

Report of the Housing Mobility Research Road Map Project



Institute for Health
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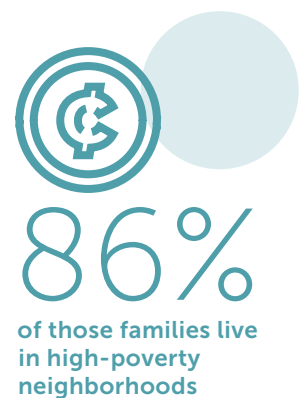
Background

Five million people in 2.2 million low-income households use the federal Housing Choice Voucher Program to afford rental housing. In metropolitan areas, however, only 14 percent of those families live in low-poverty neighborhoods and only 5 percent live in high-opportunity neighborhoods, based on HUD's composite index.¹ In the federal government's 2019 and 2020 fiscal budgets, Congress appropriated \$50 million for the U.S. Department of Housing and Urban Development (HUD) to support a new Housing Choice Voucher (HCV) Mobility Demonstration Program that offers a variety of incentives and supports to help low-income voucher holders with young children move to areas that offer a richer set of opportunities for economic advancement.

The new demonstration project follows several previous and on-going housing mobility programs, including Moving To Opportunity (MTO); Creating Moves To Opportunity (CMTO); and studies of housing mobility interventions led by MDRC. Those studies contribute to growing evidence about the supports that families need to help them move, the short- and long-term consequences of moving, and the roles played by household and neighborhood environments in determining outcomes. Nonetheless, some major knowledge gaps remain.

To expand the knowledge base further, in late 2020 the Robert Wood Johnson Foundation (RWJF) invited leaders in the housing, health, education, and economic development fields to help shape a supplementary research agenda for programs designed to leverage federal housing vouchers and other means to increase residential mobility to lower-poverty neighborhoods. The goal of this "Research Road Map" project was to consider ways that HUD's new voucher mobility program as well as other on-going and new voucher mobility programs could be used as a platform for additional research, beyond the Congressionally mandated evaluation, that can help inform a broad range of public policies and deepen scientific understanding of housing, neighborhoods, and families. RWJF recognizes that the housing voucher mobility approach is not the only way to achieve healthy communities; housing mobility can offer a unique window into what makes communities and residents healthier.

This report outlines the beginnings of a Research Road Map, using material from the roundtables and interviews to expand some points as necessary. We begin with an explanation of methods and guiding principles, followed by some big-picture themes that emerged across all of the consultative settings. We then set the context for considering new research priorities by providing overviews of the Housing Choice Voucher mobility demonstration and previous housing voucher mobility programs and by summarizing findings from the Research Road Map interviews and roundtables. We present the experts' feedback on how additional research on the HCV Mobility Demonstration Program could contribute to the knowledge base, what methods and data sources could help advance the research agenda, and what research designs warrant more consideration. We conclude with some high-level observations relevant to the further development of a research agenda.



¹ Mazarra, A. and Knudsen, B. (January 3, 2019). "Where Families With Children Use Housing Vouchers: A Comparative Look at the 50 Largest Metropolitan Areas." Center on Budget and Policy Priorities and Poverty & Race Research Action Council, https://www.cbpp.org/research/housing/where-families-with-children-use-housing-vouchers#_ftn1

Methods For Collecting Input

The Research Road Map project used three methods to elicit input from the experts:

Pre-meeting interviews

In September 2020, a consultant interviewed 25 field leaders with expertise in how housing intersects with health, education, and/or economic development, to collect their thoughts about: the value and limitations of research on housing mobility conducted to date; types of new knowledge about housing and neighborhoods that would improve policies and programs; supplemental research approaches that might use the HCV Mobility Demonstration Program as a platform; and opportunities to apply knowledge from the HCV Mobility Demonstration Program and other programs in the near future. The consultant's summary of themes from these individual conversations helped to shape the agendas for subsequent roundtable discussions.

Field-specific roundtables

In October and November 2020, the Research Road Map team convened experts from each field separately (housing, health, and education/economic development) for a one-hour virtual brainstorming session. Topics of discussion included: types of information needed to better understand the benefits and limitations of voucher mobility as a policy intervention; how the HCV Mobility Demonstration Program might serve as a platform for research to answer additional questions in the field; and what data could be collected at baseline and follow-up to help answer those questions. Each roundtable involved 8-10 experts, and invitees were selected to ensure a diverse set of perspectives. A summary of all three discussions gave the Road Map team a set of themes to pursue further.

