

## HEALTHY HOUSING

### [HH. Adequate and Healthy Housing](#)

#### **Objective HH.1 Preserve and construct housing in proportion to demand with regards to size, affordability and tenure**

##### Health-based Rationale

- High housing costs relative to the income of an individual or household result in one or more outcomes with adverse health consequences: spending a high proportion of income on housing, sharing housing with other individuals or families, accepting lower cost substandard housing, moving to where housing costs are lower, or becoming homeless. Spending a high proportion of income on rent or a mortgage means fewer resources for food, heating, transportation, health care, and child care. Sharing housing can mean crowded conditions, with risks for infectious disease, noise, and fires. Lower cost housing is often substandard with exposure to waste and sewage, physical hazards, mold spores, poorly maintained paint, cockroach antigens, old carpeting, inadequate heating and ventilation, exposed heating sources and wiring, and broken windows. Moving away can result in the loss of job, difficult school transitions, and the loss of health protective social networks.<sup>92</sup>
- Overcrowded housing conditions contribute to tuberculosis<sup>93</sup> and respiratory conditions.<sup>94</sup>

##### Established Standards

1. HP 2010 Objective 8.23: Reduce the proportion of occupied housing units that are substandard
2. California Regional Housing Needs Determination (RHND) Goals
3. Canadian National Occupancy Standards (CNOS) defines health-based standards for occupancy:
  1. There should be no more than two people per bedroom; parents or couples share a bedroom;
  2. Children aged under five years, either of same or opposite sex, may reasonably share a bedroom;
  3. Children aged under 18 years of the same sex may reasonably share a bedroom;
  4. A child aged five to 17 years should not share a bedroom with one aged under five of the opposite sex; single adults aged 18 years and over and any unpaired children require a separate bedroom.

##### Policy and Design Strategy Suggestions

- Inclusionary zoning

- Density bonus for affordable housing
- CEQA exemptions for affordable housing (e.g. Implementation of AB1925 allowable exemptions)
- Affordable housing bonds
- Use public retirement funds as affordable housing equity funds

92. San Francisco Department of Public Health, Program on Health, Equity, and Sustainability. The Case for Housing Impacts Assessment: The human health and social impacts of inadequate housing and their consideration in CEQA policy and practice. May, 2004. Available at:

[http://www.sfdph.org/phes/publications/PHES\\_publications.htm](http://www.sfdph.org/phes/publications/PHES_publications.htm)

93. Stein L. A study of respiratory tuberculosis in relation to housing conditions in Edinburgh; the pre-war period. Br J Soc Med. 1950;4:143-169.

94. Graham NM. The epidemiology of acute respiratory infections in children and adults: a global perspective. Epidemiol Rev. 1990;12:149-178.

### HH.1.a Proportion of housing production to housing need by income category

#### Humboldt Housing Production Compared to Housing Need

Income Level	Housing Need (HCAG Production Targets 2001 - 2008)	Production* (Housing Production 1998-2002)	% of Need Met	Production Needed to Meet Goals
Very Low (50% AMI)	1,033		24%	
Low (80% AMI)	676		%	
Moderate (120% AMI)	795		%	
Above Moderate (Market rate)	1,471		%	
<b>Total</b>	<b>3,975</b>			

\*Production is new units; rehabbed and conserved units are not counted.

shown in Table HH.1 above, only 43% of the projected new housing needs for the period between 2001 and 2006 were met by housing construction for people with very low incomes, and 74% of the new housing needs projected for this period were met by housing construction for people with low incomes.

According to Eureka’s Abbreviated Consolidated Plan, written in 2004, Eureka contains the largest numbers of affordable housing units.<sup>13</sup> However, for the past decade, the number of

new houses built in Eureka has been consistently and increasingly short of the number of housing units needed as identified in the community planning documents and the housing  
8 General Plan Update & Updated Population and Housing Projections, October 2007 element. This trend is demonstrated in the following figure:

Figure HH.1. Targeted versus Built Housing Units in Eureka 14 (

QuickTime™ and a  
TIFF (Uncompressed) decompressor  
are needed to see this picture.

9 <http://quickfacts.census.gov/qfd/states/06/06023.html>.

10 2006 Annual Progress Report on Implementation of the Housing Element, General Plan Report requirement pursuant to Section 65400 of the Government Code.

11 General Plan Update & Updated Population and Housing Projections, October 2007 (powerpoint presentation).

12 2006 Annual Progress Report on Implementation of the Housing Element, General Plan Report requirement pursuant to Section 65400 of the Government Code.

13 Waxman, Deborah T. Creating Affordable Housing in Humboldt County (Master's Thesis).

### **Data Sources**

Humboldt County Association of Governments. 2002. Regional Housing Needs Plan for Humboldt County.

Technical Background Study for the 2003 Housing Element. 2003 Housing Element Update. Humboldt County General Plan Volume II.

### **Explanation and Limitations**

The table illustrates future housing demand by income group in relation to housing produced to meet the demand for each income group. AMI is Area Median Income and Percent of Demand Met is calculated by dividing production by housing demand. The State of California requires the Division of Housing and Community Development (HCD) to allocate expected future housing demand to each local jurisdiction. Demand is estimated for four income levels. In Humboldt County, the Humboldt County Association of Governments (HCAOG) produces the estimates in cooperation with local jurisdictions, i.e., Regional Housing Needs Determination (RHND). The RHND estimates housing demand based on future economic and employment growth and do not take into account

unmet current demand for housing at all income levels. HCAOG uses county-level area median income from the 2000 Census in its estimates of housing demand.

While housing demand may vary year to year with demographic and economic changes, HCAOG estimates a constant annual demand within each period.

Arcata has adopted a policy of Inclusionary Zoning, and as of 10/2007 Humboldt County was considering doing the same.. Inclusionary Zoning (IZ) laws vary among various jurisdictions. The essence of IZ is to place a portion of the burden of developing or paying for affordable housing onto private developers with the goal of increasing the number of affordable housing opportunities without public subsidies.

In San Francisco the IZ ordinance was recently amended in August of 2006 to increase the mandated affordability levels; increase the percentage of affordable units required; and include strict requirements for the location of the units. The new law pertains to all development that was not pipelined when the legislation was signed. The law requires all residential developers of five units or more to provide 15% onsite units affordable at 100% of San Francisco median income for for-sale units and 60% of the median income for rental units. The law allows units to be built off-site, in which case, 20% of units are to be at affordable levels. The new law requires that off-site units be built within one mile of the project area to create more economic integration. Developers are also provided the option to pay fees, as determined by the Mayors Office of Housing (MOH), into the affordable housing fund administered by the MOH. This law is applicable to all new residential developments.

## **Analysis**

Assumptions

### **Why is this a Community Health Indicator?**

High housing costs relative to the income of an individual or household result in one or more outcomes with adverse health consequences: spending a high proportion of income on housing, sharing housing with other individuals or families, accepting lower cost substandard housing, moving to where housing costs are lower, or becoming homeless. Spending a high proportion of income on rent or a mortgage means fewer resources for food, heating, transportation, health care, and child care. Sharing housing can mean crowded conditions, with risks for infectious disease, noise, and fires. Lower cost housing is often substandard with exposure to waste and sewage, physical hazards, mold spores, poorly maintained paint, cockroach antigens, old carpeting, inadequate heating and ventilation, exposed heating sources and wiring, and broken windows. Moving away can result in the loss of job, difficult school transitions, and the loss of health protective social networks.

For additional information on the connections between housing and health, visit: The Case for Housing Impacts Assessment by SFDPH, Program on Health Equity and Sustainability. Accessed online on October 19, 2006:

<http://www.sfdph.org/phes/publications/reports/HIAR-May2004.pdf>

**HH.1.b Proportion of households paying greater than 50% of their income on their homes**

**Proportion of renter households whose gross rent\* is >50% of renter's last year income**

<b>Humboldt County (by zip code)</b>		<b>%</b>
<b>Northern</b>		
95519	Fieldbrook & McKinleyville	26%
05521	Arcata & Manila	38%
95524	Bayside	27%
95525	Blue Lake	18%
95530	Crannell (95531 in census – no 95530 available)	21%
95546	Hoopa & Weitchpec	18%
95550	Korbel & Maple Creek	0%
95555	Orick	16%
95556	Orleans	10%
95564	Fairhaven & Samoa	19%
95570	Moonstone Beach, Trinidad & Westhaven	34%
95573	Willow Creek	20%
<b>Central</b>		
95501	Eureka - N	23%
95503	Eureka - S	25%
95537	Field's Landing	16%
95549	Kneeland	20%
<b>Southern</b>		
95511	Alderpoint	38%
95514	Blocksburg	0%
95526	Bridgeville, Dinsmore & Van Duzen	17%
95528	Carlotta	25%
95536	Ferndale	13%
95540	Alton, Fernbridge, Fortuna, Newberg, Rohnerville	22%
95542	Briceland & Garberville	15%
95545	Honeydew	60%
95547	Hydesville	15%
95551	Loleta	16%

95553		54%
95554	Myers Flat	0%
95558	Petrolia	24%
95559	Phillipsville & Redcrest	100%

\* Gross rent is the contract rent plus the estimated average monthly cost of utilities and fuels.

