

RECOMMENDATION 2

Ensure Safe and Affordable Housing for Older Adults

“Housing is the basis of stability and security for an individual or family. The center of our social, emotional, and sometimes economic lives, a home should be a sanctuary – a place to live in peace, security, and dignity.” – Office of the United Nations High Commissioner for Human Rights¹⁰²

Housing is a basic need essential to survival. When one’s basic needs – like housing, food, and water – are not met, it is impossible or exceedingly difficult to meet more complex needs (e.g., employment or health).¹⁰³ While some use the terms “housing” and “shelter” interchangeably, housing denotes more than four walls and a roof. Housing refers to a permanent, stable, autonomous living situation – a self-contained space where all basic needs can be met (e.g., cooking/storing food, plumbing for hygiene and waste management, etc.).¹⁰⁴

HOUSING AS A DRIVER OF HEALTH

We can characterize housing and its influence on health through various mechanisms, including stability, affordability, quality, and location. Stability can refer to housing tenure or permanence. Affordability relates to the cost burden of housing. A commonly cited guideline is that no more than 28% to 30% of one’s income should go toward a rental or mortgage payment.^{105,106} Quality refers to various aspects of habitability and accessibility. For example, adequate housing should protect inhabitants from cold, heat, damp, rain, and wind.¹⁰⁷ It should also be free from adverse environmental exposures (e.g., lead, mold, pests, etc.) and meet the specific health and mobility needs of its inhabitants.^{102,107} Finally, location impacts health and well-being through the proximity of one’s home to resources, services, and adverse environmental exposures.

Overall, people who are chronically unhoused experience substantially higher morbidity and mortality relative to those who have reliable housing.^{108–110} Housing instability – like eviction, foreclosure, or “couch-surfing” – is similarly associated with poor physical and mental health outcomes.^{111,112} Not having a stable home may also decrease treatment adherence due to the inability to properly store medications.¹¹³ Exposures to extremely high or low temperatures have resulted in deaths, especially among those aged 65 and older.^{114,115} Those who are cost-burdened by housing are more likely to report difficulty purchasing food and health services.^{116,117} Proximity to grocery stores and safe spaces to exercise is associated with health-promoting behaviors like greater vegetable intake and physical activity.^{118–120}

Disparate access to adequate housing is a reflection of a century of housing policy and patterns in the United States.

HOUSING HISTORY

Older adults today have likely been impacted by 20th century housing and development policies. In 1934, the Federal Housing Administration (FHA) was established and codified redlining – the practice of refusing to insure mortgages in or near predominantly Black neighborhoods.¹²¹ At the same time, the FHA rapidly developed new majority-White subdivisions. This policy

contributed to residential and school segregation and left Black families vulnerable to predatory lending practices.^{122–124} In 1944, the United States enacted the Servicemen’s Readjustment Act (or “the G.I. Bill”) to support a range of benefits for returning World War II veterans, including access to low-interest mortgages and other loans. However, banks wouldn’t provide loans for housing in “hazardous” neighborhoods (i.e., Black neighborhoods), and many subdivisions would exclude Black families via covenant deeds.^{125–128}

In 1968, the Fair Housing Act prohibited discrimination by “direct providers of housing” (e.g., landlords, real estate companies, insurance companies, banks, municipalities, etc.) based on a person’s race or color, religion, sex, national origin, familial status, or disability.¹²⁹ However, racial discrimination and inequities in housing persist. For example, a study from the National Bureau of Economic Research found that property managers are less likely to respond to prospective Black and Hispanic renters when they inquire about listings.¹³⁰ Similarly, a 2012 Department of Housing and Urban Development (HUD) study found that people of color are, on average, shown fewer homes and apartments by agents compared to their White counterparts.¹³¹ In 2020, 27% of mortgage applications from Black borrowers were denied compared to only 14% percent of White borrowers.¹³²

HOUSING AND AGING

Older households – those headed by someone aged 65 or older – are projected to increase from 34 million to 48 million between 2020 and 2040.¹³² While older adults maintain a higher home ownership rate (79% of those aged 65 and older at the start of 2023) compared to other age groups, older adults make up an increasing share of renters relative to previous decades.¹³³ Adults aged 55 and older contributed to approximately two-thirds of rental housing growth between 2004 and 2019 and constitute 30% of all renter households.¹³⁴

Fifty-three percent of renters aged 62 years and older are cost-burdened, with a greater proportion of Black (58%) and Hispanic (57%) renters reporting cost burden compared to White renters (51%).¹³⁵ Additionally, seniors and people with disabilities comprise almost half of all extremely low-income households (income between 0% and 30% of the federal poverty level), and 86% of these households are cost-burdened.¹³⁵ Black (18%), Latino (17%), Asian (14%), and American Indian/Alaskan Native (13%) seniors are more likely to live in extremely low-income households compared to White seniors (5%).¹³⁵ In 2019, North Carolina had 347,275 extremely low-income renter households and only 156,365 affordable and available rental housing units.¹³⁶

ACCESSIBILITY AND HOME MODIFICATION

As homeowners and renters age, they may also realize that their home is no longer comfortable and may even be hazardous to their safety. Falls are a primary cause of injury and death among older adults, and more than half of all falls occur in the home.^{137,138} Falls that do not result in injury may impact one’s confidence in their movement. A reduction in movement may weaken muscles, affect balance, and lead to additional falls.¹³⁹



Falls in the home are preventable. For example, housing developers can build homes using the principles of universal design – “the design of products or environments to be usable by all people, to the greatest extent possible, without the need for adaptation or specialized design.”¹⁴⁰ These principles often overlap with aging-in-place guidelines and include the construction of one-story homes with no-step entryways, wide doorways and halls, and extra floor space. Families and individuals can also make modifications to their existing homes. Some of these modifications are simple: replacing doorknobs with lever-style handles, placing solid surface doormats at home entrances, removing throw rugs, or purchasing chairs with armrests for support. Other modifications, however, may be time-consuming and costly.¹⁴¹ For example, someone in a wheelchair who owns their home may need to remove walls to create wider hallways or completely renovate their bathroom. If this person was a renter, they may need to move themselves (and their family) to a different unit or complex altogether.

There are a few government-sponsored, private, and voluntary programs that help seniors modify their homes for accessibility. For instance, modification and repair funds are provided by the Older Americans Act and distributed by local Area Agencies on Aging.¹⁴¹ Volunteer organizations like Rebuilding Together, Inc. can complete some repairs for low-income seniors through local affiliates.¹⁴² Additionally, some lenders allow homeowners to leverage home equity to complete modifications.¹⁴³

North Carolina’s older adult population will continue to grow. To meet the needs of this population and their families, further attention to the current state of housing and housing-related programs is needed to shape future actions that support aging-in-place goals.



Clara and Robert have been married for 45 years. They have many close friends that live nearby who they enjoy sharing meals and conversation with and they attend a church down

the street from their home. Their income was never high enough to allow them to qualify for a home loan, so they rent their current home. They live on a limited retirement income and Robert has a part-time job to help supplement it. Recently, developers have come into their neighborhood to purchase homes and businesses for redevelopment. This has led to increased rental costs and concerns that they will need to move out of the community to seek out more affordable housing. They hope they can find something close enough to their current community to maintain connections with their friends, church, and access to bus service that is convenient to get to Robert’s job. Clara has some difficulty with mobility issues, such as climbing stairs, so any new housing they find will need to be accessible for her.

**Note – This is a composite story to depict the real-life experiences of many older adults.*