are for those that agree or strongly agree with the statements versus not agreeing. Few of the residents are having trouble sleeping (9–18 %), but close to a third feel that their future is insecure or uncertain (30%). Residents from family communities are more excited to move (66%) than are residents from senior housing (29%). At the same time residents from family housing are more concerned about being able to pay both rent and utilities (55%); are more concerned about the instability of subsidized homes (36%); and are more worried that there will not be enough homes for everyone (53%) compared to senior housing residents. One implication of these findings is that although family residents view relocation as a real opportunity to improve their lives, they still have serious concerns about housing availability and affordability, regardless of the fact that their rent and utilities will be subsidized. Given the state of their finances, these are valid concerns.

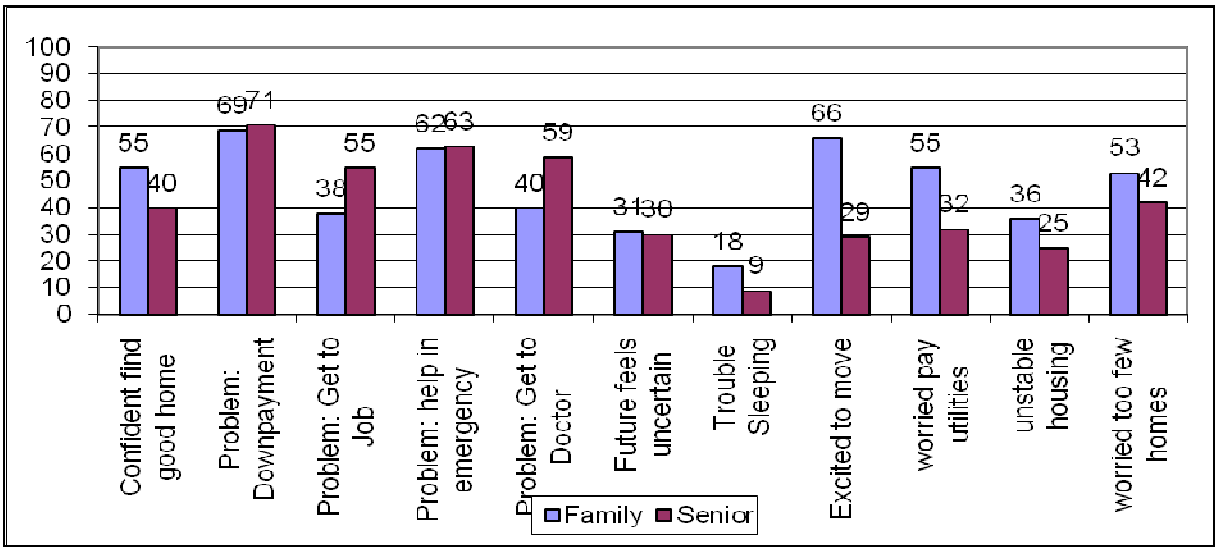
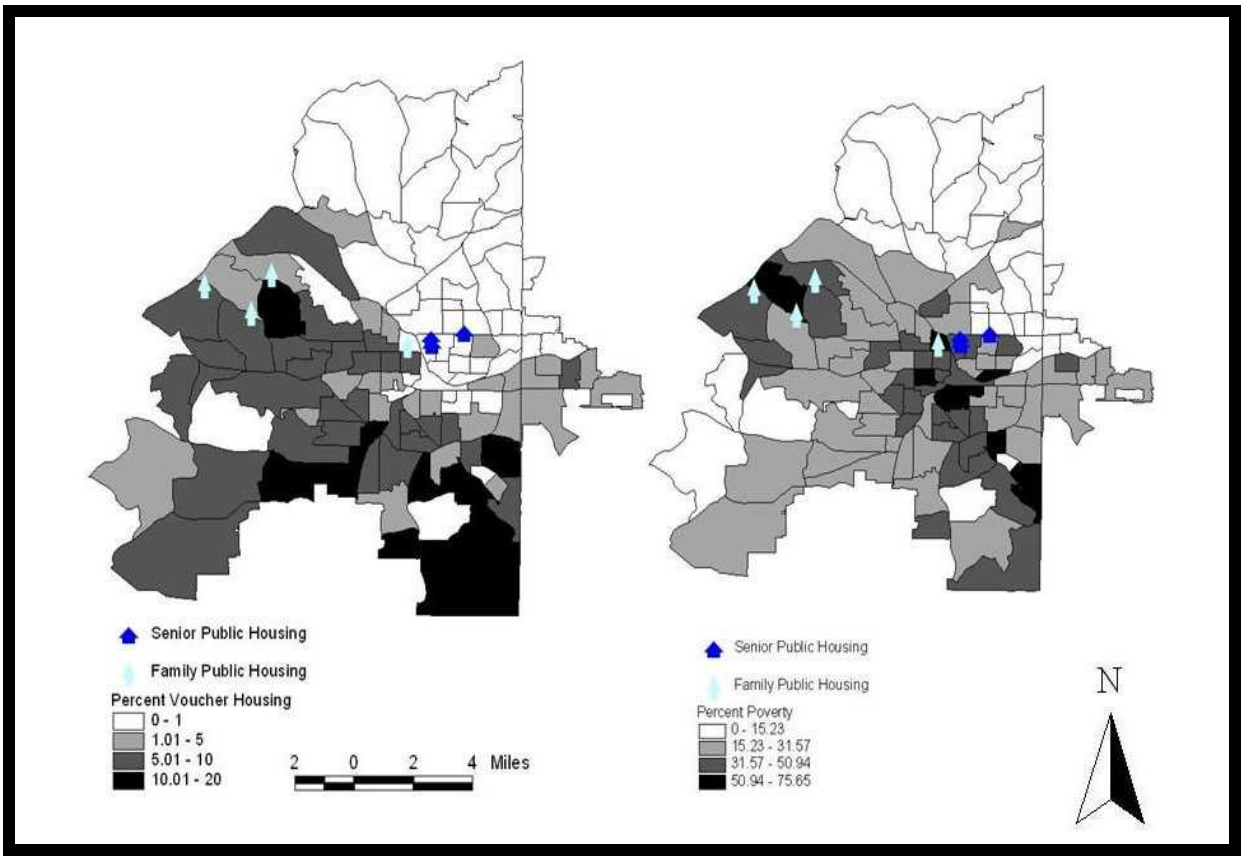


