

HOMES FOR A LIFETIME

Housing Justice for Older Adults and People with Disabilities

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We all need safe, accessible homes, but typical housing options don't reflect that we all have different needs, and they can change over the course of our lives. Most homes aren't designed with accessibility for older adults and people with disabilities in mind, either in terms of the home itself or its connection to the larger community. Housing that is accessible is often unaffordable.

Renter households living at or below 30% of area median income are **77%** more likely than all other renter households to include older adults or people with disabilities.^a

For every 10 Michigan renter families in this income bracket, there are fewer than 4 affordable rental units and many of them are inaccessible.^b



This is a result of broader economic forces connected to stereotypes that devalue the lives of older adults and disabled people, erase their contributions to society and falsely label their needs as "special." Ableism and ageism also reinforce racial inequity: the same systems that deny basic needs and opportunity to people of color drive racial disparities in health and disability, which widen with age.

We all grow older, and we all have had, currently have, or in the future will have at least one disability. We all also deserve to fully participate in society and live with safety, dignity and self-determination. Housing equity is key to a future in which all people are valued, regardless of disability, age or race.

Note: To reflect the evolution of language and varied preferences within the disability community, this brief alternates between person-first language (i.e., "people with disabilities") and identity-first language (i.e., "disabled people").

How can Michigan support better housing choices for everyone?

Support alternatives to institutional care.

Improve health, safety and quality of life in institutional settings. Take an inventory of affordable, accessible and inclusive housing in Michigan and create tools to connect residents to homes that meet their needs. Ensure that accessible housing promotes full community inclusion for older or disabled residents.

End employment discrimination.

Disability and Aging in Michigan



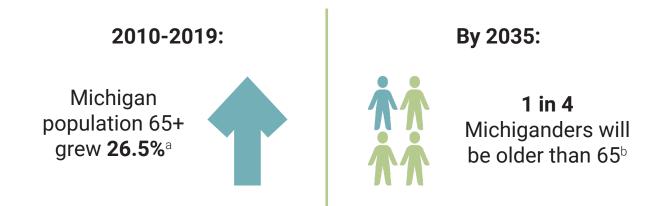
Nearly **1 in 4 children** has an "emotional, behavioral or developmental condition"^c Ambulatory, independent living and cognitive difficulties are the **most common** disabilities^d

More than 1 in 5 children have "special healthcare needs"^b



Depending on disability type, people aged 75 and older are **2 to 8 times more likely** than average to be disabled^d

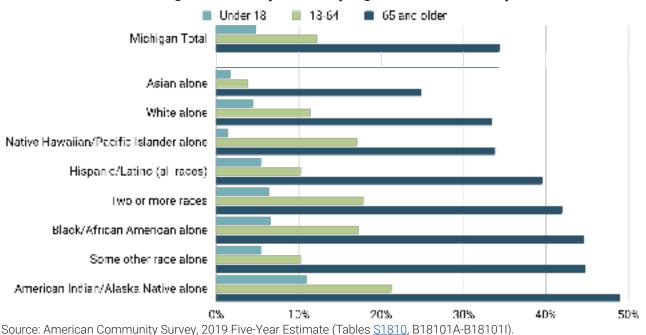
Source: a <u>2019 Michigan Behavioral Risk Factor Survey</u>, p. 3. | b <u>Annie E. Casey Foundation, Kids Count Data Center</u>, 2018-2019. | c <u>Annie E. Casey Foundation, Kids Count Data Center</u>, 2018-2019. | d <u>American Community Survey, Table S1810</u>, 2015-2019 5-Year Estimates.



Source: a American Community Survey Five-Year Estimates, 2010-2019 (Table S0103). | b Michigan State University, College of Osteopathic Medicine. (September 10, 2019).

Disability rates increase with age, and systemic racism has created racial and ethnic disparities in disability rates. Exposure to pollution, poor housing conditions, healthcare access barriers and experience of toxic stress are just some of the factors that contribute to higher disability rates among Black, Indigenous and other people of color. These disparities also widen with age, with disability prevalence increasing much more rapidly among people of color compared to white people.

