Aging and Housing in North St. Paul

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Students in HSG 5481: Promoting Independence through Housing and Community (Instructor: Lyn Bruin)

On behalf of
The City of North St. Paul

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EXECUTIVE SUMMARY

Fall 2013, the students in HSG 5481 *Promoting Independence through Housing and Community* collaborated with the Resilient Community Project to develop suggestions for the city of North Saint Paul to support aging in place (Appendix A). Five students practiced the role of housing consultants and followed a process to become familiar with North Saint Paul, its residents and its housing and listen to residents’ preferences to focus on unmet needs. The process began with a review of census data to summarize demographics and housing characteristics. The summary helped students develop interview questions for residents (Appendix B). Students interviewed seniors attending the Resilient Community Project Open House. The qualitative data were analyzed to identify themes in residents’ comments. The qualitative themes were compared to information from a literature review. Key informants, remodelers and managers of home rehab programs in the Twin Cities, were interviewed to identify local best practices (Appendix C). Students compared themes from the resident and key informant interviews to a literature review summarized in this report. Finally, students reviewed this research to identify best practices and create suggestions for a home modification program in North Saint Paul.

The purpose of this project was to develop suggestions for the City of North Saint Paul. The students found that like most residents in most communities, older adults in North Saint Paul want to stay in their home and their community. Therefore, we are recommending that the City of North Saint Paul implement a home modification program as an extension or component of rehab programs. Also, we encourage the city to support universal design and visitability principles to ensure that modifications are useful, aesthetic, increase property values, and improve neighborhoods.

INTRODUCTION
Students began the project by reviewing Census data, data from the American Community Survey, the City of North Saint Paul Comprehensive Plan, and a field trip to visit the City. American Community Survey (U.S. Census Bureau, 2010) data suggested North Saint Paul has a very low vacancy rate, 70% of the housing units were single-family detached, 71% of the units were owner-occupied, 90% were built before 1990, and 20% were built before 1950; the median value of owner-occupied units was $203,700. Thirty-one percent of residents paid less than 20% of their income on housing costs; 28% paid more than 35%. The median rental rate on rental units was $759. Sixty-eight percent of the households are family households and 31% have children under 18 years of age in the household. The median household size was 2.5 residents. In 24% of the households, the householder lived alone and in 10% of the households the householder was 65 years or older. Twenty-three percent of the households had at least one resident 65 years or older (U.S. Census Bureau, 2010).\(^1\) Two hundred and twenty-seven (227) household in North Saint Paul meet the definition of a grandfamily, a household with grandparents and grandchildren under the age of 18 residing in the same household.

\(^1\) In Hennepin County 12% of the residents were estimated to be over the age of 65. In Minnesota, 13.6% of the residents were estimated to be over the age of 65.
REVIEW OF THE LITERATURE

The Administration on Aging (2012) defines older persons as individuals 65 years or older. In 2011, older persons represented 13.3% of the U.S. population. The number increased by 6% between 2000 and 2012. Most of the older population is homeowners (81%), who may find it difficult for them to stay in their current home because of their age (Administration on Aging, 2012). Over the next 20 years, as baby boomers age, the proportion of older Americans will continue to increase. It follows that increasingly the number of older adults will need accessible, safe, and affordable housing options.

In 2011, Bruin, Yust, Imbretson, and Lien (2011) found that among Hennepin County baby boomers the majority had not considered moving from their current home. Among those who considered changing their housing, they preferred a single-family detached dwelling and wanted to remain in the same community. In general, the literature indicates the continued preference to resist change in housing as one ages. However, following the recent recession and decline in property values, some older adults may lack the financial resources to adapt their long term home to accommodate and support changes that often accompany aging (Ecumen, 2007).

What is Aging in Place?

