

around the HOUSE

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No Place Like Home

Incorporating basic Universal

Design (UD) planning and details into a home helps people in wheelchairs live a better, easier and more independent life. It also can help save a lot of money and create jobs.

By creating a \$20,000 and \$2,000 tax incentive for home remodels and new home construction, respectively, that incorporate UD, the U.S. could extend and even save hundreds of billions of dollars in long-term healthcare dollars. This would re-boot housing construction, fuel the economy and create new jobs all at the same time.

This article is based on the premise that UD in housing, when successfully implemented, can allow everyone the opportunity to achieve activities of daily living (ADLs) at home with more self-reliance and independence, thus allowing them to stay in their own homes longer and avoid or postpone institutional and other more costly long-term living arrangements.

A 2001 Harvard Joint Center for Housing Studies study titled Aging in Place reads "Aging in Place (AIP) with

supportive services is the most desirable way of aging. Successful AIP strategies minimize the provision of inappropriate care and therefore overall costs."

Your Tax Dollars

UD in housing functions "to the greatest extent possible for people of all ages and abilities." AIP is similar and includes the basic spatial and detail parameters of UD, but focuses more on housing design solutions for the aging population.

On the other hand, full accessibility may encompass both but will typically go a step further with home design that will assist a specific individual achieve his or her specific ADLs at home. The common denominator is UD.

It is also referred to as Inclusive, Life Span, Multi-Generational, Adaptable and Better Living Home Design, among others. It is known as Flex Housing in Canada. The truth is: UD is all of the above.

The research cited is the result of your tax dollars at work. It's clear that if not re-imagined on a grand scale, the typical housing stock type, as being built, is on an unhealthy train headed for the bridge over the river

Kwai. Maybe a bad joke, but you get the idea.

So, let's get after some really big long-term health/housing dollar figures with the goal of thinning them out.

By the Numbers

A figure dated from 2009 at statehealthfacts.org reports that at that time states doled out \$319 billion per year in Medicaid costs. A very large percent-

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age of this is for long-term care. The individual state amounts vary based on a variety of factors. In 2001, on average, people over 65 made up 10–13% of the population.

A Met Life study showed that in Maryland assisted living averaged \$3,700 to \$4,400 a month, and a shared room in a local nursing home will top \$7,000 a month or \$84,000 annually.

The least expensive was in Mississippi and Louisiana at about \$44,000 per year for nursing-home care, with the most expensive at about \$120,000 per year in Alaska.

For purposes of the calculations to follow, let's use a median between the two of \$82,000 for institutional home care. The typical taxpayers' burden of that is 75–80%.

Now keep that figure in mind as we look at who could benefit from a UD build tax credit incentive by staying longer at home.

An Aging Population

Research reveals there are currently about 3 million wheelchair users in



Universal Design in housing is truly sustainable as it will decrease the financial burden on future generations.

this country, and 10,000 more people every year sustain spinal-cord injuries.

Due to the cost of war, the number of disabled veterans has jumped by 25% since 2001 to 2.9 million. Today's veterans, disabled or not, number nearly 24 million. Disabled veterans already qualify for a \$64,000 Specially Adapted Housing Grant.

But probably the largest long-term healthcare burden will be from our aging population.

There are 76 million baby boomers, and every day 10,000 of them turn 65. That's not old, but people are living longer. AARP studies have found that 75% of all people asked would prefer to stay in their own homes as long as possible.

According to the Harvard Joint Center for Housing Studies, in 2008, after the boom years, there were approximately 127.5 million homes. An estimated 86 million or 68% were owner occupied. Based on research, it's fair to say roughly 1 million new homes are built per year on average.

Big Savings

Let's say we achieved a goal of 1% of existing owner-occupied homes being remodeled with UD to the extent that allows a person to stay longer at home. Then over one year the savings to the system could be 86 million owner occupied homes x 1% = 860,000.

Let's multiply that times the \$82,000 figure generated above. That's more than \$70.5 billion saved or deferred in long-term-care housing dollars if 860,000 households had at least one person stay just one year longer in their own home. We would, of course, have to deduct the cost of the actual tax credit to get the true savings.

Maybe that's too optimistic. What if we used an easier achievable number, with a combination new and remodeled homes of 100,000 total per year including new and remodeled with UD and



Basic Universal Design helps wheelchair users live better and can create jobs.

those people stayed at least one year longer at home: 100,000 multiplied by \$82,000 amounts to \$8.2 billion.

I believe \$20,000 is reasonable for remodels, as a home costs more to convert to UD, and \$1,000–\$4,000 in new construction as initially it is not as expensive. UD homes with basements are more expensive than slab on grade.

Ready to Help

Professionals are already prepared to help. The U.S. Bureau of Labor Statistics reports personal home healthcare aides are the nation's second-fastest growing occupation. It projects a more than 50% increase in such jobs by 2016.

Home care is less expensive than institutional care but is still not cheap and averages \$19 an hour in Maryland, according to the Met Life Mature Market Institute.

Hiring someone for four hours weekdays adds up to roughly \$1,500 per month. Family members and friends continue to help on weekends and evenings. A home designed with UD also eases physical and emotional distress for caregivers.

The National Association of Homebuilders, Certified Aging in Place Specialists program is the fastest growing builder designation, and

the National Remodelers Institute also has well-attended Universal Design Specialist Program.

Advances in telemedicine and house call-making physicians also make staying in the home and out of the hospital a viable alternative.

Hospital stays continue to be the most costly of all healthcare expenses. Architects are currently under employed, and building inspectors are in place to implement such programs.

Tell 'Em What You Think

So as we debate how to pay for long-term and other healthcare, and how to cast our votes, why not encourage our elected officials to consider UD in housing as an alternative to out-of-home care?

UD in housing is truly sustainable as it will decrease the financial burden on future generations. Over the next 50 years the ratio of working Americans to retired will drop from 5–1, to 2–1.

Perhaps each individual state could introduce such programs because deep down we all know, "There's no place like home."

Forward this to your state governors, senators and representatives if you think this is worth looking into.

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