Cross-disciplinary convening

In December 2020, RWJF hosted a virtual, cross-disciplinary convening of the experts already consulted plus additional researchers, evaluators, funders, and government officials, to build on the suggestions, concerns, and questions raised during interviews and roundtable discussions. About 60 people attended the 1.5-hour session, which included presentations on the HCV Mobility Demonstration Program and the housing voucher mobility sites being studied by MDRC; findings from the Research Road Map's interviews and roundtables; lessons learned from Moving To Opportunity about using the experiment as a research platform; and breakout groups during which participants discussed research and data priorities.

Guiding Principles

Over the course of the interviews with field leaders, consensus emerged around three principles that should guide supplementary research attached to the HCV Mobility Demonstration Program:

Non-interference

The Research Road Map's goal is to generate ideas and discussion about *supplemental* research but not to interfere with the integrity of the existing mobility demonstration programs, evaluations of those programs, and the Housing Choice Voucher demonstration program or its evaluation more generally. If the program is unable to operate successfully, supplemental questions about neighborhood context and other factors may become moot.

Coordination

Supplementary research projects should be coordinated to improve efficiency within projects and across experiments.

Avoidance of undue burden

Supplementary research projects should avoid undue burden on residents, public housing authority staff, landlords, and others (e.g., HUD staff, funders, researchers) who may already be participating in a program evaluation. It may be advisable to establish a resident council to help guide and coordinate research plans.



Themes

We heard widespread agreement that additional studies of housing voucher programs are needed to:

1. Understand heterogeneity in families' interactions and experiences with housing voucher mobility programs and the programs' impact.

Specifically, it is important to learn more about heterogeneity in:

- **Participation in the housing voucher mobility program**, to understand the options and tradeoffs that families face and the factors that influence their decisions to enroll in the program, take up vouchers, make a move, and sustain the move—and, similarly, to understand landlords' decisions to accept vouchers and to work with voucher holders;
- **Impacts on families and individual family members across subgroups**, to understand the factors that explain individual and family-level variation in successfully moving to and remaining in the new neighborhood, and achieving desired health, education, and economic outcomes; and
- **Impacts across places** (neighborhoods and cities/jurisdictions), to understand the contextual factors that hinder or facilitate achievement of all desired outcomes.

2. Unpack the relative impact and value of different mobility services.

Researchers are especially eager to learn more about what specific pre- and post-move services and supports are offered to families, how they are delivered, and what they cost, in order to determine their effectiveness and potential for improvement. Key services include, for example, outreach activities to increase voucher application and take-up rates, financial supports to assist with applications and security deposits, counseling and case management, legal services (e.g., enforcement of source-of-income and fair housing discrimination regulations), and landlord engagement and support. The relative cost and impact of these services may vary across family types and across places.

3. Track additional intermediate and long-term outcomes related to children's and parents' health, wellbeing, and community connectedness.

This includes more examination of:

- Whether and how housing voucher mobility interventions affect families' outcomes beyond moves and persistence, including pregnancy outcomes and early child development, household functioning and parenting, physical and mental health, and social ties;
- Whether and how families integrate into and become part of the opportunity neighborhood over time; and
- The overlap, interdependence, and mutual influences between housing and health, education, and economic outcomes

To add knowledge and nuance to existing research, these additional studies should:

Involve residents. Many advisors emphasized the importance of involving residents in research design, data interpretation, and dissemination of findings. This would involve developing processes for vetting ideas with residents on the front end (i.e., not just sharing findings at the end) and incorporating their perspectives so that they help to guide research as it unfolds.

Center race. Experts in all disciplines and sectors want to examine the role of racial inequities, racism, and racial/economic segregation in shaping families' expectations, choices, constraints, decisions, and outcomes.

Use mixed methods. Experts cited the need to capture the perspectives, attitudes, experiences, and practices of families, landlords, and public housing authorities, both within the housing voucher mobility program and in neighborhoods and schools, recognizing that these factors help to explain decisions and outcomes. In addition to expanded baseline data collection, key methods include: interviews and focus groups, surveys, active tracking and follow-up of movers and non-movers, and links with administrative databases (including agreements to link across agencies and sectors).