“Aging in place is the process through which older adults continue living in their own homes for as long as possible without relocating to a living environment designed for aging” (Cicero, 2012, p. 18). Older adults can live independently, safely, comfortably in their desired community (AARP, 2003). Fisher, Johnson, Marchand, Smeeding and Torey, (2007) suggest that design, technology, and programs can facilitate older persons’ ability to remain in their home. Home is considered to be the largest asset to the elders and also the largest consumption good.
Demographers use the phrase, aging-in-pace to describe the finding which is confirmed by surveys and geographic data that older persons wish to age where they have lived and do not want to consider moving especially into a nursing home (Prisutta, Barett & Evans, 2006).

**Changes Associated with Aging in Place**

However changes associated with aging often make it difficult to age in place. Research has found that human abilities such as sensory, physical and cognitive abilities are influenced by aging and affect activities of daily living (ADL): bathing, dressing, toileting, eating, transferring from bed to chair, and walking. Furthermore, instrumental activities of daily living (IADL), such as using the telephone, transportation, money management, shopping, light housework, and meal preparation are also affected as adults age. In the Twin Cities, an estimated 20% of individuals age 65 and older report an inability to complete all ADLs and IADLs (Hughes & O’Rand, 2004).

In 2007, older adults comprised 12% of the population, however only 60% of single-family units on the housing market in the United States were physically accessible (Memken & Earley, 2007). Accessible home environments can slow the rate of functional decline, reduce health care services, prevent falls, improve activity patterns, and improve the overall quality of life of older adults with or without disabilities, thereby supporting aging in place (James & Sweaney, 2010; Lanspery et al., 1997; Memken & Earley, 2007; Niva & Skar, 2006). Older adults who have experienced a decline in health are more likely to consider moving when they perceive their house is unfit to meet their current and increasing needs (Stoeckel & Porell, 2010). Aging in place is a safe option if the house has accessible features or is capable of being easily and affordably adapted (Memken & Earley, 2007).
**Home modifications.** “Home modifications are physical adaptations to home environments that allow older people to age in place” (Cicero, 2012, p. 16). The adaptations are designed to remove trip hazards, improve lighting and pathways, move environmental controls with a comfortable reach, and enable elders to live independently, safely, and expend less energy. As aging individuals do not typically plan for changes due aging, they do not plan for housing modifications until there is an immediate critical need. As incomes become fixed after retirement, the need of affordable housing becomes an issue with the older adults.

The “most straightforward way for older adults to improve physical accessibility in their home is through home modification” (AARP, 2010, p. 2). However, policies and programs in the United States have focused mostly on relocation or providing in-home service instead of modifying the home (Lanspery, Callahan, Miller, & Hyde, 1997). Appropriate home modifications could be an efficient strategy to stretch public funds as home modifications can be 13-22 times less than the average costs of support services and hospitalization (Zola, 1997). Adaptations and modifications to the home can increase independence, autonomy, and control for older adults (James & Sweaney, 2010; Lanspery et al., 1997; Memken & Earley, 2007; Newman, 2003; Niva & Skar, 2006; Pynoos & Nishita, 2003; Tabbarah, Silverstein, & Seeman, 2000; Wahl et al., 2009).

Home modification is done with the intention to adapt the living environment to ensure safety, security and independence. A report from the National Center for Health Statistics states that 35% of individuals aged 75 and older have modified their home (LaPlante, 1992). However one of the issues associated with home modification is funding. Most home modifications are self-sponsored without any assistance. More people may consider home
modification if assistance was available. The goal of home modification is to make the entire structure readily accessible to all members of the household. It should also ensure that there are no barriers to approaching, entering, and leaving the house, as well as to using the bathroom and kitchen and access to a place of rest. It should enhance the quality of the structure and fit in the style of the house.

