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JUST CAUSE EVICTION: A RAPID HEALTH IMPACT ASSESSMENT

SUMMARY & DISCUSSION GUIDE PREPARED BY CITY LIFE/VIDA URBANA



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About the Rapid Health Impact Assessment (RHIA) this Summary & Discussion Guide is based on:

This RHIA was conducted by a team of city planning graduate students at MIT's Department of Urban Studies & Planning from February to May 2016. It assesses the Just Cause Eviction Ordinance, proposed in the city of Boston, for potential health impacts on Boston renters.

The primary stakeholder giving input was City Life/Vida Urbana (CLVU), a community organization that works to help people in the Boston area remain in their homes, and an organizational member of the Right to Remain coalition.*

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Disclaimer: The views expressed in this report are those of the author(s) and do not necessarily reflect the views of the Health Impact Project, The Pew Charitable Trusts, the Robert Wood Johnson Foundation, or the Massachusetts Institute of Technology.

*The Right to Remain Coalition is anchored by Right to the City Boston in partnership with Boston Tenant Coalition. Other organizational members are: Action for Boston Community Development, Action for Regional Equity, Allston Brighton CDC, Alternatives for Community and Environment, Asian American Resource Workshop, Asian Community Development Corp, Black Economic Justice Institute, Boston Jobs Coalition, Boston Workers Alliance, Brazilian Worker Center, Castle Square Tenants Organization, Chelsea Collaborative, Chinese Progressive Association, Chinatown Resident Association, City Life, Codman Square NDC, Community Labor United, Dominican Development Center, Dorchester Bay EDC, Dorchester People for Peace, Dudley Street Neighborhood Initiative, Egleston Sq. Youth Group, Fair Housing Center of Greater Boston, Fairmount Indigo Line CDC Collaborative, Fenway Community Development Corp., Greater Boston Labor Council, Greater Bowdoin/Geneva Neighborhood Association, Greater Four Corners Action, Homes for Families, Immigrant Worker Center Collaborative, JP Neighborhood Council, JP Neighborhood Development Corp, Jamaica Plain Progressives, Jobs with Justice, Mass AFL-CIO, Mass Alliance of HUD Tenants, MA CDC, Mass Vote, Matahari, Mattapan United, Neighbors United for a Better East Boston, New England United for Justice, Progressive Communicators Network, Progressive Mass, 1199SEIU United Healthcare Workers East, SEIU 32BJ (District 615), Union of Minority Neighborhoods.



Health Impact Assessments (HIAs) are studies of how a planned change in a program, policy, or project may make a difference in people's health. To create an HIA, research is done on who would be affected by the change, and how the change might affect their health for good or bad.¹ The results of the HIA can be used to make sure decisions about government actions take into account the effect on health. **Rapid Health Impact Assessments (RHIA)** like this one are a shorter, faster type of HIA.

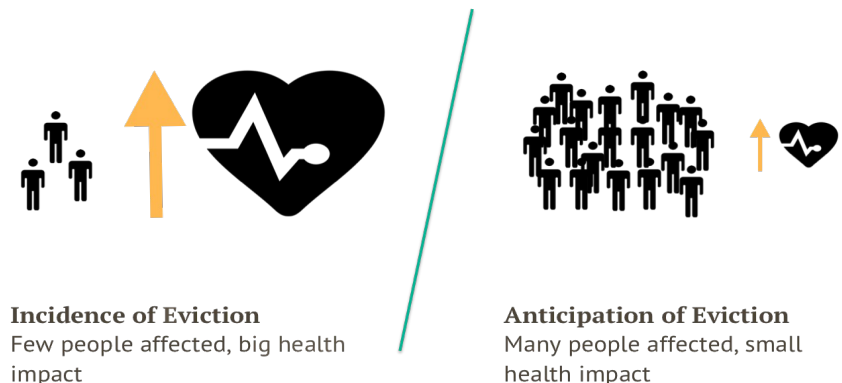
This RHIA looks at the Just Cause Eviction Ordinance proposed in the City of Boston – now called the “Jim Brooks Stabilization Act of 2016” – to see how it could impact the health of Boston renters. The proposed law would limit evictions by landlords who don't live in their buildings. These big landlords, who are not owner-occupants, would only be able to evict for a “Just Cause” – which includes any violation of the lease terms. The Jim Brooks Stabilization Act is meant to reduce the amount of gentrification-related displacement in Boston. It would do this by limiting the ability of corporate landlords to evict their tenants in order to turn properties into luxury housing and get new tenants who will pay higher rents.

This report reviews and presents research on the connections between health, eviction, housing, and neighborhoods. The goal is to bring health into the discussion of the Jim Brooks Stabilization Act and other policies to better protect at-risk tenants and homeowners. After looking at the research and hearing from affected people, this RHIA reports on how Just Cause Eviction could affect the health of Boston renters in areas like stress, environmental exposures, and health conditions like depression and substance abuse. The main source for hearing from affected people was City Life/Vida Urbana (CLVU), which is a community organization that works to help people in the Boston area remain in their homes, and also is one of the groups in the Right to Remain coalition.