Michigan Disability Rates by Age, Race & Ethnicity



Note: The available data are limited by grouping all Asians together rather than disaggregating by distinct nationality and ethnicity. This masks a wide variation with regard to numerous characteristics, such as household income, poverty rate and disability rate. A primary driver of economic and health disparities within the Asian population is the inequitable immigration rules the U.S. has applied to different subcategories of Asians. Absent this nuance, the data may create a false impression that poverty, racism, disability and ableism do not significantly affect Asians in the U.S.

Forced Poverty Makes Accessible Housing Unaffordable

Disabled people, especially disabled people of color, are more likely to live in poverty due to compounding discrimination in all parts of life, such as education, the criminal legal system, and employment. At the same time, because the world is not designed for them, they face added costs for assistive technology and devices as well as all of the basics, including healthcare, transportation, and housing.

The Disability Tax

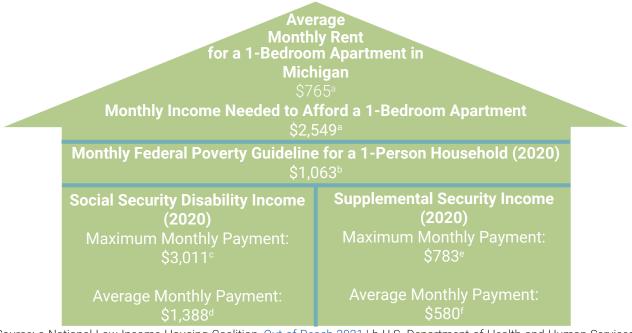
A household that includes a disabled person needs 28% more income to maintain the same standard of living as a similar household in which no one has a disability.



Source: National Disability Institute, p.1

Public assistance programs provide benefits far below what a family needs, are hard to apply for and use a very restrictive definition of "disability." Additionally, marriage penalties¹, asset limits² and other conditions penalize household members for acquiring additional resources to live above the poverty level, build savings or survive a crisis. Thus, people with disabilities and older adults on a fixed income have to make difficult budget choices between housing and other essentials like food and healthcare, with serious consequences for health and well-being.

Homes Are Out of Reach for Many



Source: a National Low Income Housing Coalition, <u>Out of Reach 2021.</u> b U.S. Department of Health and Human Services, <u>2020 Poverty Guidelines</u>. | c Injury and Disability Law Center, <u>How are SSDI Payments Calculated?</u> | d Social Security Administration, <u>Beneficiary Data</u>. | e Social Security Administration, <u>SSI Federal Payment Amounts</u>. | f Center on Budget and Policy Priorities, <u>Policy Basics: Supplemental Security Income</u> (as of December 2020).

Ultimately, ageism and ableism can lead to homelessness. Disability is about three times more common among homeless Michiganders than the general population³, and 77% of unhoused people 55 and older have a disability.⁴ Homelessness is growing among older adults in our state, increasing by more than 9% from 2015 to 2019.⁵ Also, Black and Indigenous people are overrepresented among the state's homeless population, a fact explained in part by the disability rate disparities resulting from structural racism.

Housing for All Generations

The lack of accessible, affordable housing for older adults affects children, too. In recent years, the nation has seen a rise in "grandfamilies"—households in which older adults are raising their grandchildren or other minor relatives. In Michigan, nearly 170,000 people live with their minor grandchildren; 35% of them are responsible for those children because no parent is present or able to care for them.⁶ Older family caregivers often must take in their younger relatives with very little notice, which can put a strain on their finances and housing situations. These family arrangements are likely to become even more common as more than 140,000 U.S. children—including 3,200 in Michigan—have lost a parent or other primary caregiver to COVID-19.⁷ It's critical that the state's foster care system and public assistance policies are structured to support these particular families and ensure that children aren't further traumatized by continued housing instability after leaving their parents' care.

The COVID-19 Pandemic Exposes Housing Injustice

It's clear that policymakers must center older adults' and disabled people's needs, including housing, in pandemic response and recovery efforts. Disabled people and older adults are alarmingly overrepresented among COVID-19 cases, hospitalizations and deaths—a stark display of society's disregard for their lives and well-being. Housing circumstances play a significant role. Not surprisingly, COVID-19 has had a devastating impact in congregate settings like nursing homes.