Context

Before outlining a research agenda that uses the HCV Mobility Demonstration Program as a platform, it is important to know what the parameters are of the Housing Choice Voucher mobility demonstration; of other relevant housing mobility experiments, such as Moving To Opportunity, Creating Moves To Opportunity (CMTO and CMTOx), and studies of housing mobility interventions led by MDRC; and what field leaders see as the knowledge gaps that more research might fill.

Highlights of the HCV Mobility Demonstration Program and Its Evaluation

The Housing Choice Voucher (HCV) Mobility Demonstration Program makes \$50 million available to [nine public housing agencies](#) for new vouchers for families with children as well as for mobility-related services. The primary purposes of the demonstration are to: (1) provide voucher assistance and mobility services to families with children to encourage such families to move to lower-poverty areas; (2) expand low-income families' access to opportunity areas; and (3) evaluate the effectiveness of the strategies pursued under the demonstration.

Both the demonstration and the evaluation will unfold in two phases. During Phase 1, randomly selected families will be randomly assigned receive comprehensive mobility-related services or to a control group. The evaluation will compare moves and retention in the two groups. During Phase 2, randomly selected families will be randomly assigned to receive comprehensive mobility-related services, to receive a subset of selected mobility-related services, or to a control group. The evaluation examines moves and retentions.

The evaluation encompasses a randomized controlled trial and a process study with two rounds of interviews. The study team anticipates studying about 2,000 households per site, across the comprehensive mobility-related services group, the selective mobility-related services, and the control group.

Highlights of Previous and Other Ongoing Housing Voucher Mobility Programs and Evaluations

The **Moving To Opportunity for Fair Housing program** (MTO, 1994-98) offered housing vouchers and housing counseling to a randomly selected set of public housing residents and study the effects of neighborhood environments on: economic self-sufficiency, employment, and earnings; risky and criminal behavior; educational outcomes; and health outcomes among adults and youth. It operated in Baltimore, Boston, Chicago, Los Angeles, and New York City. In each place, public housing residents living in high-poverty neighborhoods were randomized into either an experimental group that received vouchers that could only be used to move to a low-poverty neighborhood; a second group that received a traditional housing voucher without restrictions on neighborhood location; or a control group did not receive vouchers.

The randomized clinical trial involving 4,604 families collected data and followed up approximately 4-7 and 10-12 years after randomization. Evaluations were performed through surveys and exploration of housing authority data. MTO data subsequently have been linked to tax records and administrative health records, and qualitative interviews have been conducted. MTO has identified important differences among groups in long-term earnings for children who had the opportunity to move at an early age, health care use, and, among children and adults, some measures of health status.

Creating Moves to Opportunity was designed to develop and test policy-scalable strategies to reduce barriers that housing choice voucher recipients face in moving to high-opportunity areas. It was piloted in 2018 in Seattle and King County, WA, with 430 families. The experiment featured customized housing search assistance, landlord engagement, and short-term financial assistance. The evaluation, which combined a randomized controlled trial with qualitative research, found that families in the treatment group were more likely to move to higher-opportunity areas and they reported much higher levels of

What Made MTO Successful As A Research Platform – Lessons Learned

- 1. Know why the families want to participate in the program.** Having this information enables evaluators to follow up after the experiment to learn whether families got what they wanted and expected, which might help to explain their experiences after moving.
- 2. Keep an open mind for impacts.** MTO evaluators did not initially think about health outcomes or how neighborhoods might impact children's future earnings, both of which turned out to be results of MTO moves. It is important to recognize unexpected impacts while also maintaining the rigor of the initial evaluation design.
- 3. Get consent for long-term data matching.** MTO's open-ended consent forms have enabled researchers to continue analyzing impacts for more than 25 years.
- 4. No statistic without a story, no story without a statistic.** Qualitative and ethnographic research should be part of any experiment, to help explain why impacts do (or do not) appear.
- 5. Don't bury the hard lessons learned in implementation.** Information on problems and challenges is especially important if the program is to be replicated.
- 6. Plan for media interest on the front end.** Consider asking participants, as part of the consent process, whether they will be willing to talk to the media about their participation in the program. This is much more efficient than trying to obtain consent after the study ends.