Figure 14. Concerns and Feelings About the Relocations.

Prominent in the policy rhetoric surrounding relocating public housing residents with a voucher to private-market housing is that residents can use their voucher to find a home and neighborhood of their choice. Likewise, since residents are moving to private-market housing, the implication is that the neighborhoods will be much better than those surrounding public housing. This sounds ideal—who wouldn't want that—but the caveat is that a voucher is of no use if the landlord is unwilling to accept it. Many landlords do not accept vouchers for a variety of reasons. Thus, public resident relocation "choice" is actually constrained by what landlords and in which neighborhoods will accept vouchers.

So what can public housing residents realistically expect out of their relocation housing? Although we cannot yet provide any substantiated empirical evidence concerning housing conditions and housing expenses, we can provide some information about where voucher housing is located and the corresponding neighborhood characteristics within the city boundaries.

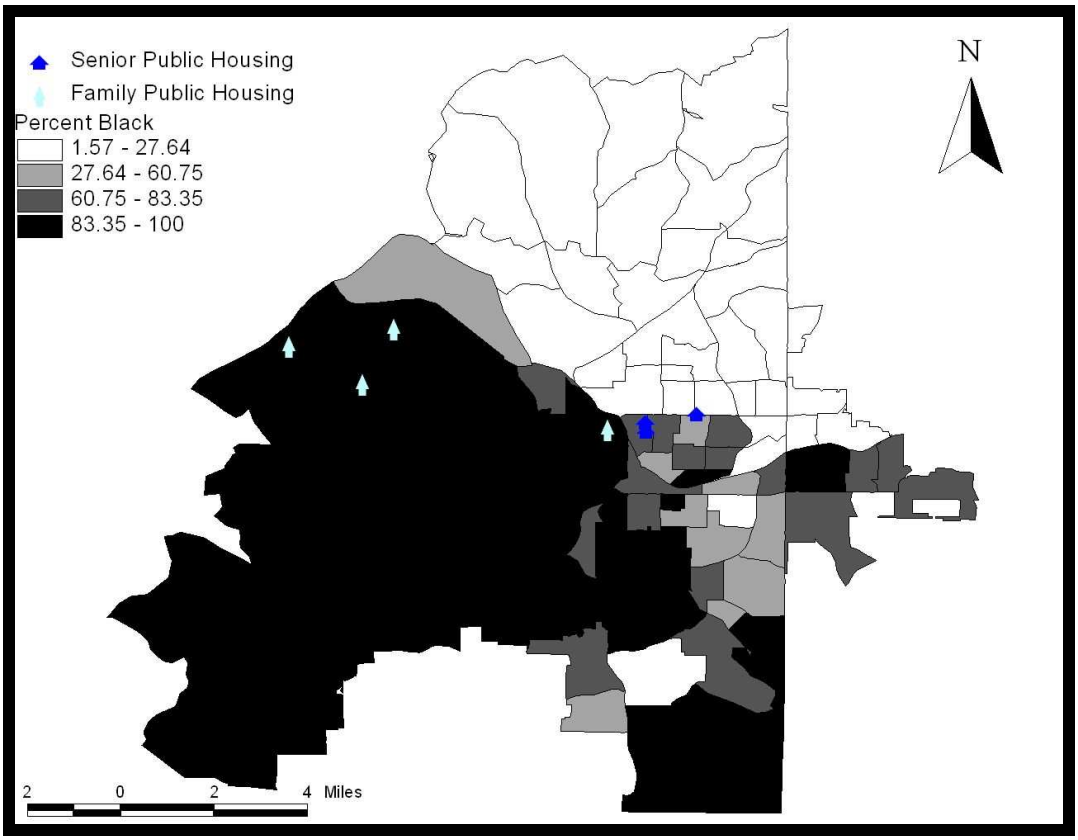
Maps 3 and 4 show where the majority of voucher housing was located, as well as poverty levels by census tract for the year 2000. The maps also show voucher housing locations and poverty levels in relation to the public housing communities in our study. The data on voucher housing came from HUD's Picture of Subsidized Housing, and poverty from the 2000 U.S. Census data.



Maps 3 and 4. Percent Voucher Housing and Percent Poverty in Relation to Public Housing.

These maps show that tracts with the higher percentages of voucher housing are by-and-large located in tracts with poverty rates ranging from just over 15% to almost 51%. The area to the far north of the city where the least poverty is present is also where the least voucher housing. This suggests that the majority of public housing residents' relocation choices within the city limits are spatially constrained to the southwest and southeast sides of the city, which have much higher poverty than the northeast and upper northwest portions. In addition, the maps show that there are higher percentages of voucher housing available in close proximity to the three family communities in the northwest quadrant of the city, suggesting that some residents will not be moving very far from public housing when relocated. Thus, how will relocation of public housing residents with vouchers achieve the major policy goal of deconcentrating poverty?

Another question concerning destination neighborhoods is whether or not relocation will accomplish greater racial integration within the city. Map 5 shows the percent Black by census tract within city boundaries for the year 2000. While it is very clear that the family public housing communities are located in majority Black neighborhoods, it is also clear that if we compare Map 5 to Maps 3 and 4, a relationship between higher percentages of voucher housing, higher percentages of poverty, and higher percentages of Black residents is just as evident.



Map 5. Percent Black by Census Tract.

In fact we can graph such trends. Figure 15 illustrates that as the percent of voucher housing increased so do the percents for Black people and poverty.