This RHIA finds that the proposed law is likely to improve the health of Boston renters by:

1. Reducing the *incidence of eviction* by making no-fault evictions illegal (less evictions would happen to renters).

The Jim Brooks Stabilization Act may prevent *actual eviction* for a small number of people, but this may strongly benefit those people's health. The way this works is through protecting them from the bad health effects of eviction: having to move a lot, ending up in poor-quality housing, being unable to cover basic costs of living, homelessness, and losing social/place ties.



2. Reducing the *anticipation of eviction* (renters would have less worry and fear of evictions happening).

A much larger number of people – up to the entire 400,000+ Boston renters – may feel less *threat of eviction* because of the ordinance, but the health benefits of this (less effects of stress) may not be as strong.

This RHIA also recommends other ways to limit negative health effects of eviction. Health and housing are deeply connected. Stable, quality housing is a basic foundation for good health. Where you live and the experiences you have can make a big difference in your short and long-term health. Eviction and displacement have many bad health impacts on people and their communities. The stress that comes with an eviction or the threat of an eviction is a serious health concern. So are the risks of becoming homeless, moving to dangerous quality housing, or making tradeoffs on daily needs in order to afford rent. In Boston, low-income residents and communities of color are at a higher risk of eviction and are also more likely to have worse health to begin with. Preventing evictions in Boston will protect the most at-risk people, who are already unfairly burdened by poor health. The Jim Brooks Stabilization Act is an important step, but the City of Boston should also find more ways to lower the overall amount of evictions in Boston. The Boston Office of Housing Stability should share eviction data and work with the Boston Public Health Commission, and should inform tenants about community health services. The Right to Remain organizations could also support the health of the communities they work with by offering counseling services and partnerships with community health organizations.

This RHIA looks at the Just Cause Eviction Ordinance proposed in the City of Boston – now called the “Jim Brooks Stabilization Act of 2016” – to see how it could impact the health of Boston renters. The proposed law would limit evictions by landlords who don't live in their buildings. These big landlords, who are not owner-occupants, would only be able to evict for a “Just Cause” – which includes any violation of the lease terms (like not paying rent, damaging the property, not allowing repairs, illegal activity, etc). They would also have to notify the City's Office of Housing Stability if they send a tenant a Notice to Quit or lease non-renewal, so that these notices can be tracked and referrals can be made.

The Jim Brooks Stabilization Act is meant to reduce the amount of gentrification-related displacement in Boston. It would do this by limiting the ability of corporate landlords to evict their tenants in order to turn properties into luxury housing so they can get new tenants who will pay higher rents. This law would not apply to a lot of landlords – either because they are owner-occupants who own no more than 6 properties in Massachusetts, or because they already have to follow Just Cause rules (like public and HUD-subsidized housing).

Other places that have Just Cause Eviction Ordinances are:

- The cities of San Francisco, San Diego, Seattle, Chicago, and New York City
- The states of New Hampshire and New Jersey



Boston citizens both for and against the just-cause eviction law gathered to testify inside City Hall in March 2016 (Sam Amore, Spare Change News)



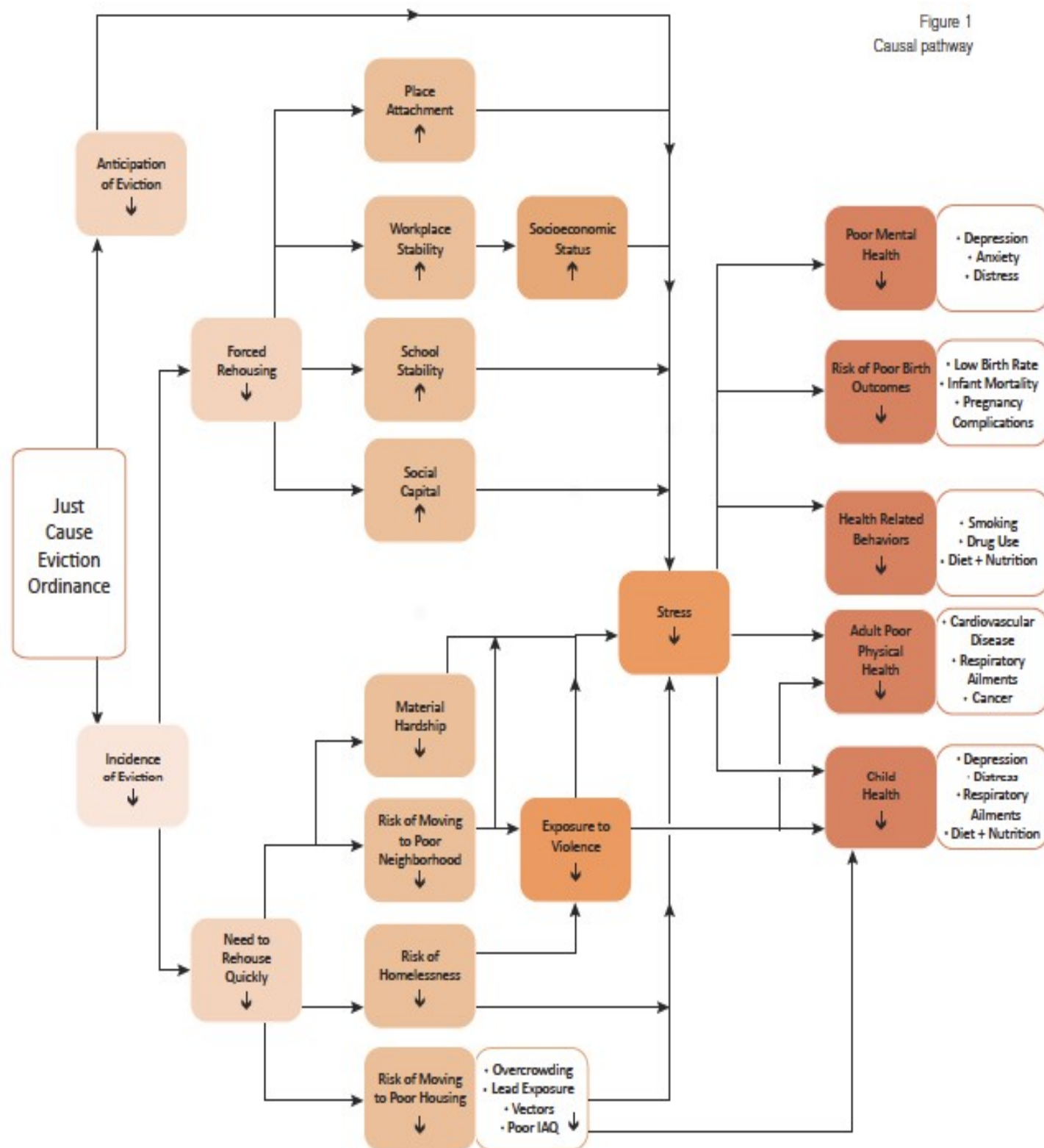
Lisa Owens Pinto testifies before the Boston City Council in March 2016 about the Just Cause for Eviction proposal (Evan Lips, New Boston Post)

