



Improving Experiences for Residents with Disabilities in Federally Assisted Family Housing

Corianne Payton Scally, Ebonie Megibow, and Susan J. Popkin

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Disabled individuals and families, including those in federally assisted housing, face multiple challenges in gaining access to housing units and services that meet their needs—despite legal frameworks meant to help them. This report leverages the perspectives of federally assisted housing providers, disability experts, service coordinators, and residents to explore challenges to reasonable accommodation processes and to service access. Boosting funding, clarifying definitions and processes, and ensuring adequate training for housing providers can increase equity in outcomes for federally assisted residents with disabilities.

Introduction

While there is a legal framework for countering housing discrimination against people with disabilities, disabled individuals and families still face multiple challenges exercising their rights, securing reasonable accommodations, and gaining access to units that meet their needs (Levy et al. 2015; Dawkins and Miller 2015). Various supports and services can be available to disabled individuals who meet program eligibility requirements and locational proximity, yet there is no clear right to physical access to essential services that disabled residents may need to live their healthiest lives and stay stably housed. Recent research has highlighted the significant number of disabled residents living in some federally assisted housing programs (Dawkins and Miller 2015; Docter and Galvez 2019). Yet little is known about the housing needs and service needs of this marginalized group, particularly working-age disabled individuals and families with a disabled household member who live in federally assisted housing for families (rather than federally assisted housing exclusively for older adults or people with

disabilities). This report begins to fill this gap, presenting evidence on how federally assisted housing processes and supports for disabled residents can improve to better meet legal obligations and resident needs.

To understand obstacles to accessible and service-connected housing for younger adults, families, and children with disabilities, our research focused on three federal housing programs that provide low-cost rental housing to eligible households with low incomes: public housing, project-based rental assistance through the Section 8 program, and the Low-Income Housing Tax Credit Program (LIHTC). The first two programs have a significant proportion of their housing stock built prior to 1980; the latter program, while it has only funded units since the 1990s, is frequently used to refinance and renovate older properties.¹

To explore these programs, we used several strategies:

- **expert interviews:** We first interviewed nine national experts in housing and disability law, federally assisted housing programs, and disability advocacy. These interviews allowed us to better understand (1) the challenges that residents with disabilities face when they are getting accommodations and connections to needed services, (2) opportunities for improving the housing and services available to residents with disabilities who live in federally assisted housing, and (3) which types of family housing programs may be better suited to meeting the needs of people with disabilities.
- **housing provider focus groups:** We conducted focus groups and individual interviews with five public housing managers, six housing managers for LIHTC properties, and two resident services coordinators. These conversations allowed us to build upon findings from the expert interviews and better understand the challenges related to physical accommodations, service connections, and meeting other resident needs, as well as opportunities for improving housing satisfaction and service connections.
- **resident focus group:** We conducted a focus group with 12 individuals with disabilities who live in federally assisted housing. This allowed us to incorporate the perspectives of residents with lived experience in navigating the intersection of housing and disability. The primary topics of discussion were housing experiences and challenges, challenges and opportunities related to service needs, and experiences with housing services and services staff.

While our findings are informative, they reflect the experiences and opinions of a small number of experts, housing providers, service coordinators, and residents and do not necessarily represent the comprehensive perspective of these groups at large.

Disability, Housing Laws, and Federally Assisted Housing

The primary US laws governing access to housing (discussed below) define a disabled individual as someone who either (1) has a physical or mental impairment that substantially limits one or more "major life activities," (2) has a record of such an impairment, or (3) is regarded as having such an impairment.²

A broad range of disabilities—including those evident at birth or occurring because of biological changes, illness, or injury—limit functions across one or more fundamental dimensions, including physical (e.g., limbs, dexterity, coordination), sensory (e.g., vision, hearing), cognitive (e.g., learning, memory), and/or psychological (e.g., emotional, social, or mental functioning).³

Disability is a widespread experience, with an estimated one out of every four adults in the US living with a disability, or around sixty-one million adults (Zhao et al. 2019). Some populations experience higher rates of disability, including women, older adults, adults who identify as American Indian/Alaska Native, adults with lower incomes, adults living in the South, and adults living in rural areas (Okoro et al. 2018; Zhao et al. 2019). Among residents—including adults, youth, and children—living in housing funded through the US Department of Housing and Urban Development (HUD), 23 percent reported having a disability in 2021, including 24 percent of public housing residents and 19 percent of residents in project-based Section 8 rental units.⁴ For LIHTC properties, 12.4 percent of households reported at least one member as disabled in 2019 (HUD 2021).

Legal protections for renters with disabilities center around leasing practices that do not discriminate by disability status, that allow reasonable accommodations to units, that meet accessible design standards, and that ensure the right to live in the least restrictive community setting (Box 1). Whether or not a law covers a specific rental property varies based on the age of the property, whether the owner receives federal financial assistance, and the type of disability. Some laws have different specifications for public or common areas of buildings versus individual dwelling units.

