Housing Insecurity in Ohio: 2019 Update

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OMAS
Ohio Medicaid Assessment Survey

EXECUTIVE SUMMARY

Housing insecurity—defined as lack of secure access to a safe, private dwelling fit for human habitation—continues to be a serious issue for many Medicaid enrollees. Prior research in Ohio has shown that roughly 4% of Medicaid expansion enrollees experienced homelessness or other serious forms of housing insecurity, and that housing insecurity is associated with greater enrollment churn.[1] The number of Ohioans accessing homelessness services has also grown approximately 20% since 2012, and is increasingly comprised of adults with children, who now represent more than one-third of the state's homeless population.[2] Nationally, housing insecurity is associated with substantially higher rates of mortality and chronic disease,[3] job loss,[4] stress, and declines in mental health status,[5] as well with greater utilization of emergency room services.[6]

This chartbook presents new 2019 data on the prevalence of housing insecurity in Ohio, with an emphasis on Medicaid enrollees and individuals who are potentially Medicaid eligible. Since housing insecurity is a multidimensional concept,[7] this chartbook examines homelessness as well as other aspects of housing that are likely to have substantial impacts on health outcomes and healthcare utilization including, current housing status, housing cost burden, housing instability and housing quality. The final section presents a combined measure of housing insecurity which includes both current housing status and housing cost burden, for which OMAS data is currently available.

Key Findings

- More than 40% of all Ohioans experienced some form of housing insecurity in 2019.
- On average, 3.6% of renter households in Ohio experienced an eviction each year in the period between 2002 and 2016.
- Medicaid enrollees were more likely than other Ohioans to experience every form of housing insecurity examined in the present study. The prevalence of housing insecurity also varied by age, race/ethnicity, and county type.
- In 2019, 68.4% of Medicaid enrollees were housing insecure, including 29.8% who were severely cost-burdened and 4.1% who were homeless or living in shelters or other temporary housing.
- Housing insecurity was associated with a greater likelihood of fair/poor self-reported health and mental health impairment, as well as more frequent emergency room visits.

Visit **grc.osu.edu/OMAS** for additional information about OMAS, including public use files, codebooks, and methods

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BACKGROUND

Ohioans face many potential challenges when seeking safe and secure housing for themselves and their families. These challenges include but are not limited to rising housing costs, deteriorating or inadequate physical structures, and the threat of forced moves due to an eviction, foreclosure, job loss or other personal crisis. For an estimated 70,000 Ohioans, these challenges will result in an experience with homelessness at some point in the year, with an estimated 10,000 Ohioans being homeless on any given night.[8]

However, literal homelessness, defined by the U.S. Department of Housing and Urban Development (HUD) as "lacking a fixed, regular and adequate nighttime residence,"[9] is only one manifestation of the broader problem of housing insecurity. Studies suggest a larger number of individuals who are housed but live in housing that can be considered insecure because it is temporary in nature, is unfit for human habitation, or is secured by precarious financing. For example, HUD estimates that in 2015 approximately 8 million renters in the U.S. exhibited "worst case needs" for housing assistance (a status determined by having very low incomes, spending more than 50% of income on housing, and living in severely inadequate conditions).[10] Likewise, recent data indicate that about 23% of households in Ohio spend more than 50% of their household income on housing, and 6.9% of renter-occupied households and 3.1% of owner-occupied households live in homes that were classified by HUD as inadequate.[11]

Consequently, recent research has sought to develop more comprehensive definitions of housing insecurity that capture different dimensions of housing-related problems. This work has also been supplemented by efforts to develop multidimensional measures of housing insecurity that capture different aspects of the concept within a single combined measure or index.[12,13,14] These studies find different dimensions of housing insecurity can have unique effects on health outcomes, and that common pathways to homelessness often entail experience with different dimensions over time. There is also evidence that the different dimensions of housing insecurity are highly correlated, and that failure to consider the multidimensional nature of housing insecurity can bias prevalence estimates of the severity of housing problems. Moreover, program evaluation studies suggest housing interventions are more likely to improve health outcomes when they address different dimensions of housing insecurity simultaneously.[15]

To accurately assess the extent of housing problems for Ohio's Medicaid population, and to fully understand the connections between housing insecurity and health, it is necessary to develop measures which extend beyond homelessness and current housing status. This includes assessing other aspects of housing such as costs and experiences with forced moves, and integrating data from a variety of sources. Overall, these activities can more accurately determine the extent of housing insecurity issues and highlight disparities. They can also provide insights into an important social determinant of health that has been shown to have an impact on health outcomes, healthcare services utilization, and costs.[16] By developing an improved understanding of the housing needs of Ohioans, and the link between these needs and their health status, one can identify targets for interventions that can address a variety of areas of interest for health policy.

OBJECTIVES

The purpose of this chartbook is to provide a comprehensive report on the extent of housing insecurity in Ohio and its impact on health outcomes and healthcare services use as measured by the Ohio Medicaid Assessment Survey (OMAS) and other data sources. Our objectives are to:

1. Investigate potential relationships between housing insecurity and health outcomes (e.g., fair/poor self-reported health, prevalence of chronic conditions, mental health impairment, and diagnoses of depression or anxiety) and healthcare services use (e.g., emergency room visits, routine checkups, and unmet healthcare needs).

2. Present estimates of housing insecurity as measured by current housing status, housing cost burden, housing instability, and housing quality. In addition, this chartbook also seeks to present a multidimensional measure of overall housing insecurity that combines the two dimensions captured by OMAS, current housing status and housing cost burden.

3. Examine the prevalence of housing insecurity among Medicaid enrollees, individuals who are potentially Medicaid eligible, and a comparison population of other Ohioans.

4. Compare estimates of housing insecurity across different subpopulations in Ohio, as defined by individual characteristics such as age, county type, and race/ethnicity.

5. Identify insights which may further improve understanding of the connections between the housing conditions and health status of individuals in Ohio.

METHODS

Description of Data Sources

- The primary source of data for this report was the 2019 Ohio Medicaid Assessment Survey (OMAS). The 2019 OMAS is an Ohio-specific assessment that provides health status and health system-related information about residential Ohioans at the state, regional and county levels, with a concentration on Ohio's Medicaid, Medicaid-eligible, and non-Medicaid populations. This multi-mode study collected data through a sample of landline and cellular phones in Ohio through random digit dialing, as well as by web-based and paper versions through address-based sampling. OMAS data is used to construct the measures of current housing status and housing cost burden, as well as the multidimensional measure of housing insecurity which combines the two.

- Because the target population for the 2019 OMAS was the total noninstitutionalized adult and child populations residing in residential households in Ohio, and because this target population excluded individuals without access to a residential phone (landline or cell phone), it is likely to underestimate the number of Ohioans experiencing the most severe forms of housing insecurity. It is expected that individuals who were homeless or living in shelters at the time of fielding were less likely to have been sampled and to have had the phone access necessary to complete the

survey. The estimates for the homeless and shelter populations should therefore be considered conservative.

- Information about housing instability was obtained from three sources. First, data from the Current Population Survey (CPS) provided information about recent changes in residence, among different subpopulations in Ohio. Second, Medicaid administrative records provided information about frequency with which Medicaid enrollees changed residence within the past year and relationship between frequent moves and various measures of health outcomes and healthcare services use. Third, data collected by the Evictions Lab at Princeton University was used to examine to the number of evictions which occurred in Ohio during the years 2002-2016. These were obtained from Ohio court records.

- Data from the American Housing Survey (AHS) was used to examine the housing quality of Ohioans and compare differences in selected housing quality measures across various subpopulations. These data were pooled for the years 2013-2018 in order to yield a sample size large enough to generate stable Ohio-specific estimates.

METHODS

Variable Definitions

- ***Current Housing Status:*** Current housing status is defined in terms of the response options to an OMAS item which asks respondents to describe where they currently live.

- ***Housing Cost Burden:*** Housing cost burden is defined as the proportion of monthly total family income devoted to monthly housing costs. Housing costs are defined as including only money spent on rent or mortgage payments, and do not factor in other costs such as utilities or home repairs. The level of housing cost burden is measured using three categories defined by HUD: (1) The level of housing cost burden is considered to be low if less than 30% of total family income is spent on housing costs; (2) moderate if spending on housing is between 30% and 50% of total family income; and (3) severe if more than 50% of total family income is spent on housing.

- ***Housing Stability:*** In the CPS data, individuals are considered to have moved if they reported that they changed their residence at least once in the past year. For the measure based on Medicaid administrative records, individuals were considered to have moved if their address changed and the new address was geocoded to a different location. A measure of the number of moves occurring in the past year was then created for each individual enrolled in Medicaid during 2018.

- ***Housing Quality:*** Housing quality is measured using several housing indicators selected from the 2015 AHS. The most important of these is housing adequacy, which is measured according to the three-part framework developed by HUD which classifies housing as severely or moderately inadequate based on the presence of problems related to plumbing, heating, wiring, upkeep, or lack of electricity. Housing units which are not classified as moderately or severely inadequate are considered adequate.

- ***Overall Housing Insecurity:*** Overall housing insecurity is measured by combining the measures of current housing status and housing burden, so that individuals falling into the homeowner and renter categories for current housing status are further subdivided by their levels of housing cost burden. This results in a combined measure of housing insecurity with nine categories ranging from homeowners with a low level of housing cost burden (the most housing secure category) to the currently homeless (the most housing insecure category).

Analyses

Descriptive statistics are reported in the figures and tables that follow. No statistical testing was performed. For statistics that were generated using survey data, weighted survey estimates are presented with the 95% confidence intervals for the estimates displayed in parentheses or using error bars.

OMAS County Types

Legend:
- ☐ Rural Appalachia
- ☐ Metropolitan
- ☐ Rural Non-Appalachia
- ☐ Suburban
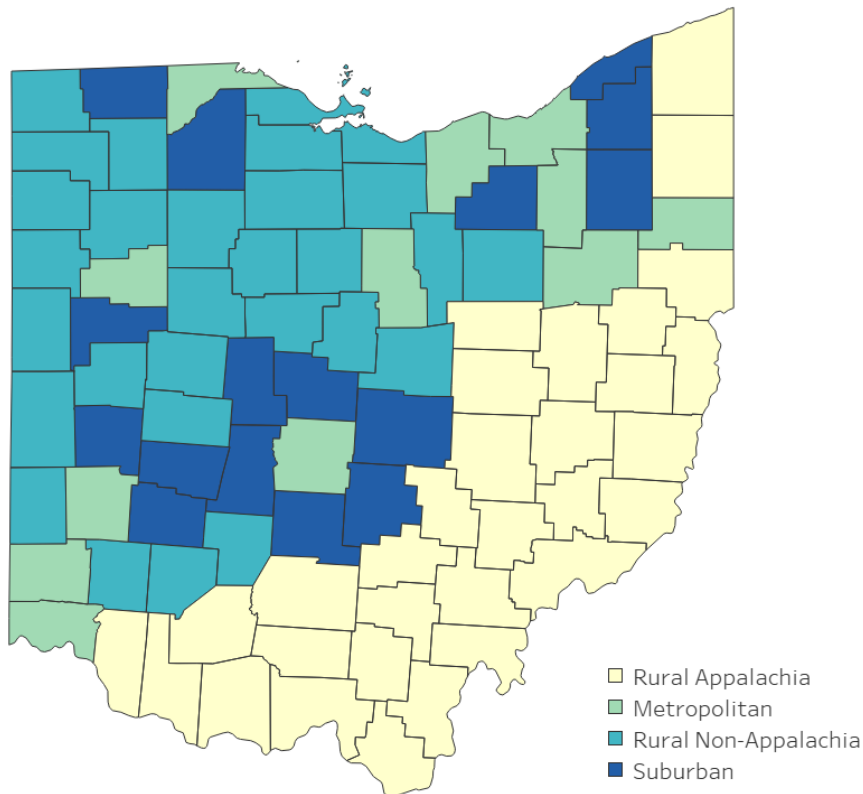
This chartbook contains analyses that refer to county types, which are Ohio counties grouped by demographic characteristics. OMAS defines these county types in accordance with federal definitions, as follows: (1) Appalachia is defined using the Appalachian Regional Commission (ARC) standard; (2) metropolitan is defined using US Census Bureau definitions incorporating urban areas and urban cluster parameters; (3) rural is defined by the Federal Office of Rural Health Policy at the Health Resources and Services Administration (HRSA), excluding Appalachian counties; and (4) suburban is defined by the US Census Bureau and is characterized as a mixed-use or predominantly residential area within commuting distance of a city or metropolitan area. These designations were originally set by the Ohio Department of Health in 1997 for the 1998 Ohio Family Health Survey (OFHS) and were slightly adjusted in 2004 and again adjusted in 2010 to include Ashtabula and Trumbull counties as Appalachian, in accordance with a federal re-designation. Guidance for these categories was provided by National Research Council's Committee on Population and Demography staff – for original designations and revisions.
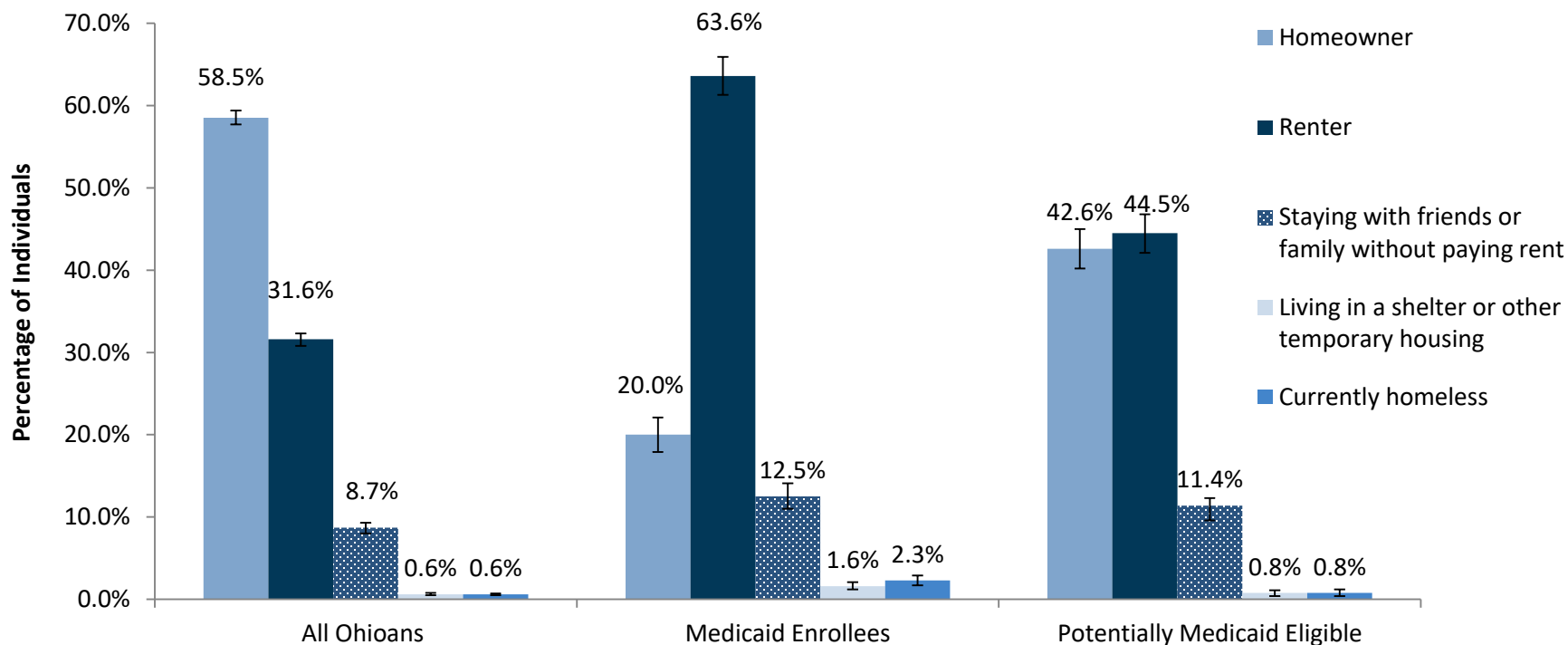
OMAS
Ohio Medicaid Assessment Survey

RESULTS:
CURRENT HOUSING STATUS

Key Findings: Current Housing Status

- Nearly 1 in 10 Ohioans is currently housing insecure in terms of their current housing status.