This RHIA focuses on renters in Boston, the group that will be most directly impacted by the Jim Brooks Stabilization Act. The proposed law does require Just Cause for evicting both renters and foreclosed homeowners. But this report doesn't look at how the law would impact tenants who are former homeowners living in the property after the bank took it back at foreclosure, because not enough information is available about this group. And since this RHIA was done with limited time and resources, it focuses on the most at-risk people. It doesn't study other groups that may be affected, like landlords or people looking to move to Boston.

"Now, I'm on a fixed income—I can't afford that, there's no way I can ... If I disagree with what they said, they will proceed in an eviction notice. I'm 72 years old, and I don't see myself being homeless. At my age, where am I going to go? My blood pressure is so high. ... Each morning I'm leaving my apartment and I'm looking for some kind of note attached to my door. It's very scary to me. Each day I'm so tense."

- Canute Harris, Boston Displacement Mapping

Research shows many ways a Just Cause for Eviction law could make a difference in renters' health. The diagram below maps out many possible pathways that have been studied. This report picks out to talk about pathways that studies show make a bigger difference, and the ones that are most important to directly-affected people. Review of the research and CLVU members' input helped find the main pathways leading from eviction/threat of eviction to effects on renters health: having to move a lot, ending up in poor-quality housing, being unable to cover basic costs of living, homelessness, losing social/environmental ties, and stress.



Eviction policies affect the majority of Bostonians. About 650,000 people live in the City, and over 60% of those are renters. Close to half of these renters are “rent-burdened” (meaning more than 30% of their income goes to housing costs), with half of this group spending 50% and up of their household income on rent.² Growing demand to live near the core of the city has pushed housing and rental prices up in the last decade, but incomes haven't kept up with the cost of housing in Boston for low-income and middle-class residents. The City found that for households making \$50,000/year, only 9% of available rental housing listings would be affordable – and households earning \$25,000/year could afford less than 1%. This mismatch will only get worse over time. The City expects that by 2030, there will be more low-income residents and a need for 38,000+ affordable units.³



“The whole [eviction] process was so stressful. It covers every aspect of your life. You can't sleep, you have this thing on your mind...I have developed so many health issues as a result of this.”