—Discussed at the Research Road Map Project convening on December 8, 2020

neighborhood satisfaction. This suggested that barriers in the housing search process, rather than preference, are keeping many families in low-opportunity areas—and that redesigning affordable housing policies to provide customized assistance with housing searches could reduce residential segregation and increase families’ “upward mobility.”²

With planning funds from the Ford Foundation, core grants from RWJF and Ford, and evaluation funds from the U.S. Department of Health and Human Services (plus support from HUD for one site), **MDRC is leading a demonstration program** to test the robustness of mobility approaches in three mid-sized highly segregated cities: Milwaukee, Chicago, and St. Louis. Multiple housing authorities are involved in each city, and the mobility services provider is a nonprofit organization that works with the housing authorities.

The MDRC-led demonstration encompasses two types of randomized controlled trials. One, in Milwaukee and St. Louis, focuses mostly on existing voucher holders; it tests pre- and post-move services for about 400 families in each site. In these sites, evaluators expect to learn whether the interventions increase the likelihood of voucher families moving to and remaining in higher-opportunity areas in regions characterized by historical hyper-segregation. The other RCT, in Chicago/Cook County, focuses only on post-move services to test the added value of interventions at that stage. Families in the Chicago/Cook County intervention receive intensive, comprehensive two-generation coaching and services for 18 months after moving, and evaluators hope to learn whether the intervention improves parents’ employment and earnings, children’s school outcomes, and family well-being.

Priorities And Considerations For A Research Agenda

With the previous and future experiments and evaluations in mind, experts consulted by the Research Road Map project considered two main questions: What more do we want to better understand through research on the HCV Mobility Demonstration and other programs?³ And, what research methods, data sources, and tools could help advance the research agenda? The themes that surfaced reflect participants’ belief that the knowledge base on housing voucher mobility lacks some information that is vital for creating the most supportive, equitable, and impactful services and supports for low-income households with children. In general, experts want to better understand where and for whom the intervention does and does not work, why, how, and to what effect. In particular, experts identified gaps in knowledge about (1) heterogeneity in program participants’ enrollment, experiences, and outcomes; (2) program components, policies, and practices that affect outcomes; and (3) school, neighborhood, and jurisdictional effects on mobility decisions and outcomes.

² <https://opportunityinsights.org/paper/cmto/>

³ Previous evaluations have collected data on participants’ basic demographic characteristics such as race/ethnicity, age, and gender, but the HCV Mobility Demonstration Program offers an opportunity to consider additional data points.

To fill those gaps in ways that are consistent with the themes identified earlier, participants suggested supplemental areas of focus and additional intermediate and long-term outcomes to study. They also recommended research methods, data sources, and tools for additional research linked to the Housing Choice Voucher mobility demonstration program.

Areas of Focus for Supplemental Research

Gaps in knowledge about heterogeneity in program participants' enrollment, experiences, and outcomes could be filled by better understanding the characteristics and motivations of families that do or do not sign up for the experiment, use the intervention to move, and remain in the opportunity neighborhood. It also will be important to know about the characteristics of subgroups within the group of movers and non-movers who achieve different outcomes. Specifically, researchers suggest collecting and analyzing robust baseline data on individual and family factors such as:

- Race/ethnicity (of all family members);
- Gender (of all family members);
- Age (of all family members);
- Family structure;
- Physical health, mental health, and well-being;
- Birth weight and early childhood development;
- Housing stability and prior experiences with private-market landlords;
- Economic and employment conditions;
- Dependence on supports in the baseline neighborhood, and perceived need for support after moving (for instance, to support a child with special needs);
- Motivations for and perceived barriers to moving;
- Past experiences with racism in schools and neighborhoods;
- Past experiences with landlords and housing authorities;
- Sense of agency about making the choice to move, and depth of understanding about the range of housing and neighborhood options;
- Level of trust between the family and entity providing information about options (PHA or nonprofit agency)
- Level of civic engagement, community-school interactions, and social networks in the original neighborhood.