- Housing insecure individuals were much more likely to report being in fair or poor health, report mental health impairment, and to have unmet healthcare needs.

- Renters were also more likely than homeowners to report being in fair or poor health.

Figure 1. Current Housing Status of Adult Ohioans

Note: All data obtained from the 2019 OMAS, with errors bars displaying 95% confidence intervals for the survey estimates.

Of all adult Ohioans, most (58.5%) were homeowners and 31.6% were renters. In addition, 8.7% were staying with friends or family without paying rent, 0.6% were living in a shelter or other temporary housing and 0.6% were currently homeless. Combining these last three categories, about 9.9% of Ohio adults are housing insecure. In comparison, Medicaid enrollees are much more likely to be renters (63.6%) or housing insecure (16.4%).

Table 1. Current Housing Status of Ohio Adults, by Age Group

Age Group	Current Housing Status				
	Homeowner	Renter	Staying with Friends or Family	Living in Shelter	Currently Homeless
19-24	9.3% (7.7 - 10.7%)	49.8% (46.4 - 53.2%)	38.1% (34.3 - 41.8%)	2.1% (1.4 - 2.8%)	0.8% (0.4 - 1.2%)
25-34	35.9% (33.9 - 37.9%)	51.6% (49.5 - 53.7%)	11.0% (9.6 - 12.5%)	0.6% (0.3 - 0.8%)	0.8% (0.5 - 1.2%)
35-44	57.4% (55.2 - 59.6%)	34.5% (32.4 - 36.5%)	6.2% (5.0 - 7.4%)	0.8% (0.4 - 1.2%)	1.1% (0.7 - 1.5%)
45-54	69.0% (66.9 - 71.0%)	25.7% (23.8 - 27.5%)	4.5% (3.5 - 5.5%)	0.4% (0.2 - 0.7%)	0.4% (0.3 - 0.6%)
55-64	72.8% (71.3 - 74.4%)	22.0% (20.6 - 23.4%)	4.0% (3.2 - 4.8%)	0.5% (0.3 - 0.7)	0.6% (0.3 - 0.9)
65+	79.1% (77.8 - 80.4%)	18.2% (16.9 - 19.4%)	2.4% (1.9 - 2.9%)	0.2% (0.1 - 0.3%)	0.1% (0.0 - 0.1%)

Note: All data obtained from the 2019 OMAS, with 95% confidence intervals in parentheses.

Ohioans in older age groups were generally more likely to be homeowners and less likely to be housing insecure. Individuals who were between the ages of 19 and 24 were the most likely to be housing insecure, with 38.1% living with friends or family, 2.1% living in shelters or other temporary housing, and 0.8% being currently homeless. Comparatively high rates of current homelessness were also observed for those in the 25-34 age group (0.8%) and the 34-44 age group (1.1%).

Table 2. Current Housing Status of Ohio Adults, by Race/Ethnicity

Race/Ethnicity	Current Housing Status				
	Homeowner	Renter	Staying with Friends or Family	Living in Shelter	Currently Homeless
White	**64.0%** (63.0 - 65.0%)	**26.7%** (25.9 - 27.6%)	**8.3%** (7.6 - 9.1%)	**0.5%** (0.4 - 0.6%)	**0.4%** (0.3 - 0.5%)
African American	**28.8%** (26.8 - 30.8%)	**57.7%** (55.6 - 59.9%)	**10.6%** (9.1 - 12.1%)	**1.4%** (0.9 - 1.8%)	**1.4%** (1.0 - 1.9%)
Asian American/Pacific Islander	**52.9%** (45.1 - 60.8%)	**37.0%** (30.0 - 44.1%)	**7.8%** (4.2 - 11.5%)	**0.7%** (0.0 - 1.7%)	**1.6%** (0.0 - 3.8%)
Hispanic (any race)	**35.0%** (30.9 - 39.1%)	**52.1%** (47.9 - 56.2%)	**10.7%** (8.3 - 13.2%)	**1.2%** (0.4 - 2.0%)	**1.0%** (0.4 - 1.6%)

Note: All data obtained from the 2019 OMAS, with 95% confidence intervals in parentheses.

White Ohioans were more likely to be homeowners (64.0%) and less likely to be housing insecure than other Ohioans. The lowest rates of homeownership were observed among Ohioans who were African American (28.8%) or Hispanic (35.0%), and individuals in these groups also had the highest rates of housing insecurity. While individuals who were Asian or Pacific Islander had a relatively high rate of homeownership (52.9%), they were also the most likely to be currently homeless (1.6%).
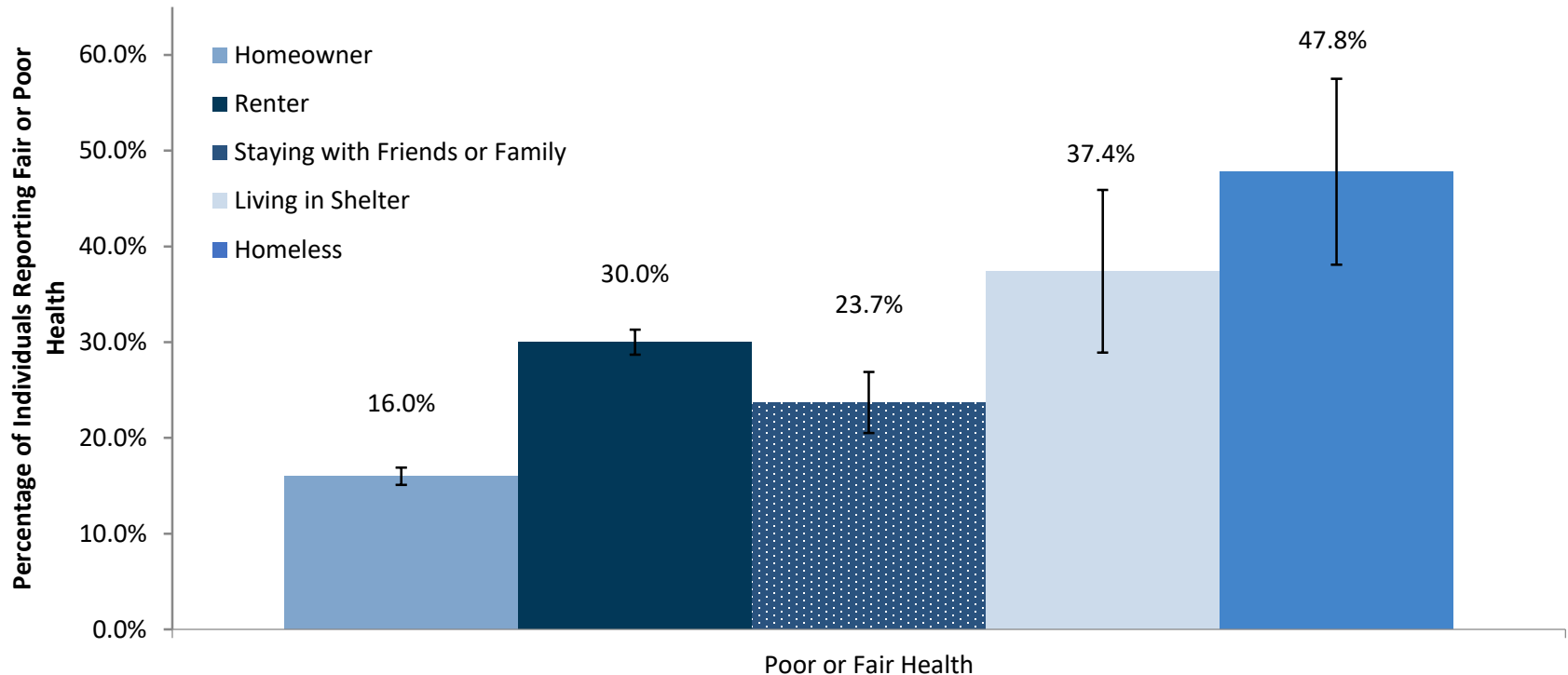
OMAS
Ohio Medicaid Assessment Survey

Table 3. Current Housing Status of Ohio Adults, by County Type

County Type	Current Housing Status				
	Homeowner	Renter	Staying with Friends or Family	Living in Shelter	Currently Homeless
Metropolitan	52.6% (51.4 - 53.8%)	36.9% (35.8 - 38.0%)	9.0% (8.2 - 9.8%)	0.7% (0.6 - 0.9%)	0.8% (0.6 - 0.9%)
Suburban	66.6% (64.7 - 68.5%)	24.4% (22.7 - 26.2%)	8.0% (6.9 - 9.1%)	0.6% (0.3 - 1.0%)	0.4% (0.2 - 0.5)
Appalachian	64.3% (62.1 - 66.4%)	26.3% (24.6 - 28.0%)	8.4% (6.5 - 10.3%)	0.4% (0.3 - 0.7%)	0.4% (0.2 - 0.7%)
Rural Non-Appalachian	65.8% (63.2 - 68.5%)	24.7% (22.7 - 26.7%)	8.6% (6.1 - 11.1%)	0.5% (0.2 - 0.7%)	0.5% (0.2 - 0.7%)

Note: All data obtained from the 2019 OMAS, with 95% confidence intervals in parentheses.

Individuals living metropolitan counties were less likely than other Ohioans to be homeowners (52.6%), were much more likely to be renters (36.9%). Metropolitan Ohioans were also the most likely to be housing insecure, as measured by staying with friends or family (9.0%), living in a shelter (0.7%), or current homelessness (0.8%).
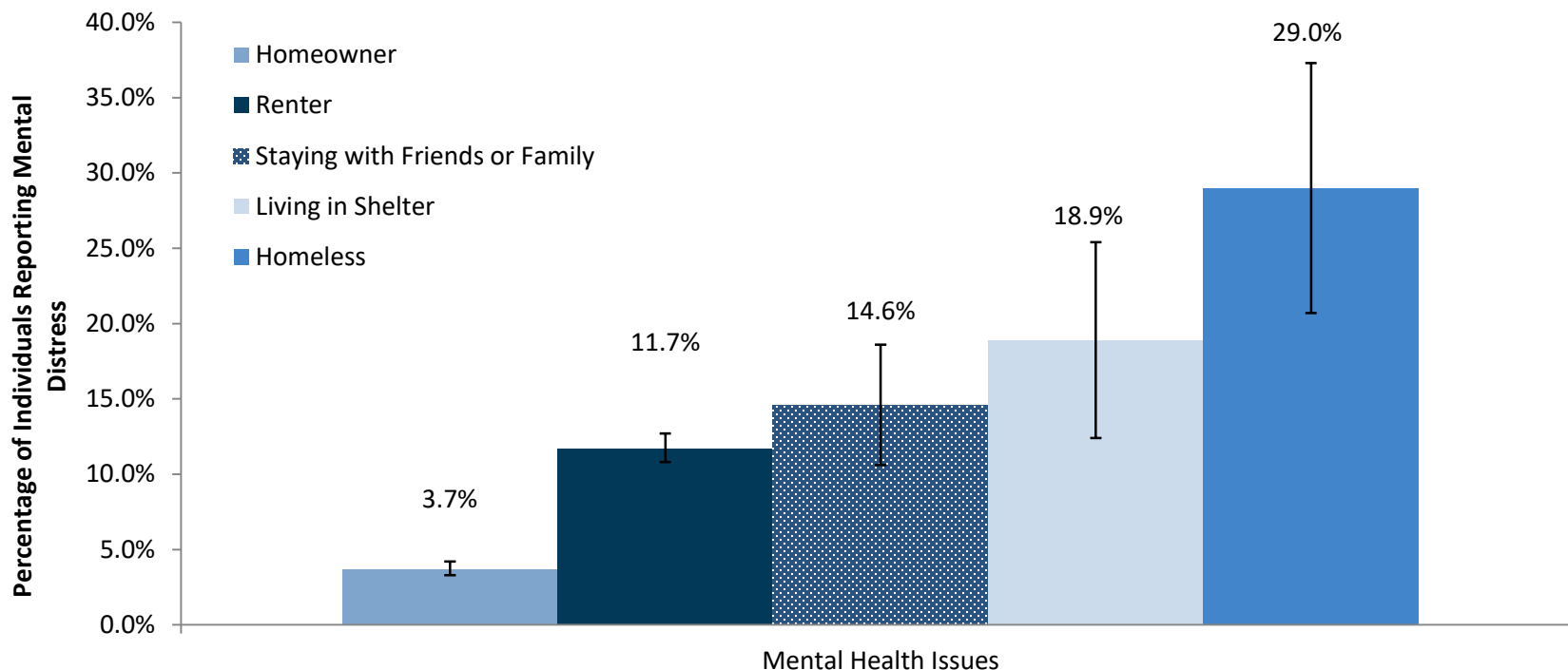
Figure 2. Percent of Ohio Adults with Fair/Poor Self-Reported Health, by Current Housing Status

Note: All data obtained from the 2019 OMAS, with errors bars displaying 95% confidence intervals for the survey estimates.