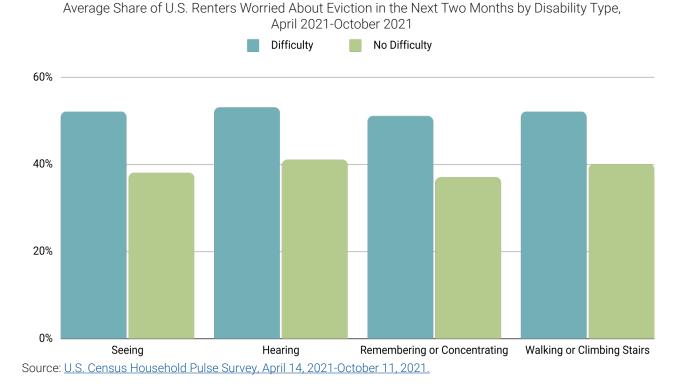
Nationwide, residents and staff of long-term care facilities account for nearly one-third of COVIDrelated deaths;⁸ due to broader health and social inequities, the resident death rate is more than three times higher in nursing homes serving more people of color.⁹

This is the entirely predictable outcome of a society that prefers to warehouse older adults and disabled people rather than provide the resources all people need to remain in their homes and communities where they are safer, healthier and happier. Drastically changing our approach to housing will only become more important as COVID-19 itself disables more people: up to 1 in 3 survivors has "long COVID," experiencing potentially life-altering symptoms for months after infection.¹⁰

The harmful impacts of COVID-19 haven't been limited to residents of institutional settings, either. The pandemic has worsened an existing unmet need for older adults and people with disabilities still living in their homes as workers who provide home- and community-based services have been sickened or died, or have left the labor force to care for their children while schools and day care centers have been closed.¹¹

The pandemic has also economically affected housing security for people with disabilities, who disproportionately work in the low-wage service jobs that carry heightened risk of coronavirus exposure or that have been hit hardest by layoffs.¹² Even before the pandemic, renters with disabilities were more likely to be evicted due to the combination of low incomes, higher costs of living, and outright discrimination; the health and economic impacts of COVID-19 have magnified the risk of eviction, which is a frequent precursor to other serious health problems, hospitalization, and homelessness. Although the economy is recovering, disabled people could continue to face hardship because it may not be safe for them to return to work yet: dangerous virus variants continue to emerge, adequate workplace safety measures may not be in place, and, despite their heightened COVID-19 risk and lower vaccine hesitancy¹³, people with disabilities face inequity in vaccine access.¹⁴

During the COVID-19 Pandemic, Disabled Renters Have Faced a Greater Eviction Risk Compared to Renters Without Disabilities



Creating Better Housing Choices for Everyone

Policymakers can better ensure that we all have safe, quality homes that meet our needs throughout our lives. As the most affected residents, people with disabilities and older adults should be hired as key informants and leaders in all of these efforts, and justly compensated for contributing time, technical expertise and lived experience from which we will all benefit.

Support alternatives to institutional care. Nearly everyone wants to remain in their current home as they age rather than move to a long-term care (LTC) facility.¹⁵ There is much Michigan can do to make remaining at home a real option for people, and with the federal government's historic investment in states and communities under the American Rescue Plan Act (ARPA), now is the time to do it.

- Educate the public about and fund home modifications for accessibility and safety. These modifications can prevent injury and death and otherwise improve health and quality of life at a fraction of the cost of LTC.
- Expand access to supportive services that promote independent living. There are several programs, such as the Program of All-Inclusive Care for the Elderly (PACE), that provide services to older adults and people with disabilities in their homes or other community-based settings. These programs aren't available everywhere (rural communities are typically underserved) or might be unaffordable or otherwise inaccessible to people who need them. With ARPA funding, the state should expand these services to reach new communities and individuals currently experiencing obstacles.
- Invest more in the essential workers who provide supportive services. Michigan has a shortage
 of direct care workers, such as home health and personal care aides, of nearly 40,000.¹⁶ Even
 after a pay increase instituted during the COVID-19 pandemic, the average wage for a home
 health aide in Michigan is less than the \$14.71 full-time hourly wage needed to afford a onebedroom apartment.¹⁷ These workers are virtually all women and disproportionately women of
 color and immigrants.¹⁸ In many cases, home care workers have not had the same access to
 personal protective equipment (PPE) as healthcare workers in hospital and other facility settings¹⁹,
 leaving them and their high-risk patients vulnerable to COVID-19. The state must recruit and retain
 workers by ensuring safe working conditions and increasing wages, professional development
 opportunities and other benefits to cover housing, child care and other basic needs.