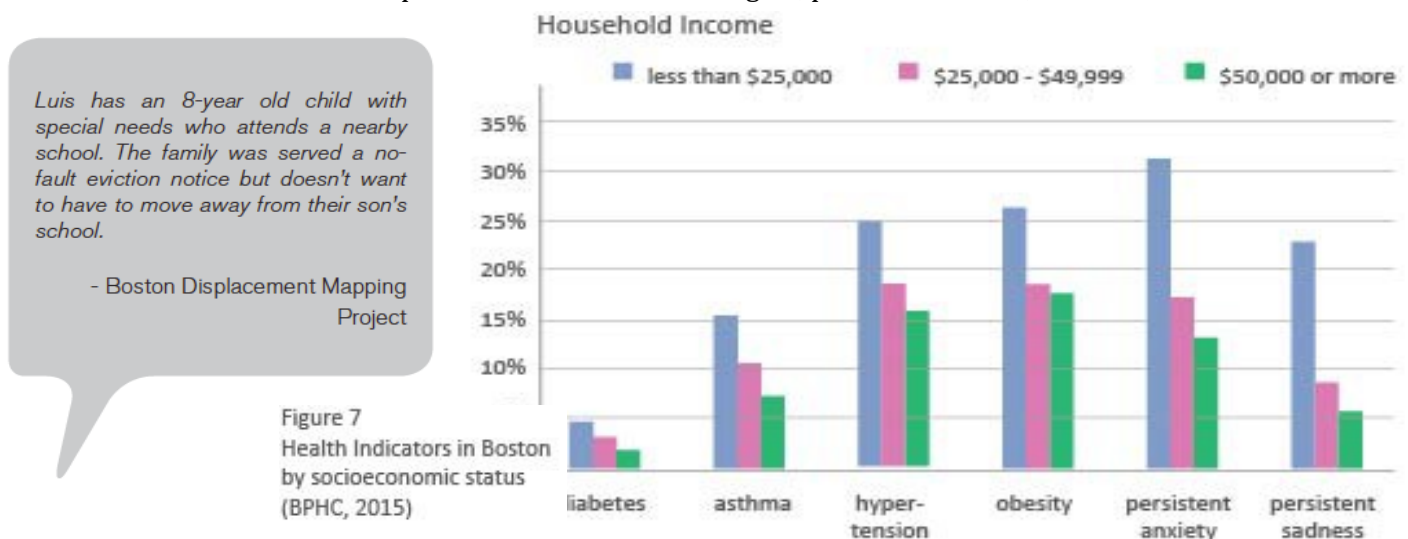
– City Life/Vida Urbana member

Figure 4
Number of cases brought to housing court in Boston from 2006 - 2014
(Mass Court System, 2013)

Evictions are on the rise in Boston. Every year, many renters get a “Notice to Quit” from their landlord, who wishes to terminate their tenancy. According to the Census Bureau, this happened to 6,900 Boston households in 2013.⁴ In a lot of these cases, the landlord then files in housing court trying to get authorization to evict. In Boston, cases filed in Housing Court went up 17% from 2006-2014 (from ~4,600 cases to ~5,400. See Figure 4).⁵ Around 41% of Housing Court cases 2006-2011 ended in evictions.⁶ This rise in displacement during the recent rental market boom^{7,8} is troubling. High turnover interrupts neighborhood stability and people's social ties.

The baseline state of health in Boston is very unequal, even before looking at how eviction affects it. Groups and neighborhoods with more social, economic, and political power have many advantages over those with less privilege – from education, unemployment, and income levels, to rates of physical and mental health challenges (See Figure 7)^{9,10}. People of color are more likely to be low-income, less-educated or unemployed – and people with these characteristics are more likely to suffer from¹¹:

- Physical health problems like diabetes, asthma, high blood pressure, and obesity
- Mental health problems like persistent anxiety and sadness
- Maternal-child health problems like low birth weights, premature births, and infant deaths



Luis has an 8-year old child with special needs who attends a nearby school. The family was served a no-fault eviction notice but doesn't want to have to move away from their son's school.

– Boston Displacement Mapping Project

Looking at Boston neighborhoods, the ones with more low-income residents and people of color (African-American, Hispanic, Asian American, and other) tend to have high percentages of renters. More tenants in these communities are rent-burdened, and more eviction cases in Housing Court come from these neighborhoods^{12 13}. At the same time, many of these areas show higher rates of¹⁴:

- Mental health hospitalizations
- Chronic disease hospitalizations
- Bad birth outcomes