Following are some of the basics of home modification described by Wylde, Baron-Robbins, & Clark (1994) that may be helpful for older adults:

<table>
<thead>
<tr>
<th>Building Element</th>
<th>Modification helpful for older adults</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Pathway</strong></td>
<td>• Pathway should be even and well lit.</td>
</tr>
<tr>
<td></td>
<td>• Refurbish concrete, asphalt sidewalks, improve brick ones where they have crack</td>
</tr>
<tr>
<td></td>
<td>• Remove, prune bushes and trees that drops leaves, fruit from pathways</td>
</tr>
<tr>
<td></td>
<td>• Proper lighting should be there from the point of disembark to entry</td>
</tr>
<tr>
<td><strong>Entrance</strong></td>
<td>• Entrance should be smooth and short pathway</td>
</tr>
<tr>
<td></td>
<td>• Stepless entry is preferred; ramp, raising elevation of vehicle staging, combination of ramp and elevation can be beneficial in achieving stepless entry.</td>
</tr>
<tr>
<td></td>
<td>• Entry should be straight</td>
</tr>
<tr>
<td></td>
<td>• It also should be weather protected</td>
</tr>
<tr>
<td><strong>Interior Pathway</strong></td>
<td>• Door should be of width of minimum 32 in</td>
</tr>
<tr>
<td></td>
<td>• Swing should be outward</td>
</tr>
<tr>
<td></td>
<td>• Sunken living room- ramp</td>
</tr>
<tr>
<td><strong>Multi-level homes</strong></td>
<td>• In multi-level homes, it may be difficult for older adults to access the upper floor</td>
</tr>
<tr>
<td></td>
<td>• In this case, making one floor accessible may be an option</td>
</tr>
<tr>
<td></td>
<td>• A bedroom and a full bath should be added in the accessible floor</td>
</tr>
<tr>
<td></td>
<td>• Elevator may be an option but it may be expensive</td>
</tr>
<tr>
<td><strong>Level change: Ramp and Stairs</strong></td>
<td>• Hand rail/ protective barriers should be present</td>
</tr>
<tr>
<td></td>
<td>• Sufficient lighting should be there</td>
</tr>
</tbody>
</table>

Special consideration should be made for the people with specific impairments such as visual and hearing impairment.
<table>
<thead>
<tr>
<th>Impairment</th>
<th>Design Consideration</th>
</tr>
</thead>
</table>
| Visual     | • Change in surface texture can be beneficial for visually impaired  
|            | • Walkway can be done with high visual contrast  |
| Hearing    | • Visual indicator can be installed to sound signaling systems  
|            | • Background noise level should be decreased  |

All of the modification options can enhance the living environment. If public agencies subsidize home modification programs more, people will be encouraged to modify their home and age in place without necessitating a move.

**Home modification programs in Minnesota.** As people age and retire, income may be a constraint. Most elders have to depend on Social Security incomes. Therefore, intention for home modification can be hampered by the lack of resources. A number of public, private and non-profit organizations help seniors to modify their home and age in place.

*Lifetime Home Project.* This is a Minneapolis based organization that is dedicated to promote ‘comfortable, safe and long-term living at home’. The organization is working to provide education, professional training, advocacy and technical services to encourage universal design, gerotechnology and design, construction/ remodeling, social arrangements for lifetime housing and lifetime communities. They have adapted the guidelines for remodeling for universal design provided by Minnesota Housing Financing Agency (MHFA) and encourage people to follow those guidelines. They have also listed various assistance programs for home modification available from public, private and non-profit organizations that the seniors can explore to modify their home. The programs are listed below:

*Section 202 Supportive Housing Program for Elders.* This is the only federally funded program focused on elders, the applicant has to be 62 years or older, and with an income less than 50% of the area median income. There are more than 300,000 Section 202 housing units in
the U.S. which is not adequate to meet the housing demand of increasing senior population (Ginzler, 2012).

*Community Development Block Grants.* This program is funded by U.S. Department of Housing and Urban Development (HUD). It provides assistance to state and local agencies community and economic development activities. Funding in Minnesota is divided among cities and counties through Department of Employment and Economic Development (DEED). Housing rehabilitation including remodeling to improve accessibility is a priority activity.

*HOME program.* HOME is also administered by HUD, and is similar to CDBG but solely focused on housing activities. States and communities are provided grants for the acquisition, construction, rehabilitation, and demolition of housing. Similar to CDBG, accessibility remodeling is a priority activity.