Homeowners were much less likely to report fair/poor health (16.0%) compared to renters (30.0%), those staying with friends or family (23.7%), or those staying in shelters or other temporary housing (37.4%). While both renters and homeowners are generally considered to have secure housing, renters had a prevalence of self-reported fair or poor health that was roughly twice that of homeowners and comparable to those living in shelters or staying with friends or family. As expected, currently homeless individuals were most likely (41.5%) to self-report their health as poor or fair.
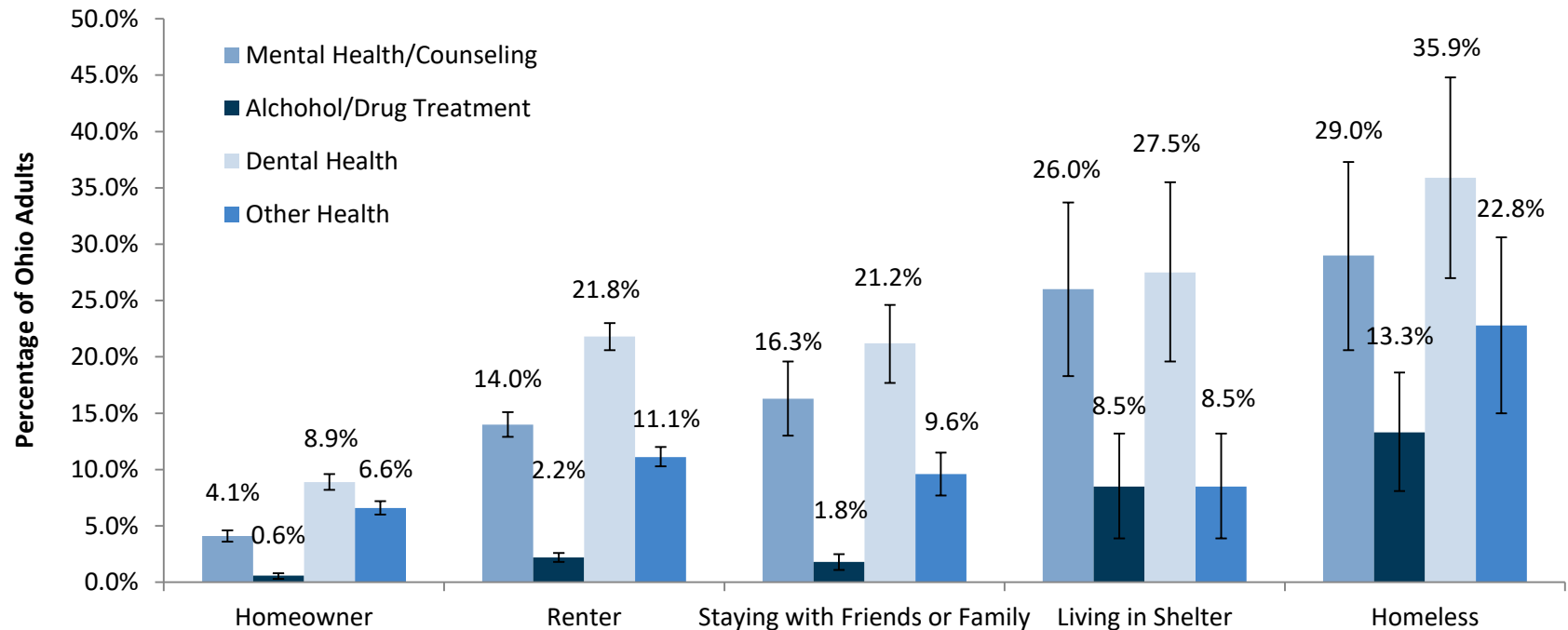
Figure 3. Percent of Ohio Adults with Mental Health Impairment by Current Housing Status

Note: All data obtained from the 2019 OMAS, with errors bars displaying 95% confidence intervals for the survey estimates. Individuals were considered to have experienced mental health impairment if they reported that they had 14 or more days where a mental health issue prevented them from working or pursuing their normal activities within the past month.

Homeowners were much less likely to report mental health impairment (3.7%) than individuals who were renters (11.7%), staying with friends or family (14.6%), living in shelters (18.9%) or who were currently homeless (29.0%). The self-reported prevalence of mental impairment among renters was approximately three times that of homeowners and was comparable to the prevalence for individuals who did not have their own home and were staying with friends or family.

Figure 4. Percent of Ohio Adults with Unmet Healthcare Needs, by Current Housing Status

Note: All data obtained from the 2019 OMAS, with errors bars displaying 95% confidence intervals for the survey estimates.

Homeowners were less likely to report unmet mental health or counseling needs (4.1%) than those who were renters (14.0%), staying with friends or family (16.3%), living in a shelter (26.0%), or currently homeless (29.0%). The same general pattern is also observed with respect to unmet needs related to alcohol or drug treatment, dental health, and other healthcare needs. For each type of need, homeowners had the lowest rate of unmet needs while individuals who were currently homeless had the highest rate of unmet needs. The rates of unmet needs for renters was also much higher than that of homeowners for every type of need, and was generally comparable to the rate of unmet needs for individuals who were staying with friends or family.

RESULTS:
HOUSING COST BURDEN

Note: Levels of housing cost burden are based on HUD's three-part categorization: (1) Low: Less than 30% of total family income spent on housing costs; (2), Moderate: Between 30% and 50% of total family income spent on housing; and (3) Severe: More than 50% of total family income on housing.

Key Findings: Housing Cost Burden

- On average, Medicaid enrollees spend about 40% of their total family income on housing, and roughly one third are severely burdened by housing costs.

- Individuals who were moderately or severely burdened by housing costs were much more likely to report being in fair or poor health.

- Severely cost burdened individuals were also more likely to use emergency room services.
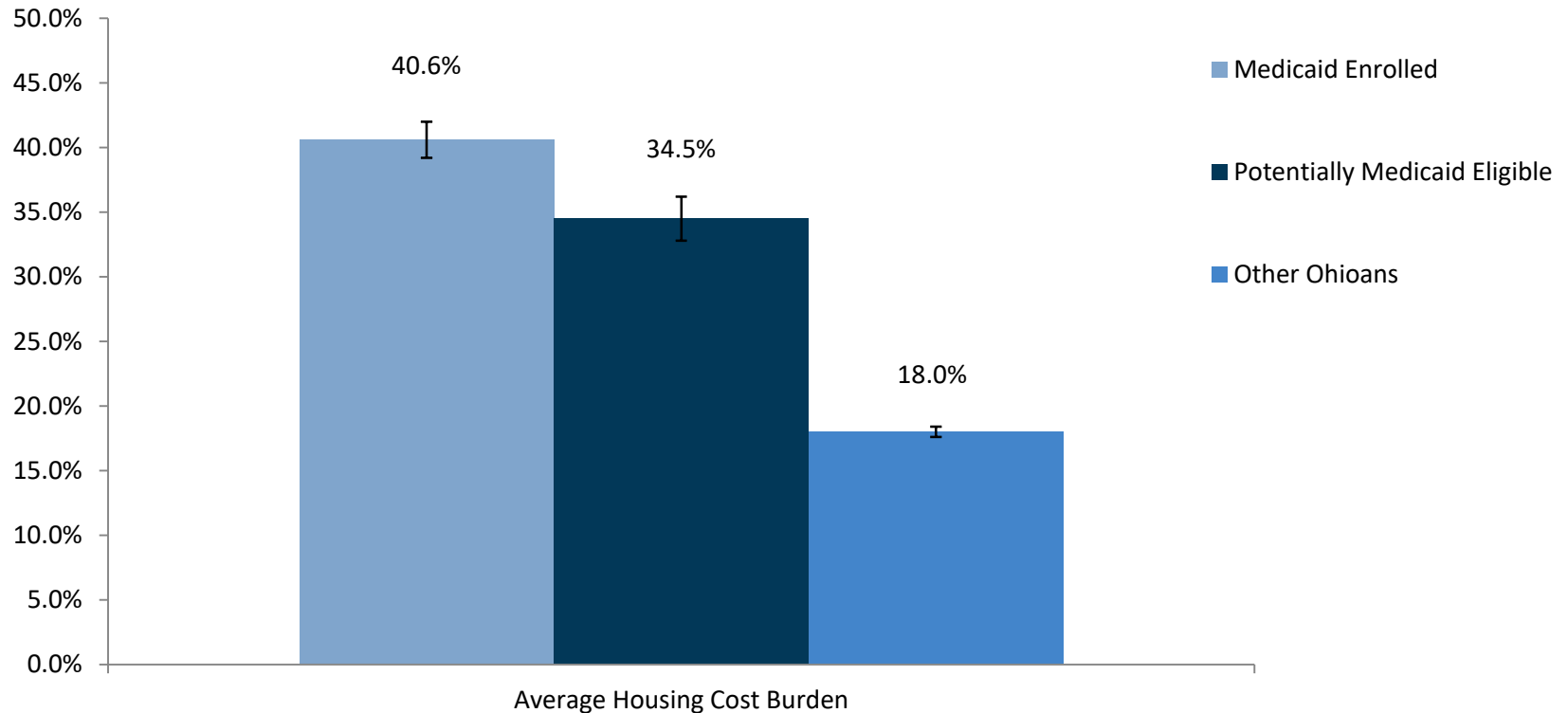
Figure 5. Percent of Ohio Homeowners & Renters with Low, Moderate or Severe Levels of Housing Cost Burden
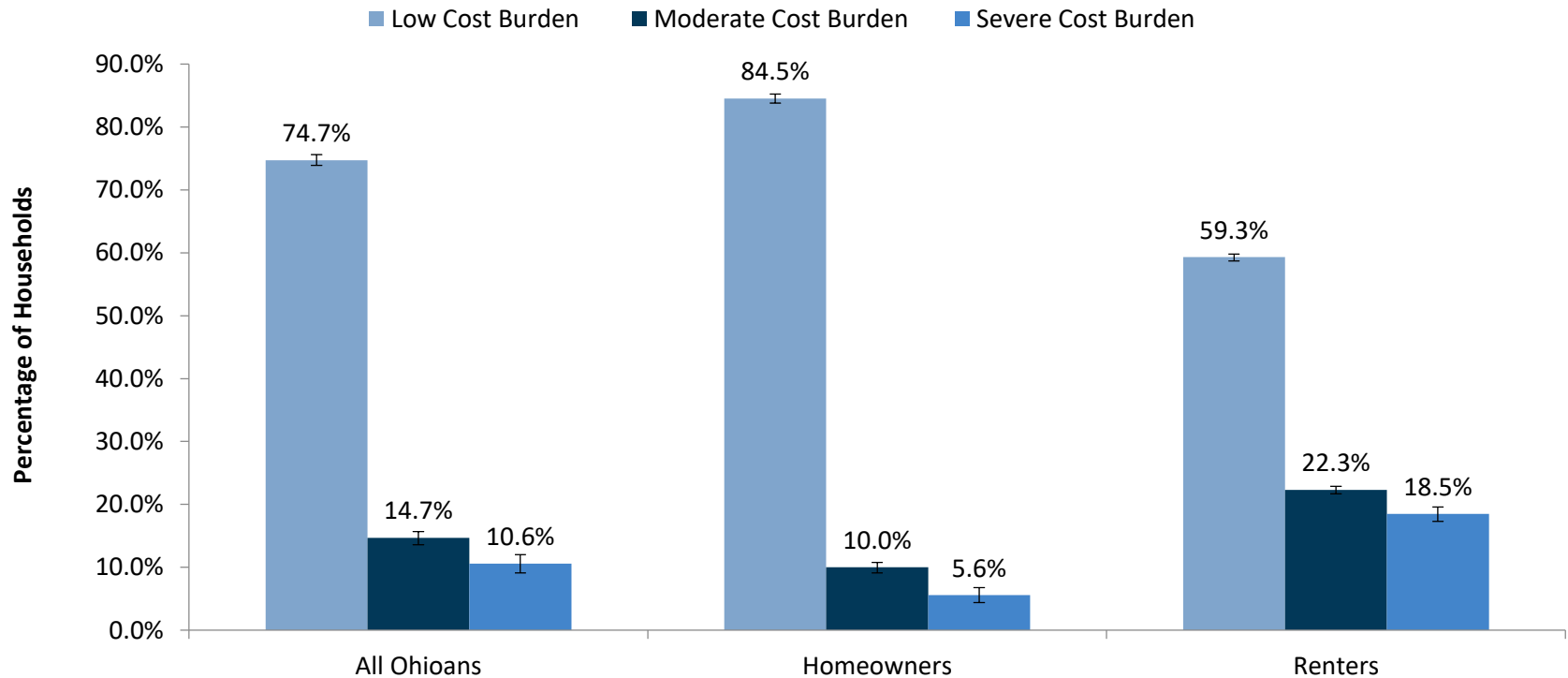
Note: All data obtained from the 2019 OMAS, with errors bars displaying 95% confidence intervals for the survey estimates. See Methods (pp. 7-8) for definitions of housing cost burden.