**Proportion of owner-occupied housing whose monthly costs\* are >50% of owner's last year income**

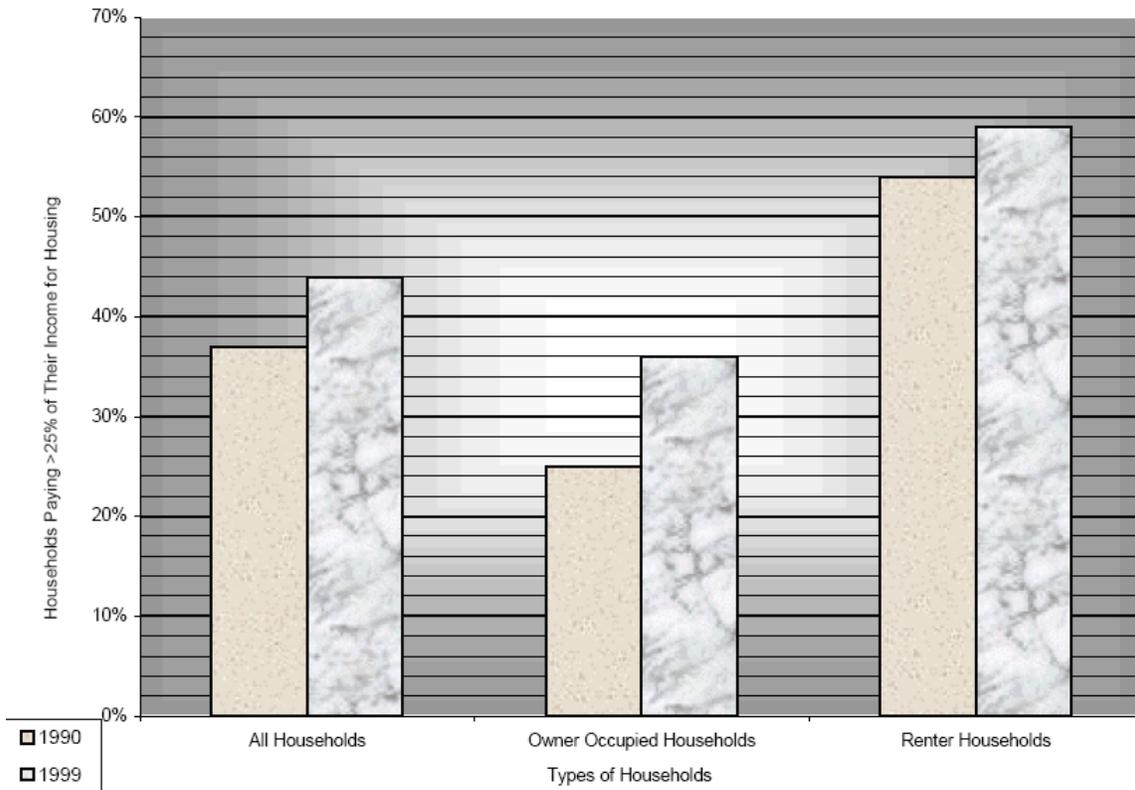
**City (by zip code)**

Northern		Central		Southern		
				95511 Alderpoint	48%	
95519	Fieldbrook & McKinleyville	11%	95501 Eureka - N	12%	95514 Blocksburg	0%
05521	Arcata & Manila	6%	95502	0%	95526 Bridgeville, Dinsmore & Van Duzen	0%
95524	Bayside	13%	95503 Eureka - S	9%	95528 Carlotta	15%
95525	Blue Lake	14%	95534 Cutten	%	95536 Ferndale	16%
95531	Crannell	15%	95537 Field's Landing	0%	95540 Alton, Fernbridge, Fortuna, Newberg, Rohnerville	11%
95546	Hoopa & Weitchpec	11%	95549 Kneeland	17%	95542 Briceland & Garberville	24%
95550	Korbel & Maple Creek	0%			95545 Honeydew	0
95555	Orick	0%			95547 Hydesville	13%
95556	Orleans	22%			95551 Loleta	13%
95564	Fairhaven & Samoa	0%			95553	43%
95570	Moonstone Beach, Trinidad & Westhaven	18%			95554 Myers Flat	32%
95573	Willow Creek	5%			95558 Petrolia	11%
					95559	0%

**Monthly owner costs include mortgages and similar debts on the property, real estate taxes, property insurance, utilities and fuels, and monthly condo fees and mobile home costs.**

**Percentages are based on owner-occupied housing currently with a mortgage.**

**Percent of Households Paying 25% or More of Their Income for Housing in 2000**



Source: U.S. Department of Commerce; Census of Population and Housing; 1990, 2000

**Data Source**

US Census 2000.

**Explanation and Limitations**

Households that spend more than 50% of their income on their homes are classified by the National Low Income Housing Coalition as severely cost-burdened. The U.S. Census collects data on both household income and the proportion of income households spend on their gross rent or mortgage.

Gross rent is the contract rent plus the estimated average monthly cost of utilities and fuels. Monthly owner costs include mortgages and similar debts on the property, real estate taxes, property insurance, utilities and fuels, and monthly condo fees and mobile home costs.

**Why is this a Community Health Indicator?**

High housing costs relative to the income of an individual or household result in one or more outcomes with adverse health consequences: spending a high proportion of income on housing, sharing housing with other individuals or families, accepting lower cost substandard housing, moving to where housing costs are lower, or becoming homeless.

Spending a high proportion of income on rent or a mortgage means fewer resources for food, heating, transportation, health care, and child care. Sharing housing can mean crowded conditions, with risks for infectious disease, noise, and fires. Lower cost housing is often substandard with exposure to waste and sewage, physical hazards, mold spores, poorly maintained paint, cockroach antigens, old carpeting, inadequate heating and ventilation, exposed heating sources and wiring, and broken windows. Moving away can result in the loss of job, difficult school transitions, and the loss of health protective social networks.

For additional information on the connections between housing and health, visit: The Case for Housing Impacts Assessment by SFDPH, Program on Health Equity and Sustainability. Accessed online on October 19, 2006:

<http://www.sfdph.org/phes/publications/reports/HIAR-May2004.pdf>

### HH.1.c Housing purchasing capacity of the median income household

**Table 1. Affordability Index\* for Home Purchase in Humboldt County for select areas**

Area	Affordability Index in Jan 1999	Affordability Index in Jan 2003	Affordability Index in Aug 2007
9551/03 Eureka	54%	37%	12%
95519 Arcata	43%	26%	11%
95521 McKinleyville	59%	37%	11%
95540 Fortuna	46%	34%	13%

**Affordability index is the percent of a median price of a house that you can afford to pay if you make the median income for the area. See below for explanation of how the Affordability Index is calculated.**

Area	Median Price of Home in Jan 1999	Median Price of Home in Jan 2003	Median Price of Home in Aug 2007
9551/03 Eureka	\$112,000	\$175,000	\$291,500
95519 Arcata	\$124,750	\$215,000	\$350,000
95521 McKinleyville	\$127,000	\$201,200	\$325,000
95540 Fortuna	\$132,910	\$192,450	\$287,000

Area	Median Income in Jan 1999	Median Income in Jan 2003	Median Income in Aug 2007
------	---------------------------	---------------------------	---------------------------

9551/03 Eureka	\$32,456	\$36,240	\$41,121
95519 Arcata	\$31,623	\$35,310	\$40,065
95521 McKinleyville	\$38,047	\$42,483	\$48,204
95540 Fortuna	\$31,129	\$34,758	\$39,439

**Table 2. 2005 Humboldt County Median House Price by Zip Code**

Zip Code	Median
95501 Eureka	\$270,279
95503 Eureka	\$299,530
95511 Alderpoint	\$224,881
95514 Blocksburg	\$424,256
95519 McKinleyville	\$317,783
95521 Arcata	\$317,783
95524 Bayside	\$501,497
95525 Blue Lake	\$270,747
95526 Bridgeville	\$202,885
95528 Carlotta	\$309,826
95536 Ferndale	\$420,278
95540 Fortuna	\$296,596
95542 Garberville	\$412,088
95545 Honeydew	\$321,761
95546 Hoopa	\$188,610
95547 Hydesville	\$377,689
95549 Kneeland	\$580,573
<b>95550 Korb</b>	<b>\$2,340,080</b>
95551 Loleta	\$308,656
95553 Miranda	\$314,506
95554 Myer's Flat	\$287,128
95555 Orick	\$202,885
95556 Orleans	\$112,324
95558 Petrolia	\$288,532
95559 Phillipsville	\$354,818
95560 Redway	\$333,929
95562 Rio Dell	\$225,349
95563 Saylor	\$275,236
95564 Samoa	\$230,030
95565 Scotia	\$242,432
95569 Redcrest	\$313,336