BOX 1

Legal Protections for Housing People with Disabilities

The Federal Fair Housing Act of 1968 prohibits discrimination in housing on the basis of race, color, religion, sex, national origin, familial status, and disability. The Fair Housing Act makes it unlawful for any person to refuse “to make reasonable accommodations in rules, policies, practices, or services, when such an accommodation may be necessary to afford...person(s) [with disabilities] equal opportunity to use and enjoy a dwelling.” The Act’s protection against disability discrimination covers people with a disability seeking to buy or rent a home as well as buyers and renters without disabilities who live or are associated with individuals with disabilities.

Housing providers are also prevented from refusing residency to persons with disabilities, or placing conditions on their residency because those persons may require reasonable accommodations. The act requires that housing providers allow residents to make reasonable structural modifications to units and public/common areas in a dwelling when those modifications are necessary for a person with a disability to have “full enjoyment” of a dwelling. It applies to privately and publicly owned housing, including housing subsidized by the federal government or rented with a tenant-based voucher.

Section 504 of the Rehabilitation Act of 1973 prohibits discrimination on the basis of disability in any program or activity that receives federal financial assistance. This rule means, for example, that persons with disabilities may not be denied the opportunity to participate in a program or activity because of their disability, may not be required to accept a different kind or lesser program or service than what is provided to others without disabilities, and may not be required to participate in separate programs and services from those available to persons without disabilities, even if separate programs

and services exist. For federally financed housing units built after 1991, or older buildings that are substantially altered, five percent of units must be accessible for persons with mobility impairments and an additional two percent must be accessible for those with hearing or visual disabilities. Housing providers may not require persons with disabilities to live only on certain floors, or in one section of a building or complex. Housing providers may not refuse to make repairs, and may not limit or deny someone with a disability access to recreational and other public and common-use facilities, parking privileges, cleaning or janitorial services, or any services that are made available to other residents without disabilities. The cost of reasonable accommodations is the responsibility of the housing provider receiving the federal financial assistance.

The Americans with Disabilities Act (ADA) of 1990 created, for the first time, a comprehensive mandate to make buildings, infrastructure, and transit accessible to people with disabilities regardless of when they were constructed. It is the only civil rights legislation that includes detailed technical diagrams (Americans with Disabilities Act Accessibility Guidelines for Buildings and Facilities; Architectural Barriers Act ABA Accessibility Guidelines) as a mechanism for ensuring just access to a historically underrepresented group. The law covers all spaces serving the broader public, including, for example, the rental office of a building. It does not, however, cover individual dwelling units or spaces reserved for use by private residents, such as a community space limited to tenants.

The Olmstead Act of 1999 requires states to place qualified individuals with mental disabilities in community settings, rather than in institutions, whenever treatment professionals determine such placement is appropriate, the affected persons do not oppose such placement, and the state can reasonably accommodate the placement, taking into account the needs of others with disabilities.

Sources: Fair Housing Act of 1968, 42 USC § 800 (2021); “An Overview of the Americans with Disabilities Act,” ADA National Network, accessed September 11, 2022, <https://adata.org/factsheet/ADA-overview>; “Olmstead: Community Integration for Everyone,” US Department of Justice Civil Rights Division, accessed September 11, 2022, https://www.ada.gov/olmstead/olmstead_about.htm; “Section 504: Frequently Asked Questions,” US Department of Housing and Urban Development, accessed August 9, 2022, https://www.hud.gov/program_offices/fair_housing_equal_opp/disabilities/sect504faq.

Despite the complex legal framework for ensuring housing access for disabled individuals and the evidence that working-age residents in federally assisted housing have a high prevalence of disabilities (Dawkins and Miller 2015; Brucker and Scally 2015), there has been little systematic research on whether these disabled residents’ housing and services needs are being met. Research instead focuses on older adults with disabilities or does not disaggregate by age, with some recent exceptions (Sanders et al. 2022). Other research examines assisted housing that is specifically designated for disabled households (Dawkins and Miller 2015). This research overlooks working-age disabled adults and families with disabled youth and children living in housing that is not specifically designated for people with disabilities. There is a need for research to fill gaps and help improve the experiences of disabled residents living in federally assisted housing. This includes looking at the:

- **shortage of accessible units.** There is a shortage of accessible units in the federally assisted housing stock across public housing and multifamily programs, even within buildings designated to serve residents with disabilities (Dawkins and Miller 2015).
- **small proportion of accommodation requests fulfilled.** Only 30 percent of households with a member with a disability living in public housing who requested a housing unit with a disability

feature received such a unit (Dawkins and Miller 2015). Data on requests are not available for other types of assisted rental housing programs.

- **lack of access to community services.** Funding for service coordination and case management within federally assisted housing for working-age disabled individuals is thin and caseloads are high (Sally et al. 2021). Even when housing providers have found other sources of funding or partnerships to offer some onsite services—such as transportation, food assistance and/or meals, social activities, or limited health and wellness services—these services often target older adults or young children and can leave out behavioral health and daily assistance needs (Sanders et al. 2022).

