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# Evaluating housing concerns for people with physical disabilities:

## **Barriers, best practices, and policy implications**

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With 64.3 million U.S. adults living with disabilities (25 percent), most of us either know someone with a disability or experience one ourselves.<sup>1</sup>

- One in every seven U.S. adults has a mobility disability<sup>1</sup> the most common disability type in the U.S.<sup>2</sup>
- Individuals with disabilities are more likely to be women, minorities, impoverished, and reside in the South.<sup>2</sup>
- Disability rates increase with age, affecting two in every five adults aged 65 and older.<sup>2</sup>
- By 2035, some predict that 17 million older adult households (an increase of 7.4 million compared to 2014) will have a least one individual with a mobility disability.<sup>3</sup>

The home environment is critical to improving the quality of life and independence for individuals with mobility challenges, regardless of disability age of onset.<sup>3</sup> However, despite a long history of advocacy efforts to ensure that individuals with disabilities have a right to fair housing, those with physical disabilities remain disproportionately impacted by the lack of accessible and affordable homes compared to individuals without disabilities.<sup>4,5</sup>

To protect populations with disabilities from further inequities it is imperative for policymakers to address both the affordable housing crisis and the insufficient stock of accessible housing.

Toward that end, this issue brief outlines:

- 1) The factors that are exacerbating housing challenges around affordability and accessibility for individuals with physical disabilities.
- 2) The role housing has on improving health outcomes and minimizing health costs.
- 3) Best practices and policy levers that local, state, and federal governments may utilize to address the accessible and affordable housing shortage for people with disabilities.

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<sup>1</sup> Mobility disability is defined by the Behavioral Risk Factor Surveillance System (BRFSS) as someone with serious difficulty walking or climbing stairs<sup>2</sup>

## Key findings

Individuals with physical disabilities<sup>ii</sup> are impacted by the housing crisis twofold: affordability and accessibility. This population's barriers to accessing safe and fair housing warrant urgent action from policymakers. Key findings from this issue brief include:

1. Local and state jurisdictions could implement universal design policies, regulatory reforms, and home modification initiatives to advance housing accessibility and affordability.
2. Medicaid's 1915(c) Home and Community-Based Services (HCBS) waivers and the CAPABLE model, frequently administered through waivers, are well-established methods for states to coordinate funds to increase housing accessibility.
3. Increases in federal rental assistance should be considered to meet the present and rising demand for affordable and accessible housing and should be prioritized for low-income individuals with physical disabilities.

The U.S. housing crisis is magnified for people with physical disabilities for two reasons:

- Lack of affordable housing, because individuals with physical disabilities are more than twice as likely to be low-income.
- Lack of accessibility, because making a home accessible for people with disabilities requires significant and costly retrofitting.

### Affordability<sup>iii</sup>

Racist housing policies, coupled with an inadequate stock of accessible homes and severely limited housing assistance, have led to a shortage of homes for individuals with disabilities in the lowest-income brackets. Pre-COVID, millions of low-income renters were experiencing or at high risk of housing instability. Individuals with disabilities are more likely to be extremely low-income (ELI)<sup>iv</sup> renters and to experience higher rates of discrimination, making finding adequate housing an arduous task.<sup>6</sup>

- The increase in ELI renters and the rise in an aging demographic will ultimately lead to an even greater need for economical and navigable housing in the coming years.<sup>3</sup>
- ELI renters account for a quarter of all renter households, with nearly half of ELI households including an individual with a disability or an older adult (62 years old or older).<sup>7</sup>
- As of 2018, 4 million renters with disabilities spent over half their monthly income on rent, mortgage, and utilities, placing them in the category of severely cost-burdened.<sup>v,8</sup>

<sup>ii</sup> The literature does not often make a distinction between types of disabilities. Therefore, findings may relate to people with all disabilities. This issue brief's aim is to focus on the impact as it relates to populations with physical disabilities. Physical disabilities are often most represented as mobility disabilities, but can be included in a self-care or household activity disability as well.<sup>18</sup>

<sup>iii</sup> The government has made 30 percent the standard indicator of affordability for housing. Housing costs that are below 30 percent of income ideally ensure households have enough money to pay for other necessities. Households who spend more than 30 percent of income on housing costs are considered housing cost burdened.<sup>7</sup>

<sup>iv</sup> Extremely low-income (ELI): households with income at or below 30% area median income (AMI)<sup>7</sup>

<sup>v</sup> Severely cost burdened: spending more than 50% of household income on housing costs<sup>7</sup>

Figure 1

**7 million** Americans with disabilities pay more than 30% of their income on rent...



... of which **4 million** Americans with disabilities pay more than 50% of their income on rent