95570	Trinidad	\$443,253
95571	Weott	\$231,668
95573	Willow Creek	\$227,924
95587		\$133,233
95589	Whitethorn	\$532,836
96046		\$178,447

**In August 2007, the median home sale price was \$316,000, down from \$325,000 in June 2007.**

**SOLD LISTINGS SOUTH BAY (SB)**

	1ST QRT	2ND QRT	3RD QRT	4TH QRT
1992	91	146	123	117
1993	81	102	141	112
1994	90	127	100	113
1995	84	100	113	106
1996	98	122	116	112
1997	78	115	100	110
1998	83	139	150	116
1999	121	131	146	131
2000	116	163	157	141
2001	148	170	165	165
2002	141	181	196	169

**SOLD LISTINGS MID COUNTY (MC)**

	1ST QRT	2ND QRT	3RD QRT	4TH QRT
1992	35	44	31	34
1993	24	35	48	43
1994	44	37	36	40
1995	34	55	55	40
1996	42	45	53	61
1997	28	57	55	46
1998	32	55	54	63
1999	48	54	71	75
2000	60	68	74	61
2001	48	84	74	79
2002	62	83	100	88

**SOLD LISTINGS NORTH BAY (NB)**

	1ST QRT	2ND QRT	3RD QRT	4TH QRT
1992	52	78	81	65
1993	46	99	89	95
1994	102	107	94	78
1995	61	84	80	82
1996	53	71	86	79
1997	39	76	108	75
1998	72	91	114	93
1999	80	91	131	82
2000	82	90	129	119
2001	76	96	110	81
2002	69	91	108	85

**SOLD LISTINGS ALL AREAS**

	1ST QRT	2ND QRT	3RD QRT	4TH QRT
1992	186	284	254	228
1993	164	254	298	266
1994	248	280	250	242
1995	192	233	268	247
1996	202	248	278	261
1997	154	262	283	248
1998	198	304	338	290
1999	264	305	369	309
2000	275	343	387	339
2001	272	369	366	348
2002	291	378	430	377

### **Data Sources**

US Census Factfinder; [www.citydata.com](http://www.citydata.com)

Humboldt Association of Realtors. Available at <http://harealtors.com/properties.php>

### **Explanation and Limitations**

How the Affordability Index is calculated:

**Step 1.** Median Home Sales is based on the Humboldt Association of Realtors multiple listing service data and reflects the median price of single family homes sold broken down on a monthly basis.

**Step 2.** Annual Mortgage Rate is derived using the National Average Effective Mortgage Rate on all fixed and adjustable rate mortgages closed for the purchase of previously occupied homes as reported by the Federal Housing Finance Board.

**Step 3.** Median Household Income is taken from the US Census data for Humboldt County with an annualized increase based upon the previous 10 year annualized growth rate.

**Step 4.** Monthly Payment is derived by calculating a 20 percent down payment on the median priced home and amortizing the loan amount, 80 percent, over 30 years for a total principal and interest payment.

**Step 5.** Property taxes are assumed to be 1 percent of the median home sales price, which is divided by 12 for a monthly amount. The monthly amount is then added to the principal and interest payment.

**Step 6.** Insurance is then calculated by taking .35 percent of the median home sale price and dividing by 12 for a monthly insurance amount. The monthly amount is then added to the principal, interest, and insurance figure for a total monthly payment.

**Step 7.** It is assumed that in order to qualify for financing, the total monthly payment (PITI) can not exceed 30 percent of the total monthly income. The PITI payment is annualized (multiplied by 12). The total annualized payment is

divided by 0.3 which gives the annual qualifying income.

**Step 8.** The total monthly payment (PITI) required in order to qualify for a Median Price Home in Humboldt County is divided by the monthly Median Household Income (annual figure divided by 12). This represents the percent of Median Income needed for a house payment. As stated above, it is assumed that 30 percent or lower qualifies and above 30 percent does not qualify for purposes of financing. However, it is understood other factors are involved in qualifying.

**Step 9.** The actual affordability index is derived by using the US Census figures and calculating the total number of households at the qualifying income and dividing it by the total number of households in Humboldt County. This gives the percentage of households in Humboldt County that would be considered qualified under the above guidelines for a Median Price Home.

Between 1999 and 2007, the average home purchase price has more than doubled. Despite the availability of lower rate mortgages to first-time home buyers, the high cost of housing in Humboldt County makes home ownership beyond the reach of most of it's residents.

**Why is this a Community Health Indicator?**

Similar to rent burdened households, households spending a high percentage of their income on a mortgage have a smaller percentage of income to spend on other necessities such as food, heating, transportation, health care, and child care and very little, if any, savings for emergency situations, children's future tuition or retirement. Although a mortgage can be a financial burden, home ownership does provide multiple benefits to its owners including increased tax benefits, collateral for financial emergencies, and opportunities for wealth creation. Home ownership is also associated with increased residential stability, and benefits homeowners by providing a setting for expression of identity and control. This catalyzes a personal investment in home maintenance, neighborhood improvement, and community cohesion.

**HH.1.d Proportion of households living in overcrowded conditions**

**Table 1. Proportion of households living in overcrowded conditions**

Humboldt County (by zip code)	%
<b>Northern</b>	
95519 Fieldbrook & McKinleyville	4%
95521 Arcata & Manila	2%
95524 Bayside	1%
95525 Blue Lake	2%

95531	Cranell	4%
95546	Hoopla & Weitchpec *	14%
95550	Korbel & Maple Creek	27%
95555	Orick	9%
95556	Orleans	11%
95564	Fairhaven & Samoa	2%
95570	Moonstone Beach, Trinidad & Westhaven	3%
95573	Willow Creek	4%

**Central**

95501	Eureka - N	5%
95502		0%
95503	Eureka - S	4%
95534	Cutten	0%
95537	Field's Landing	0%
95549	Kneeland	10%

**Southern**

95511	Alderpoint	0%
95514	Blocksburg	12%
95526	Bridgeville, Dinsmore & Van Duzen	3%
95528	Carlotta	3%
95536	Ferndale	2%
95540	Alton, Fernbridge, Fortuna, Newberg, Rohnerville	5%
95542	Briceland & Garberville	6%
95545	Honeydew	15%
95547	Hydesville	4%
95551	Loleta	3%
95553		4%
95554	Myers Flat	0%
95558	Petrolia	9%
95559	Phillipsville & Redcrest	16%

**\*Except for 95546, all zip codes information for all zip codes is for white households only.**

**Table 2. Housing stock by number of bedrooms (2000)  
Humboldt County**

**Number of Bedrooms      Units      Percent**

One Room	2,207	4%
2 Rooms	3,780	7%
3 Rooms	6,197	11%
4 Rooms	11,412	20%
5 Rooms	13,141	24%%
6 Rooms	9,497	17%
7 Rooms	5,345	9.6%
8 Rooms	2,530	5%
9 or more Rooms	1,803	3%

**DATA SOURCE:**

Data on overcrowding from 2000 United States Census.  
Table 2 data from Census, Humboldt County Community Development Services Department. Demographic Data for Humboldt County from 2000 Census. Available at <http://co.humboldt.ca.us/planning/demograp/default.asp?pg=2000/SelectedHousingCharacteristics.htm>.

**Explanation and Limitations**

The U.S. Census collects data on overcrowding in housing units. Overcrowding is defined by Housing and Urban Development (HUD) as greater than 1.01 people per habitable room. Severe overcrowding is defined as greater than 1.51 people per habitable room.

The U.S. Census collects data on number of rooms in a house and does not make a distinction between bedrooms and other types of rooms.

**Why is this a Community Health Indicator?**

Overcrowding reflects that cost of available housing is high relative to income of community members. The impacts of overcrowding on health are both direct and indirect. Most immediately, crowding increases risks for respiratory infections such as tuberculosis and ear infection.<sup>a</sup> Overcrowded housing has also been associated with increased mortality rates (particularly for women), meningitis, and Helicobacter pylori bacteria which can cause stomach ailments.<sup>b</sup> Crowded housing conditions also contribute to poor child development and school performance, in part, because overcrowding limits the space and quiet necessary for children to do homework.<sup>c,d</sup> Overcrowding may act cumulatively with other environmental health stressors. For example, one recent study found that crowding combined with noise significantly increases chronic stress hormones in low-income children.<sup>e</sup> Finally, overcrowding affects health indirectly by creating conditions conducive to poor sanitation, high environmental noise, and residential fires.

a. Krieger J, Higgins DL. Housing and Health: Time again for Public Health Action. American Journal of Public Health. 2002;92:758-768.

b. Office of Deputy Prime Minister. 2004. The impacts of overcrowding on health and education: A review of the evidence and literature. London. Last accessed online August 30, 2007 from: <http://www.communities.gov.uk/documents/housing/pdf/138631>.