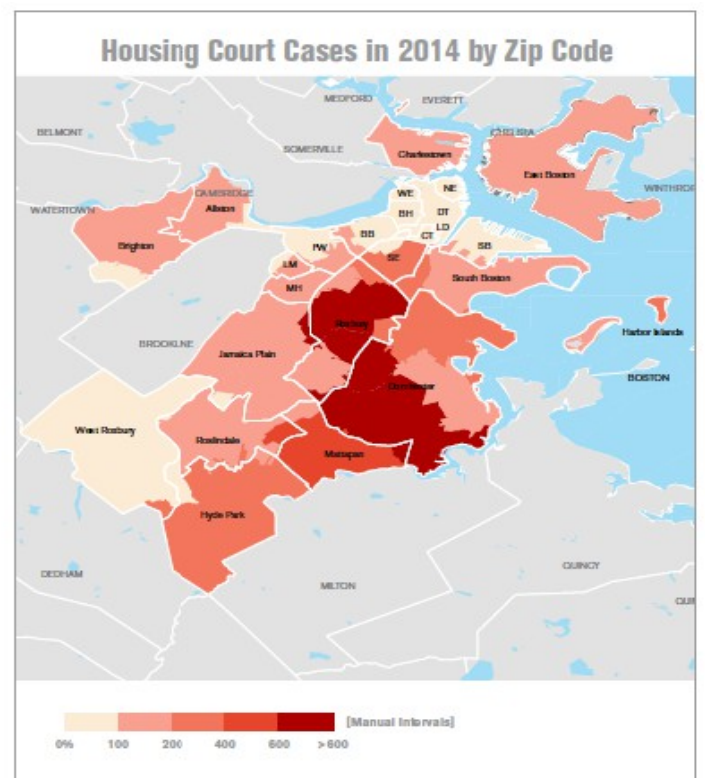
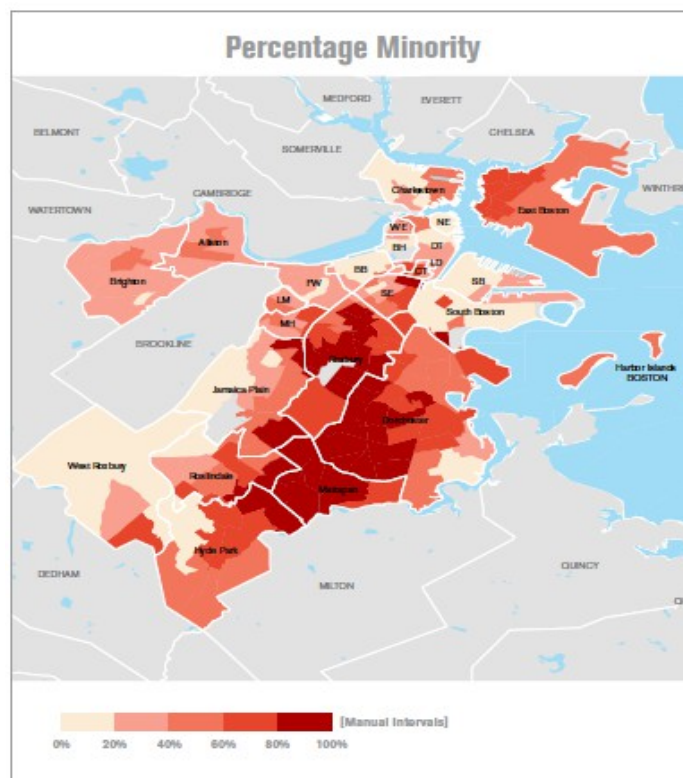
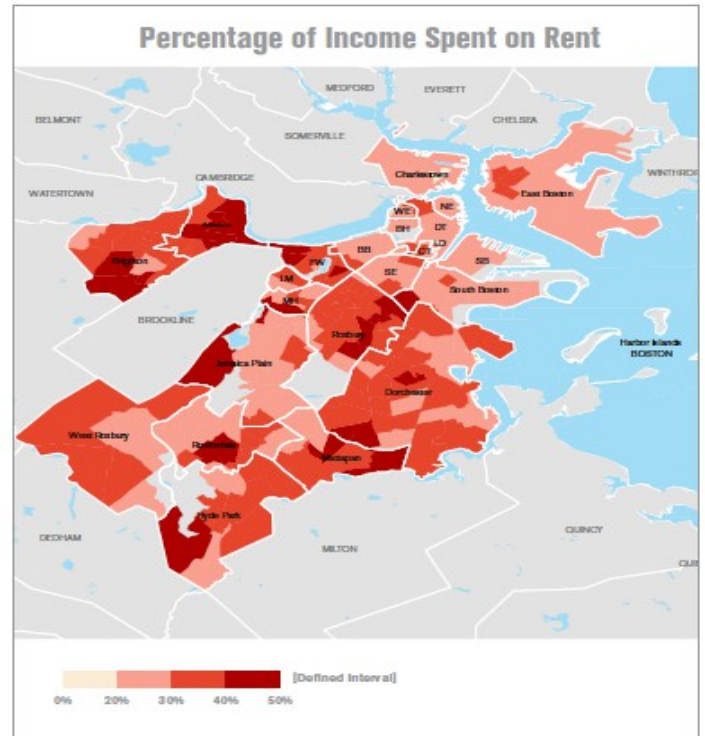
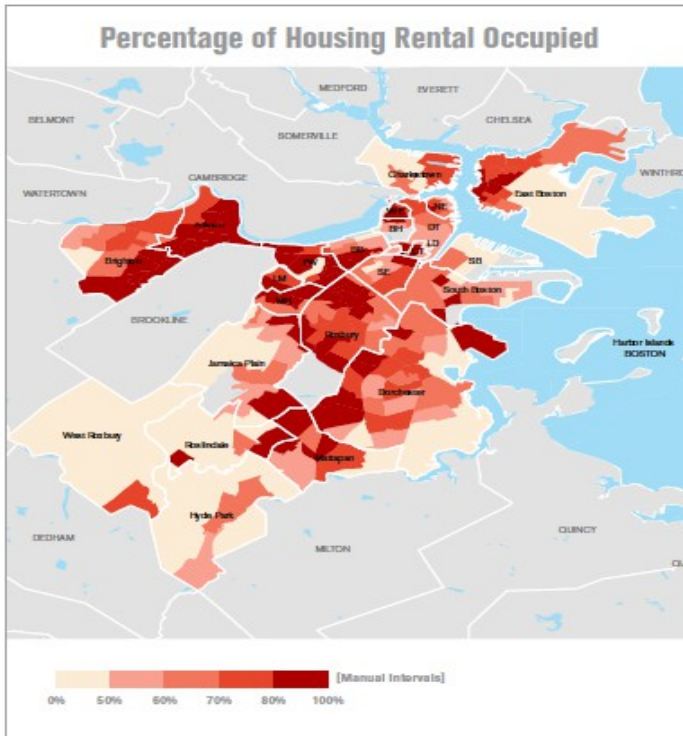
Figure 6
Social determinants of health
in Boston by census tract
(US Census, 2014)



BB Back Bay
BH Beacon Hill
CT Chinatown
DT Downtown
FW Fenway
LD Leather District
LM Longwood Medical
MH Mission Hill
NE North End
SB South Boston Waterfront
SE South End
WE West End



Rapid Health Impact Assessment on Just Cause for Eviction Ordinance
Maps Created by: Jennifer Hise, Ellen Morris, Hannah Payne, Amy Plovnick + Ayesha Shahid
Source: American Community Housing Survey (2014 Five Year Estimates)



Changing the law to limit evictions, and displacement because of the threat of eviction, could affect many people's health in different ways.