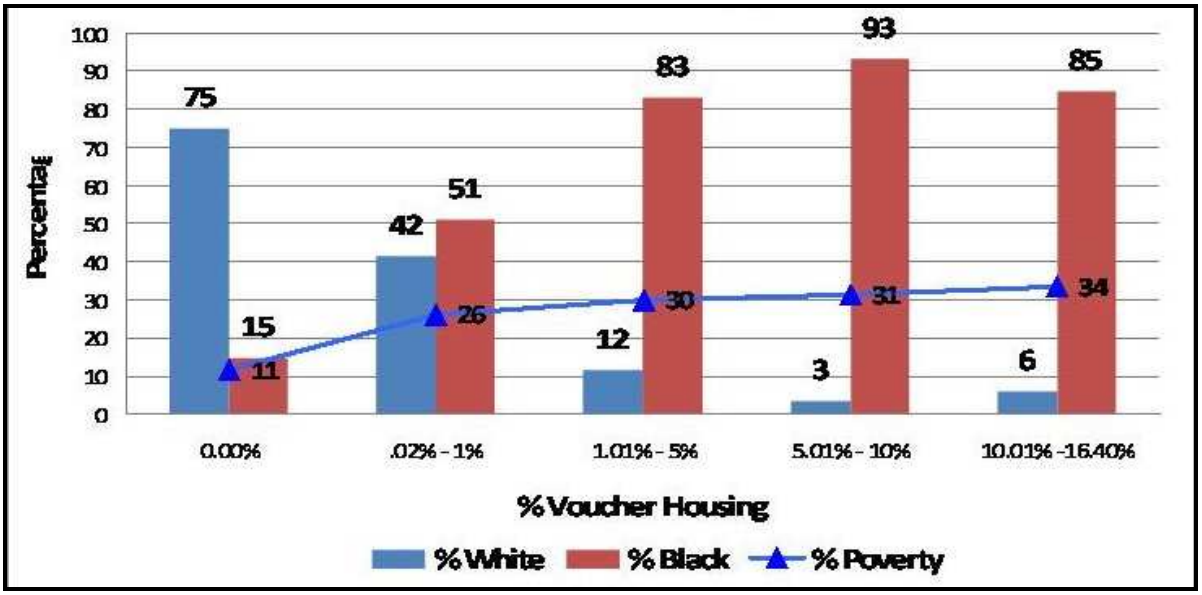
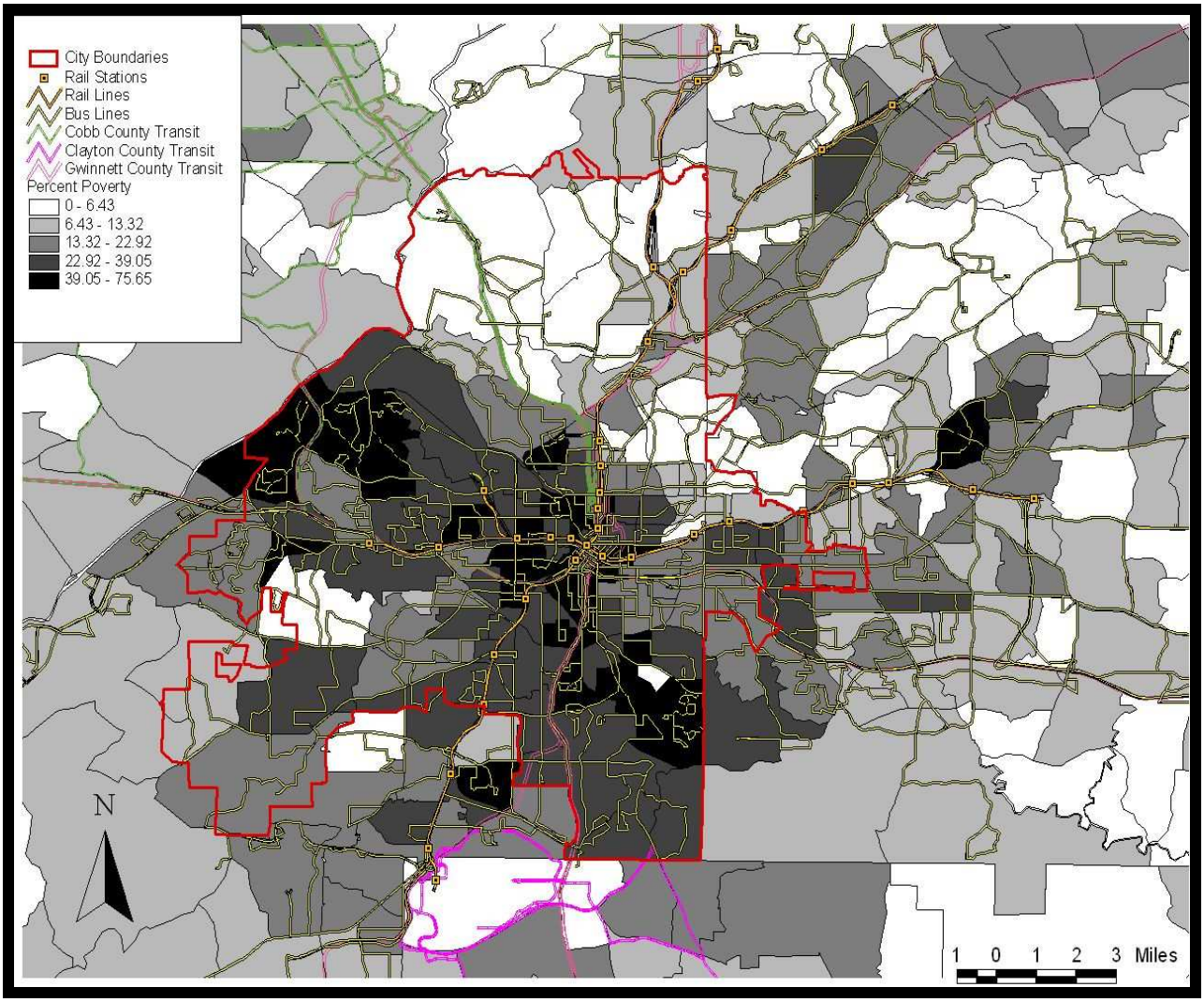


Figure 15. Percent Voucher Housing Compared to Poverty and Race by Census Tract.