*Section 504 Loan Grant.* This grant program is administered by U.S. Department of Agriculture (DOA) and Department of Rural Development (RD). It focuses on non-metropolitan areas with population of 20,000 or less. Residents of those communities who are aged 62 years or older may receive a grant of maximum $7,500 for lifetime and have to repay the loan within three years.

*Rehabilitation Loan Program.* This loan program is administered by MHFA provides loans and grants to repair single family and duplex properties owned or occupied by low-income households. There is no periodic payment however, the borrower must repay the loan if he/she sells, transfer the title, or stops being the primary household of the property.

*Local and Neighborhood Agencies.* Cities and counties may use their own resource for rehabilitation for accessibility. Type of fund, availability and eligibility may vary from agency to agency. Some of the examples are:

- Neighborhood Housing Service: local branches of federally supported organizations
to promote rehabilitation. They serve specific large cities within Minnesota

- Neighborhood associations, planning councils and cities may provide funding for modification and rehabilitation.
- Non-profit housing agencies may also provide assistance for home modification. One of the examples is Metropolitan Housing Corporation, based on Minneapolis that offers assistance in Western and Northern metro area (Lifetime Home Project, n.d.)

Conclusion

In summary, we conclude that home modification can be critical to help older persons to age in place. The potential of well-designed modifications based on individual needs suited to single-family and multi-family homes has not been completely realized by planners and policy makers. As people age, their income are often fixed and the lack of incentives and easy to understand information about home modification by public agencies makes it difficult for the public to embrace the idea of home modifications. Yet it ensures safety and security without compromising privacy and control. Most of home modifications can be done cost-effectively if the public agencies develop subsidy and educational programs.

Public and nonprofit agencies interested in encouraging home modifications to support aging in place need to explore effective ways of promoting home modification programs with in and as an extension of rehab programs. We suggest they include universal design and visitability principles as guidelines to the rehab programs. To overcome the combined stigma of home modification and subsidy, we need to find language and graphics that explain home modification as a community betterment initiative.

Residents need easy to understand reference materials and a review panel to ensure modifications are aesthetic as well as functional; that such improvements increase property
values and enhance neighborhoods. This review panel should include residents and students in the construction trades with city administrators. Furthermore, we encourage the city to collaborate with the school system to build a cadre of tradespeople knowledgeable in universal design and the concept of visitability.
GENERAL METHOD

Overview

On October 17, 2013, students attended an open house about the Resilient Community Project at the North St. Paul Community center. The goal was to hear how older adults (+55 years old) living in North St. Paul describe their housing needs. The data was gathered from the answers received from semi-structured open-ended questions. Answers were recorded; field notes, participant observation and documentation were conducted. In total 23 participants were interviewed. Interviews lasted about 10 minutes and were examined multiple times to generate emergent themes, clusters, develop reflections, codes and categories.

Participants

All participants were Caucasian between the ages of 55 and 79. The average age was 69 years old. Both men and women participated, however slightly more women (52%). Among the participants, 74% lived in single-family homes, 17% resided in condominiums, and 9% rented apartments. The longest a resident had lived in their home was 67 years, the shortest was 2 months; the average length of residences was 28 years.

Results and Discussion

When asked to describe what modifications have been done to their home, the most common answers were adding more space, replacing windows, and installing railings and grab bars. The most common change that they expected to make to accommodate aging issues was moving the laundry to the first floor; adjustments to deal with steps and stairs. Forty four percent responded that they would not modify their home and 12% did not answer the question.

When asked what they would like to do next to their homes, almost 40% did not have an
answer. Thirty six percent of those who did respond said they would like to add a bedroom and/or bathroom on the main level. Other frequent answers included adding hand railings, grab bars, and putting the laundry on the first floor.