Source: CBPP analysis of 2018 ACS PUMS 5-year data; 2018 Department of Housing and Urban Development income

The fallout from the COVID-19 epidemic, combined with the U.S. housing market's “unprecedented levels of unaffordability,” has only intensified this long-running crisis.<sup>6,9</sup>

The U.S. Department of Housing and Urban Development (HUD) rental assistance programs serve over 2.4 million people with disabilities and an additional 1.9 million older adults, most of whom also live with a disability.<sup>10</sup> In fact, due to this growing demand, individuals with disabilities and older adults have become the main demographic of beneficiaries served by HUD programs.<sup>11</sup>

HUD provides three main types of deep housing subsidies, which are the federal government's most generous and reliable support:

- 1) Public housing assistance (PHA): rental housing assistance tied to a specific unit and managed by public housing agencies.
- 2) Section 8 project-based rental assistance (PBRA): private housing owners contract with HUD to allow units to be rented to individuals receiving rental housing assistance.
- 3) Housing choice vouchers (HCV): rental housing assistance provided through the use of vouchers to help pay for privately-owned housing.<sup>11</sup>

However, the Center on Budget and Policy Priorities (CBPP) calculates that out of the 1.9 million low-income disabled renter households without children, 57 percent do not receive the federal assistance they need.<sup>12</sup>

- Since housing assistance is not an entitlement, households may be placed on long waiting lists, sometimes waiting years before receiving assistance.<sup>11</sup>
- While some housing assistance programs have seen increased funding over the past few years, funds specifically for people with disabilities have been reduced by 43 percent over the last decade.<sup>13</sup>

The underproduction of housing that occurred after the Great Recession, coupled with discriminatory and restrictive regulations, has led to demand outpacing supply.<sup>38</sup> Presently, “no state has an adequate supply of affordable rental housing for ELI households,” and nationally only 36 affordable and available homes exist for every 100 ELI renter households.<sup>7</sup> There is a national affordable housing shortage of more than 7 million units.<sup>6,7</sup> The greatest challenge exists in Nevada where only 18 out of 100 affordable and available rental homes exist, followed by California at 23 out of 100.<sup>7</sup>

*Disproportionate levels of poverty*

Individuals with disabilities often have limited employment options and face barriers to education and support services that contribute to higher levels of poverty.<sup>8</sup>

According to the latest Priced Out report by the Technical Assistance Collaborative (TAC), “Nearly five million non-elderly adults with significant and long-term disabilities have Supplemental Security Income (SSI) levels equal to only 20 percent of the [average median income] (AMI) and cannot afford housing without housing assistance.”<sup>14</sup>

In 2021, the average SSI benefit was \$841 per month, while the average rental price for a one-bedroom apartment was \$1,111 per month.<sup>15</sup> The federal poverty line for an individual is \$1,133 per month.<sup>16</sup> Therefore, the average rent is 127 percent more than an individual with a disability’s SSI income. This is inadequate for most housing costs and even where it is enough, it leaves nothing for other necessities, such as food, transportation, health care, etc.<sup>15</sup> The present SSI benefit is effectively impoverishing individuals with disabilities.

Individuals with disabilities are disproportionately affected by poverty, compared to those without disabilities. In 2015, 27 percent of adults with disabilities experienced poverty—more than twice the rate of non-disabled adults (12 percent).<sup>6,17</sup> Middle-aged adults, 45 to 64 years old and living below the poverty level, are nearly five times more likely to have a mobility disability compared to those above the poverty level. Meanwhile, the number of adults, aged 65 and older, experiencing housing cost burdens has reached an all-time high.<sup>2,18</sup>

According to the CCD, “Disabled people of all ages, disproportionately nonwhite and poor people with disabilities, are acutely impacted by the nation’s housing crisis and face staggering barriers from high costs, continued segregation, institutionalization, lack of supply, extreme rates of inaccessibility, skyrocketing rates of discrimination, among others.”<sup>19</sup> These factors compound, placing individuals with disabilities at a higher risk of homelessness.<sup>6</sup>

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*(Consortium for Constituents with Disabilities (CCD), 2022)*



## Accessibility

### What does physically accessible housing mean?

Housing that people with disabilities can easily enter and use. Minimum accessibility features include:

- Ground-level entrances or graded ramps
- First floor bedrooms and bathrooms
- Levered handles
- Widened doorways and hallways for wheelchairs
- Accessible light switches, electrical outlets, thermostats, and other environmental controls
- Reinforced walls for installation of grab bars or handrails