- c. Ross DP, Roberts P. Income and child well being: A new perspective on the policy debate. Canadian Council for Social Development. Ottawa. 1999.  
d. Cooper, Merrill. Housing Affordability: A Children's Issue. Canadian Policy Research Networks Discussion Paper. Ottawa. 2001

### HH.1.e Proportion of renter and owner occupied housing

#### Percent of owner-occupied and renter-occupied housing units

Humboldt County (by zip code)	Rent	Own
<b>Northern</b>		
95519 Fieldbrook & McKinleyville	33%	67%
05521 Arcata & Manila	59%	41%
95524 Bayside	24%	76%
95525 Blue Lake	35%	65%
95531 Crannell	37%	63%
95546 Hoopa & Weitchpec *	27%	73%
95550 Korbel & Maple Creek	62%	38%
95555 Orick	47%	53%
95556 Orleans	36%	64%
95564 Fairhaven & Samoa	79%	21%
95570 Moonstone Beach, Trinidad & Westhaven	33%	67%
95573 Willow Creek	34%	66%
<b>Central</b>		
95501 Eureka - N	57%	43%
95502	18%	82%
95503 Eureka - S	31%	69%
95534 Cutten	%	%
95537 Field's Landing	60%	40%
95549 Kneeland	13%	87%
<b>Southern</b>		
95511 Alderpoint	27%	73%
95514 Blocksburg	28%	72%
95526 Bridgeville, Dinsmore & Van Duzen	38%	62%
95528 Carlotta	26%	74%
95536 Ferndale	39%	61%
95540 Alton, Fernbridge, Fortuna, Newberg, Rohnerville	36%	64%

95542	Briceland & Garberville	34%	66%
95545	Honeydew	32%	68%
95547	Hydesville	16%	84%
95551	Loleta	39%	61%
95553		37%	63%
95554	Myers Flat	21%	79%
95558	Petrolia	34%	66%
95559	Phillipsville & Redcrest	41%	59%

**Data Source**

Median household income and housing tenure from 2000 US Census. National Association of Realtors. Metropolitan Area Existing-Home Prices and State Existing-Home Sales. The Quarterly Reports. Accessed online on February 28, 2007: <http://www.realtor.org/Research.nsf/Pages/MetroPrice>

**Explanation and Limitations**

The proportion of owner-occupied housing units was calculated by dividing the total number of owner-occupied housing units by the total number of occupied units in that neighborhood. The proportion of renter-occupied housing units was calculated by dividing the total number of renter-occupied housing units by the total number of occupied units in that neighborhood.

Housing tenure describes whether a family rents or owns its place of residence.

**Why is this a Community Health Indicator?**

Similar to rent burdened households, households spending a high percentage of their income on a mortgage have a smaller percentage of income to spend on other necessities such as food, heating, transportation, health care, and child care and very little, if any, savings for emergency situations, children’s future tuition or retirement. Although a mortgage can be a financial burden, home ownership does provide multiple benefits to its owners including increased tax benefits, collateral for financial emergencies, and opportunities for wealth creation. Home ownership is also associated with increased residential stability, and benefits homeowners by providing a setting for expression of identity and control. This catalyzes a personal investment in home maintenance, neighborhood improvement, and community cohesion.

**HH.1.f Housing wage as a percent of minimum wage**

**Housing wage as percentage of minimum wage, 2007**

	FMR for 2-bedroom	Min. Hourly Wage	Housing Wage for 2 bedroom FMR	Percentage of full-time minimum wage (1 worker)	Percentage of full-time minimum wage (2 workers)
Humboldt	\$725	\$6.75	\$13.94	207%	103%

County

**Data Source**

Housing Wage: Out of Reach, 2005, National Low Income Housing Coalition. Available at <http://www.nlihc.org/oor/oor2006/data.cfm?getcounty=on&county=196&state=CA>

**Explanation and Limitations**

The National Low Income Housing Coalition (NLIHC) calculates the Housing Wage for each county and state. The housing wage is the hourly income of an individual working 40 hours per week for 52 weeks necessary to pay 30 percent of total annual income on housing.

Fair Market Rent (FMR) is a gross rent estimate; it includes shelter rent and the cost of utilities, except telephone. The FMR is an amount calculated by the Department of Housing and Urban Development (HUD) for Section 8 housing assistance. It is set at a level high enough to permit a selection of units and neighborhoods and low enough to serve as many low income families as possible.

The current definition used is the 40th percentile rent, the dollar amount below which 40 percent of standard quality rental housing units rent.

Housing wage as a percent of minimum wage for a one worker household is calculated by dividing the housing wage for a 2 bedroom FMR by the minimum hourly wage. For a two-worker household, the denominator (minimum wage for one person) is doubled.

**Why is this a Community Health Indicator?**

High housing costs relative to the income of an individual or household result in one or more outcomes with adverse health consequences: spending a high proportion of income on housing, sharing housing with other individuals or families, accepting lower cost substandard housing, moving to where housing costs are lower, or becoming homeless. Spending a high proportion of income on rent or a mortgage means fewer resources for food, heating, transportation, health care, and child care. Sharing housing can mean crowded conditions, with risks for infectious disease, noise, and fires. Lower cost housing is often substandard with exposure to waste and sewage, physical hazards, mold spores, poorly maintained paint, cockroach antigens, old carpeting, inadequate heating and ventilation, exposed heating sources and wiring, and broken windows. Moving away can result in the loss of job, difficult school transitions, and the loss of health protective social networks.

For additional information on the connections between housing and health, visit: The Case for Housing Impacts Assessment by SFDPH, Program on Health Equity and Sustainability. Accessed online on October 19, 2006:

<http://www.sfdph.org/phes/publications/reports/HIAR-May2004.pdf>

## HH.1.g Residential density

### Humboldt Residential Housing Density\* (2000)

Zip	Town	Population Density (person per square mile)	Housing Density (housing units per square mile)
95501	Eureka	3205	1478
95503	Eureka	220	94
95511	Alderpoint	6	2.5
95514	Blocksburg	2	1.1
95519	McKinleyville	204	84
95521	Arcata	290	129
95524	Bayside	129	52
95525	Blue Lake	12	6.3
95526	Bridgeville	3	2.3
95528	Carlotta	9	3.8
95536	Ferndale	14	6.5
95540	Fortuna	345	147
95542	Garberville	7	3.6
95545	Honeydew	2	1.8
95546	Hoopa	21	8.6
95547	Hydesville	158	69
95549	Kneeland	2	1.1
95550	Korbel	1	64
95551	Loleta	43	14
95553	Miranda	30	18
95554	Myers Flat	13	6.7
95555	Orick	10	5
95556	Orleans	3	1.6
95558	Petrolia	4	2.5
95559	Phillipsville	8	4.2
95560	Redway	30	16
95562	Rio Dell	308	98
95563	Sayler	22	17
95564	Samoa	201	89
95565	Scotia	51	18
95569	Redcrest	7	2.8
95570	Trinidad	23	14
95571	Weott	147	68
95573	Willow Creek	26	17
95587		4	2.8
95589	Whitethorn	9	6.2

\* Average housing  
units per acre

### **Data Source**

Raw data from 2000 Census (Summary File 1) on variable “housing units.”

### **Explanation and Limitations**

Density can be calculated in a number of ways. Population density is calculated by dividing the total population within a census tract by the total acreage in that tract. Residential density can be calculated by 1) dividing the total number of housing units by the total acres zoned for residential development (thus not zoned for commercial or industrial development) within that tract or 2) dividing the total number of housing units by total acres within the census tract. For the purposes of this indicator, residential density is calculated by dividing the total number of housing units within a census tract by the total number of acres in the census tract (the U.S. Census terms this housing density).

Housing or residential density is one measure of urban sprawl. Urban sprawl is a term used to denote the continued growth of suburban neighborhoods which have sprawled from large cities into more rural farmlands, or “natural” areas. Urban sprawl can be associated with a number of negative environmental and public health issues. Two of the largest issues include the loss of natural habitat for flora and fauna or farmland, and the impact of increased motor vehicle travel. As distances increase between housing, work and daily necessities, there is an increase in cars, roads and parking spaces (resulting in more loss of natural- or farm-land), traffic, air and water pollution, and increased temperatures. All of which result in negative health implications, such as increased respiratory disease and vehicle collisions, and decreased social interactions, and physical activity.

High residential densities can allow for more housing units to be built on a given piece of land and can potentially lower the cost of construction and the cost of housing. Density and transportation needs also have a direct relationship. For example, in lower density areas, there is often limited public transit and individuals are more dependent on cars, increasing the household cost of transportation and increasing the need for parking in both residential and commercial areas.