The question of changing living situations because of health issues was not a concern for most of the respondents. Over 65% of participants did not answer when asked to predict an age when they might move because of health issues. Of the people who responded, 10 years was the most common answer. Two participants said in 30 or so years when they are 100 years old. Just over 50% of respondents said that they would move if health issues arise; 33% responded specifically stated that they would move somewhere in North St. Paul. Thirty five percent responded they did not plan to move, another 13% said maybe or they weren’t sure. For the people who didn’t want to move modifying their home to accommodate health issues might be an option; 44% of the participants agreed with that option.

The city of North St. Paul is interested in helping their residents and requested suggestions about what to do to help elder residents modify their home so they can age in place. Surprisingly 61% of participants did not have an answer to this question. However, of those who did reply wanted the city to provide help with low interest financing, subsidy to renters for senior housing, offer forgivable loans to those who age in their home, run meetings to demonstrated what options of modification where available and who to contact to make the modifications. Although not specifically questioned about the community infrastructure, the older adults had more opinions on how the city can help seniors by improving the community environment. Over one fourth of participants said they wanted the city to add sidewalks in their neighborhoods. Other popular requests were for the city to provide snow removal and lawn care, transportation options, and services such as recommending reliable handy man services and information about home modification.
There was a sense of denial from the participants about aging and housing needs that arise. Many respondents do not plan to move for health issues. A common response to that question was “I’m not thinking about that yet” and “I’ll deal with it when it comes up”. One respondent that had installed grab bars said “I put in grab bars but I did it for my mother in law who came to live with us”. Yet, there were also a few participants that had thought ahead as to how they could modify their home and were open to options of modification. A couple of respondents said they bought rambler style homes with aging in place in mind. Another person stated “I have a closet on the main floor that I will put my laundry in”. Other modification plans included making bathrooms and showers more accessible and putting in a ramp.

**Key Informants**

Throughout the month of November 2013 our class conducted interviews by phone and email with five HRA’s and contractors we identified as key informants. The questions we asked are included in Appendix B; the interviews lasted approximately 30 minutes. In the following paragraphs we summarized their responses to help develop best practices for a home modification program for the City as they support residents to age in place.

**Housing and Redevelopment Authorities.** Three of the interviewees were from HRA’s. The HRA’s administer home modification through rehabilitation loan programs funded by the county and CDBG’s (Community Development Block Grants). These programs were targeted to households that have an income of 80% of the median income, a requirement of the CDBG. Of the HRA’s only one answered that they had what they considered a home modification program to support elders in the community.

**Private Consultant and Contractor.** The other interviewees were a private consultant and contractor. They listed sources of funding as private, Medical Assistance waivers, Medicaid,
and a library program. They both targeted the senior population as well as people with disabilities.

**Results and Discussion**

Four of the five key informants indicated that there is a need for education and outreach regarding home modification. Other topics mentions included 1. Universal design, 2. Home modification, in general, and, 3. Difficulties in finding reliable contractors and getting accurate bids. When asked to identify best practices for home modification programs, one emphasized the need for a “well seasoned rehab specialist who knows home and modifications.”
SUMMARY AND CONCLUDING DISCUSSION

The central questions we were investigating were if the older residents are planning to age in their current home and what they expect from the City. The results from our interviews indicate that about 90% of the respondents are planning on aging in place. Respondents are concerned about sidewalks and community lighting. Within their homes, they need to move laundries to the first floor and adapt steps and stairs. Additionally, they need financial help and information to make good decisions about home modifications and confidence in selecting tradespersons to complete changes to their homes.

No key informants we spoke to had programs specific to home modification targeted to seniors aging in place. Of the people that we interviewed no one has considered Universal Design in their program and therefore do not promote it. The key informants agreed with the residents we interviewed in North Saint Paul, that finding reliable contractors was an issue. As stated in the executive summary, we are recommending that the City of North Saint Paul implement a home modification program. In particular, we encourage universal design that is useful and provides appealing aesthetics that not only will increase property values but improve neighborhood design.
References


Appendix A

HSG 5481 Resilient Communities Project:
Work as a consultant group to develop recommendations to support aging in place in North Saint Paul
200 Points (40% of course grade)

University Learning Outcome Addressed: Identify, define, and solve problems

The outcome is addressed through lecture, small and large group discussions, readings, reflection papers, and public engagement activities to identify and define housing and community barriers for individuals, including seniors and individuals with disabilities.