Renters were much more likely than homeowners to be cost-burdened, with 18.5% of renter households being severely cost burdened compared to 5.6% of households that owned their home.
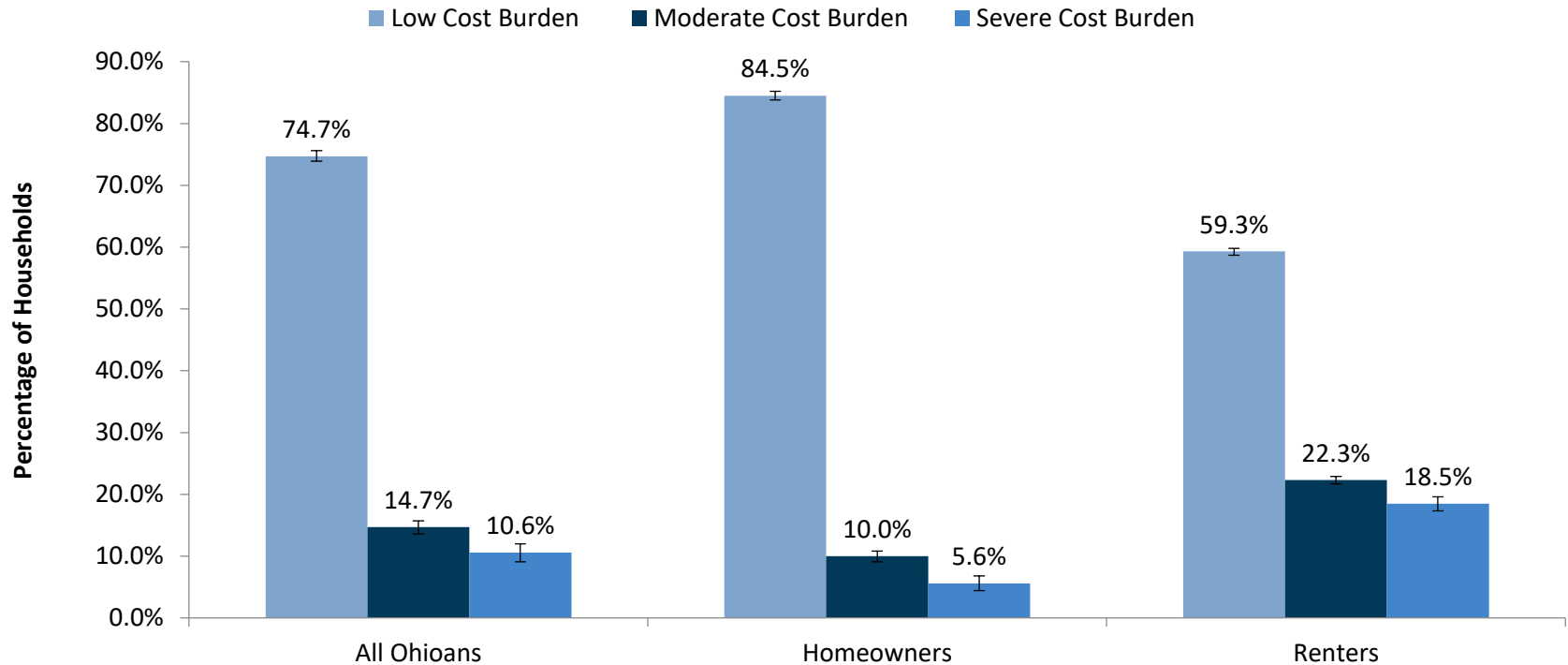
Figure 6. Average Percentage of Total Family Income Spent on Housing Costs, by Insurance/Income Category

Note: All data obtained from the 2019 OMAS, with errors bars displaying 95% confidence intervals for the survey estimates.

On average, Medicaid enrollees spent about 40.6% of their household income on housing costs, and individuals who were potentially Medicaid eligible spent about 34.5% of their household income on housing. In contrast, other Ohioans spent about 18.0% of their household income on housing. The measure of housing costs presented here includes only rent or mortgage payments, and does not include income spent on utilities, home maintenance, or other costs associated with housing.
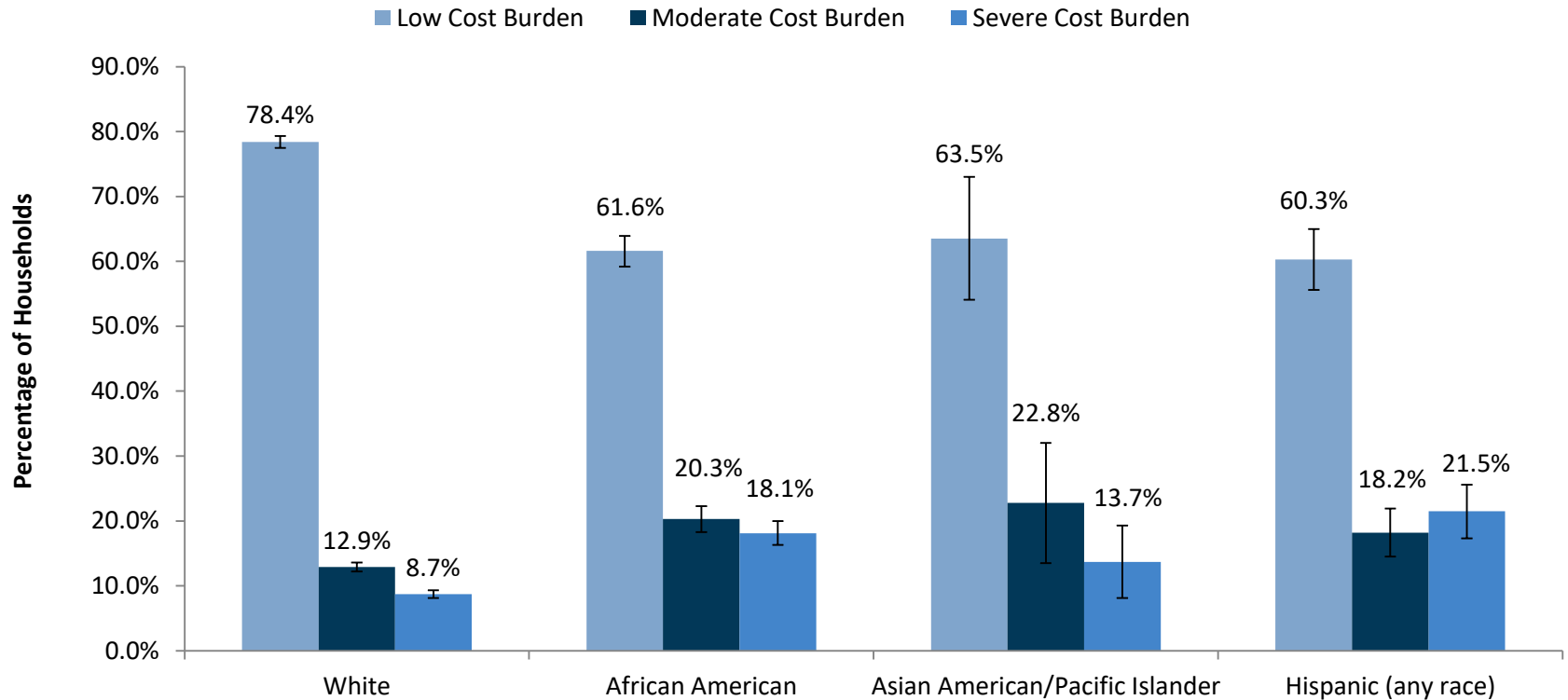
Figure 7. Percent of Ohio Households with Low, Moderate & Severe Housing Cost Burden by Insurance/Income Category

Note: All data obtained from the 2019 OMAS, with errors bars displaying 95% confidence intervals for the survey estimates. See Methods (pp. 7-8) for definitions of housing cost burden.

Most Medicaid enrollees experienced a significant housing cost burden, with 26.0% being moderately burdened and 31.5% being severely burdened. Among Ohioans who were potentially Medicaid eligible but not enrolled in Medicaid, 22.2% were moderately cost burdened and 24.0% were severely burdened. Other Ohioans were much less likely experience a housing cost burden, with 11.6% being moderately burdened and 4.9% being severely burdened.
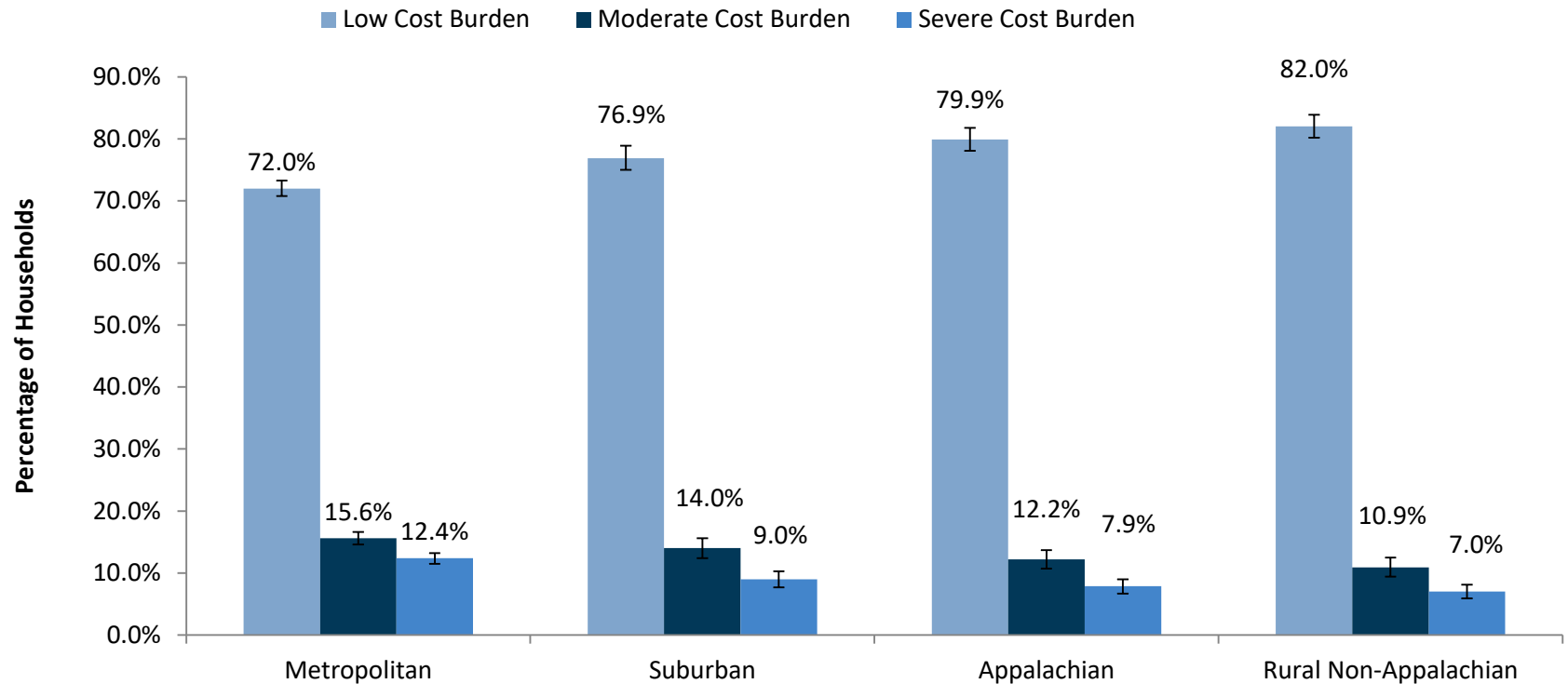
Figure 8. Percentage of Households with Selected Levels of Housing Cost Burden by Race/Ethnicity

Note: All data obtained from the 2019 OMAS, with errors bars displaying 95% confidence intervals for the survey estimates.

White Ohioans were less likely than Ohioans in other racial or ethnic groups to experience either a moderate or severe level of housing cost burden. Combining the moderate and severe cost burden categories, about 21.6% of white Ohioans were cost burdened, compared to 38.4% of those who were African American, 36.5% of those were Asian American or Pacific Islander, and 39.7% of those who were Hispanic.

Figure 9. Percentage of Households with Selected Levels of Housing Cost Burden by County Type

Note: All data obtained from the 2019 OMAS, with errors bars displaying 95% confidence intervals for the survey estimates.

Households living in metropolitan counties were likely to be cost burdened than those living in other parts of the state. Combining the moderate and severe cost burden categories, about 28.0% of metropolitan households were cost burdened, compared 23% of households in suburban counties, 20.1% of households in Appalachian counties, and 17.9% of households in rural non-Appalachian counties.

Figure 10. Percentage of Individuals Reporting Fair/Poor Health & Selected Chronic Conditions by Level of Housing Cost Burden
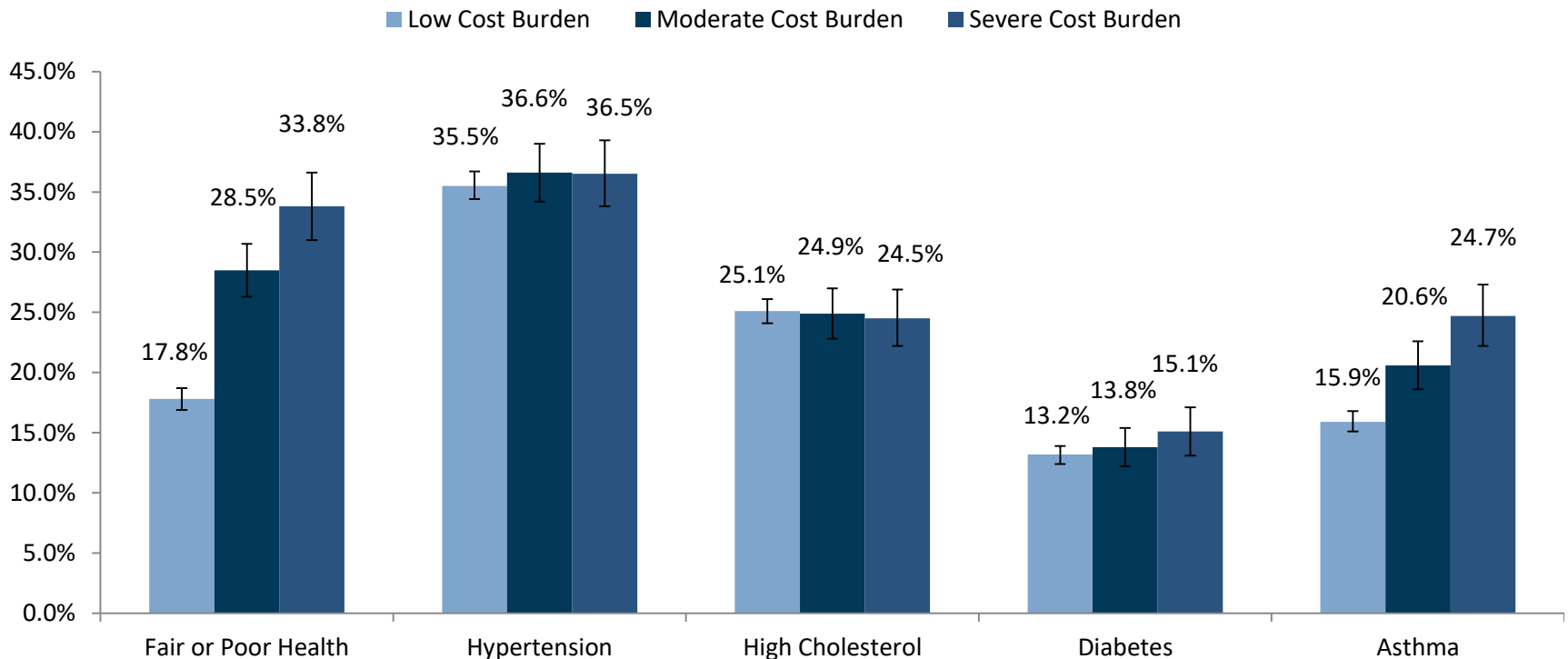
Legend: ■ Low Cost Burden ■ Moderate Cost Burden ■ Severe Cost Burden

Condition	Low Cost Burden	Moderate Cost Burden	Severe Cost Burden
Fair or Poor Health	17.8%	28.5%	33.8%
Hypertension	35.5%	36.6%	36.5%
High Cholesterol	25.1%	24.9%	24.5%
Diabetes	13.2%	13.8%	15.1%
Asthma	15.9%	20.6%	24.7%

Note: All data obtained from the 2019 OMAS, with errors bars displaying 95% confidence intervals for the survey estimates.