One implication is that in order to really achieve poverty deconcentration public housing residents need to be relocated either to the northern section of the city or outside the city limits altogether. The northern end of the city is very affluent and predominantly White. Although there are plenty of rental units in this area, most are not affordable even with a subsidy for public

housing residents. That leaves relocating residents outside the city limits. What are the patterns of poverty for the greater Metro Atlanta area and where could public housing residents move to escape high poverty neighborhoods? How would this affect access to public transportation? Map 6 shows percent poverty for 2000 by census tract in relation to public transportation systems for the Metro Atlanta area.



Map 6. Percent Poverty for the Greater Atlanta Metropolitan Area in Relation to Public Transit.

Map 6 clearly illustrates that there is significantly less poverty outside the city limits in virtually every direction. However, with the exception of transit lines into east central and the far northeast, public transportation is either sparse or completely nonexistent. Thus, while relocating outside the city would result in destination neighborhoods with less poverty, there is a trade off in terms of access to public transportation. And because public housing residents are largely dependent on this form of transportation, how will they get to their jobs and needed services?

Conclusion

Will there be community centers for the children like we have here? *(Bowen Homes resident*)

Housing authorities around the country argue that demolishing project-based public housing and moving residents to housing of their choice with a private-market subsidy leads to poverty deconcentration and better living conditions. As Atlanta's Housing Authority Chief Executive Officer, Renee Glover, has stated, "This closes the door on warehousing families in distressed communities and poverty" (Atlanta Journal Constitution, 6/23/08, C1). Few would argue against this goal. However, it is unclear whether or not it is actually being accomplished in Atlanta and elsewhere. The maps of voucher housing location in this report show that for the most part, such housing is located in high poverty, majority Black neighborhoods in the city, mirroring findings from other cities. This raises an important but unaddressed policy question: Are these public housing transformation policies actually deconcentrating poverty or merely reconcentrating it in other neighborhoods?

Our findings also point to the value of public housing as a needed low-income housing resource. Shortages of affordable housing have increased since the early 1980s with a corresponding increase in homelessness among poor families. At present our economy is in crisis and an increasing number of Americans are losing their jobs. We found that many residents entered public housing because they fell on hard times and had no other options. Where will individuals and families who end up in such circumstance go when public housing is no longer available?

Likewise, we found that there is financial security in public housing because it is so affordable. By and large the residents we interviewed were able to live within their means in public housing even though their monthly incomes were extremely low. Will subsidized private-market housing

offer equivalent financial security? Even residents who want to move have concerns about increased living expenses once relocated.

A related factor is that public housing is in close proximity to public transportation, which the majority of the residents depend on. It is unclear whether relocation will compromise easy access to public transportation and whether or not decreased access might increase living expenses and make it more difficult to travel to jobs and needed services.

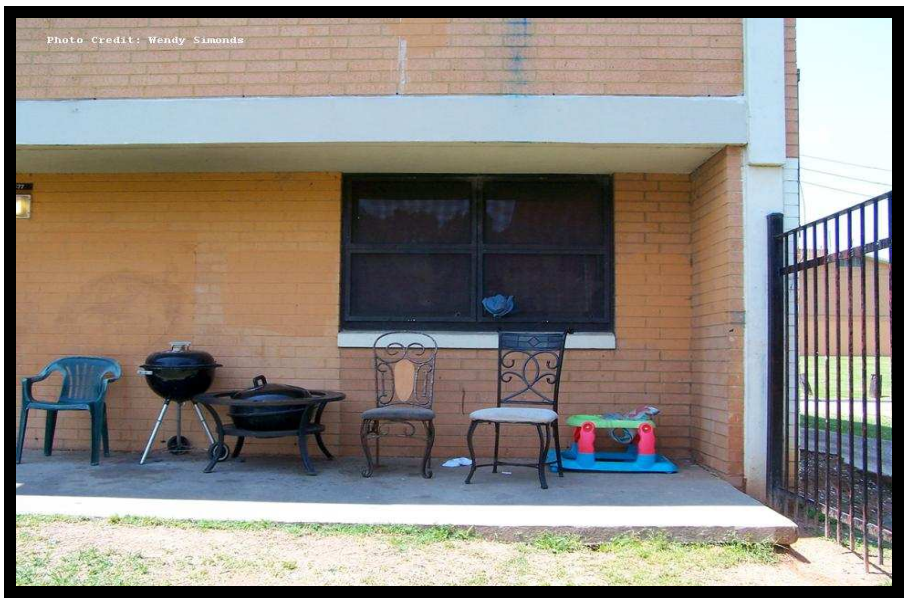
Compared to the general population, public housing residents are in poorer health with 28% of family housing residents and 54% of senior housing residents rating their health as fair or poor. In addition, 60% to 80% of the residents with chronic health conditions such as high blood pressure, diabetes, asthma, heart disease and arthritis were diagnosed prior to entry into public housing, suggesting that coming to live in public housing may be related to a pre-existing health condition. It also suggests that easy access to needed services is important to these residents' lives.

