

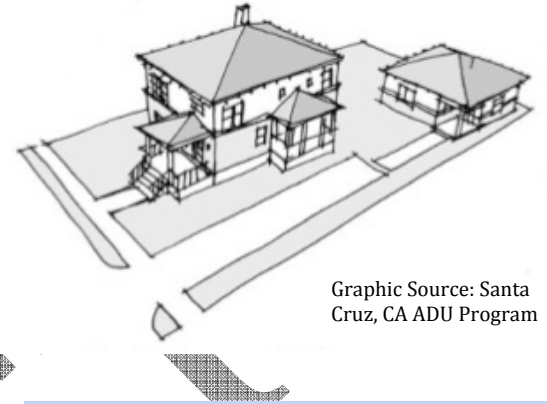
Health Impact Assessment: Accessory Dwelling Units

Benton County Health Department

Project Summary

Project Description

Currently, Benton County does not allow accessory dwelling units (ADUs), which are small, secondary housing units on a property with an existing single-family home. Community members continue to request permits to develop ADUs and the County comprehensive plan encourages the adoption of ADU development standards. A health impact assessment (HIA) was completed by the County Health Department to determine the potential health impacts of allowing ADUs in rural Benton County. Assist decision makers in considering health when deciding upon accessory dwelling units issues.



Graphic Source: Santa Cruz, CA ADU Program

Potential Impacts on Health

Positive Impacts:

- Provide living spaces for persons with disabilities of medical hardships to live near caretakers or family members.
- Generate additional income for homeowners by offering the unit as a rental.
- Provide an affordable housing alternative for individual and small households in rural areas.
- Encourage multi-generational housing that strengthens the family unit.
- Reduce the number of sub-standard and overcrowded housing units by allowing legal development of accessory units.
- Allow elderly homeowners to “age-in-place” and remain in their home by providing living space for a caregiver or family member.

Negative Impacts:

- Allow development in rural areas with poor access to schools, food markets, medical facilities, and parks.
- Allow development in rural areas with poor public transit services and high auto-dependence.
- Increased vehicle emissions caused by more people driving to and from rural areas.
- Allow development in rural areas without adequate pedestrian and bicycle infrastructure, reducing walkability and opportunity for physical activity.

Community Input

Two community meetings were held in Alsea and Monroe to discuss accessory dwelling units and housing issues in Benton County. Some comments from the community meetings include:

“I want my disabled grandson to live with me, but I don’t want to live with his caregiver”- a community member expressed a need for a second unit because of a family member’s dependence on a live-in caregiver.

“There are very few starter homes out here, because you have to buy the acreage that comes with the house” – A response from a community member when asked the potential benefits of accessory dwelling units as an alternative housing option.

“Manufactured homes work well with temporary medical needs. Once your done with them you pick them up and move them” – a response when asked about the current laws permitting temporary medical hardship trailers.



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Summary of Findings

Policy Options	Impact Categories			
	Healthy Housing	Access to Goods/Services	Social Cohesion	Transportation And Mobility
Option 1: No Policy Change	*	*	*	*
Option 2: Restriction of Current Rules	-	+	-	+
Option 3: Dependent ADUs	+	--	+++	-
Option 4: Independent ADUs	++	---	++	--
Option 5: Independent ADUs in UGB zones	+	--	+	-

Methodology

Policy impacts were assessed using indicators from the Healthy Development Measurement Tool (HDMT) and existing health conditions in Benton County. Visit www.thehdmt.org or see the complete HIA report available at the Health Dept. for more information.

Projected Impacts

- Policy option three has the greatest positive impact on health by improving healthy housing options and social cohesion.
- Policy options four and five have an overall negative impact on health. These options benefit healthy housing and social cohesion but have stronger negative impacts related to access to goods/services and transportation.
- Taking no policy action, as in option one, will have no negative or positive impact on health.
- If an ADU policy is adopted, an estimated 8 units will be permitted and constructed annually.
- If an ADU policy is adopted allowing units in UGB zones only, an estimated 3-4 units will be permitted and constructed annually.

Conclusions

The health impact assessment concluded that accessory dwelling units will have a positive impact on health if they are restricted in size and limited to family use. Dependent ADUs encourage social cohesion and alternative housing options for family members, disabled individuals, and aging persons. Independent ADUs also provide these benefits to family cohesion and significant benefits to healthy housing options. But the larger size of independent ADUs and capacity to be offered as rental units encourages increased residency in areas without adequate goods, services, transportation systems, and pedestrian infrastructure.

Policy Recommendation

Based on the HIA conclusions, it is recommended that **Policy Option Three: Dependent Accessory Dwelling Units** be adopted with certain mitigations: 1) resident of ADU must be the homeowner, a relative or a caregiver; 2) the units cannot be offered as a rental; 3) review the policy after adoption to identify any unpredicted impacts; and 4) “cap” the number of annual permits allowed to limit potential negative impacts.