Improve health, safety and quality of life in institutional settings. Michigan also can use ARPA funds to transform the delivery of care for people who still don't have the option to live at home, or who prefer to live in a congregate setting.

- Finance the start-up costs of "small-house" nursing homes. These nontraditional facilities, known as "Green Houses," can provide the same level of care as a traditional nursing home but typically have only 10 to 12 beds, as well as other design features that make for a safer living environment. Green House residents have experienced fewer COVID-19 cases and deaths than their counterparts in larger nursing homes and report a higher quality of life and greater family satisfaction.²⁰
- Convert multi-bed LTC rooms to private rooms. Single-occupancy nursing home rooms are associated with better infection control, better health outcomes and higher resident satisfaction. ARPA funds can be used to reduce crowding while ensuring that residents have continued opportunities for healthy socialization.²¹

Take an inventory of affordable, accessible and inclusive housing in Michigan and create tools to connect residents to homes that meet their needs. Nationwide, there are more than three times as many families that include a disabled person as there are accessible homes.²² For older adults and people with disabilities, this large shortage compounds the difficulty of finding a home that is both safe and affordable. Housing assistance is chronically underfunded, so the majority of families with incomes low enough to qualify for it never receive any support, and only 5% of Michigan rental units are subsidized.²³ This leaves many disabled people and older adults struggling to pay market rates for homes that don't actually meet their needs.

The state should conduct a survey of accessible housing stock to 1) better understand the scope of housing challenges for these populations and address them through funding and policy decisions; and 2) make the information available through a public portal to make it easier for people to find and apply for accessible, inclusive housing within their budget.

Ensure that accessible housing promotes full community inclusion for older or disabled residents. Housing design standards for accessibility are tiered, ranging from various levels of "adaptable" to fully "accessible." Adaptable units fall into one of three levels: A, B and C. They have some of the features of fully accessible units, as well as others that can be easily modified to accommodate the needs of individual tenants—for example, reinforced walls to allow for grab bar installation, adjustable countertop heights, and base cabinets that can be removed to make kitchen and bathroom sinks usable. Accessible units have features such as grab bars already installed, roll-in showers, and other more permanent elements to meet the needs of disabled residents.

Federal law requires all new buildings with at least four dwelling units, whether privately or publicly financed, to meet Type B adaptability standards. If the developer is using federal funds, 7% of the units must meet full accessibility standards: 5% for people with mobility disabilities and 2% for people with hearing or visual disabilities. In its process for distributing developer incentives such as the Low-Income Housing Tax Credit, the state should incorporate accessibility considerations for buildings with fewer than four units, and in larger developments require all units beyond the 7% accessibility quota to meet the higher Type A adaptability standards. This would increase housing options for people with disabilities in neighborhoods with equitable opportunities for transportation, education, employment, health, recreation and socializing.

End employment discrimination. People with disabilities are unemployed at nearly three times the national average and, when working, paid only 63 cents for every dollar paid to workers without disabilities.²⁴ In a number of states, including Michigan, it's actually legal for employers to pay disabled workers less than the minimum wage. More than 8,000 Michiganders with disabilities are employed in workplaces known as "sheltered workshops," where they are often segregated and paid an average wage of only \$2.75 per hour.²⁵ The state should eliminate the sub-minimum wage and instead promote more inclusive and equitable employment practices that recognize the value people with disabilities bring to the workplace and the larger community.

Provide for eviction expungement. Nearly 200,000 eviction cases are filed in Michigan every year, with around 40,000 ultimately resulting in an eviction order.²⁶ In the remaining cases, the parties agree to a settlement or the court dismisses the case or rules in the tenant's favor. Regardless of the context or outcome, however, any dispute between a landlord and tenant that ends up in housing court can tarnish a tenant's rental history indefinitely. This makes it extremely difficult to secure an adequate, stable home for the entire family. People with disabilities may be at higher risk for an eviction action due to financial precariousness, landlord violations of fair housing laws,²⁷ and nuisance laws that penalize renters for experiencing a health crisis or being the victims of violent crime.²⁸

The law should provide for eviction expungement after a certain period of time, just as it does for negative financial entries on a credit report, to give struggling families the opportunity to gain the housing that is so critical to health and economic security.

End Notes

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