### **Why is this a Community Health Indicator?**

Negative health implications have been associated with urban sprawl. Research has found that people living in counties with sprawling development are less likely to walk, weigh more and are more likely to suffer from high blood pressure than those living in less sprawling counties.<sup>a</sup>

People in sprawling areas drive more. Vehicle miles traveled are directly proportional to air pollution and greenhouse gas emissions. Air pollutants, including ozone and particulate matter are causal factors for cardiovascular mortality and respiratory disease and illness. Greenhouse gases contribute to climate change and may increase heat-related illness and death, health effects related to extreme weather events, health effects related to air pollution, water-borne and food-borne diseases and vector-borne and rodent-borne

disease. Areas with high levels of vehicle miles traveled per capita also tend to have higher accident and injury rates.

In addition, a significant amount of time is also spent driving; the average U.S. resident spends 443 hours in a car each year. This represents time that could otherwise be spent in productive or leisure activity.

The impact of increased highways, roads and parking lots can also take away from trees and green space which improve the physical environment by removing air pollution from the air and mitigating the urban heat island effect produced by concrete and glass. Water resources are also negatively impacted by urban sprawl. As sprawling communities increase impermeable surfaces, such as highways and roads, the more difficult protecting the quantity and quality of water supplies becomes. Watersheds with as little as ten percent impervious surfaces can experience impaired water resources. Water resources are impacted by the runoff; emissions generated by travel; use of chemicals in landscaping; and construction activities.<sup>b</sup>

a. McCann B. and Ewing R. 2003. Measuring the health effects of sprawl: A national analysis of physical activity, obesity and chronic disease. Smart Growth America, Surface Transportation Policy Project

b. United States Environmental Protection Agency (EPA). Protecting water resources with smart growth. Last accessed online August 30, 2007 from [http://www.epa.gov/smartgrowth/pdf/waterresources\\_with\\_sg.pdf](http://www.epa.gov/smartgrowth/pdf/waterresources_with_sg.pdf).

## **HH.1.h Proportion of renter households paying more than 30% of their household income on gross rent**

**Renter households whose gross rent is greater than 30% of their income  
(2000)**

### **Humboldt County (by zip code)**

#### **Northern**

95519 Fieldbrook & McKinleyville	55%
05521 Arcata & Manila	67%
95524 Bayside	51%
95525 Blue Lake	50%
95531 Crannell	54%
95546 Hoopa & Weitchpec	57%
95550 Korbel & Maple Creek	5%
95555 Orick	45%
95556 Orleans	38%
95564 Fairhaven & Samoa	26%
95570 Moonstone Beach, Trinidad & Westhaven	66%
95573 Willow Creek	50%

#### **Central**

95501	Eureka - N	54%
95503	Eureka - S	54%
95534	Cutten	%
95537	Field's Landing	58%
95549	Kneeland	20%

**Southern**

95511	Alderpoint	38%
95514	Blocksburg	0%
95526	Bridgeville, Dinsmore & Van Duzen	49%
95528	Carlotta	63%
95536	Ferndale	55%
95540	Alton, Fernbridge, Fortuna, Newberg, Rohnerville	51%
95542	Briceland & Garberville	68%
95545	Honeydew	100%
95547	Hydesville	47%
95551	Loleta	56%
95553		82%
95554	Myers Flat	63%
95558	Petrolia	57%
95559	Phillipsville & Redcrest	100%

**Data Source**

Raw data from 2000 Census (Summary File 3) on variable “Gross Rent as a Percent of Household Income in 1999.

**Explanation and Limitations**

The U.S. Census collects data on percentage of household income spent on their gross rent. Gross rent is defined by the Census as the contract rent plus the estimated average monthly cost of utilities and fuels. Renter households whose gross rent is more than 30% of their income is calculated using those the number of people who pay more than 30% of their income on gross rent divided by the total renter population within the neighborhood. Households that spend more than 30% of their income on their homes are classified by the federal government as cost-burdened. Those who spend more than 50% of their income on housing are considered severely cost-burdened by the National Low Income Housing Coalition (see HDMT indicator HH1.b for more information). Thus, those who meet household income eligibility to receive federally subsidized housing are expected to pay no more than 30% of their annual income on their homes.

**Why is this a Community Health Indicator?**

High housing costs relative to the income of an individual or household result in one or more outcomes with adverse health consequences: spending a high proportion of income on housing, sharing housing with other individuals or families, accepting lower cost substandard housing, moving to where housing costs are lower, or becoming homeless. Spending a high proportion of income on rent or a mortgage means fewer resources for food, heating, transportation, health care, and child care. Sharing housing can mean crowded conditions, with risks for infectious disease, noise, and fires. Lower cost housing is often substandard with exposure to waste and sewage, physical hazards, mold spores, poorly maintained paint, cockroach antigens, old carpeting, inadequate heating and ventilation, exposed heating sources and wiring, and broken windows. Moving away can result in the loss of job, difficult school transitions, and the loss of health protective social networks.

For additional information on the connections between housing and health, visit: The Case for Housing Impacts Assessment by SFDPH, Program on Health Equity and Sustainability. Accessed online on October 19, 2006:

<http://www.sfdph.org/phes/publications/reports/HIAR-May2004.pdf>

## ***Objective HH.2 Protect residents from involuntary displacement***

### **HH.2.a Homeless Population**

#### **Health-Based Rationale**

Homelessness is a condition that describes people who lack a fixed, regular, and adequate nighttime residence. The term may also include people whose primary nighttime residence is in a homeless shelter, in an institution that provides a temporary residence for individuals intended to be institutionalized, or in a public or private place not designed for use as a regular sleeping accommodation for human beings.<sup>1</sup>

Homelessness is usually a consequence of a combination of structural and individual factors. On an individual level, homelessness is frequently the result of a crisis in one's life, such as leaving the parental home after arguments; marital or relationship breakdown; death of a spouse; leaving prison; a sharp deterioration of mental health; increased drug or alcohol misuse; unemployment or another financial crisis; or eviction. In addition, there are many factors that put individuals at a greater risk of homelessness when a crisis occurs. Some common background characteristics of people who become homeless include physical or sexual abuse in childhood or adolescence; a background of institutional care; lack of social support network; debts, especially due to rent and mortgage; anti-social behavior; substance abuse; and poor mental or physical health.<sup>2</sup>

Structural factors, relating to how we organize our society and distribute wealth and power, also play a role in homelessness. According to Ireland's Homeless Agency, "The failure of

---

<sup>1</sup> United States Code, Title 42, Chapter 119, Subchapter I, § 11302. United States Code: General definition of a homeless individual.

<sup>2</sup> The Homeless Agency. [http://www.homelessagency.ie/about\\_homelessness/causes.html](http://www.homelessagency.ie/about_homelessness/causes.html).

infrastructure to support those most vulnerable in our society has resulted in high levels of poverty, rising unemployment, social exclusion, the lack of affordable accommodation and increasingly negative effects of de-institutionalization ultimately creating pathways into homelessness.”<sup>3</sup>

Homeless people have many of the same health problems as people with homes, but at rates three to six times greater than housed people.<sup>4</sup> Age-adjusted death rates were four times higher in the homeless than the general U.S. population in a study done in New York City.<sup>5</sup> In homeless shelters, high levels of contact, poor nutrition, poor access to health care, and substance abuse contributes to an increased risk for respiratory infections and outbreaks of tuberculosis and other aerosol transmitted infectious diseases.<sup>6 7</sup> Among homeless children, 78% have suffered from depression, behavior problems, or severe academic delay.<sup>8</sup> Approximately one-third of homeless people have mental illnesses, and approximately one-half have a current or past drug or alcohol addiction.<sup>9</sup> Many homeless people are in desperate need of health care services, but because they are often uninsured and lack access to preventative health care, they go without care until minor problems become urgent medical emergencies.<sup>10</sup>

Homelessness can also be emotionally damaging. In addition to representing poverty due to a lack of financial resources, homelessness can also cause people to lose privacy, security, and control over their lives. The longer the time period that a person is homeless, the more difficult it is for them to recover.<sup>11</sup>

### **Existing conditions**

*Total Number of Homeless:* Estimates of total homeless persons in Humboldt County throughout the course of one year range from 4,000 to 6,000.<sup>12 13</sup> It has been estimated that at any point in time, there are between 800 and 1,100 homeless persons in the County,<sup>14</sup> and

---

<sup>3</sup> The Homeless Agency. [http://www.homelessagency.ie/about\\_homelessness/causes.html](http://www.homelessagency.ie/about_homelessness/causes.html).

<sup>4</sup> National Health Care for the Homeless Council, 2007. Basics of Homelessness. [http://www.nhchc.org/Publications/basics\\_of\\_homelessness.html](http://www.nhchc.org/Publications/basics_of_homelessness.html)

<sup>5</sup> Barrow SM, Herman DB, Cordova P, Stuenkel EL. 1999. Mortality among homeless shelter residents in New York City. *American Journal of Public Health* 1999;529-534.

<sup>6</sup> Francis J. Curry National Tuberculosis Center, Institutional Consultation Services, and California Department of Health Services. TB in Homeless Shelters: Reducing the Risk through Ventilation, Filters, and UV. 2000. [available at [www.nationaltbcenter.edu](http://www.nationaltbcenter.edu)].