Housing cost burden was associated with fair/poor health status and asthma, but not with hypertension or diabetes. For example, 15.9% of adults with low housing cost burden had asthma, compared to 24.7% of those with severe cost burden.

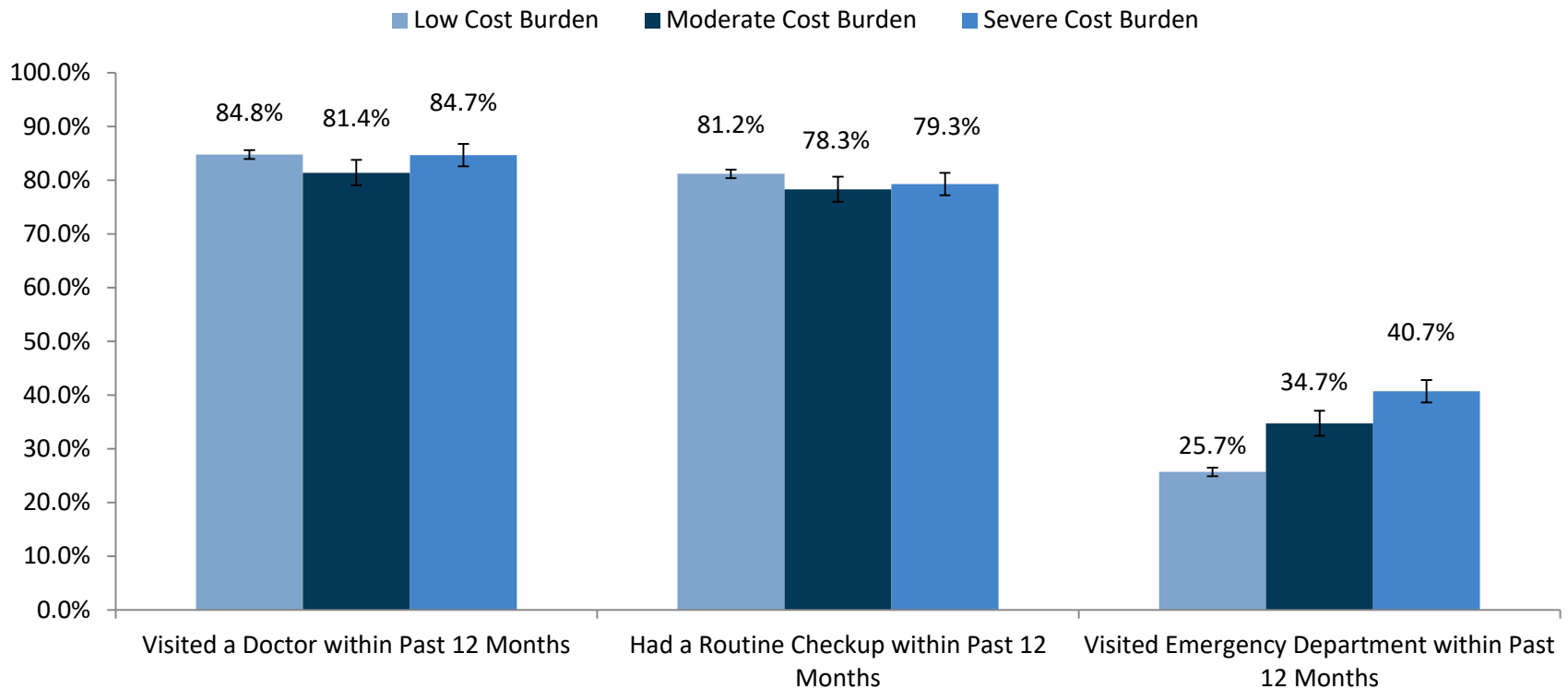# Figure 11. Healthcare Service Utilization by Level of Housing Cost Burden

Note: All data obtained from the 2019 OMAS, with errors bars displaying 95% confidence intervals for the survey estimates.

The percentage of individuals who reported visiting an emergency department in the past 12 months was greater for those who were severely cost burdened (40.7%) and moderately cost burdened (34.7%) than for those with a low level of housing cost burden (25.7%), suggesting that cost-burdened individuals are more likely to rely on emergency departments for care. However, there were few differences in the percentage of individuals visiting a doctor or having a routine checkup in the past 12 months across different levels of housing cost burden.

RESULTS:
HOUSING INSTABILITY

Key Findings: Housing Instability

- On average, about 3.5 - 4.0% of renter households in Ohio experienced an eviction each year during the period between 2002 and 2016.

- Ohioans were more likely to experience housing instability if they were younger, lived in metropolitan counties, or were African American or Hispanic.

- Medicaid enrollees who moved more often in the past year were more likely to have diagnoses of depression or anxiety.

# Figure 12. Percentage of Ohioans Moving within the Past Year, by Selected Demographic Characteristics
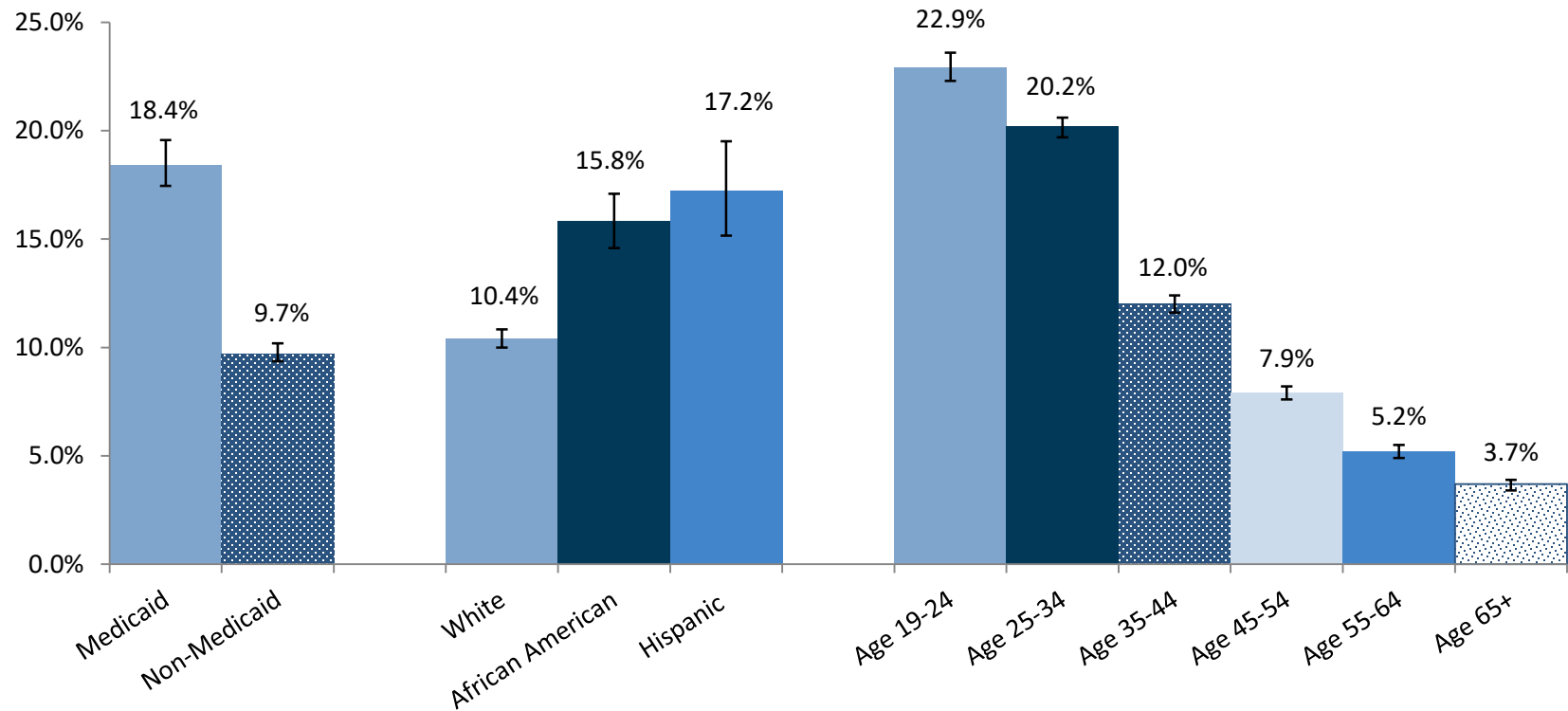
Note: Estimates are obtained from Current Population Survey data pooled for the years 2013 through 2018. Error bars show 95% confidence intervals for survey estimates

Individuals who were enrolled in Medicaid (18.4%) were about twice as likely to report that they had changed residences in the past year than other Ohioans (9.7%), suggesting that they experience a greater degree of housing instability. Differences in the percentages of individuals who moved were also observed across different groups of Ohioans based on age and race or ethnicity. Ohioans were more likely to have moved in the past year if they were younger, and Ohioans who were African American or Hispanic were more likely to have moved than those who were white.

Figure 13. Number of Eviction Filings & Evictions Occurring in Ohio by Year, 2002-2016
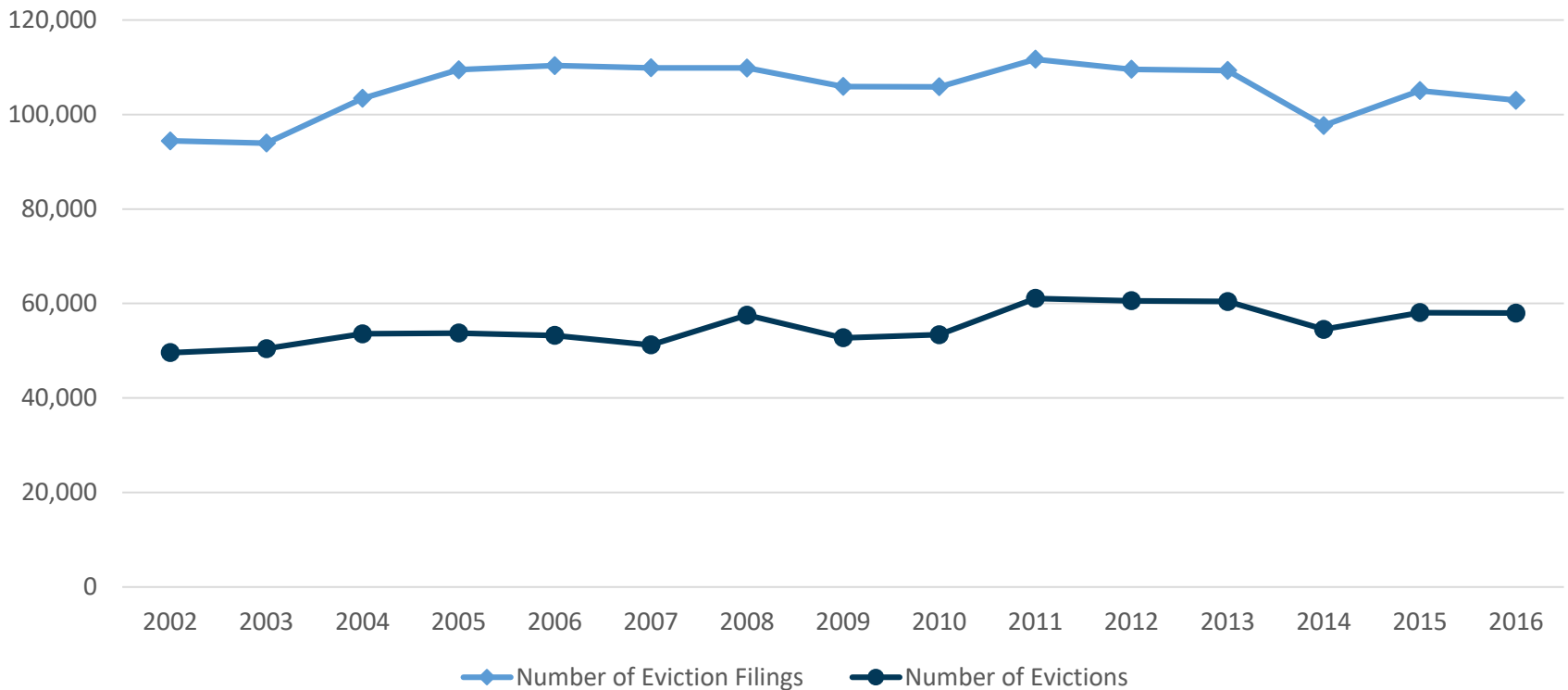
Source: Princeton Eviction Labs data, obtained from Ohio court records.

The number of eviction filings occurring each year in Ohio has fluctuated between 100,000 and 110,000, while the number of formal evictions has fluctuated between 50,000 and 60,000 per year. The largest annual increases in the number of eviction filings occurred in 2011, and largest number of evictions occurred in 2008 and 2011, a period roughly coinciding with the 2008 financial crisis and its aftermath. On average, roughly 50% to 60% of eviction filings in Ohio resulted in a formal eviction.

