On July 23, the Department of Housing and Urban Development (HUD) announced the ultimate termination of the currently suspended 2015 Affirmatively Furthering Fair Housing (AFFH) regulation, a critical tool for addressing systemic racism and segregation in communities across our nation. As pediatricians, public health researchers, and child health and policy experts, we are deeply concerned with the harmful impact that this rule change will have on the health and well-being of children and families of color, and urge the Department to rescind this change immediately and resume implementation of the 2015 AFFH rule.

The evidence on the connection between housing and health is clear: when children live in quality, stable homes their families can afford in neighborhoods with ready access to opportunity, they are better able to thrive. Previous research documents the ways in which these four domains – quality, stability, affordability, and location – are essential for the short- and long-term health of children. Ensuring all four domains are adequately met is critical to forming the optimal foundation for children’s health. Systemic racism and historic segregation have directly and negatively impacted all four domains of housing for families of color and as a result created deep economic inequities that exacerbate health disparities.

Changes to the AFFH rule will substantially weaken the Fair Housing Act of 1968, which sought to prevent individual acts of discrimination as well as address historic patterns of segregation. This will, in turn, threaten the health of children and their families by increasing risks in all four of the housing domains, particularly through increased segregation – a strong predictor of health inequities. Residential segregation and its association with disparities in wealth and health has been extensively documented. Where a child lives influences their health; it determines where they go to school – the quality of which is often tied to the income of the neighborhood and thus the tax base for funding the school – and dictates access to safe spaces in which to play and exercise (such as parks and green space), nutritious food, and other opportunities that influence health and well-being across the lifespan. Current housing discrimination, even when unintentional, unfolds in the historic context of government-sanctioned discriminatory policies, and often reinforces neighborhood racial and ethnic inequities. Enforcement of the Fair Housing Act of 1968 and desegregating communities are critically important for child health.

Health and economic disparities are deeply rooted in systemic and institutional factors that have been shaped over our country’s history. The COVID-19 crisis and recent protests against systemic and institutionalized racism highlight the continued presence of these disparities in our society, and the urgent need to recognize and address them. The 2015 AFFH rule was designed to address disparities and discrimination in housing through rigorous criteria for evaluating the underlying conditions of segregation in cities and towns across the U.S. and developing plans for addressing these issues. If implemented fully, this rule would have been effective in improving health and undoing entrenched patterns of housing segregation. The tools and requirements in the rule made progress toward not only ending residential segregation and addressing the root causes of discrimination but would have also advanced health equity by addressing multiple forms of adverse housing circumstances. HUD’s decision to eliminate the rule demonstrates a failure to address the drivers of health created by segregation and the concentration of poverty and, as a result, will perpetuate and exacerbate health disparities.
Ensuring that all children live in homes and communities that promote health is not just a wise choice for today – it is an investment in our future economic stability and national prosperity. When children are healthy, they are better able to succeed in school and grow up to become healthy, more productive adults. When parents are healthy, they are able to support the health and development of their children and contribute to the prosperity of all. To achieve this vision, we must ensure all communities have equitable access to the supports and resources necessary for people to reach their highest potential. Recognizing the ways in which our national history and discriminatory policies have contributed to inequitable systems where some communities have access to housing and opportunities for thriving when others do not, we must seek evidence-based solutions, like the 2015 AFFH rule, for responding to this reality. In doing so, we secure a brighter future for us all. As experts in pediatric health and development, we oppose in the strongest term changes to the AFFH rule.