<sup>7</sup> Raoult, D. et al. Sept. 2001. Infections in the homeless. *The Lancet Infectious Diseases*. 1(2):77-84.

<sup>8</sup> Zima BT, Wells KB, Freeman HE. 1994. Emotional and behavioral problems and severe academic delays among sheltered homeless children in Los Angeles County. *American Journal of Public Health*. 84:260-264.

<sup>9</sup> National Health Care for the Homeless Council, 2007. Basics of Homelessness. [http://www.nhchc.org/Publications/basics\\_of\\_homelessness.html](http://www.nhchc.org/Publications/basics_of_homelessness.html).

<sup>10</sup> National Health Care for the Homeless Council, 2007. Basics of Homelessness. [http://www.nhchc.org/Publications/basics\\_of\\_homelessness.html](http://www.nhchc.org/Publications/basics_of_homelessness.html).

<sup>11</sup> City of Arcata, March 7, 2007. Homeless Services Plan: 2007-2016.

<sup>12</sup> Waxman, Deborah T. Creating Affordable Housing in Humboldt County (Master's Thesis).

<sup>13</sup> 2003 Housing Element Update to Humboldt County General Plan. (Approved December 16, 2003) Amended November 30, 2004).

<sup>14</sup> 2003 Housing Element Update to Humboldt County General Plan. (Approved December 16, 2003) Amended November 30, 2004).

the number is generally higher during summer months than during winter months.<sup>15</sup> According to the Housing and Homeless Coalition, the number of homeless in the County has gone down in the last three years, while the number of homeless children has stayed the same.<sup>16</sup>

The following tables present results of a point-in-time survey conducted on January 25, 2005.

---

<sup>15</sup> City of Arcata, March 7, 2007. Homeless Services Plan: 2007-2016.

<sup>16</sup> Personal Communication, December 10, 2007.

	Sheltered - Emergency Shelter	Sheltered - Transitional Housing	Unsheltered	Total
Individual Households*	152	99	854	1,105
Family Households with Children	15	36	251	302
Total Households	167	135	1,105	1,407
Persons in Individual Households*	152	99	854	1,105
Persons in Family Households with Children	37	78	627	742
Total Homeless Persons in Households	189	177	1,481	1,847

*\*HUD assumes one person per individual household.*

Subpopulation	Sheltered	Unsheltered	Total
Chronically Homeless	107	395	502
Severely Mentally Ill	223	0	223
Chronic Substance Abuse	267	0	267
Veterans	73	0	73
Persons with HIV or AIDS	6	0	6
Victims of Domestic Violence	113	0	113
Unaccompanied Youth less than 18 yrs.	75	0	75

*Location, Gender, Age, and Voluntary Homeless statistics:* Another survey of the Humboldt County homeless population, conducted in January 2005, documented the following information:<sup>19</sup>

Location	Percent
Eureka	16.6%
Arcata	6.8%
Southern Humboldt	6.8%
Other Locations	69.8%

Gender	Percent
Male	82%
Female	18%

<sup>17</sup> U.S. Department of Housing and Urban Development (HUD), August 13, 2007. HUD's 2006 Continuum of Care Homeless Assistance Programs Homeless Populations and Subpopulations. [Available at <http://www.hud.gov/offices/cpd/homeless/local/ca/caCoC.cfm?CoC=522>].

<sup>18</sup> U.S. Department of Housing and Urban Development (HUD), August 13, 2007. HUD's 2006 Continuum of Care Homeless Assistance Programs Homeless Populations and Subpopulations. [Available at <http://www.hud.gov/offices/cpd/homeless/local/ca/caCoC.cfm?CoC=522>].

<sup>19</sup> City of Arcata, March 7, 2007. Homeless Services Plan: 2007-2016.

Table HH.12 Respondents who are Voluntarily Homeless	
Voluntary homeless	Percent
Do not choose to remain homeless	57%
Choose to remain homeless	8%
No response	32%

Table HH.13 Age of Homeless Respondents <sup>20</sup>	
Age	Percent
Under 20 years	5%
20-29 years	27%
30-39 years	24%
40-49 years	23%
50-59 years	17%
60-69 years	3%
70 or more years	0%

*Homelessness in Eureka and Arcata:* Eureka hosts the majority of the homeless population, with an estimated 888 people.<sup>21 22</sup> Eureka is also home to the largest numbers of affordable housing units, residents in poverty, and homeless services in the County. The City of Eureka provides approximately 423 beds in various shelters and transitional housing facilities, and an additional 86 during the winter. Many homeless people sleep in automobiles, outdoors, or in motels.<sup>23</sup>

There are between 50 and 75 homeless individuals in Arcata throughout the year, and the number rises to approximately 200 in the summer. In Arcata, an estimated 900 to 1,000 individuals experience some form of homelessness each year.<sup>24</sup>

Much smaller homeless populations are estimated to live in other incorporated cities in Humboldt County, which provide minimal or no homeless services. In unincorporated areas of Humboldt County, transients and homeless individuals often camp or stay with friends.<sup>25</sup>

*Additional Location information:* Almost three quarters of the County’s homeless population camp in locations ranging from forests, wildlife sanctuaries, and city parks, to bushes along railroad tracks, under bridges, and on private property. Approximately 17% stay in shelters, 4% stay in motels, and 3% stay with friends.<sup>26</sup>

*Nomadic population:* In addition to the homeless population, there is also a nomadic population in Humboldt County with its own set of housing needs. According to the 2003 update of the county’s Housing Element of the General Plan, “nomadic households belong to a generally unnoticed demographic segment of our population that resides throughout the

<sup>20</sup> Humboldt Housing and Home Coalition, January 23, 2007, Survey of Humboldt County Homeless People.

<sup>21</sup> City of Arcata, March 7, 2007. Homeless Services Plan: 2007-2016.

<sup>22</sup> Waxman, Deborah T. Creating Affordable Housing in Humboldt County (Master’s Thesis).

<sup>23</sup> Waxman, Deborah T. Creating Affordable Housing in Humboldt County (Master’s Thesis).

<sup>24</sup> City of Arcata, March 7, 2007. Homeless Services Plan: 2007-2016.

<sup>25</sup> Waxman, Deborah T. Creating Affordable Housing in Humboldt County (Master’s Thesis).

<sup>26</sup> City of Arcata, March 7, 2007. Homeless Services Plan: 2007-2016.

year in various campgrounds, parks, and other sites both public and private. The nomadic population distinguishes itself from other forms of housing styles by staying on the move. The nomadic population also has a spectrum of socio-economic income groups from high to moderate, to low and very low income groups”. The 2003 Housing Element Update reports that in Humboldt County, “56 nomadic households might avail themselves of a special occupancy park specifically designed for lower income persons, and there are others who would use it on a more permanent basis who do not consider themselves nomadic.” This evaluation estimates that there are presently 89 special occupancy spaces needed to accommodate the housing needs of nomadic persons.<sup>27</sup>

## Analysis:

### Assumptions

- At least 57% of the homeless population in the County does not choose to be homeless. These citizens would reside in permanent housing if it was accessible to them.

### Logic

- One key strategy for reducing homelessness is the creation of affordable housing. While emergency shelters and transitional housing provide vital access to services for families in crisis, they often fail to address the long-term needs of homeless people. Getting people into housing and then providing the support and services they need to maintain housing leads to long-term stability and increased self-sufficiency.<sup>28 29</sup> Because of its greater affordability,<sup>30 31</sup> development of higher density housing is more likely to be accessible to the portion of the homeless population with significant incomes and a certain level of stability. Resources such as jobs, social service programs, food access, transportation, and social connection with others, are typically centered in denser areas. All three scenarios provide the same amount of housing in higher-density areas of the county, so they may all lead to more affordable housing than the housing currently available.
- Additional housing options for the homeless, such as those listed below (with the exception of the “special occupancy park”), are more likely to be concentrated within dense areas. Because all three Plan Alternatives propose the same amount of infill development, the following housing options could be incorporated by local governments into any of the three scenarios:
  - Homeless Shelters: Temporary residences for homeless people.
  - Transitional Housing: Programs that assist people who are ready to move beyond emergency shelter into a more independent living situation.

---

<sup>27</sup> 2003 Housing Element Update to Humboldt County General Plan. (Approved December 16, 2003, Amended November 30, 2004).

<sup>28</sup> City of Arcata, March 7, 2007. Homeless Services Plan: 2007-2016.

<sup>29</sup> Housing First. [http://www.beyondshelter.org/aaa\\_initiatives/ending\\_homelessness.shtml](http://www.beyondshelter.org/aaa_initiatives/ending_homelessness.shtml).

<sup>30</sup> Haughey, Richard M. The Case for Multifamily Housing, Second Edition. Washington, D.C.: ULI—the Urban Land Institute, 2003.