Figure 14. Number of Evictions per 100 Renter Households in Ohio, by OMAS County Type & Year
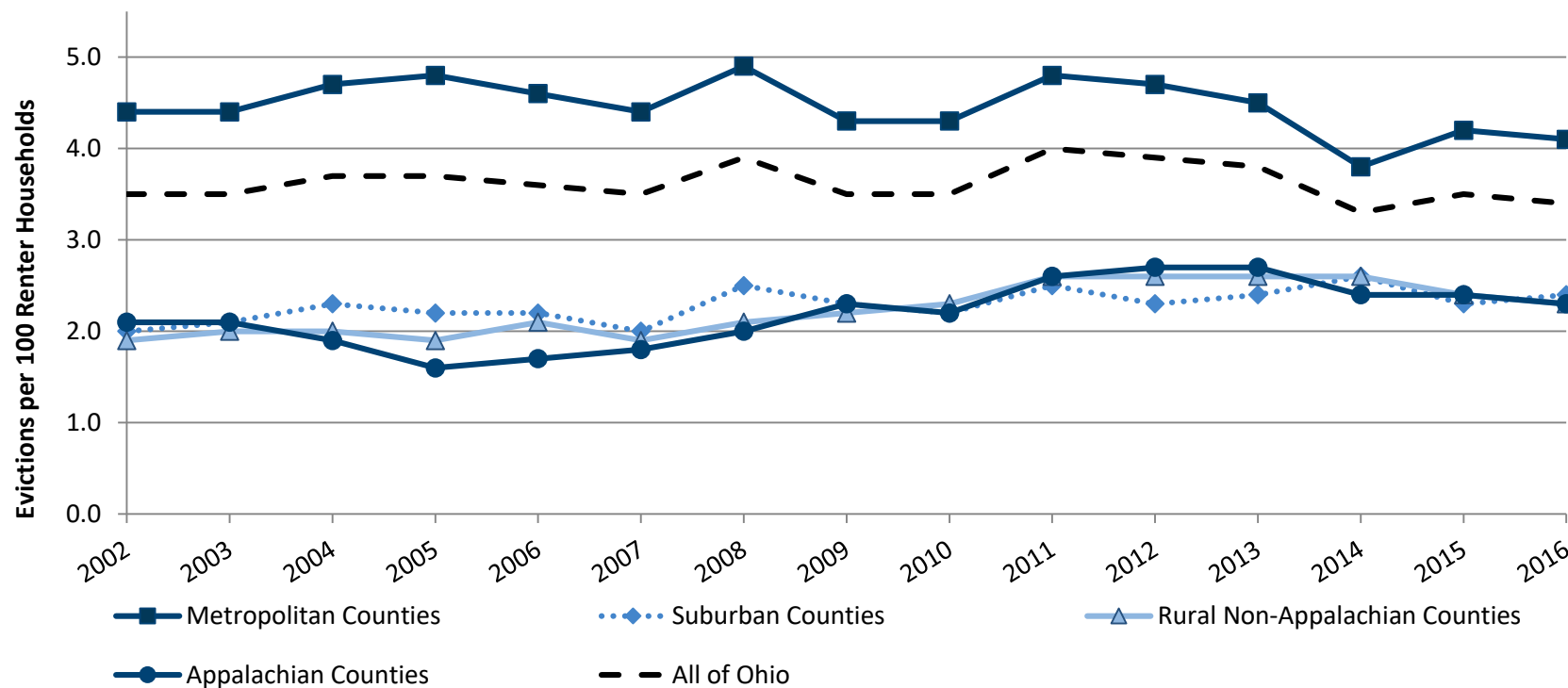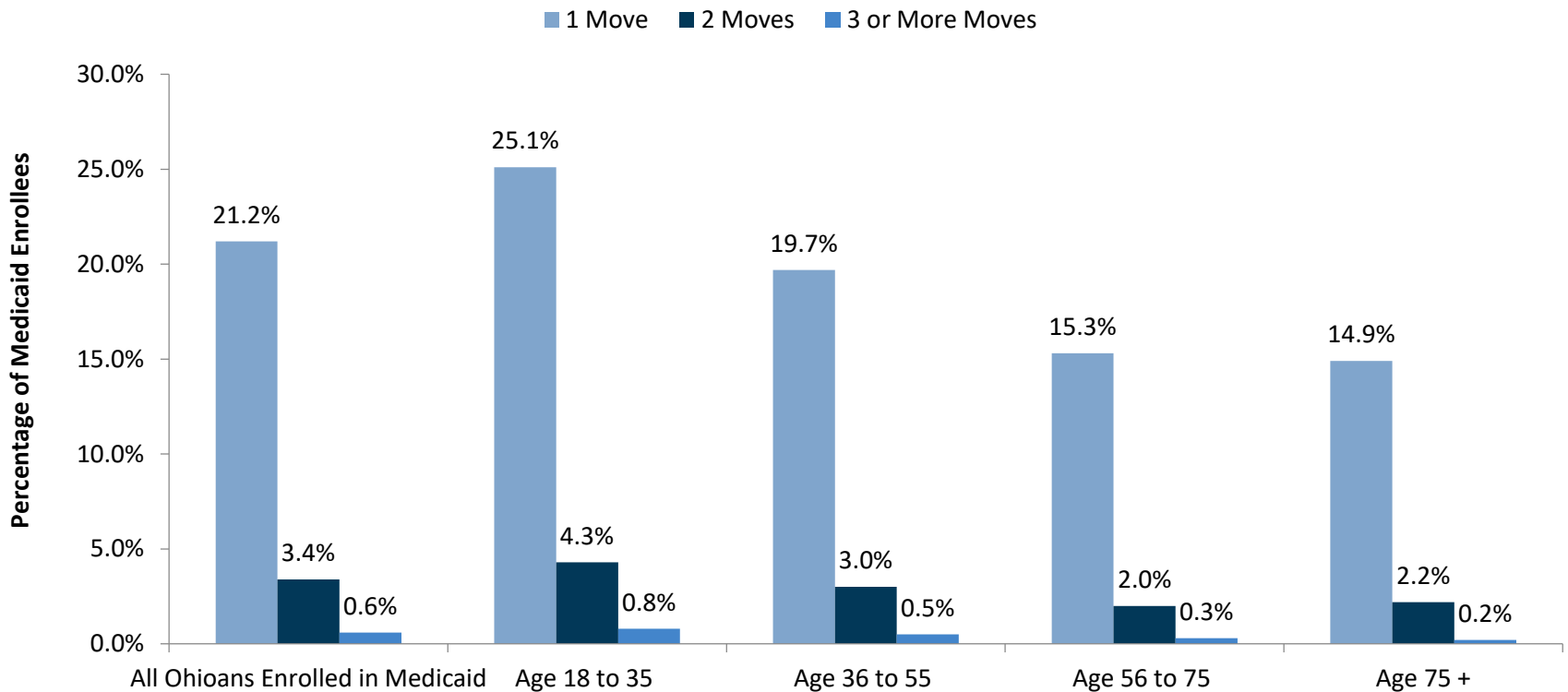

Note: Data was obtained from the Princeton Evictions Lab, and created using Ohio court records. Following the methodology employed by the Evictions Lab, the eviction rate is calculated as the number of evictions per 100 renter households, and can be interpreted as the percentage of renter households experiencing an eviction in a given year.

Statewide, Ohio has experienced an average annual eviction rate of about 3.5% to 4.0%, with the highest rates occurring in 2008 and 2011. Metropolitan counties have generally experienced much higher rates of evictions, with an annual eviction rate that is roughly twice that of other parts of Ohio. Rural Appalachian counties saw the largest increase in eviction rates during the period following the 2008 financial crisis, with their eviction rate increasing from 1.8% in 2007 to 2.7% in 2013, before falling to about 2.4% in 2016.

Figure 15. Number of Moves in the Past Year Among Adult Ohioans Enrolled in Medicaid by Age Group, 2018

Legend: ■ 1 Move ■ 2 Moves ■ 3 or More Moves

Y-axis: Percentage of Medicaid Enrollees (0.0% to 30.0%)

Category	1 Move	2 Moves	3 or More Moves
All Ohioans Enrolled in Medicaid	21.2%	3.4%	0.6%
Age 18 to 35	25.1%	4.3%	0.8%
Age 36 to 55	19.7%	3.0%	0.5%
Age 56 to 75	15.3%	2.0%	0.3%
Age 75 +	14.9%	2.2%	0.2%

Note: All data obtained from Ohio department of Medicaid administrative records.

As expected, younger individuals were more likely to experience frequent changes in residence than older individuals, with 5.1% of those aged 18 to 35 moving two or more times in the past year, compared to 3.5% of those aged 36 to 55, 2.3% of those aged 56 to 75, and 2.4% of those with ages greater than 75. Among all enrollees, a total of 25.4% moved at least once in the past year.

Figure 16. Depression or Anxiety Diagnoses Among Adults Enrolled in Medicaid by the Number of Moves in the Past Year, 2018
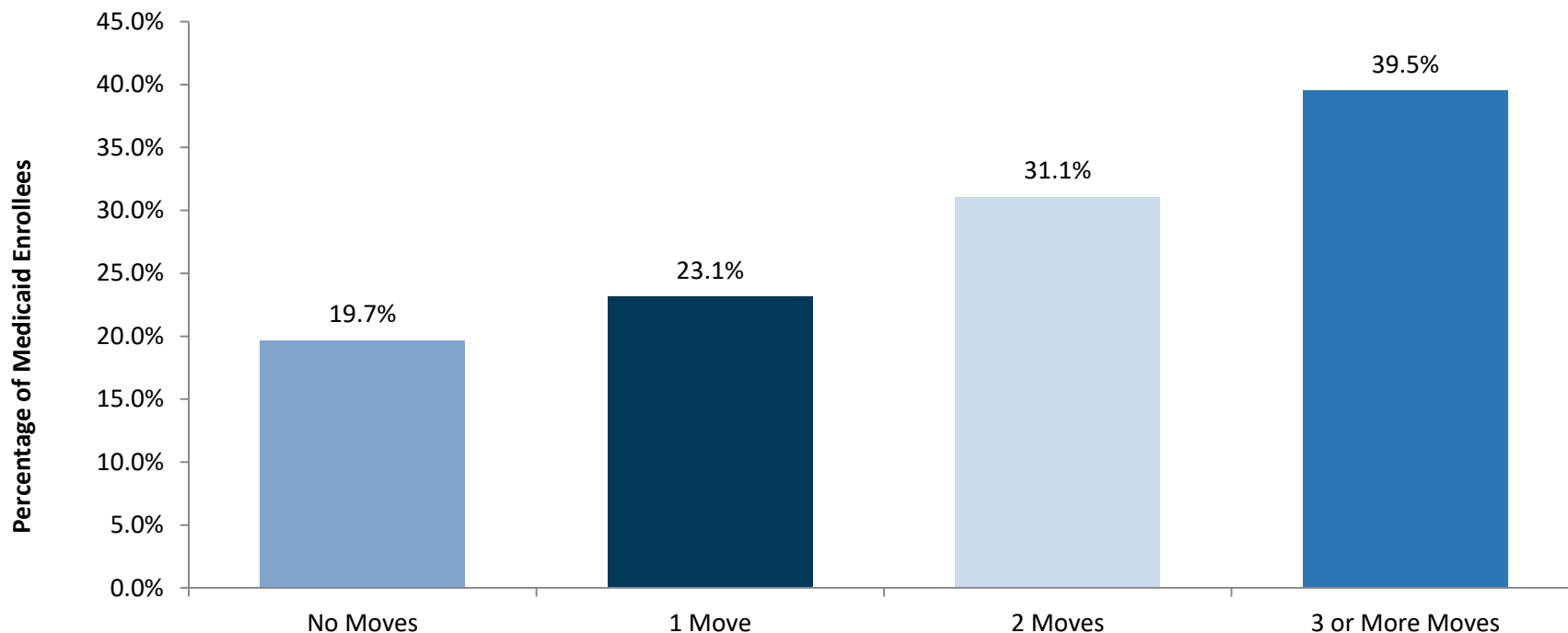
Note: All data obtained from Ohio Department of Medicaid administrative records.

Individuals who moved more frequently in the past year were more likely to have had a diagnosis of depression or anxiety during the same period. While 19.6% of individuals who did not change residences had a diagnosis of depression or anxiety, 39.5% of those with three or more moves in the past year (indicative of severe housing instability) had depression or anxiety diagnosis.

Figure 17. Percent of Medicaid Enrollees Utilizing Emergency Room Services, by Number of Moves in the Past Year, 2018
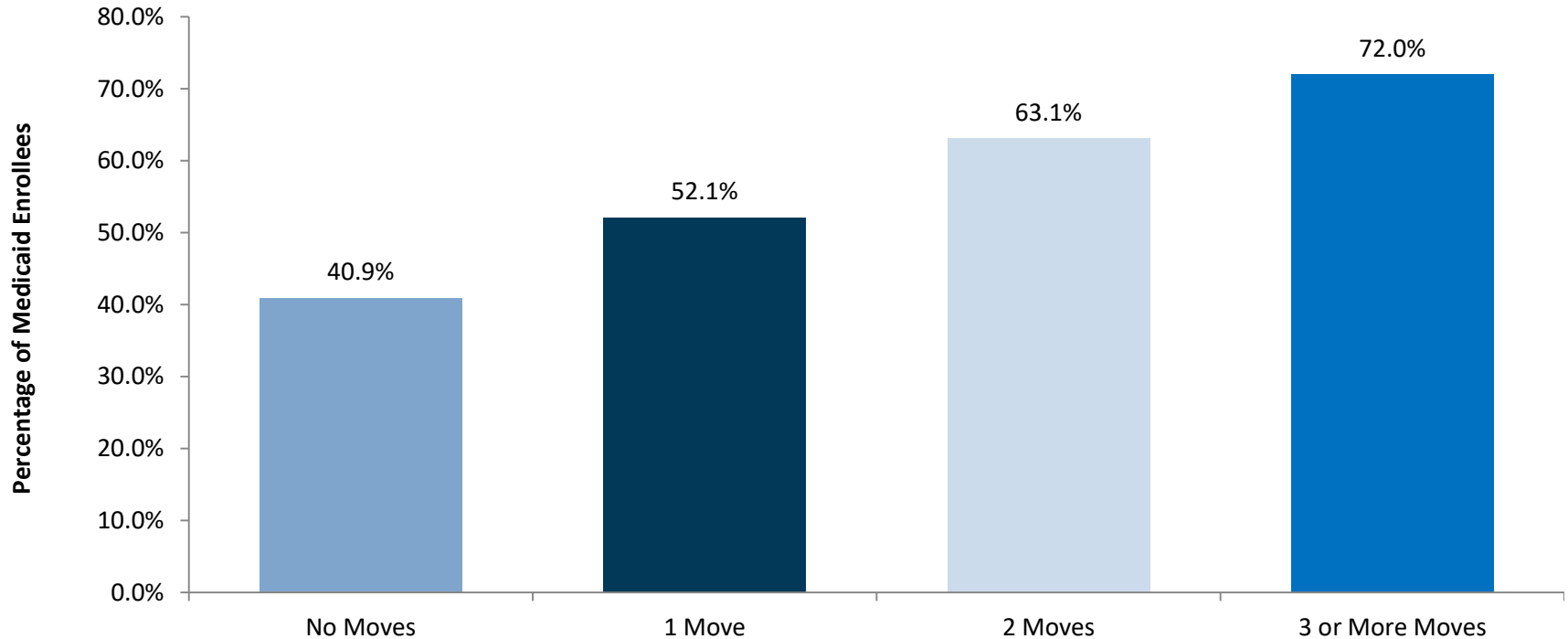
Note: All data obtained from Ohio Department of Medicaid administrative records.

Medicaid enrollees who moved more frequently in the past year were more likely to utilize emergency room services, with 72.0% of those with three or more moves visiting an emergency room at least once, compared 40.9% of those who did not move in the past year.

RESULTS:
HOUSING QUALITY

Key Findings: Housing Quality

- Most Ohioans live in housing classified by HUD as adequate, but access to adequate housing varied by household income level.