General course objectives:

- Increase awareness of the ways in which existing housing and community designs create barriers or facilitates improved quality of life for residents.
- Understand how user needs and characteristics influence housing and community development.
- Evaluate housing and community designs for accessibility, safety, and support for individuals.
- Evaluate regulations, standards, and public policies that affect inclusive planning for housing and community development.
- Understand the concepts of accessible and universal design and their application to the built environment.

It is the students’ responsibility to divide the work and develop a collaborative work plan. At the end of the semester, individual team members will submit a reflective evaluation of their contributions, the contribution of each team member, and the team’s progress.

The course project is completed in sections:

- Needs Assessment (50 points due on October 2, 2013)
  - Develop questions to assess residents’ wants.
  - Conduct interviews
  - Analyze interview data
  - Analyze secondary data
  - Summarize needs and barriers
- Literature review on housing and community alternatives that encourage and support aging in place. Research and evaluate housing solutions and community planning strategies for inclusive home, work, and community environments that align with the values of North Saint Paul (50 points due on November 24, 2013)
- Recommend practical solutions in a written report and deliver presentation at a community meeting (100 points due on Dec 12, 5 p.m.)

*We will use class time to discuss and plan the project.*
*You must bring your questions, examples, ideas, and problems to class.*
*You will also need to plan time outside of class to work independently and collaboratively.*
Appendix B

October 17, 2013 Open House Interview Script

Date: __________ Interviewer: ___________________________

Time began: __________ Time concluded: __________

Introduction
We are asking residents of North Saint Paul about their housing needs. The purpose is to guide recommendations to the City about Aging in Place.

1. Describe your home __________ Single family
   __________ Condo, is it in a senior development Yes No
   __________ Apartment, is it in a senior development Yes No
   __________ Mobile home

2. How long have you lived there? __________

3. Describe what you have done to your home to make it safe, comfortable, and accessible.

4. What changes would you like to do, you plan to do, or think you might need to do in the future?

5. At what age do you think you will change your living situations because of health issues? ______

   Will you move? NO YES Where?

   Will you modify your current home? NO YES

   What changes do you think you will need to make changes in your living situation?

6. What should the city do to help residents modify their homes so they can age in place?

   A few more questions so that we can accurately describe the individuals we have talked with

   Do you plan to age in your current home? Yes No Ask even if you think you have already heard the answer.

   Your Race

   Age

   Gender
Appendix C

Key Informant Interview Script

Name of interviewee_______________________ Organization__________________________
Date___________________________ Time began____   Time ended____

I am a student in a housing studies course at the University of Minnesota. I am participating in a Resilient Communities Project with the City of North Saint Paul to develop a proposal for a Home Modification Program. The purpose is to help senior homeowners modify their home and live independently in the community. We have selected you as a key informant.

Do you have a home modification program?
   Yes: Do you have 30 minutes to complete an interview or can we arrange a better time?
   No: Can you recommend someone we should interview as a key informant on home modification?

Have you or your program ever considered a home modification program to support elders in the community?

How is your program funded?

How many homes have participated? Do you know how many were seniors?

Describe the program: Who is the target population?

How do you distribute funds?

How do you promote the program?

Estimate the percentage of requested modifications that were conducive to aging in place compared to regular maintenance and repair?

If you do, would you promote Universal Design with home modifications?

If you have a modification program, how do you follow the participants?

How do you evaluate the outcomes?

How do the participants use and feel about the changes in their home?

How do you provide additional support?

In summary, can you share two best practices we should include in a new program.

Finally, can you identify any pitfalls we should try to avoid.

Thank you very much for your time and information.