The American Housing Survey (AHS), led by the U.S. Census Bureau, surveyed housing accessibility nationwide in 2011 and 2019. Findings from the most recent survey indicate that:

- Less than **five percent** of housing is accessible for people with moderate mobility difficulties.<sup>20</sup>
- Less than **one percent** of housing is accessible for wheelchair users.<sup>20</sup>
- 19 percent of U.S. households, or 23.1 million households, contain an individual who has difficulty accessing their home or using spaces in their home, has a mobility-related disability, or uses a mobility-assistive device (Figure 2).<sup>vi,21</sup>
- 40 percent of U.S. households include someone with accessibility needs that does not currently have the accessibility features they need, such as a ramp, lift, or bedroom and full bathroom on the entry level.<sup>21</sup>

**Figure 2**



These findings reinforce the need for adequately funded home modification programs that can improve housing accessibility. Many local or state-funded programs for home modifications exist, but only a small share of older adults with disabilities can receive home modification support through Medicaid home and community-based care (HCBS) waivers. These programs are often limited to individuals with certain types of disabilities and may require residents to still pay for part of the cost, which may not be practical for those operating with low incomes.<sup>20</sup> Especially considering that challenges with housing accessibility are most common among those

<sup>vi</sup> Individuals who experienced more than one of the accessibility measurements were only counted once. The combination of the three accessibility measurements in the figure does not add to 23.1 million due to overlap within the categories.<sup>21</sup>

with low incomes, minority populations, specifically Black and Hispanic older adults, and populations residing in rural areas of the South.<sup>vii,20,21</sup>

Several federal policies already exist to ensure accessibility protections for individuals with disabilities (see Figure 3)<sup>22</sup>. Policies like the Fair Housing Amendments Act (FHAA) and Section 504 have contributed to multifamily properties being 2.5 times more likely to be accessible than owned units.<sup>23,24</sup> With an already limited amount of accessible housing, it's critical that multifamily unit construction and restoration are prioritized.<sup>11</sup>

Additionally, while these policies increase the stock of accessible housing, the current thresholds for these laws are far too low to meet the growing demand for accessible housing.<sup>10</sup> Moreover, even when accessible homes exist, there is no guarantee that they will be rented or sold to people with disabilities who need these features—a U.S. real estate analysis found that only one in five accessible dwellings was inhabited by a person with a physical disability.<sup>25</sup>

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<sup>vii</sup> Appalachia, the Mid-South, and the Mississippi Delta have higher rates of disability, thus higher accessibility needs. This geographic disparity echoes with higher rates of obesity, smoking, diabetes, and cardiovascular disease, which are concurrent with lower socioeconomic status.<sup>16</sup>

**Figure 3**

**Americans with Disabilities Act (ADA):** passed in 1990, the act required public, commercial spaces, (hotels, businesses, restaurants), and local and state government facilities to be made physically accessible to individuals with disabilities.<sup>22</sup>

**Fair Housing Amendments Act (FHAA):** makes it illegal to discriminate against individuals with disabilities in the sale or rental of private and public housing. It ensures the right of the tenant to make any reasonable accommodations or home modification necessary for full use of a unit, at their own expense. In addition, it requires that all newly constructed (after 1991) privately owned and publicly assisted multifamily housing buildings with four or more units meet FHA design and construction requirements.<sup>22</sup>

**Section 504 of the Rehabilitation Act:** ensures accessibility standards in any federally financed multi-family housing project. All newly-constructed multifamily housing and non-housing facilities, or existing facilities where substantial alternations are made, require a minimum of 5 percent of the total dwelling units (or at least one unit, whichever is greater) to be made accessible for persons with mobility impairments.<sup>22</sup>

hospitalization instead of being transferred to a nursing facility.<sup>26</sup> Additionally, for individuals with disabilities who relied heavily on external home care workers, those who continued in-home services risked infection while others who chose to reduce risk were forced to go without necessary care.

### *Housing discrimination remains widespread*

In 2019, 61.7 percent of housing discrimination complaints were based on disability status and failure to make reasonable accommodations. Complaints based on disability status have accounted for the largest share of complaints since the Fair Housing Act went into effect in 1989 and listed populations with a disability as a protected group.<sup>28,29</sup>

While individuals with disabilities already begin their housing search at a disadvantage due to the limited number of accessible housing units, an analysis conducted by the federal department of Housing and Urban Development found that only a small number of units advertised as accessible truly were.<sup>29</sup>

### **Factors exacerbating the crisis**

#### *COVID-19 magnified housing issues and widened disparities among populations with disabilities*

People with disabilities and older adults were hit hardest by the COVID-19 pandemic, experiencing higher rates of severe cases and deaths.<sup>26</sup>