The Jim Brooks Stabilization Act would stop big landlords in Boston, who don't owner-occupy their buildings, from evicting tenants in order to turn properties into luxury housing and get new tenants at higher rents. Statistics aren't kept on how many no-fault evictions happen for these reasons, but there are many examples from lots of neighborhoods like East Boston, Chinatown, and Roxbury.¹⁵ The law would mean big landlords could only send eviction notices in cases with Just Cause (mostly nonpayment and lease violations). This change would mean less eviction cases brought to Housing Court, and also less people forced to move because of the threat of having to fight a court eviction case (many tenants move out during the notice period before an eviction is filed, even though this may hurt their health). A study of Milwaukee renters found that only 24% of "involuntarily displacements" – moving because of eviction, landlord foreclosure, or building condemnation – were

In MA, legally a tenant only has to leave or face forcible eviction by the landlord after:

- Both sides have had the opportunity to present their arguments in court
- A judge has ruled on the case

Many tenants don't use these rights because they:

- Don't know them
- Can't afford legal representation,
- Don't have time or transportation to access the court process
- Fear employment/housing/credit discrimination from eviction court records.



Photo credit: Howard Rotman

formal evictions through Housing Court.¹⁶

"Where will you go? How will you move your stuff? How will you get money to put a deposit down because you've been evicted and you have no money? With my salary, all I can rent is my room. The whole process was so stressful. How we are going to eat, how are we going to pay for rent?"

– City Life/Vida Urbana member

Research from other cities shows that eviction in general affects people unequally based on their race, gender, and family type. The Milwaukee study found that 9% of white renters had a forced move in the past two years, vs. 12% of black and 23% of Hispanic renters.¹⁷ Women were more than twice as likely to be evicted as men,¹⁸ and women with children are most likely to end up with an eviction judgment.¹⁹

Studies confirm the direct connection affected people see between eviction and health.

Members at a CLVU meeting described from firsthand experience how an eviction affects every element of one's life, including work, eating, sleeping, and making major decisions. They explained that it led to stress, depression, poor mental health, and poor physical health. Academic studies have also made this link. A survey of 2,700 low-income urban mothers from 20 cities found that those who went through eviction had worse self-reported health, depression, and parental stress (See Table 1).²⁰ These effects lasted over time – 2 years later, evicted mothers still

had higher rates of material hardship and depression than those who weren't evicted.²¹ A study of the effects of displacement on 250 women forced from Boston's West End found a grief reaction in 46%. Two years later, 26% reported feeling sad or depressed.²²

Outcome	Evicted	Not Evicted
Own health reported poor or fair	27	15
Children's health reported poor or fair	11	4
Maternal depression	34	16

Table 1: Health Outcomes for Evicted Mothers and Children (Desmond & Kimbro, 2015)

Eviction, and moving under threat of eviction, also leads to other traumatic events proven to hurt health. These main pathways from displacement to bad health are: having to move a lot, ending up in poor-quality housing, not being able to cover basic costs of living, homelessness, and losing social/environmental ties. (See Table 2) All of the pathways lead to moderate or severe impacts on health.


















	Stress	Depression	Substance Abuse	Environmental Exposures	Child Health
Residential Mobility					
Poor Housing Quality					
Material Hardship					
Homelessness					
Loss of Social Capital					

Table 2 shows the negative health effects connected to each pathway linked to eviction.

Frequent moves after an eviction process (“residential mobility”): Having to find new housing fast because of eviction can set off a chain reaction of both voluntary and involuntary moves. A Milwaukee study found that a forced move such as eviction, makes a renter 14% more likely to move voluntarily the next year.²³ Moving a lot can be especially hard for families with children and can lead to disrupted education and being willing to accept poor housing quality.^{24 25} Children who move often tend to have more behavioral and emotional issues, teen pregnancy, and depression or drug use later in life.²⁶ Adjusting to new schools and peers is stressful for children, which can make their behavioral problems worse.²⁷ Frequent moves hurt kids' school performance, making them less likely to graduate high school, which itself can mean worse health. The Health of Boston Report found that people without a high school diploma/GED had more high blood pressure, anxiety, and persistent sadness than those with more education.²⁸



Photo credit: Eroc Arroyo-Montano

Poor housing quality after an eviction process: Evicted renters have to move quickly, and are more likely to end up in poor-quality housing or neighborhoods with high crime and poverty rates, compared to renters who move by choice.²⁹ Living in dangerous environments harms health³⁰ and so does bad housing quality.³¹ Boston Medical Center and Children’s Hospital found that homes with roaches, rats, mold, inadequate heat, fire risk, lead, and in violent areas were connected to more respiratory disease, injuries, and lead poisoning in children.³² In London, people living in high-quality public housing spent less time sick than people in bad-condition public housing.³³