<sup>31</sup> Transportation Research Board, National Research Council, 1998. TCRP Report 39: The Costs of Sprawl – Revisited.

Transitional programs allow individuals and families to further develop the stability, confidence, and coping skills they need to sustain permanent housing. Some transitional program participants live in apartment-style quarters, while others may live in group settings where several families or individuals share a household.<sup>32</sup>

- Homeless Support Centers: Resource centers with services to assist homeless people to cope with the problems they face in learning how to sustain their lives. They may also provide housing.<sup>33</sup>
  - Multifamily Housing: Higher density housing, which is sometimes affordable to very low-income persons, may provide housing to members of the homeless population with significant incomes and who are stable enough to be on their own.<sup>34</sup>
  - Single Resident Occupancy Structures (SROs): This is multi-unit housing for very-low-income persons that typically consists of a single room and shared bath and also may include a shared common kitchen and common activity area.<sup>35</sup> Usually SRO's are developed by converting hotels, and they are often allowed under the same permits as hotels.<sup>36</sup>
  - Special Occupancy Park: A park specifically designed for the nomadic population, who otherwise sleep in various campgrounds, parks, and other sites both public and private.<sup>37</sup>
- However, a community that is concentrated in the area where social services are located may present better opportunities for the homeless population. In a sprawling community, social services may be less concentrated, and not as convenient in terms of access to other urban resources such as transportation, etc.

### Disparities

People suffering from alcoholism and other substance abuse may be unable to access treatment programs.

### Caveats

- Only the portion of the homeless population that earns income and/or pursues opportunities for housing will attain housing. Percentage of homeless population who chooses to be homeless (between 8% and 43%) may not be affected by any of the Plan Alternatives. Park space for “nomadic” population and access to wilderness camping for homeless may not be affected by any of the scenarios.

---

<sup>32</sup> Los Angeles Homeless Services Authority.

<http://www.lahsa.org/archive/programs/transitionalhousing.htm>,

<sup>33</sup> 2003 Housing Element Update to Humboldt County General Plan. (Approved December 16, 2003, Amended November 30, 2004).

<sup>34</sup> 2003 Housing Element Update to Humboldt County General Plan. (Approved December 16, 2003, Amended November 30, 2004).

<sup>35</sup> New York State Office for the Aging. Your Guide to Senior Housing.

<http://seniorhousing.state.ny.us/definitions/index.htm>.

<sup>36</sup> 2003 Housing Element Update to Humboldt County General Plan. (Approved December 16, 2003, Amended November 30, 2004).

<sup>37</sup> 2003 Housing Element Update to Humboldt County General Plan. (Approved December 16, 2003, Amended November 30, 2004).

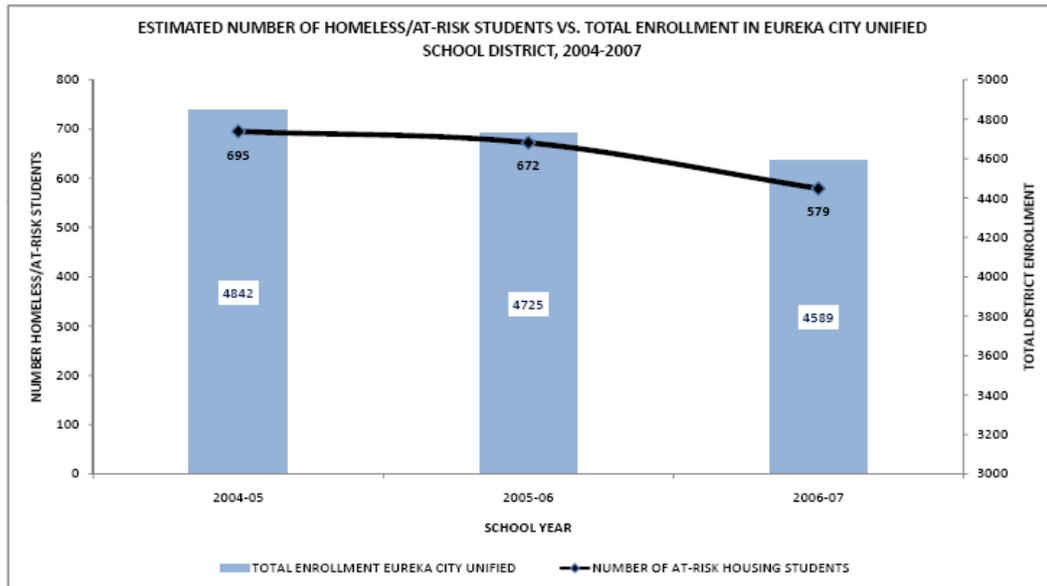
**Recommended Health-Promoting Mitigations**

- Pre-release permanent housing planning for people discharged from public institutions such as the foster care system, jail, prison, mental health programs, hospital, or drug and alcohol programs.
- Increase emergency, interim, transitional, and permanent housing options and programs.
- Improve social services offered to the homeless population by the county, such as mental health, domestic abuse, and substance abuse resources.

**HH.2 b Percentage of homeless school children**

YEAR	NUMBER OF AT-RISK HOUSING STUDENTS	TOTAL ENROLLMENT EUREKA CITY UNIFIED	% OF TOTAL	+/-
2004-05	695	4842	14.4%	1.0%
2005-06	672	4725	14.2%	1.0%
2006-07	579	4589	12.8%	1.0%

SOURCES: CA Dept of Education Data Quest (<http://data1.cde.ca.gov/dataquest/>)  
Eureka City Unified School District



% CHANGE ENROLLMENT: 5.2% DECREASE  
% CHANGE HOMELESS/AT-RISK: 16.7% DECREASE

**DATA SOURCE:** Maureen Chase, Project Director, Homeless Education Project. Eureka City Schools

**Explanation and Limitations:** Ms.Chase’s data is not an exhaustive survey of homeless students in the system. The numbers here represent students who are referred to her for services throughout the school year, reflecting awareness of the program amongst school staff and families as well as Ms. Chase’s availability. “Homeless” includes students living in shelters, in cars, on the streets, short-term with

friends or relatives (“couch surfing”). These numbers cannot be compared to HH2.c, Estimated Homeless Population in the County, because of different definitions and methodology. Never the less, the data reflects a surprisingly high percentage of students in unstable housing situations.

**Why is this a Community Health Indicator?**

Being homeless has a negative health impact on the individuals involved and on the community. Homeless people may suffer weather-related illnesses, lack access to sanitation and have difficulty obtaining and following through with medical care. It is very difficult for homeless people to eat a nutritious diet. Homeless children have difficulty obtaining a consistent school experience and developing trusting relationships with school personnel, and may have insurmountable challenges completing homework assignments.

Homelessness is a reflection of our society’s inability to engage and care for all community members. Homeless people may not have access to bathroom facilities and be forced to defecate outdoors, unwillingly presenting a risk to other community members. Some community members, particularly the elderly, report being afraid of “transients”, which impacts their sense of security at home and may limit their activity outside the home.

**HH2.c Estimated homeless population in the County**

	January 23, 2007	January 30, 2006	January 25, 2005
TOTAL ADULTS	431	515	545
African American	4%	4%	3%
White	78%	81%	78%
Latino	3%	4%	6%
American Indian	11%	11%	9%
CHILDREN	339	193	212

**DATA SOURCE:** Humboldt Housing and Homeless Coalition’s Point in Time Count of Homeless

**Explanation and Limitations:** The HHHC has developed a methodology for assessing the homeless population with consistency for one day late in January every year. They make observations at the Mission, homeless shelters, established transitional housing, and other places where homeless congregate. They do not claim to count all homeless, but by using a consistent methodology they are able produce a “report card” year to year. The ethnic breakdown amongst the reported homeless is roughly the same as the ethnic composition of the County.

**Why is this a Community Health Indicator?**

Being homeless has a negative health impact on the individuals involved and on the community. Homeless people suffer weather-related illnesses, lack access to sanitation and have difficulty obtaining and following through with medical care especially when chronic disease is involved. It is very difficult for homeless people to eat a nutritious diet. Furthermore, homeless people are generally not accepted into alcohol and drug treatment programs. Homeless children have difficulty obtaining a consistent school experience and developing trusting relationships with school personnel, and may have insurmountable challenges completing homework assignments.

Homelessness is a reflection of our society’s inability to engage and care for all community members. Homeless people may not have access to bathroom facilities and be forced to defecate outdoors, unwillingly presenting a risk to other community members. Some community members, particularly the elderly, report being afraid of “transients”, which impacts their sense of security at home and may limit their activity outside the home.