Older adults and people with disabilities not only faced an increased physical threat from the COVID-19 virus, but also experienced layoffs resulting in income losses and subsequent difficulties paying mortgages, rent, or utilities, and receiving tenancy support services.<sup>26</sup> During the first month of the pandemic (March-April 2020) the number of people with a disability who were working decreased by 20 percent, and past recessions show evidence that those with disabilities who lose their jobs are less likely or slower to return to work.<sup>27</sup>

Moreover, evictions and financial stress related to affording rent disproportionately affected Black and Hispanic populations, further widening health and housing disparities.<sup>26</sup> Low-income individuals with disabilities already experience higher rates of homelessness than the general population and the COVID-19 pandemic has only worsened this gap.<sup>6,26</sup>

The pandemic reshaped community life for everyone, but especially for people with disabilities. Many experienced social isolation, reduced independence, difficulty receiving necessary health care services, and difficulty receiving home modifications to support independent living, which was especially common for those who opted to return home after a



Individuals with a physical disability requiring a wheelchair face even more challenges, such as lower chances of obtaining an appointment, touring a unit, or being made aware of vacant units altogether.<sup>29</sup> Those using a wheelchair were more likely to receive denials or unclear responses to making reasonable modifications.<sup>29</sup>

Discriminatory practices compounded with inadequate housing stock are increasingly making it difficult for people with physical disabilities to find accessible housing.<sup>29</sup>

### Improving health and reducing health care costs

Adults living in unaffordable housing are more likely to rate their health as fair or poor and to report being unable to follow treatments or fill prescriptions due to financial constraints, as compared to those living in affordable housing.<sup>30</sup> As a result, adults in unaffordable housing are more likely to experience evictions and homelessness which, unsurprisingly, worsens existing health conditions and can lead to new declines in mental and physical health due to the lack of access to food, protection, and social services.<sup>31</sup>

When individuals living with chronic diseases have stable and affordable housing they are more likely to effectively manage their treatments and access preventive services or needed medical care, resulting in better health outcomes.<sup>30</sup> No amount of health care can substitute for stable housing and evidence finds that communities that invest in affordable housing see a boost in local economies while also seeing improved health outcomes.<sup>31,32</sup>

However, it isn't just individuals in unaffordable housing who suffer worse health outcomes. People with disabilities who are unable to safely and fully utilize their homes are at risk of suffering from falls and injuries at higher rates.<sup>33</sup> Accessible home features reduce the likelihood of these events and can even reduce adult mortality.<sup>20,23</sup> Specifically, home modifications that target fall prevention can save millions in health care costs.<sup>33</sup> Stevens and Lee found that "home modification interventions implemented with an occupational therapist for at-risk community-dwelling older adults would prevent over 120,000 falls, averting \$442 million in direct medical costs annually."<sup>33</sup>

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**(Stevens and Lee, 2018)**

Home modifications have been found to increase safety, self-sufficiency, and housing stability as older, disabled adults lose functional mobility.<sup>20</sup> Allowing individuals to stay in their homes longer, and thus reducing the number of individuals in nursing homes and congregate care facilities, reduces the economic strain on government programs and on the families of older adults, who are often responsible for paying for this costly care.<sup>33</sup> Low-income individuals with a disability that are integrated into communities are more likely to have better health outcomes, longer lifespans, and a higher self-reported quality of life.<sup>34</sup> Providing safe and accessible housing, especially if targeted at underserved and high-risk groups, will not only improve individual health but will reap rewards in reduced disability and health care costs.<sup>33</sup>

## Policy Implications

### Local and state policy options

#### *Universal design principles*

At the local level, promising practices to expand housing accessibility in new homes include implementing new housing codes.<sup>35</sup> Visitability ordinances, which require certain universal design features on the first floor including a zero-step entrance, a bathroom on the entry-level, wider doors and hallways, reinforced walls for the installation of grab bars, raised light switches, and electrical outlets, have been adopted by over 30 jurisdictions



across the country.<sup>36</sup> In 1992, Atlanta was the first city to pass an ordinance requiring all publicly subsidized single-family homes to have these visitability features (JCHS Accessibility Needs, 2014). It's estimated that over 30,000 new units have been built with visitability features due to these ordinances.<sup>36</sup> Alternatively, some states (GA, VA, PA, OH) are encouraging visitability initiatives through tax credits, which are available to builders and homeowners who install accessibility features. For example, Ohio's Livable Homes Tax credit offers a personal income tax credit of up to \$5,000 to new or existing homes.<sup>24</sup> Over 10 years ago, Vancouver, British Columbia implemented a building bylaw requiring all new housing, single or multifamily, to include several universal design features.<sup>24</sup>