Being unable to cover basic costs of living after an eviction process (“material hardship”³⁴): This is a permanent state for many families in Boston, but eviction can make it much worse by adding unexpected costs like losing wages in order to go to Housing Court to defend yourself, renting a moving truck, paying a security deposit or storage costs, and having to quickly find new housing where the rent and/or transportation are likely to be more expensive. Census data shows that Bostonians who moved after 2010 pay 33% higher rent on average than those who’ve lived in the same home since the previous decade.³⁵ Families with material hardship are more likely to make spending trade-offs between rent, utilities, food, and healthcare.³⁶ Studies confirm that worse material hardship is connected with more risk to children's health, nutrition, and development.^{37 38} Struggling to make ends meet puts stress on adults' parenting, leading to emotional and behavior problems in their kids.³⁹

Homelessness after an eviction process: Low-income residents who get evicted may be at higher risk of homelessness because of not being able afford housing.⁴⁰ Nationally only 1 out of every 4 low-income renter households financially eligible for housing subsidy, actually gets it.⁴¹ The 2015 Boston Homeless Census listed 1,543 homeless families - a 25% increase from the year before. Families are the fastest-growing homeless group in Boston due to rising rents and not enough rental assistance.⁴² Living on the street or in a shelter is very stressful and can expose people to violence, diseases, malnutrition and harmful weather. It also makes health conditions like asthma, high blood pressure, diabetes, depression and alcoholism worse.⁴³ Those most at risk of being homeless after eviction are low-income people who on average have worse health to begin with.⁴⁴ Even children who experienced homelessness prenatally or as babies are more at risk of bad health, vs. children who were never homeless (see Figure 10).⁴⁵ Many shelters only accept women, girls, and boys under age 13, so families with fathers or teenage sons may need to split up to get shelter.⁴⁶ CLVU members described finding temporary housing as extremely stressful, especially for those with teenage children or pets. They sometimes chose unsafe places to sleep to avoid splitting up families. Preventing the homelessness that can result from eviction would also mean less people in shelters (it costs the \$26,620 when a homeless family enters the state-run emergency-shelter system).⁴⁷

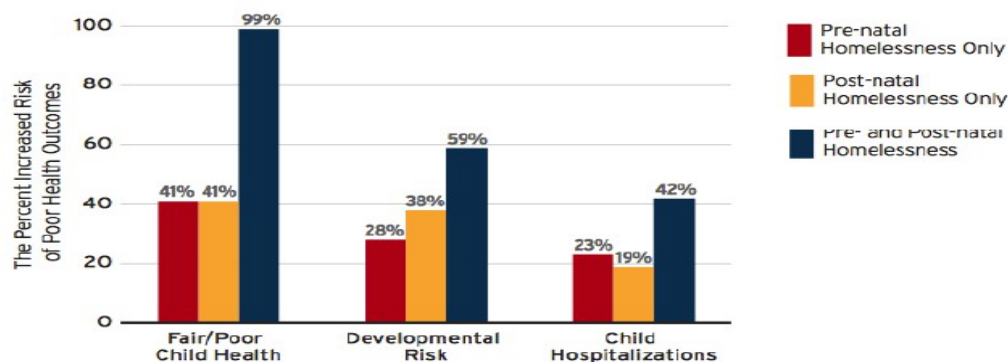


Figure 10
Compounding effects of homelessness on child health (Sandel, Sheward, & Sturtevant, 2015)

Losing social and environmental ties after an eviction process (“place attachment”⁴⁸ and “social capital”⁴⁹):

Research on place attachment shows that disaster victims report feeling dizzy, anxious, and disoriented when they no longer recognize their destroyed neighborhood. This suggests that physical place, physical health, and mental health are linked.⁵⁰ Forcibly removing someone from their physical place –like through eviction – may affect their health. People’s social ties in their neighborhood – from helping watch each other’s kids to encouraging voting in elections – may be very good for health.⁵¹ Social capital is connected to less death from heart disease, cancer, and infant mortality.

Neighborhoods with more income inequality are less likely to have trust and connection between neighbors, which is bad for health.⁵²



Photo credit: Eroc Arroyo-Montano

Josue grew up in a house in Egleston Square. But after 17 years, Josue's family was displaced out of the neighborhood when their rent went up. Josue says, "The whole entire street was awesome, we all got along, especially in a snowstorm...everybody knew each other. But then as soon as the landlord decided to raise up the bills, people were leaving left and right." Josue still prefers his old neighborhood, and he tries to spend time with his friends and community in Egleston even since he's been displaced. Josue works with teens at the YMCA and engages them in local issues.

