

## The doctor will make house calls

*Some people said to me, "You're medicine, why would you go do something like HUD?" I actually believe there is a tremendous nexus or great intersection, because good health has a lot to do with a good environment.*

– Dr. Benjamin Carson at his Senate confirmation hearing, January 12, 2017

Not for the last time, President-elect Trump confounded expectations when he nominated as HUD secretary a pediatric neurosurgeon and unsuccessful Presidential candidate. Like many folks, about Dr. Carson I knew next to nothing first hand, so when I studied his confirmation hearing, both prepared statement and senatorial Q&A, I found to my surprise that though he is new to housing and ignorant of our blizzard of programs and acronym jargon, he has a genuine theory of change to tackle urban poverty and a consistent, if as of yet undeveloped, theory of impact for HUD:

When we talk about HUD, traditionally most people think of putting houses up and roofs over the heads of poor people, but HUD has the ability to be so much more than that. I see each individual as human capital that can be developed to become part of the engine that drives our nation, or if not developed, becomes part of the load.

We are the ones who are tasked with helping to make a difference. How do we develop our fellow human being?

In their efforts to break the cycle of poverty, for two centuries or more American affordable housing innovators (faith-based, philanthropic and governmental) have pursued three imperatives:

**1. Housing security.** From almshouses to orphanages, affordable housing has been a haven of family stability:

We lived in a 750 square foot GI home in southwest Detroit, and we thought that was paradise. Then my parents got divorced, we had no place to live, so we went to Boston and moved in with relatives. So I have actually in my life understood what housing insecurity is.

**2. Anti-poverty assistance.** A secure home makes no change unless the person and family living in the

home are able and willing to improve their lives. In support of Dr. Carson, my friend of two decades Bart Harvey (protégé of Jim Rouse and multi-decadal CEO of Enterprise) wrote a testimonial, a portion of which was read into the record:



David A. Smith

I have known Ben for about two decades ... and I helped him at the start of the Carson Scholars Fund. He has helped raise millions of dollars to send promising inner-city and other disadvantaged students to college – 7,300 so far.

Although we come from opposite sides of the political spectrum, Ben and I share a common belief in helping people move up and out of poverty. I can vouch for his character, his heart, and his drive to help others. He has led an inspiring life, lifting himself up from poverty, and he can motivate others to try a similar journey.

**3. Urban health.** Cast into the establishment of HUD is the goal of decent, safe and sanitary housing. Though today we give it only cursory acknowledgment, sanitation was the genesis of American governmental affordable housing, and the motivation of the man I call America's first housing commissioner – George M. Sternberg.

After thirty-plus years in the Army, where he rose to become Surgeon General, the 'founder of bacteriology' in 1897 formed the Washington Sanitary Improvement Company, and succeeded it in 1904 with Congressional authorization to form the Washington Sanitary Housing Company ("to build sanitary houses for a deserving class of the population which cannot afford to pay [market] rentals") because:

The slum exacts a heavy total of death from those who dwell therein. No civilized community can afford to show a happy-go-lucky lack of concern for the youth of today, for if so, the community will have to pay a terrible penalty of financial burden and social degradation in the tomorrow.

Dr. Carson echoed those same family-health and urban-health principles:

There is a strong connection between housing and health. Housing and housing discrimination is a “social determinant” of health. Pest infestation, lead-based paint, faulty plumbing, and overcrowding, which disproportionately affect low-income and minority families, lead to asthma, lead poisoning, heart disease and neurological disorders.

We in affordable housing have for years been making the case for upstreaming health and wellness into housing because it will save money later. Dr. Carson gets this in two ways – childhood education and a healthy home environment:

There are points of intervention, things that we can do to make a difference. If we can truncate that downstream we can change the trajectory of people’s lives.

Previously, I’ve written that in affordable housing we have to cross the funding streams, such as via the Medicaid 1115 waiver, to upstream money from DOE (high school dropouts), HHS (TANF and Medicaid), and even DOJ (reducing incarceration), because home is the place where preventive upstream interventions can happen.

I’m old enough to remember when the family doctor made house calls. Now we have a doctor in charge of America’s housing, and he’s going to make house calls:

I want to go on a listening tour. I want to hear from the people with boots on the ground who are administering programs, who are benefiting from programs. I want to see what actually works and what doesn’t work. I want to analyze why it works and why it doesn’t work.

Five years ago, President Obama confounded expectations by nominating as the next World Bank head a doctor: Jim Kim. He did so to bring the World Bank back past its business products – loans – and back to its purpose – global health, fiscal, social, environmental and biological. Dr. Kim wasn’t a maker of finance, he was a user of finance to make change.

Dr. Ben Carson isn’t a maker of housing, he’s been a user of housing to make change. He wants to make it more healthy, make it work to grow better Americans. He wants us to show him how to do that.

Why don’t we take him at his word?

Send me your best ideas, with hyperlinks, and I’ll feature them in an upcoming *Guru*. **TCA**



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