### *Regulatory reform*

Addressing exclusionary zoning policies would provide low-income individuals with disabilities and older adults with more opportunities to live in housing that suits their needs.<sup>36</sup> Exclusionary zoning, defined as zoning restrictions in neighborhoods that only allow single-family homes, makes it difficult for those who need alternative housing arrangements to live in preferred or safe locations. Changing these ordinances would allow for different types of residences, such as small group residences, shared housing, intergenerational housing, co-housing, and most importantly, accessory dwelling units (ADUs),<sup>viii</sup> which would increase aging and disabled adults' access to affordable housing.<sup>36</sup> Best practice legislation, preventing local prohibition of ADUs, has been enacted or revised in recent years in California, Vermont, Oregon, New Hampshire, and Rhode Island.<sup>37</sup> Due to these changes in policy, Los Angeles, has seen a substantial increase in issued ADU permits; LA issued 6,747 ADU permits in 2019, up from 15 ADU permits in 2013.<sup>37</sup>

States can empower local jurisdictions to revise their land use regulations<sup>ix</sup> to expand the construction of affordable housing and reduce price pressures.<sup>9</sup> Local best practices for specific housing policies are hard to identify because effectiveness depends on local context, however, expedited permit reviews and repurposing of unused government lands are relatively easy, cheap, and effective policies to implement.<sup>35,38</sup>

Another promising practice is the creation of density bonuses that allow developers to build more units, only if a certain percentage of them are affordable.<sup>36</sup> Communities can utilize the [Regulatory Barriers Clearinghouse](#), which documents state and local regulations and policies affecting the creation or maintenance of affordable housing; this resource provides local communities to browse affordable housing solutions that may work best for their jurisdictions.<sup>39</sup>

### *Home modification initiatives*


In the meantime, home modification efforts can improve the accessibility of current housing stock. Due to the lack of a nationally streamlined approach to home modifications, communities and states have built a vast yet confusing network of programs and funding resources available to disabled and older adults.<sup>33</sup>

One best practice to alleviate the burden of searching for resources is online "one-stop-shop" resources. The [National Directory of Home Modification and Repair Resources](#) created by USC Leonard Davis, School of Gerontology, Fall Prevention Center of Excellence provides a catalog of resources including available loans, grants, and for-profit businesses offering modification or repair services.<sup>35</sup> The center also provides a credentialing program to certify businesses in home modification techniques.<sup>40</sup>

Other home modification programs include the Centers for Independent Living and Area Agencies on Aging. The Centers for Independent Living (CILs) are local non-profits that are funded by the Administration for

<sup>viii</sup> ADUs are independent housing units, that are typically created on single-family lots through remodeling or expanding the existing home or through the construction of a detached dwelling<sup>37</sup>

<sup>ix</sup> Land use regulations refer to a range of ordinances and procedures local governments use to govern housing developments<sup>9</sup>



Community Living (ACL) and operated by individuals with disabilities.<sup>41</sup> Currently, 70 percent of CILs operate home modification programs and they have earned a strong record for helping non-elderly people with disabilities secure housing from HUD funding streams such as Section 8 Vouchers, Section 811 Mainstream housing vouchers, and Section 811 Project rental assistance.<sup>41,42</sup>

Many other home modification programs exist, headed by local volunteer organizations or Area Agencies on Aging, however, their scope is often limited to low-income disabled older adults and homeowners, leaving those who are non-elderly or renting with less support.<sup>33</sup>

### *Medicaid waivers*

Individuals with disabilities are three times as likely to be covered by Medicaid, qualifying through poverty- or disability-related pathways. Given this, waivers are a well-positioned avenue to provide housing resources to this population.<sup>43</sup>

Specifically, Medicaid's 1915(c) Home and Community-Based Services (HCBS) waivers are a well-established method for states to coordinate funds to increase housing accessibility.<sup>44</sup> The 1915(c) waivers provide states with the opportunity to expand programs to assist low-income populations with disabilities and older adults with home modifications and repairs.<sup>42</sup> As of 2020, only two states did not have a Medicaid waiver in place to make home modifications.<sup>45</sup> Additionally, states' recognition of the lack of accessible and affordable housing has led to an increase in Medicaid waivers to support HCBS.