– Boston Displacement Mapping Project

Fear, worry, and stress about the threat of eviction also harms people. CLVU members described how anticipating an eviction – either after getting a notice, or seeing their neighbors evicted – can be very stressful. Stress links to many physical and mental health problems.⁵³ If no-fault evictions by big landlords were outlawed, many renters would no longer have to fear eviction at any moment without cause. Connecting renters with tenant advocacy resources when they do get a notice of eviction or rent increase will help them cope better with the stress

This RHIA recommends the following actions to improve renters' health:

Boston City Council:

1. Pass the Just Cause Eviction Ordinance (now called the Jim Brooks Stabilization Act of 2016).

The proposed law is expected to lead to better mental and physical health in Boston renters by reducing the number of evictions, lowering renters' fear and worry about being evicted, and making the support network stronger for residents facing rent increases or displacement.

2. Work to pass policies that reduce evictions overall.

Although the Jim Brooks Stabilization Act would lower the number of no-fault evictions in Boston, many types of eviction and displacement would not be prevented, including those caused by rising rents. To help more people get the health benefits described in this RHIA, the City Council could pass related policies like: rent stabilization, increasing affordable housing, and a living wage.



Photo Credit: Mike Leyba

City of Boston's Office of Housing Stability (OHS):

1. Provide tenants with information about community health services.

The Jim Brooks Stabilization Act would require landlords to notify OHS when sending a Notice to Quit or lease non-renewal. OHS would track cases and make referrals. Given the known negative health effects of eviction, OHS referrals should include a list of community health services. Tenants should be encouraged to use these services to help them cope with some of the mental and physical health effects of facing a potential eviction.

2. Collect and share eviction data and collaborate with the Boston Public Health Commission (BPHC).

OHS should track the number of, reason for, and location of evictions. Data on evictions and displacement should be shared with the BPHC. The BPHC can then see where forced displacement is happening and whether this is related to areas of the city that have poor health. They can design their work to target places facing more evictions.

Right to Remain campaign member organizations that work directly with affected people (such as CLVU):

1. Use this RHIA to talk further about Just Cause Eviction and other policies to protect Boston residents from eviction.

There are many reasons to reduce evictions including: maintaining community, limiting real estate buyers ability to force people from their homes in hope of future profits, and giving residents a sense of security. By reporting on the health effects of eviction, this RHIA adds a new way of looking at the importance of the proposed law. Groups like CLVU can use this new view in conversations about the issue of no-fault evictions.

2. Magnify the health benefits that people get from participating in groups like CLVU by offering counseling services and partnerships with community health organizations.



Photo credit: Howard Rotman

CLVU and other groups in the Right to Remain coalition already do a lot to connect people facing eviction with legal help, social support, and a sense of hope. We heard from members that working with CLVU saved their lives, helped them to remain in their home or find new housing, and even encouraged them to get mental health services. CLVU can make its impact bigger by providing counseling services or partnering with community health organizations to connect people who are experiencing health effects of eviction with the support they need.

Imagine you are talking to a politician with the power to vote for the proposed Just Cause Eviction law about the report.

What part would you point out? Is it a statistic, a chart, a picture, a quotation? Why do you think it would be important for them to see it? How would you explain it to them?

Read the list of organizations in the Right to Remain Coalition.

Knowing that there are such close connections between housing stability and health, who else do you think would care about passing the Jim Brooks Stabilization Act? How would you reach out to them? What would you ask them to do to help?

Read the quotations by Canute Harris, Josue, Luis, and other City Life/Vida Urbana members.

Where do you see the words of people directly-affected by eviction/displacement matching up with the statistics from researchers? Is there anywhere they don't match? Why do you think that is?

Think about who can be considered an “expert” on eviction.

What types of knowledge make someone an expert? Who do you think lawmakers would see as experts on this topic? Are there other ways of looking at who the experts are?

Find your neighborhood on the 4 maps that show how many: 1.) renters, 2.) people of color, 3.) rent-burdened households, and 4.) eviction cases are in different parts of Boston.

What do you notice about the characteristics of your neighborhood? How does it compare to other areas? What do you think are some reasons for these differences? Does any of the information on the maps surprise you? Why?

In the section “Eviction policies affect the majority of Bostonians,” the report says: “Close to half of [Boston] renters are 'rent-burdened' (meaning more than 30% of their income goes to housing costs).” In the section “Eviction, and moving under threat of eviction, also leads to other traumatic events proven to hurt health,” it says: “Families with material hardship [not having money to cover basic needs] are more likely to make spending trade-offs between rent, utilities, food, and healthcare... Struggling to make ends meet puts stress on adults' parenting, leading to emotional and behavior problems in their kids.”

Are you now or have you ever been cost-burdened as a renter or homeowner? What tradeoffs did you have to make and how did they affect you and your family?

In the recommendations section it says: “To help more people get the health benefits described in this RHIA, the City Council could pass related policies like: rent stabilization, increasing affordable housing, and a living wage.”

Which of these other policies (besides Just Cause Eviction) do you think would help the housing situation in Boston most? Why? What other recommendations would you suggest?

Have you or someone you know had their health put in danger because of a housing situation? Tell the story if you feel ready to.

If we had a Just Cause Eviction law, would things have turned out differently? If not, what would have helped? Is this a story you could share to help people understand why we need the Jim Brooks Stabilization Act, or another housing policy? What support would you need to be able to share it?

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- 5 Massachusetts Court System (2014)
- 6 Project Hope (2012)
- 7 Loth, Renee. "Evictions rise as Boston gentrifies." *Boston Globe* (April 10, 2016)
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