- Lower income households were also more likely to have housing with external structural problems, experience periods of prolonged cold, and live in neighborhoods that they perceived to have more serious crime.

Figure 18. Percentage of Households Meeting Selected Housing Quality Criteria, by Level of Household Income Relative to the Federal Poverty Level (FPL)
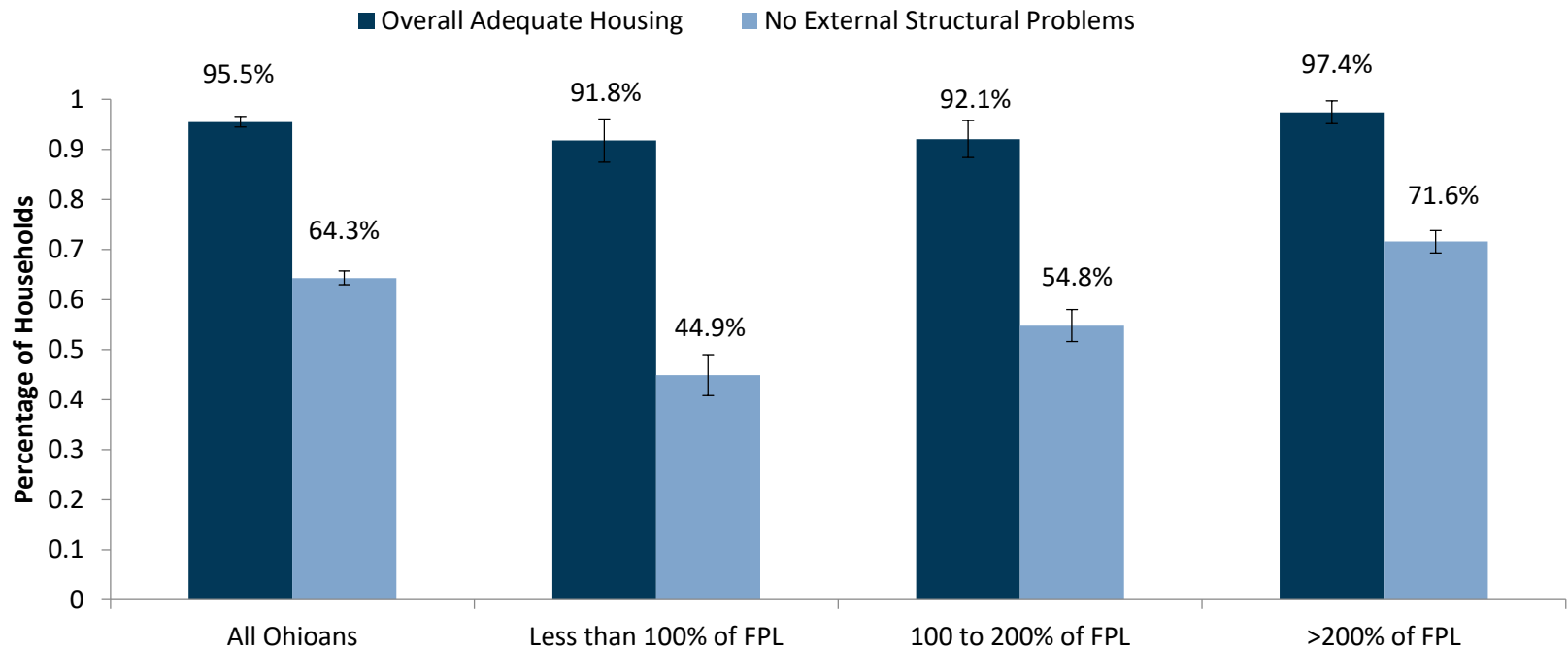
Note: Survey estimates obtained from the 2015 American Housing Survey (AHS). Error bars display 95% confidence interval for survey estimates.

Most Ohioans (95.5%) live in housing considered by HUD to be adequate, but there is some variation by the level of household income relative to the federal poverty level (FPL), with households with lower incomes being less likely to live in adequate housing. There are also differences across households with different income levels in regard to the presence of external structural problems. While 71.6% of households with incomes greater than 200% of the FPL lived in housing without any serious structural problems, this rate was 54.8% for households with incomes between 100 and 200% of the FPL, and was 44.9% for households with incomes below 100% of the FPL. Housing adequacy and external structural problems defined by HUD and measured by the AHS.[17]

Figure 19. Percentage of Households Reporting Being Uncomfortably Cold for 24 or more Hours during the Last 12 months, by Level of Household Income Relative to the Federal Poverty Level (FPL)

Note: Survey estimates obtained from the 2015 American Survey (AHS). Error bars display 95% confidence interval for survey estimates.

Households with lower incomes were generally more likely to experience periods where the home was uncomfortably cold for 24 hours or more than households with higher incomes. While only 7.5% of households with incomes greater than 200% of the FPL experienced prolonged cold, this rate was 9.9% for households with incomes between 100% and 200% of the FPL and 14.2% for households with incomes below 100% of the FPL.
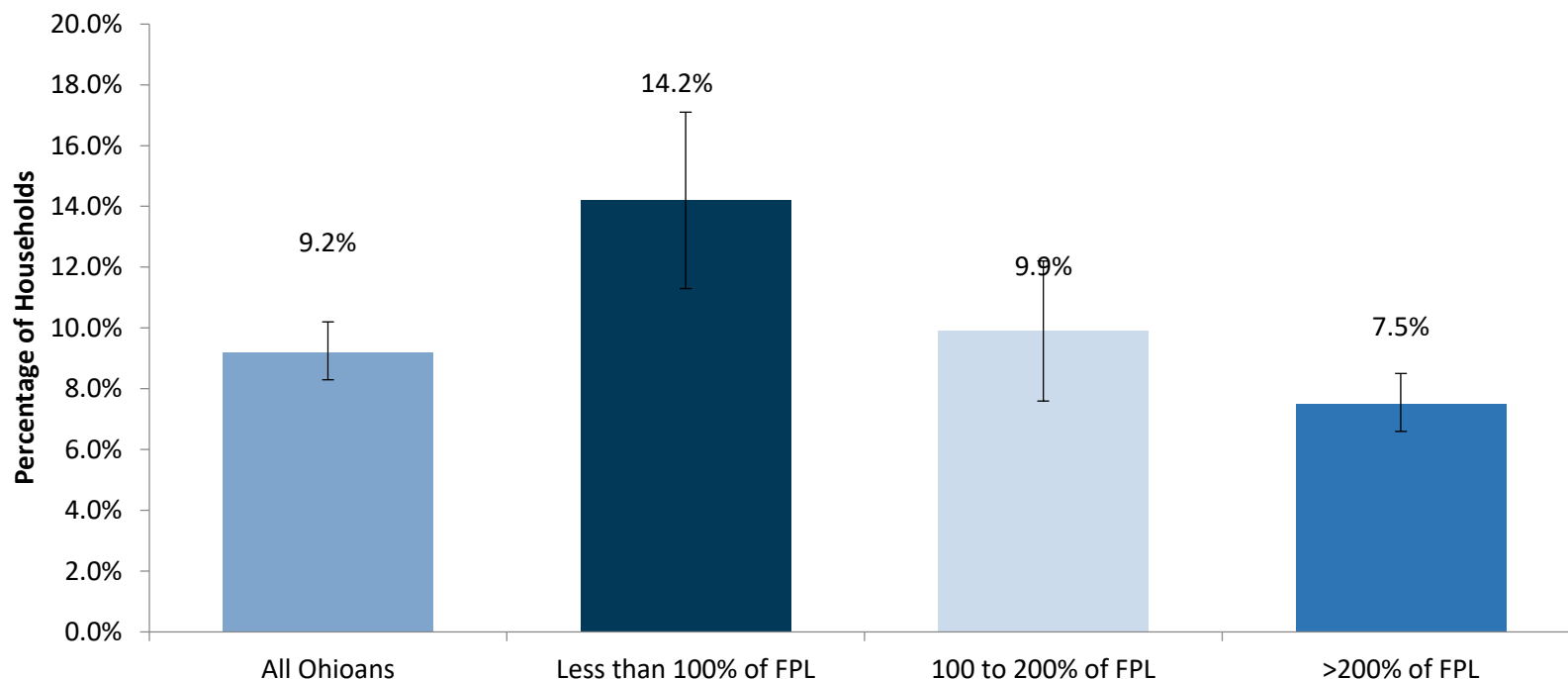
Figure 20. Percentage of Households meeting Selected Housing Quality Criteria, by Level of Household Income Relative to the Federal Poverty Level (FPL)
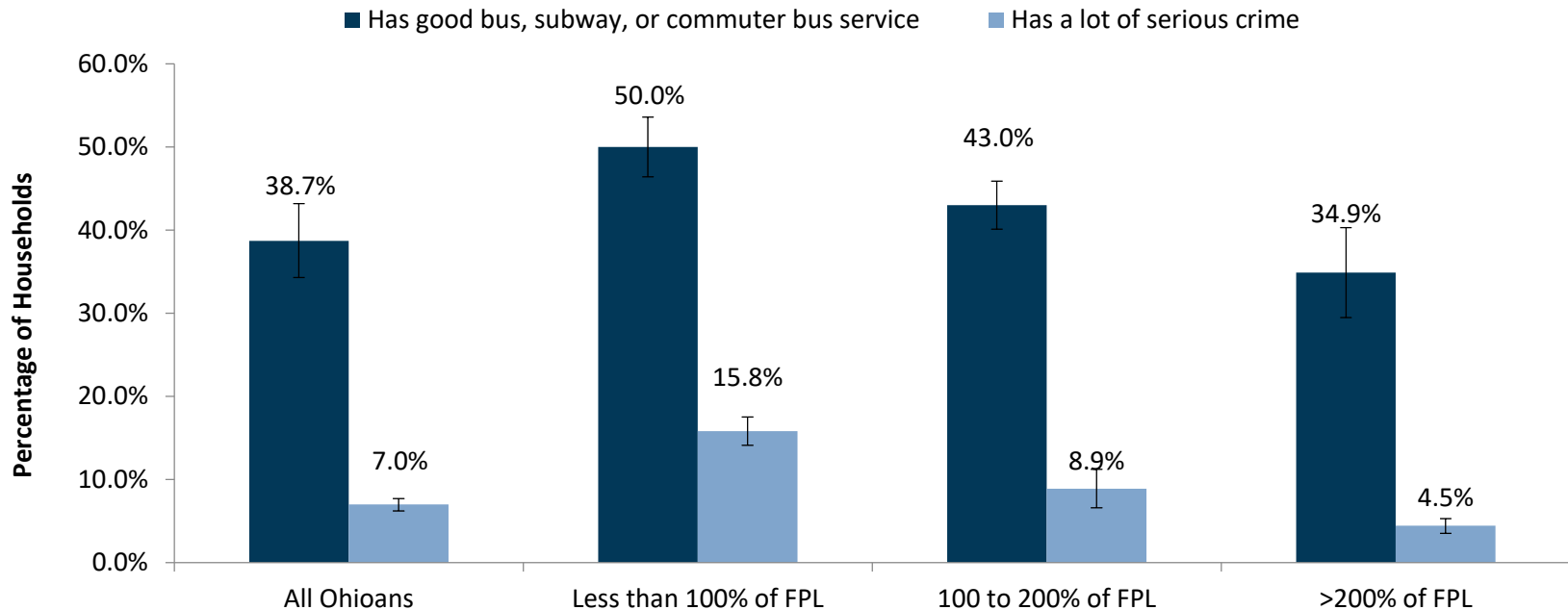
Note: Survey estimates obtained from the 2015 American Housing Survey (AHS). Error bars display 95% confidence interval for survey estimates.

Statewide, only 38.7% of Ohioans reported that their neighborhood had good public transportation service. While few Ohioans reported that they thought their neighborhood had a lot of serious crime, those who lived in households with lower incomes were much more likely to do so. Of those with a household income below 100% of the FPL, 15.8% reported that their neighborhood had a lot of serious crime, compared to 4.5% of those living in households with incomes greater than 200% of the FPL.

RESULTS:
OVERALL HOUSING QUALITY

Key Findings: Overall Housing Quality

- When the different dimensions of housing insecurity are considered together, roughly 40% of Ohioans are housing insecure.

- Medicaid enrollees were more likely to be housing insecure, with about 70% experiencing some form of housing insecurity.

- Housing insecure individuals were much more likely to report being in fair or poor health.

Figure 21. Combined Measure of Current Housing Status & Severity of Housing Cost Burden, by Insurance Status

Legend:
- Homeowner with low cost burden
- Homeowner with moderate cost burden
- Homeowner with severe cost burden
- Renter with low cost burden
- Renter with moderate cost burden
- Renter with severe cost burden
- Staying with friends or family without paying rent
- Living in a shelter or other temporary housing
- Currently homeless

All Ohioans: 40.9% | 5.2% | 9.3% | 18.1% | 7.4% | 8.3% | 9.4% | 0.7% | 0.7%

Potentially Medicaid Eligible: 22.7% | 5.0% | 11.3% | 18.2% | 13.0% | 15.8% | 12.3% | 0.8% | 0.8%

Medicaid Enrolled: 9.9% | 3.6% | 4.3% | 21.7% | 17.9% | 25.5% | 13.0... | 1.7% | 2.4%

(X-axis: 0.0% to 100.0%)

Note: All estimates are obtained from 2019 OMAS data.

Statewide, 59% of adult Ohioans were housing secure, as indicated by being a homeowner or renter with a low level of housing cost burden. Another 30.2% of Ohioans were housing insecure because they faced a moderate or severe level of housing cost burden, while 10.8% were housing insecure due to living with friends or family, in a shelter or being homeless. In comparison, Medicaid enrollees were less likely to be housing secure, with only 30.7% being homeowners or renters with a low level of cost burden. A greater proportion of Medicaid enrollees were cost burdened (51.3%) and Medicaid enrollees were much more likely to be homeless or living in a shelter than Ohioans in general.