An analysis of 1915(c) waivers found that expenditure limits on modifications that are too restrictive can hinder the success of these Medicaid benefits.<sup>44</sup> A 2010 report by MetLife Mature Market Institute found that necessary home modification services can cost more than some states' set waiver limits. For instance, door widening can cost \$800-\$1,200 per door, wheelchair ramps can be \$1,600-\$3,200 and stair lift installations can be anywhere from \$3,000-\$12,000, and with inflation, these estimates are likely to be higher.<sup>44</sup>

Minnesota's waiver stands out as a best practice, capping modifications at \$40,000 per year and even allowing additional square footage to be added to the home for bathroom remodels.<sup>44</sup> In comparison, California's San Francisco Community Living Waiver, since terminated, limited home modifications to just \$1,500 per year, making it the least generous expenditure limit.<sup>44</sup> Other states, such as Ohio, Missouri, and New York, have expenditure limits ranging from \$10,000-\$15,000. States should consider setting higher expenditure limits under the HCBS waiver to ensure individuals with disabilities can make home modifications that ensure long-term livability. For additional information on Medicaid waivers providing other types of housing support reference this [article](#).

### *CAPABLE model*

One of the current best practice programs to provide home modifications to older adults with disabilities (>60 years of age) is through the Community Aging in Place, Advancing Better Living for Elders (CAPABLE) model.<sup>46</sup> Efforts to modify or expand the CAPABLE program to serve qualifying individuals with disabilities under the age of 60 may be considered.

This model was developed by Johns Hopkins University and is comprised of an interdisciplinary team of occupational therapists, nurses, and a handy worker to provide home repair and modifications.<sup>46</sup> CAPABLE is a 10-session home-based program that targets functional rehabilitation for low-income disabled and elderly adult homeowners or renters, over the course of five months.<sup>46</sup> The program currently has 33 sites across 17 states and is administered through local organizations and CMS Medicaid waivers. Due to the program's success in modifying activities of daily living (ADLs), ACL has certified it as an evidence-based fall prevention program.<sup>46</sup>

CAPABLE has been cited by multiple sources as reducing disabilities related to physical function, reducing depressive symptoms, and being cost-effective by decreasing health care costs through reduced hospitalization and nursing home admissions.<sup>47</sup> For every \$1 spent on CAPABLE, Medicare and Medicaid reap \$10 worth of savings.<sup>47</sup> Efforts to convince Medicare to reimburse the CAPABLE program are underway, but presently some Medicare Advantage plans, ACOs, and other local aging agencies such as Meals on Wheels, Habitat for Humanity, and AAAs are acting as partners and payers.<sup>47</sup>

### Federal policy options

#### *Increase funds for affordable housing assistance*

Federal and state housing programs have been chronically underfunded, leading to long waiting lists. These waiting lists are predicted to worsen given the increase in demand for affordable and accessible housing as the U.S. population ages.<sup>45</sup>

Housing Choice Vouchers (HCVs) are the largest source of federal rental assistance, providing benefits to 1.2 million people with disabilities nationwide.<sup>8</sup> HCVs provide low-income individuals with access to private housing and can be project-based or tenant-based, with the majority in the latter category, allowing individuals to move without losing their voucher.

HCVs are applauded as efficient and effective housing assistance and they typically cost less than new housing production.<sup>9</sup> HUD just recently announced that it is awarding \$36 million to Mainstream Vouchers, which are dedicated to individuals with disabilities, to promote transition into the community and to avoid homelessness and institutionalization.<sup>48</sup>

While this is strong progress, HUD could go one step further by ensuring that everyone who qualifies for HCVs receives assistance.<sup>8</sup> This solution would effectively lift one million people with disabilities out of poverty, reducing poverty among people with disabilities by 25 percent for the general population and more for Black and Latinx people with disabilities, according to researchers at Columbia University.<sup>8</sup>

**Housing Choice Vouchers would effectively lift 1 million people out of poverty, reducing poverty among people with disabilities by 25 percent — and by even more among Black and Latinx people with disabilities — according to researchers at Columbia University.**

**Figure 4**

### Rental assistance helps over 2 million people with disabilities

Total people assisted by program



Source: CBPP analysis of HUD 2018 administrative data

Furthermore, the Transportation, HUD, and Related Agencies Appropriations Act, 2023, which passed in the house and is currently in the Senate Committee on Appropriations, [H.R.8294](#), would raise the total HUD budget to \$62.7 billion, a 17 percent increase over the current funds.<sup>49</sup> Although not an entitlement, these funds could provide an additional 140,000 households with access to Housing Choice Vouchers (HCVs).<sup>49</sup> Estimates predict the additional vouchers would help 53,000 people with disabilities and over half would be expected to go to households of color due to the disproportionate rate of need.<sup>49</sup>

The Consortium for Constituents with Disabilities (CCD) is advocating for amendments to the HUD appropriations bill to allow Public Health Authorities (PHAs) the ability to use 10 percent of funds (in addition to administrative fees) for security deposits and landlord incentives, and other activities to ensure people with disabilities can obtain housing to employ their vouchers.<sup>19</sup>