Gaps in knowledge about the program components, policies, and practices that affect outcomes could be filled by better understanding families' eligibility for and

recruitment into the program; their experiences with entering, navigating, and exiting the program and its services; their use of services and supports; their ability to use vouchers to lease up successfully in an opportunity neighborhood; and their persistence in opportunity neighborhoods after moving. Specifically, researchers suggest collecting and examining data on such factors as:

- PHA and HUD policies and practices for outreach, recruitment, and engagement of families, including what services are offered and how they are offered;
- The composition, comprehensiveness, quality, cultural responsiveness, and duration of mobility information, services, counseling, interactions, and supports provided before and after families move;
- PHA and landlord outreach, recruitment, engagement, and support strategies; and
- The use of cross-disciplinary and unifying strategies, including policies and strategies that break down barriers and bring people together across racial/ethnic, economic, and social differences.

Gaps in knowledge about school, neighborhood, and jurisdictional effects on mobility decisions and outcomes could be filled by better understanding which features

of opportunity neighborhoods and schools make it more or less likely that different types of children and families will be able to move and achieve positive outcomes, and how those factors influence outcomes. This area of focus would lead researchers to examine, for example:

- Housing and neighborhood as determinants of health (e.g., the impact of housing and neighborhood environment on health; whether and how housing interventions affect early risk factors for poor health as well as longer-term health outcomes);
- Housing as a factor that influences access to health care (e.g., location of health care services, acceptance of insurance);
- Housing and neighborhood's impact on healthy parenting (e.g., quality of parent-child relationship, household stress level, amount of time parent spends with child) and early childhood development; and
- Housing and neighborhood as root causes of education and economic outcomes (in addition to health outcomes).

In particular, advisors noted, race and racism affect many of these factors. Families of color may not view a more resource-rich neighborhood (or school) as appealing if it is not also racially diverse and inclusive, and parents of color may be wary of exposing their children to racial profiling and discriminatory treatment in the new neighborhood or school. Even if racism were not a concern, under-resourced parents may not consider it beneficial to relocate to a neighborhood where the “better” school does not offer much-needed free afterschool and food programs. This wariness should be viewed as a constraint on the mobility choice, not necessarily as indicating a preference to stay in the baseline neighborhood.

Consequently, it will be useful to know more about the role of schools (compared with other neighborhood features) in improving children’s outcomes, how much neighborhoods contribute to improved outcomes, and which neighborhood characteristics have the greatest impact. Specifically, researchers suggest collecting (or gathering from public sources) and examining data on factors such as:

- Participating parents’ perceptions of current and future school quality;
- Availability and usage of local school choice options;
- Racial disparities, inequities, and segregation in the city and its neighborhoods;
- Participating parents’ expectations for racial acceptance, safety, and interaction with neighbors;
- Families’ experiences of racism, discrimination, opportunities, and safety in their original neighborhoods and their perception of these factors in the “opportunity” areas (including, but not limited to, police brutality, policing practices, and crime rates;⁴
- Dynamics of the local and regional housing market;
- Proximity of opportunity neighborhoods to families’ original neighborhood, friends and relatives, jobs, and network of resources, especially in areas with inadequate public transportation;
- Physical exposures in the housing and neighborhood; and
- Presence of supports in the opportunity area that families need to achieve the full benefit of relocation.

⁴ Some researchers suggested asking program participants what they consider good neighborhoods for their family and using the responses to understand how they experience the neighborhood, rather than of “thinking of neighborhood as something imposed on the person.”

Additional Intermediate and Long-Term Outcomes

To better understand whether and how moving to an opportunity neighborhood impacts the lives of children and families, and how children and families with different risk factors experience neighborhoods differently, it will be important to measure and track more outcomes than previous studies have done. This requires assessing baseline status for the measures and changes over time. In addition to the housing outcomes that are the focus of the HCV Mobility Demonstration Program, experts emphasized the importance of studying **children’s educational,⁵ health, and well-being** outcomes and **adults’ health** outcomes.

The experts positioned health outcomes as potential predictors of moving, as outcomes of moving, and as sources of heterogeneity in treatment effects. For children, key health outcomes include:

- Cognitive and emotional development;
- Indices of health and mental conditions,⁶ especially asthma, obesity, and emotional disorders, which can have long-term effects on health and productivity and have cross-cutting implications for socioeconomic and educational outcomes;
- Health care access and use;
- Food security, which has implications for mental health and is related to financial security;
- Oral health; and
- Sleep, which has implications for stress, physical health, and family dynamics.