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Figure 22. Self-Reported Fair or Poor Health by Combined Measure of Current Housing Status & Housing Cost Burden
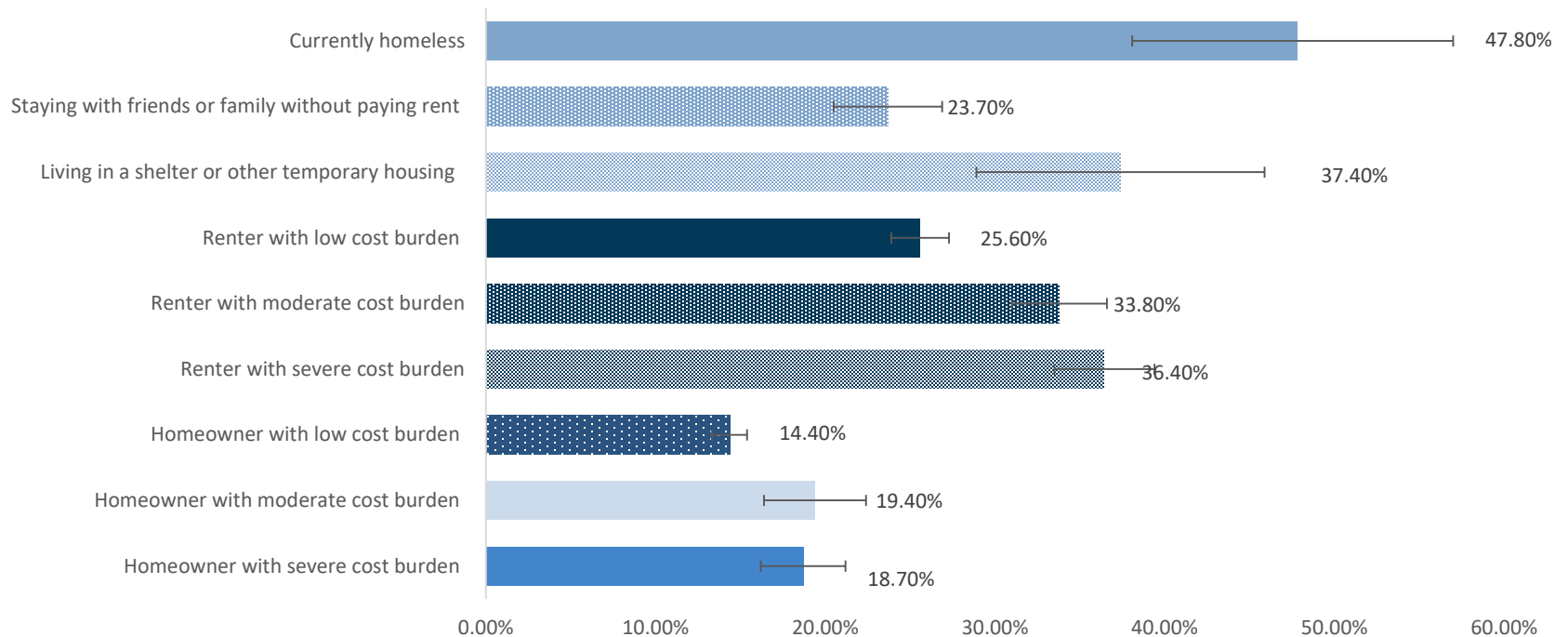
Note: All estimates are obtained from 2019 OMAS data with 95% confidence intervals displayed using error bars.

As expected, the currently homeless were the most likely to report fair or poor health (47.8%), but high rates were also observed for those living in a shelter and for renters with a severe (36.4%) or moderate level of cost burden (33.8%). Notably, homeowners were less likely than renters at the same level of housing cost burden to report fair or poor health, and about 23.7% of those staying with friends or family reported being in fair or poor health, a rate comparable to that of renters with a low level of cost burden (25.6%).

SUMMARY OF RESULTS

- **Current Housing Status:** In 2019, most adult Ohioans were homeowners (58.5%) or renters (31.6%), while 8.7% were staying with friends or family without paying rent, 0.6% were living in a shelter or other temporary housing, and 0.6% were homeless at the time of survey.

- Combining the last three categories, about 9.9% of Ohio adults were housing insecure in terms of their current housing status.

- Compared to other Ohioans, Medicaid enrollees were more likely to be renters (63.6%) or to be housing insecure (16.4%), with 2.3% being homeless at the time of survey.

- There were notable differences in the current housing status among adult Ohioans by age and race or ethnicity, with those who were younger as well as those who were African American or Hispanic being more likely to be housing insecure.

- Examination of health outcomes and unmet healthcare needs by current status indicated that housing insecure individuals were more likely to report being fair or poor health, report mental health impairment, and to have unmet needs.

- Notably, individuals who were renting were also more likely to report being in fair or poor health (30.0%) than those who were homeowners (16.0%), and reported health outcomes that were broadly comparable to those who were staying with friends or family, a group considered to be housing insecure.

- **Housing Cost Burden:** On average, Medicaid enrollees spent about 40.6% of their total family income on housing costs in 2019, and about 31.5% of enrollees were considered to face a severe level of housing cost burden.

- The level of housing cost burden was also observed to be greater for individuals who were renters, living in metropolitan counties, and who had a race or ethnicity other than white.

- In terms of health outcomes, 33.8% of severely cost burdened individuals reported that they were in fair or poor health, compared to only 17.8% of individuals with a low level of housing cost burden.

- Severely cost burdened individuals also were more likely to use emergency room services, with 40.7% reporting that they had visited an emergency in the past year, compared to 25.7% of those with a low level of housing cost burden.

SUMMARY OF RESULTS

- **Housing Instability:** Examination of CPS data from years 2013-2018 indicated that among adult Ohioans, individuals were more likely to report that they had moved in the past year if they were younger, were African American or Hispanic, or if they were enrolled in Medicaid.
- Medicaid enrollees were about twice as likely to have moved in the past year as other Ohioans, suggesting a greater level of housing instability.
- Data collected from Medicaid administrative records shows that in 2018, 25.4% of enrollees changed their residence in the past year, with 4.0% moving two times or more.
- Consistent with the findings observed for other measures of housing insecurity, Medicaid enrollees who moved more often in the past year were more likely to have used emergency room services and to have diagnoses of depression or anxiety.
- Regarding forced moves, data collected by the Evictions Lab project at Princeton University show that Ohio experienced an average of 105,000 eviction filings and 55,000 formal evictions per year during the period from 2002 to 2016.
- Statewide, about 3.5% to 4.0% of renter households experienced an eviction each year.
- The highest eviction rates were observed in metropolitan counties, which had annual eviction rates that were generally between 4.0% and 5.0% and roughly twice that of other parts of Ohio.

- **Housing Quality:** Data from the American Housing Survey indicate that 95.5% of Ohioans lived in housing classified by HUD as adequate in 2015.
- However, access to adequate housing varied by income level, with 91.8% of households with incomes less than 100% of the federal poverty level (FPL) having adequate housing compared to 97.4% of households with incomes greater than 200% of the FPL.
- Lower income households also were more likely have housing with external structural problems, experience periods of prolonged cold, and live in neighborhoods that they perceived to have more serious crime than those with higher incomes.

- **Overall Housing Insecurity:** Statewide, 41% of individuals were housing insecure, with most (30.2%) being insecure because they faced a moderate or severe housing cost burden. An estimated 9.4% of Ohioans were staying with friends or family without paying rent and 1.4% were homeless or living in a shelter. Among Medicaid enrollees, 69.4% were housing insecure, with 51.3% being cost burdened. Medicaid enrollees also were more likely to experience severe forms of housing insecurity, with 29.8% of enrollees being severely cost burdened and 4.1% being homeless or living in a shelter.

POLICY CONSIDERATIONS

The data presented in this chartbook highlight the extent of housing insecurity in Ohio. An estimated 41% of Ohioans and 68.4% of Medicaid enrollees are housing insecure, either because they currently do not have a home of their own or because their current housing costs consume a large proportion of their family's total income. In addition, the data also indicate that many Ohioans have housing situations that are unstable, with more than 100,000 individuals facing formal eviction filings each year. Access to stable housing is also no guarantee that the household is a safe and secure place to live, as an estimated 4.5% of Ohioans live in housing that is considered inadequate by HUD, and 7.0% live neighborhoods that they consider to have a large amount of serious crime.

The stresses that this insecurity can place on individuals and their families is evident in the substantially higher rates of mental health impairment, more frequent diagnoses of anxiety and depression, and overall poorer health reported by Ohioans that are housing insecure. These health impacts are particularly significant among Medicaid enrollees, as this population is more likely to be housing insecure than other Ohioans and may be more vulnerable to the stressors associated with housing problems. Although there is not a single data source which address all of the most salient dimensions of housing insecurity in Ohio, the information presented here indicates that these dimensions are likely to be interconnected and suggests several considerations for policy.

First, this chartbook identifies a substantial proportion of Ohioans who are currently housed, but who are living in homes that are not their own or that are secured by precarious financing. These individuals are likely to be at greater risk of homelessness and experience stressors that have adverse effects on health. The accurate identification of this housed but insecure population therefore has important implications for interventions aimed at reducing homelessness or alleviating the impact of housing insecurity on health outcomes and healthcare service use.

Another important policy consideration relates to the impact of housing insecurity on health. The findings presented here suggest that interventions aimed at addressing housing insecurity are likely to have secondary effects on mental health, and may improve overall physical health, especially if they help cost-burdened households to reallocate scarce household resources towards healthcare needs such as medication or treatment. While access to secure housing may not cure ailments or treat diseases, it does make it easier for individuals to connect to services and access care.

Finally, it should be noted that the data in this chartbook cover a period before the unprecedented increases in unemployment associated with the COVID-19 pandemic in 2020. It is likely that these events substantially increased the proportion of the population that is housing insecure, and that some of those identified as insecure in this chartbook subsequently transitioned into homelessness. Consequently, while the estimates presented here provide an accurate description of the state's housing situation prior to the COVID-19 pandemic, they likely underestimate the severity of current housing insecurity issues in Ohio.

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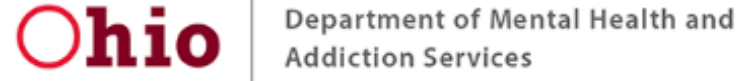
Ohio | Department of Mental Health and Addiction Services

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Appendix Table A. Housing cost burden for Medicaid enrollees, by age, race & county type of residence

	Housing Cost Burden Level		
	Low Cost Burden (<30% of monthly income)	Moderately Cost Burdened (30-49% of monthly income)	Severely Cost Burdened (>50% of monthly income)
Age Group			
19-24	67.4% (64.2-74.6%)	15.7% (13.3 – 18.2%)	16.9% (14.3-19.4%)
25-34	71.6% (69.6 – 73.6%)	16.7% (15.0 – 18.3%)	11.7% (10.2 – 13.2%)
35-44	73.2% (71.0 – 75.5%)	15.0% (13.1 – 17.0%)	11.7% (10.3 – 13.2%)
45-54	75.9% (73.8 – 78.0%)	13.5% (11.8 – 15.2%)	10.6% (9.1 – 12.1%)
55-64	78.0% (76.4 – 79.7%)	13.1% (11.8 – 14.5%)	8.8% (7.8 – 9.9%)
64+	80.6% (78.9 – 82.3%)	12.2% (10.8 – 13.6%)	7.2% (6.1 – 8.2%)
Age Group			
White	78.4% (77.5 – 79.3%)	12.9% (12.2 – 13.6%)	8.7% (8.1 – 9.3%)
African American	61.6% (59.2 – 63.9%)	20.3% (18.3 – 22.3%)	18.1% (16.3 – 20.0%)
Hispanic (any race)	60.3% (55.6 – 65.0%)	18.2% (14.5 – 21.9%)	21.5% (17.3 – 25.6%)
Asian	63.5% (54.1 – 73.0%)	22.8% (13.5 – 32.0%)	13.7% (8.1 – 19.3%)
Sex			
Male	77.8% (76.7 – 79.0%)	12.6% (11.7 – 13.6%)	9.5% (8.7 – 10.4%)
Female	72.9% (71.7 – 74.1%)	15.7% (14.7 – 16.7%)	11.4% (10.6 – 12.2%)
County Type			
Metropolitan	72.0% (70.8 – 73.3%)	15.6% (14.6 – 16.6%)	12.4% (11.5 – 13.2%)
Suburban	76.9% (75.0 – 78.9%)	14.0% (12.4 – 15.6%)	9.0% (7.7 – 10.3%)
Appalachian	79.9% (78.1 – 81.8%)	12.2% (10.7 – 13.7%)	7.9% (6.7 – 9.0%)
Rural Non-Appalachian	82.0% (80.2 – 83.9%)	10.9% (9.4 – 12.5%)	7.0% (5.9 – 8.1%)

Appendix Table B. Frequent moves among adults enrolled in Medicaid in 2018

	Number of moves in the past year			
	No moves	**1 move**	**2 moves**	**3 or more moves**
All Medicaid Enrollees (N = 1,990,068)	74.8%	21.2%	3.4%	0.6%
Race/Ethnicity				
White (N = 1,195,124)	75.1%	20.6%	3.6%	0.7%
Non-Hispanic Black (N = 521,135)	71.7%	24.2%	3.6%	0.5%
Asians (N = 39,594)	80.9%	17.1%	1.7%	0.2%
Hispanic (N = 65,304)	73.0%	22.9%	3.5%	0.4%
Age Group				
18 to 35 (N = 901,185)	69.8%	25.1%	4.3%	0.8%
36 to 55 (N = 666,035)	76.7%	19.7%	3.0%	0.5%
56 to 75 (N = 344917)	82.4%	15.3%	2.0%	0.3%
75 above (N = 77,931)	82.8%	14.9%	2.2%	0.2%
County Type				
Metropolitan (N = 1,204,673)	75.3%	21.2%	3.0%	0.5%
Suburban (N = 228,045)	74.5%	21.1%	3.6%	0.7%
Appalachian (N = 347,403)	74.4%	20.7%	4.0%	0.8%
Rural Non-Appalachian (N = 204,615)	73.3%	21.6%	4.3%	0.9%

Appendix Table C. Housing instability& health among Medicaid enrollees, 2018

	Patient Population			
	No Moves (N = 1,488,511)	**1 move (N = 421,869)**	**2 moves (N = 67,787)**	**3 or more moves (N = 11,901)**
Chronic Condition Diagnosis				
Percentage with type 2 diabetes diagnosis in past year	12.94%	10.80%	11.03%	11.32%
Percentage with hypertension diagnosis in past year	27.38%	23.47%	24.06%	23.61%
Percentage with heart disease diagnosis in past year	10.52%	8.97%	9.62%	9.64%
Mental Health Diagnosis				
Percentage with depression diagnosis in past year	19.66%	23.12%	31.09%	39.51%
Percentage with anxiety diagnosis in past year	20.34%	23.20%	30.46%	37.86%
Health Services Use				
Mean number of emergency room visits in past year	2.26	3.25	4.68	6.31
Percentage with at least one emergency room visit in past year	40.9%	52.1%	63.1%	72.0%
Mean number of urgent care visits in past year	0.34	0.42	0.5	0.56
Percentage with at least one urgent care visit in past year	10.9%	12.6%	14.2%	16.1%