### *Increase supply and preserve the affordable housing stock*

Roughly 20 percent of individuals with disabilities rely on public housing, however, due to years of underfunding of the Public Housing Capital Fund, many units are unsanitary or uninhabitable. Estimates indicate that the national public housing stock may need close to \$70 billion to address the backlog of public housing units that require repairs.<sup>9</sup> In addition to the capital needs of public housing, an estimated 299,303 federally assisted homes will potentially face the expiration of contracts guarding affordability by 2024 (based on 2020 estimates).<sup>9</sup> The loss of federally assisted housing, whether through disrepair or expiration of contracts, will have ramifications on the number of affordable units available for people with a disability.

Solutions to address these challenges include increasing allotments to the Housing Trust Fund (HTF), which is an annual block grant distributed to states based on their affordable housing needs. The grant provides states with funds to create, preserve, or rehabilitate rental housing for the lowest-income renters.<sup>9</sup> Multiple bills supporting this have been introduced to Congress, but none have been passed into law.

Lack of federal funding is the biggest problem facing public housing, but another limitation exists, posing future problems if funding were to be increased.<sup>50</sup> The Faircloth Amendment arbitrarily limits the total number of public housing units the Public Housing Authority (PHA) can own and operate, to levels set in 1999.<sup>9</sup> Coupled with an increase in funds, repealing this amendment would allow more affordable public housing units to be constructed and ensure the rehabilitation of existing units for people with disabilities.<sup>9</sup>

### *Improve housing accessibility requirements*

The [Eleanor Smith Inclusive Home Design Act](#) would require all federally assisted, newly constructed single-family homes and townhomes to meet minimum standards of visitability<sup>x</sup> for persons with disabilities.<sup>10</sup> Versions of this bill have been introduced in 2003 and 2015.<sup>36</sup> The bill was most recently introduced in 2022 and referred to the Senate Committee on Banking, Housing, and Urban Affairs.

The FHAA—as mentioned earlier in the accessibility section—only requires that multi-unit housing with four or more units be accessible. While less extensive than the Eleanor Smith Inclusive Home Design Act, broadening FHAA to require accessibility and visitability standards in multi-unit housings with less than four units would certainly still improve the availability of accessible homes for individuals with disabilities.<sup>36</sup> Similarly, expanding HUD housing Section 504 accessibility requirements to match the need and applying it to currently exempt programs such as the LIHTC, can increase accessibility in new homes.<sup>10,36</sup> The most far-reaching solution would be to institute a federal universal design policy, which would apply existing principles of accessibility for all public buildings to include all housing, removing any need for future home modifications.<sup>36</sup>

<sup>x</sup> Visitability is defined as a single-family home that is designed in such a way that people with disabilities can visit it and includes three basic requirements: one zero-step entrance, doorways 32 inches wide, and a first-floor bathroom that is wheelchair accessible<sup>36</sup>

### *National Home Modification Program*

Despite the known benefits of home modifications, only about one-quarter of adults make modifications, likely due to the fragmented delivery system that leads to inadequate support in identifying and obtaining these needed modifications.<sup>33</sup> To improve access to home modifications, we need to create more coordinated systems.<sup>33</sup> One widespread suggestion is to streamline resources to pay for home modifications by creating a National Home Modification program. In a 2016 report to Congress, the Bipartisan Policy Center proposed using current federal funds to create a Modification Assistance Initiative that would be administered by ACL and a federal income tax credit that could be used to help pay for modifications.<sup>36,51</sup>

### *Improve SSI benefits*

Another approach to increasing access to housing is to modify and increase the supplemental security income (SSI) benefit for people with disabilities.<sup>15,25</sup> In 2016, this program aided over 4.6 million people with disabilities, however, the income is not sufficient to cover basic needs such as housing and leaves people living below the poverty line.<sup>15</sup> Congress could raise the SSI benefit so that it would lift all beneficiaries' incomes above the annual poverty line, and could continue to adjust max benefits indexed with inflation.<sup>52</sup>

Equally important to raising SSI benefits, is increasing the asset limit.<sup>15</sup> The asset limits have not been updated for more than 30 years and individuals are currently limited to \$2,000 in assets, including retirement accounts, restricting recipients' wealth and economic mobility.<sup>16</sup> Policymakers could increase the asset limit to at least \$10,000 and exempt retirement savings from these limits.<sup>16</sup> Supporters could advocate for the [SSI Restoration Act](#) introduced in 2021.