***Objective HH.3 Eliminate Barriers to Diversity***

**HH.3.a Multi-group diversity index**

**Humboldt County Healthy Development Measurement Tool**  
*Healthy Housing*

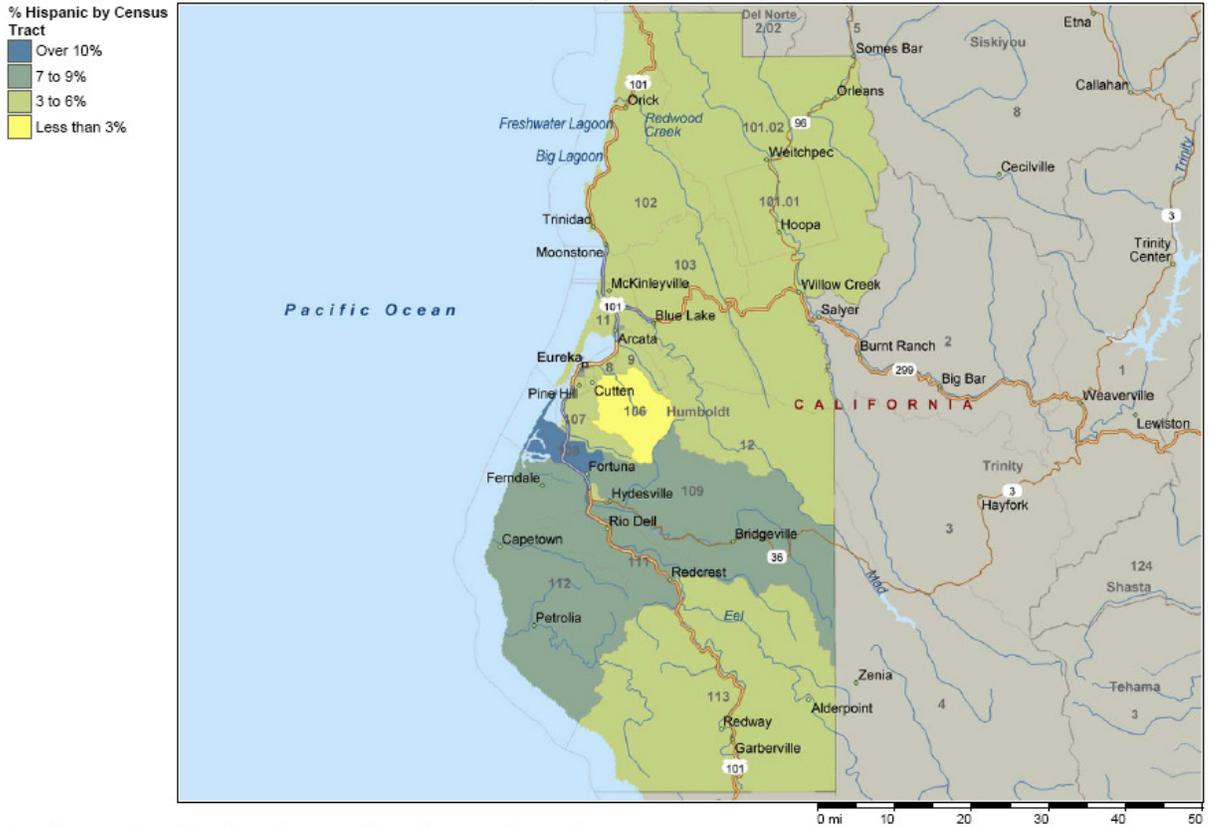
Percentage American Indian by Census Tract, 2000 Census



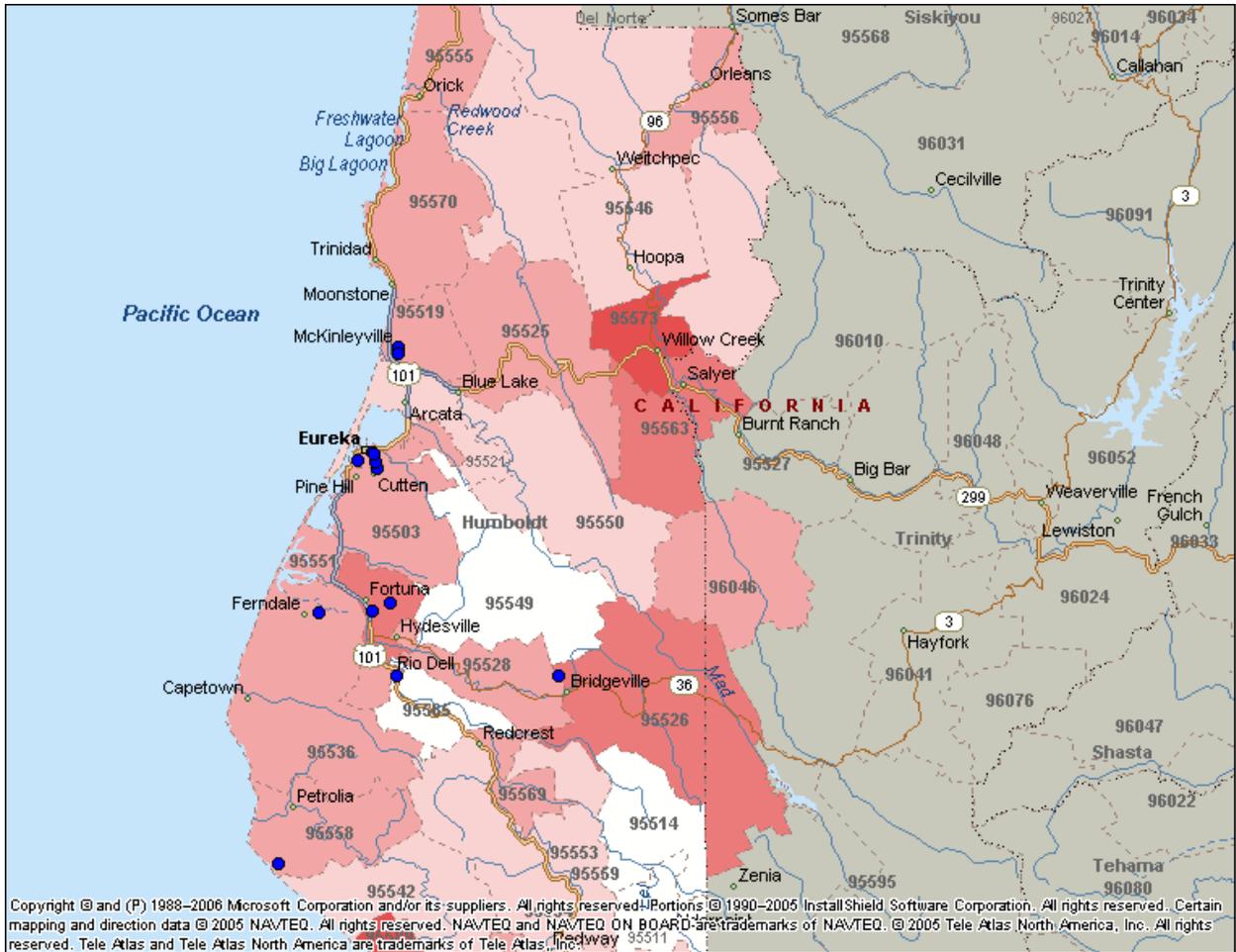
Copyright © and (P) 1998-2006 Microsoft Corporation and/or its suppliers. All rights reserved. <http://www.microsoft.com/mappoint/>  
 Portions © 1999-2005 InstallShield Software Corporation. All rights reserved. Certain mapping and direction data © 2005 NAVTEQ. All rights reserved. The data for areas of Canada includes information taken with permission from Canadian authorities.  
 Includes: © Her Majesty the Queen in Right of Canada, © Queen's Printer for Ontario. NAVTEQ and NAVTEQ ON BOARD are trademarks of NAVTEQ. © 2005 Tele Atlas North America, Inc. All rights reserved. Tele Atlas and Tele Atlas North America are trademarks of Tele Atlas, Inc.

**Humboldt County Healthy Development Measurement Tool**  
*Healthy Housing*

Humboldt Percent Hispanic by Census Tract, 2000 Census



Copyright © and (P) 1989–2006 Microsoft Corporation and/or its suppliers. All rights reserved. <http://www.microsoft.com/mappoint/>  
 Portions © 1990–2006 Instatfield Software Corporation. All rights reserved. Certain mapping and direction data © 2005 NAVTEQ. All rights reserved. The Data for areas of Canada includes information taken with permission from Canadian authorities.  
 Includes: © Her Majesty the Queen in Right of Canada, © Queen's Printer for Ontario. NAVTEQ and NAVTEQ ON BOARD are trademarks of NAVTEQ. © 2005 Tele Atlas North America, Inc. All rights reserved. Tele Atlas and Tele Atlas North America are trademarks of Tele Atlas, Inc.



**DATA SOURCE:** 2000 census

### **Why is this a Community Health Indicator?**

Cultural diversity enriches the entire community. There are health disparities associated with race and income in our society. Sometimes these disparities are due to health risks associated with the geographic location of a particular group.

**HH.3.b Number of per capita code violations for housing safety and habitability in the past year**(DATA SOURCE: County Community assistance office)