For adults, important health outcomes include:

- Pregnancy-related outcomes such as low birth weight⁷ and maternal mortality, especially in the context of racial disparities;
- Physical health conditions, including obesity and diabetes;
- Mental health—including measures of hopelessness, depression, happiness, flourishing, thriving, well-being, sense of belonging, social cohesion, and social capital—and its impact on other outcomes for parents (e.g., employment, general health) and on children (e.g., health, mental health, education), and
- Sleep, which—as it does for children—has implications for stress, physical health, and family dynamics.

⁵ Suggested data tools include the Stanford Educational Data Archive (SEDA), and Measures of Academic Progress (MAP Growth). SEDA contains detailed data on educational conditions, contexts, and outcomes in schools and school districts across the United States, including measures of academic achievement, achievement gaps, school and neighborhood racial and socioeconomic composition, school and neighborhood racial and socioeconomic segregation patterns, and other features of the schooling system. Measures of Academic Progress is an assessment that measures children’s individual growth from a baseline over time. Researchers could administer it directly to children, thereby avoiding the chore of securing student-level data from each school district, and the assessment is standardized so the data can be pooled across sites (unlike school district test data).

⁶ E.g., as measured by the Kessler Psychological Distress Scale

⁷ A measure of risk stratification, as low birth-weight babies are at risk for poor outcomes later in life

Research Methods and Data Sources to Advance the Research Agenda

- 1. Study Design** Experts consulted by the Research Road Map team recommended the following design elements for studies that use the HCV Mobility Demonstration Program as a platform:
 - Use of multiple methods, including strong support for the planned RCT, qualitative research, and observational data collection. Relevant methods include focused or rapid ethnography, especially to understand why participants make the choices they do and to aid with interpreting mixed results; and cross-classified, multi-level modeling to study people who are embedded in more than one environment (e.g., nesting children in their school and neighborhood environments), to better estimate the contributions of each;
 - Involvement of people from multiple disciplines in shaping study protocols—anthropology, demography, sociology, psychology, epidemiology, genetics, epigenetics, pediatrics, urban studies, “big data,” etc.;
 - Resident participation (including youth as well as adults), to provide input on research priorities, questions, and study design; assistance with data interpretation; feedback on findings; and assistance with dissemination. Resident councils, which exist for some mobility programs, can be a vehicle for including residents in research and evaluation;
 - Focus on sub-population studies of children (e.g., boys vs. girls; young vs. older children; low-birthweight babies; children with asthma, obesity, and/or chronic stress) and of parents to better understand how exposure to new neighborhood conditions may affect health outcomes. Findings from these studies might also suggest the optimal age and developmental stage for a child to participate in a mobility intervention in order to obtain the greatest positive impact; and
 - Plans for long-term follow-up, including qualitative interviews, surveys, and data linkages.
- 2. Data Collection** Baseline data collection. Experts suggest that researchers should conduct robust data collection at baseline through child and in-home assessments, surveys, and interviews. This effort would have to be coordinated with the main evaluation, and it may involve some tradeoffs, as increasing the amount of information requested from program participants could increase response burden.

Baseline data collection should collect information about people who choose to sign up as well as those who choose not to sign up for the HCV Mobility Demonstration Program. This would allow a better understanding of the generalizability of the program and would assist with the development strategies and approaches to reach potentially underserved populations.

One researcher suggested the possibility of partnering with NIH to collect and “bank” biospecimens (blood and saliva) from HCV Mobility Demonstration Program participants at baseline. Researchers could then, for example, analyze biospecimens to potentially identify, among children, early markers of later health. Epigenetic studies, for example, could show how physical developments (such as cellular aging) might change in response to changes in the social and physical environment achieved through mobility. Use of biomarkers and their banking would need to be approached carefully, to avoid the risk of people misinterpreting or misusing the results.

Follow-up data collection. Post-move, researchers should survey and/or interview families to collect data on the choices they made and the trade-offs they considered, as well as on all of the different outcomes identified earlier in this summary.