Combined, these measures would increase income and accrue wealth for older adults and individuals with disabilities, enhancing protections against housing insecurity and safeguarding against poverty.

## Conclusion

The lack of sufficient accessible housing, resources for home modifications, and funding for housing assistance programs have contributed to a dual housing crisis for individuals with disabilities.

- Individuals with physical disabilities are particularly vulnerable to inequities in employment and income, which disproportionality impacts minorities and perpetuates the cycle of poverty, resulting in housing insecurity, poor health outcomes, and increased health care costs.<sup>6,23</sup>
- The COVID-19 pandemic has further increased income disparity and reduced independence, resulting in increased housing insecurity for individuals with disabilities.

While best practices to improve accessibility are most frequently focused on older adults with disabilities rather than the younger population—policymakers could consider advocating for universal design principles, locally or federally, eliminate exclusionary zoning, and support generous Medicaid waivers to improve accessibility for all adults with physical disabilities.

Improving the social-safety net through increased SSI benefits and funds for federal housing assistance will allow households with disabilities to enjoy better health and economic mobility, lifting millions out of poverty, for which society will reap the benefit.<sup>9</sup>

Leaders should look to this brief to address barriers to housing, ensuring all individuals regardless of ability, have equal rights to accessible and affordable housing.

## Appendix

Table 1: HUD ‘Deep Subsidy’ Housing Assistance Programs

Program	Eligibility and funding	Program details	Policy options	Active legislation
<p><b>Housing choice vouchers (HCV)</b><sup>53</sup></p> <p>Vouchers designated for people with disabilities:</p> <ol style="list-style-type: none"> <li>1. Mainstream</li> <li>2. Non-elderly disabled (NED)</li> </ol>	<p>Low-income individuals and families<sup>xi</sup></p> <p>75 percent of newly admitted households must have ELI<sup>xii</sup></p> <p>Funded annually through Congressional appropriations</p>	<p>Vouchers are used to help pay for privately owned housing</p> <p>Tenant-based vouchers allow individuals to find their own housing, however, housing must be approved by the public housing agencies (PHAs)</p> <p>Project-based vouchers are tied to a specific property rather than an individual and can be used to pay for rehabilitation, construction, or even mortgage payments</p>	<p>Increase renewal funds provided each year</p> <p>Expand cap on how many vouchers agencies are allowed to administer</p> <p>Make vouchers an entitlement</p>	<p><a href="#">H.R. 8294</a> – Transportation, HUD, and Related Agencies Appropriations Act<sup>49</sup></p> <p><a href="#">S. 1991</a>– Family Stability and Opportunity Vouchers Act of 2021</p>
<p><b>Public housing</b><sup>54</sup></p>	<p>Low-income individuals and families</p> <p>40 percent of newly admitted households must have ELI</p> <p>Public Housing Operating Fund covers the gap between rents tenants pay and operating costs</p> <p>Public Housing Capital Fund finances renovations</p>	<p>Tenants pay 30 percent of their income for rent and utilities or a minimum of \$50/month</p> <p>Rental housing assistance is tied to the specific housing unit and is managed by public housing agencies (PHAs)</p> <p>Units are often more accessible and PHAs are more likely to permit home modifications</p> <p>The number of units has declined over time due to inadequate funding<sup>8</sup></p>	<p>Increase funds to both the Public Housing Operating and Capital Fund<sup>6</sup></p>	<p><a href="#">H.R. 659</a> – Repeal the Faircloth Amendment Act of 2021<sup>6</sup></p> <p><a href="#">S. 598</a> – Public Housing Emergency Response Act</p>
<p><b>Section 8 project-based rental assistance (PBRA)</b><sup>55</sup></p>	<p>Low-income individuals and families</p> <p>40 percent of newly admitted households must have ELI</p> <p>Congress provides annual funds to renew PBRA contracts</p>	<p>Tenants pay 30 percent of their income for rent and utilities or a minimum of \$25/month</p> <p>Private owners’ contract with HUD to rent some or all of their housing development’s units</p> <p>Project-based means tenants generally cannot move without losing their rental assistance</p>	<p>Increase funds to maintain existing contracts</p> <p>Allow HUD to sign new Section 8 PBRA contracts</p>	<p><a href="#">H.R. 2200</a> – Housing Accountability Act of 2021</p> <p><a href="#">H.R. 8294</a> – Transportation, HUD, and Related Agencies Appropriations Act<sup>49</sup></p>

<sup>xi</sup> Low-income: HUD defines this as less than 80 percent of the local median income

<sup>xii</sup> Extremely low-income (ELI): households with income at or below 30% area median income (AMI)<sup>7</sup>



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