Of particular relevance to residents in the senior high rises is the fact that this housing is centrally located near many amenities that benefit these residents. The neighborhood conditions of senior housing differ from family housing: there is far less poverty and more racial integration. In fact poverty levels in these neighborhoods do not meet the established definition of concentrated poverty (40% or more). This raises questions about why these communities are being demolished if the overall goal of public housing transformation is to deconcentrate poverty.

Lastly, not everyone wants to move; there is a large discrepancy based on age, tenure and circumstances. While 62% of family housing residents want to move, only 34% of senior housing residents do. Likewise, given the option to fix-up their communities versus relocating, 61% of senior housing residents and 35% of the family housing resident would prefer this option.

Taken together, our findings suggest that a "one size fits all" approach to public housing transformation may not be the best policy given residents' varying health and service access needs. At present, stated policy is that residents have a choice—they can take their voucher and move to a neighborhood where they want to live. But what about all the residents who do not want to move? This policy presents a choice with no options. Additionally, given the various constraints of a housing voucher it is unclear whether residents will actually end up in a neighborhood of their choosing. This is particularly relevant to residents living in the senior communities who have multiple service and mobility needs, which are currently addressed by the convenient location of these buildings. Will subsidized private-market housing offer the same level of access? And if not, how will the older adults and disabled individuals relocated from public housing survive?

Policy Recommendations



Don't forget about us little people. We contribute too—especially our elderly. (Cosby-Spears resident)

1. Do not demolish all the remaining family public housing. Keep some units available for low-income residents who have no other options. Another option would be to develop some form of transitional public housing for those who lose their homes or jobs due to economic downturns, who need a short-term helping hand.

2. Give the residents who want to move to private-market housing a voucher but provide other options for those who do not, particularly those with special needs. Other options could include building replacement housing, or upgrading existing public housing units.

3. Ensure that relocation provides the same level of access to public transportation and needed services that residents currently have in public housing.

4. Provide assurances that relocation will not add to the monthly living expenditures of the residents.

5. Poor health is a reoccurring theme for public housing residents. More concrete assurances are needed that private-market housing is disabled or elderly accessible – as well as in close proximity to public transportation in order to accommodate the health needs of these residents.

6. Keep the senior high rise housing open. The majority of the residents like living there. The convenient location meets their multiple service needs. In addition, the overall goal of deconcentrating poverty does not apply to these communities.

WHY DO YOU THINK THE RELOCATIONS ARE TAKING PLACE?

I really don't know. No one gave you a reason why. All of the sudden, boom, they throw it out on you…

They don't have the money to put into the community due to politics—the money got used some other way.

Because of crime, violence and laziness of residents—they are too comfortable here.

Big business is buying the property and wants the poor people to move out so Wal-mart can come in…

Because they're evil. They want to build a shopping center here.

I have no idea.

I don't have a clue.

No idea except to phase out public housing.

Gentrification.

They want the property for the Beltline.

I really don't know because I don't see anything wrong… It's a big question mark.

Because they are tired of all the crime here.

I don't know. They said they are going to give us a better place to live in.

There's a connection to the real estate market. I don't know why anyone hasn't brought up this conflict of interest.

I don't know. I wish they wouldn't – all the people here are elderly or handicapped and we don't have anywhere else to go.

Photo Credit: Deirdre Oakley