Data on contextual factors. To better understand potential mediators of outcomes—and what the implications might be for taking housing mobility programs to scale in local and regional housing markets—researchers advise creating data summaries of relevant contextual factors. These factors include school choice policies, the local housing market, characteristics of landlords and rental property businesses in neighborhoods that offer housing to program participants, and school characteristics.

Analyses of the market for affordable rental housing in opportunity neighborhoods, for instance, could include: patterns of racial and economic segregation, patterns of eviction and foreclosure, availability and quality of rental housing, variation in rents, and vacancy rates (in addition to factors detailed on p 8).

Analyses of landlord characteristics could include: a profile of landlords (e.g., size of housing portfolio, type of ownership, number already participating in the HCV Mobility Demonstration Program); comparisons between the market profile and the profile of landlords participating in the housing voucher program, to understand which types of landlords are opting in and out of the HCV Mobility Demonstration Program; and focus groups with landlords who own affordable rental housing in opportunity neighborhoods to test strategies for marketing voucher participation to them and to ascertain whether landlords’ perspective on vouchers changes over time.

Cross-sector, cross-agency data linkages. Beyond repeated surveys of participants, studying the interconnections among health, housing, and education outcomes will require the ability to link data on HCV Mobility Demonstration Program households with other local databases held by non-housing agencies and sectors. These could potentially include:

- Public schools;
- State Medicaid agencies;
- Health services operated in partnership with PHAs
- Local health and human services agencies;
- Local Homeless Management Information systems, to access data on participants' homelessness, and to track these data for voucher recipients (and non-recipients) over time; and
- Vital records, such as birth certificates (which, when linked to Medicaid/CHIP data, increases capacity to report on two measures of health care quality, low birth weight and Cesarean section rates).

Making these links will require baseline consent forms that permit information on participants in the supplemental studies to be linked with other administrative records, coordination across agencies to develop these linkages, and arrangements that enable HUD to share data with researchers so they can analyze the linked data. Researchers suggested that the Oregon Health Insurance Experiment, a landmark study of the effects of expanding public health insurance that involved an RCT of Medicaid data linked to a range of outcomes, might be one model for these agreements.

- 3. Data Architecture** Given the need to coordinate and streamline data collection, and to support the many studies for which the HCV Mobility Demonstration Program could serve as a platform, it will be important to create a system and structure to serve as a repository for data that are not part of the primary study, for access by other researchers. The experts with whom the Research Road Map consulted raised this issue but did not explore it further.

Takeaways

The interviews, small-group discussions, and full convening that constituted the Research Road Map Project revealed agreement among leaders in the housing, health, education, and economic development fields that HUD's new voucher mobility program and other voucher mobility programs offer a valuable platform for supplemental research on housing, neighborhoods, and families. That research is needed to better understand heterogeneity in (a) families' interactions and experiences with housing voucher mobility programs and the programs' impact, including the choices and trade-offs families face; (b) the factors that explain individual and family-level variation in successfully connecting to new neighborhoods, and achieving desired health, education, and economic outcomes; and (c) the contextual factors that hinder or facilitate achievement of all desired outcomes.

Supplemental research based on the HCV Mobility Demonstration Program should unpack the relative impact and value of different mobility services and track multiple intermediate and long-term outcomes related to children's and parents' health, wellbeing, and community connectedness. It should involve residents in research design, data interpretation, and dissemination of findings. The research should center the role of racial inequities, racism, and racial/economic segregation in shaping families' expectations, choices, constraints, decisions, and outcomes. And it should use mixed methods—surveys, qualitative and ethnographic studies, and cross-sector, cross-agency data linkages—to capture the perspectives, attitudes, experiences, and practices of families, landlords, and public housing authorities, both within the housing voucher mobility program and in neighborhoods and schools.

Housing mobility can offer a unique window into what makes communities healthier places to raise families and thrive.

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Disclaimer

Dr. Pollack serves as a part-time Senior Research Advisor to the Office of Policy Development and Research at U.S. Department of Housing and Urban Development (HUD), and Dr. Ellen serves as a technical advisor to the team from Abt Associates and Urban Institute that was selected to evaluate the new Housing Choice Voucher demonstration.

The contents of this report do not necessarily reflect the views or policies of HUD, other federal agencies, or the Housing Choice Voucher Mobility Demonstration Project evaluation team.