



TEXAS  
Health and Human  
Services

Aging Texas Well

## Issue Brief

# Older Adults and Housing

Safe, affordable housing is important for everyone's health and well-being. The availability, cost, and type of housing can impact a person's health, including an older adult who may simultaneously experience a disability or illness and reduced income.



The Harvard's Joint Center for Housing Studies predicts the number of Americans 50 and older will increase 20 percent by 2030. Texans are benefiting from this growth as well, with adults age 50 and older estimated to exceed 11 million by 2030. <sup>(1)</sup> Longer life provides new opportunities for people as they age, like more time with loved ones, recreation and leisure, and opportunities for engagement in their community. However, growing older can also increase the risk for chronic disease, other health issues, and financial stress.

### HOUSING AS AN INDICATOR FOR HEALTH

Research indicates nearly 70 percent of those who reach age 65 will need long-term care in their later years, and more than two-thirds of people age 85 and older will have a chronic condition that will affect their mobility. <sup>(2)</sup> In Texas, approximately 39.5 percent of adults 65 and older have a disability that impacts their daily life. <sup>(3)</sup> In addition to health concerns, many older adults experience a decrease in their income. This is due to a variety of reasons, including: loss of a spouse and their income; loss of a job; or retirement on a fixed income. Depending on a person's housing situation, a decrease in income could significantly impact their well-being and ability to afford housing and other expenses.

The U.S. Department of Housing and Urban Development found the number of older adult households with "worst-case" housing needs grew by 43.5 percent from 2005 to 2017. HUD defines "worst-case" housing needs as a household spending more than half of their income on housing and/or living in severely poor conditions. Extremely low-income renters had an even greater incidence of worst-case needs at 51.6 percent, with older adult households making up the second highest share of worst-case housing needs. <sup>(4)</sup>

Approximately 15 percent of older Texans ages 65-84, and 22 percent 85 and older, are renters. <sup>(5)</sup> Furthermore, older adults of color may be overrepresented in this category, as they are more likely to be renters and have lower incomes. <sup>(6)</sup> The table below highlights the distribution of the Texas population that are renters by age and race/ethnicity.

<b>Renting Housing Tenure by Age and Race/Ethnicity (percent distribution) <sup>(7)</sup></b>				
<b>Race/Ethnicity</b>	<b>Age 50-64</b>	<b>Age 65-84</b>	<b>Age 85 +</b>	<b>Age 50+ (overall)</b>
Hispanic	23.44%	17.62%	17.53%	21.42%
Black (Non-Hispanic)	40.22%	28.09%	20.27%	35.83%
White (Non-Hispanic)	15.74%	11.97%	22.92%	14.56%
All Other (Non-Hispanic)	17.31%	15.28%	32.96%	17.04%
<b>General 50+ population</b>	<b>21.06%</b>	<b>14.92%</b>	<b>21.96%</b>	<b>18.83%</b>

Source: U.S. Census Bureau. 2017 American Community Survey for Texas.

## AGING IN PLACE

Most older adults prefer to age at home. <sup>(8)</sup> The Centers for Disease Control and Prevention define aging in place as the “ability to live in one’s own home and community safely, independently, and comfortably regardless of age, income, or ability level.” <sup>(9)</sup> Services like those authorized under the Older Americans Act are critical in helping older adults remain at home. <sup>(10)</sup>

### Affordable Housing

Many older adults cannot afford to pay market-rate rent, and the poorest renters are at a greater risk of experiencing evictions, homelessness, and other hardships. <sup>(11)</sup> HUD funds over 400 Public Housing Authorities in Texas to administer tenant-based and project-based housing programs.



Additionally, there are federally subsidized housing complexes developed and managed by non-profit or for-profit entities (e.g. Section 202 and Low-Income Housing Tax Credit developments). A survey of all Texas PHAs identified the availability of over 50,000 public housing units and over

161,000 Housing Choice Vouchers. <sup>(12)</sup> Yet only a quarter of the eligible low-income households received a federal housing subsidy, with a third of the recipients being older adults. <sup>(13) (14)</sup>

Older adults, their families, and even service providers often struggle to navigate the complex and decentralized nature of affordable housing. Access to more federal and state-funded rental assistance is needed.

Likewise, increased training, technical assistance, and resources to expand and enhance service providers' ability to navigate affordable housing could help support older adults to age in place.

### Support Services

Having a disability or chronic illness can make aging in place challenging, but with home and community-based services, many older adults remain independent. These include attendant or home health services, respite services, transportation assistance, and nutrition services. Additionally, accessible features such as no-step entry, single-floor living, and extra-wide doorways are home improvements that help older adults safely age in place. HCBS provide opportunities for Medicaid beneficiaries to remain in the community, rather than in institutions or more isolated settings.

State and federally-funded local organizations were established to help connect low-income older adults to these services<sup>(15)</sup> including:

- **Area Agencies on Aging:**

AAAs provide support services for older adults and can link them to long-term attendant and home health services. Many help with home modifications and can make referrals based on a client's needs.



- **Home-Delivered Meals:** HDM organizations provide safe and nutritious food for people who are homebound with limited mobility. Some HDM organizations assist with housing repairs and safety modifications.
- **Aging and Disability Resource Centers:** ADRCs provide comprehensive information and referral assistance about a range of various LTSS available.<sup>(16)</sup>

These organizations are meeting a great need by bridging gaps and streamlining processes, however it should be noted that services vary by region and not all providers offer the same services or have the same eligibility requirements. This fragmentation can make it difficult to access services and leave some communities underserved. More coordination of services, cross-agency and interdisciplinary collaboration, and the integration of housing services into aging services is needed to make aging in place a viable option for all older Texans.<sup>(17)</sup>

## CONCLUSION

Affordable housing with access to an array of support services can positively impact quality of life and save money for Medicaid beneficiaries. A randomized control study found people receiving daily, HDMs experienced the greatest improvements in health and quality of life.<sup>(18)</sup> Additionally, HDM programs and others are aligned with the federal cost containment policy that rebalances long-term care supports

away from institutions to HCBS by helping older adults remain in their homes and communities as they age. <sup>(19)</sup>

The costs for nursing home care is three times that for community-based long-term care. Medicare and Medicaid programs that pay for institutional long-term care could realize cost savings by devoting more resources to HCBS. In a review of waiver demonstrations, a HUD report noted the expansion of Medicaid HCBS waiver programs that target community-based, long-term care services can result in sustainable savings of state funding. <sup>(20)</sup>

It is anticipated that the growing number of older adults will want to age in place. The stability that safe, affordable housing provides also allows people to take advantage of new opportunities in later life. Promoting and expanding programs and services will help Texans realize improved quality of life and systemic cost savings as well.

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