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Research

Research Protocol for CityHealth: Affordable Housing Trusts

Prepared by Center for Public Health Law Research

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CITYHEALTH: AFFORDABLE HOUSING TRUSTS

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Research Protocol

- I. **Dates of Protocol:** December 19, 2022; December 1, 2023
- II. **Scope:** Compile statutes and ordinances on Affordable Housing Trusts policies across 75 cities, their respective counties, 33 states and the District of Columbia. CityHealth examines policies that have been determined to help people lead healthier and happier lives. Affordable Housing Trusts aim to create and preserve affordable housing. This is a cross-sectional dataset capturing currently effective law valid through June 1, 2023.
- III. **Primary Data Collection**
 - a. **Original project dates:** June 2022 – December 2022
 - b. **Data collection methods:** The team building this dataset consisted of three team members: two legal researchers (“Researchers”) and one supervisor (“Supervisor”).
 - c. **Databases used:** Searches conducted using WestlawNext, city and county code databases; the laws were then collected from state-specific legislature websites. County and city laws were collected from official government websites, municode.com and amlegal.com.
 - d. **Search terms:** “affordable housing trusts”, “affordable housing”
 - i. Key word searches were supplemented by examination of the table of contents of each relevant section of the law identified.
 - ii. Once all the relevant laws were identified in each jurisdiction, a master sheet was created for each jurisdiction that summarized the relevant laws within the scope at each jurisdictional level. This summary included the statutory history for each law and the effective date for that version of the law.
 - e. **Information about initial returns and additional inclusion or exclusion criteria:**
 - i. Affordable Housing Trusts can be administered by non-governmental or quasi-governmental entities but for the trust to be in scope it must be established by the local government. Trusts established by private and/or philanthropic leaders are not in scope.
- IV. **Coding**
 - a. **Development of coding scheme:** The Researchers and Supervisor drafted coding questions and circulated them for review until all parties felt they had been sufficiently refined. Once the coding questions were finalized, they were entered into the MonQcle software. For each city, the state law also was researched for preemption specifically. When researching counties, if a city spans multiple counties only the county seat was researched.

b. Coding methods: The Researchers and the Supervisor were responsible for coding the 75 cities, including the respective state and county laws. Each jurisdiction was researched and coded independently.

c. Coding Rules for Specific Questions:

i. Does the policy identify a dedicated revenue source to fund the trust?

1. The policy must identify at least one reliable revenue source for its affordable housing trust for the fiscal year.
2. Dedicated revenue sources include:
 - a. Appropriations
 - b. Bonds
 - c. Linkage fees
 - d. Impact fees
 - e. Documentation recordation fees
 - f. Real estate transfer fees
 - g. Short-term rental fees
 - h. Property tax revenues
3. Voluntary Payments are a non-permissible revenue source.
 - a. In-lieu payments are not considered to be permissible sources as they are voluntary payments and, thus, not reliable sources of revenue.

ii. Is the trust funded by a recurring revenue source?

1. Recurring revenue sources include:
 - a. Appropriations *if* the entity has adopted a policy codifying annual appropriations that would require additional legislative action to repeal the policy
 - b. Linkage fees
 - c. Impact fees
 - d. Documentation recordation fees
 - e. Real estate transfer fees
 - f. Short-term rental fees
 - g. Property tax revenues
2. Voluntary Payments are a non-permissible revenue source.
 - a. In-lieu payments are not considered to be permissible sources as they are voluntary payments and, thus, not reliable sources of revenue.

d. Quality control:

- i. The Supervisor oversaw the quality of the data by downloading the data from the MonQcle into Microsoft Excel and reviewing it to find caution flags, missing citations, and errors in the coding. Issues in the coding were discussed by the Researchers in coding meetings and resolved accordingly.
- ii. The Supervisor also compared the data to the 2022 Preview Assessment. The 2022 Preview Assessment was conducted in 2021 and was a preliminary assessment of the 2.0 policies.
- iii. The Supervisor did a final check of the original coding for all states and ensured that the state coding was consistent among cities within the same.
- iv. City review phase: After the medal results were tabulated and reviewed by CityHealth, the Supervisor sent the medal results to a designated representative in each of the 75 cities to give them an opportunity to review the preliminary result and provide any notice of new or missing laws in scope or question the end results. This feedback was reviewed by both the CPHLR team and the CityHealth team prior to final publication of the final medal results.

V. 2023 Assessment

a. Updates:

- i. Substantive updates to the law were found in Aurora, Baltimore, Colorado Springs, and Denver.
- ii. New Laws were passed in Lexington, Louisville, Minneapolis, and St Louis. However, this did not change their medal status from the previous year.
- iii. Non substantive updates to the law were found also in Atlanta, Boston, Chicago, Indianapolis, Nashville, Philadelphia, Pittsburgh, San Diego, Seattle, and Washington DC.

b. Quality Control:

- i. **Original coding review:** The supervisor reviewed the excel data download from MonQcle to ensure consistency and that all questions were answered.
- ii. **Redundant Coding Review:** Cities with substantive updates were redundantly coded. Any divergences were discussed with the researchers and supervisor, and subsequently resolved.
- iii. **City Review Phase:** Following the completion of the research and coding, all 75 cities were contacted via one or more representatives to review the findings. All feedback was discussed between Temple, CityHealth and the subject matter expert. If necessary, any coding changes were made.