This brief is an important step in documenting the challenges to ensuring housing access and service connections for disabled residents of federally assistance housing. Our aim is to recommend where changes in regulations and processes could improve experiences for these residents and better support housing providers.

Challenges within the Reasonable Accommodations Process

We spoke to organizational directors and tenant services and compliance staff at public housing, project-based Section 8, and LIHTC properties across the country, as well as to residents with disabilities who have experience living in these types of housing. Our aim was to understand the barriers within the reasonable accommodations process. For housing, a reasonable accommodation is a change, adaptation, or modification that allows a disabled resident to use and enjoy a dwelling and that does not cause undue financial and administrative burden on the housing provider or fundamentally alter the provider's operations.⁵ Our interview and focus group conversations revealed several themes: common obstacles that make accommodations costly to provide; hang-ups in the process of matching units with needs, including a lack of resources and a lack of trust between the residents making requests and housing staff handling them; and legal uncertainties and resulting shortcomings in standards and trainings.

Older Structures and Lack of Resources Make Accommodations Costly

The age and physical structure of older federally assisted housing can be a barrier to providing reasonable accommodations. Depending on when units were constructed and the construction materials used, some buildings can be difficult to modify physically. For example, participants in the public housing focus group noted that jackhammering concrete is a more expensive and less effective process for widening doorways than modifying framed walls. Some available units might be in buildings that cannot reasonably accommodate a particular request, which can mean relocating residents to another property to meet their accommodation needs. Multiple experts and housing providers gave examples of challenges they have encountered, including residents requiring a single-floor unit within a development consisting of only two-story townhomes, residents needing wheelchair access in a

property without an elevator and with commercial space on the ground floor, and inadequately sized stairways and stairwells in older buildings.

There are no dedicated federal funding streams that help owners or residents of federally assisted housing pay for reasonable accommodations. Public housing capital funds, which have a history of underfunding (Fischer, Acosta and Bailey 2021), must cover both overall maintenance and repairs as well as costs for reasonable accommodation requests. LIHTC properties receive no direct operating support from federal funds (although some properties and residents may receive other rental assistance), so are limited in what they can afford by the rents they can collect (Box 2).

“There is no support at the federal level. So, we are stuck going to counties or cities who maybe have a waiting list and don’t have funding but could maybe refer people out to other agencies that may have funding, and having to hodge-podge things together to try to come up with it.”

–LIHTC focus group participant

BOX 2

A Closer Look at LIHTC Properties

LIHTC properties have a complex relationship with reasonable accommodations. Since LIHTC is funded via a tax credit and not direct federal financial assistance, properties are not subject to 504 compliance if there are no other federal funds supporting the property. If there are other federal funds supporting the property, the responsibilities for reasonable accommodations may vary based on the type of federal funds. For example, according to HUD, a voucher that pays rent on behalf of a resident does not obligate the housing provider under Section 504 but receiving HOME funds does.

Even when a LIHTC property is subject to Section 504, their financing structure may prevent many accommodation requests from meeting a “reasonable” standard. For example, LIHTC focus group participants said that if debt repayment would be jeopardized or if a property is operating at a loss, costly accommodations could be deemed unreasonable. As one participant said, “It’s [a] worse [outcome] if a property can’t pay the mortgage if you put the property under financial burden. So it’s a balancing act. Sometimes there’s just no right answer.” During our focus group, some LIHTC housing providers explained that when accommodations are too costly to be considered reasonable, they try and connect residents to local public and private grant resources for accommodations. However, these resources are not always available. This situation means that residents may incur the cost of accommodations in their units themselves or go without a needed accommodation.

LIHTC focus group participants all agreed that there is “no support” at the federal level for reasonable accommodations and that more resources are needed. They discussed incentivizing the construction of new accessible units, with one participant suggesting a boost in the eligible basis upon which tax credits are calculated to encourage more accessible units. This could counter what some

LIHTC housing providers discussed as a financial “penalty” for developing accessible units in new buildings, which comes at a high cost. These providers acknowledged that it would cost less to instead leave those units out of new building plans and deny accommodation requests as unreasonable once construction is complete.

Sources: Adam Cowing, “Section 504 Protections Apply to ARRA-funded LIHTC Projects,” Washington, DC: National Housing Law Project, 2009, <https://www.nhlp.org/wp-content/uploads/NHLP-Section-504-Protns-Apply-to-ARRA-funded-LIHTC-Projects-39-Hous.-L.-Bull-182-July-2009.pdf>; “Section 504: Frequently Asked Questions,” US Department of Housing and Urban Development, accessed August 9, 2022, https://www.hud.gov/program_offices/fair_housing_equal_opp/disabilities/sect504faq.

Managers often make the difficult decision to prioritize the overall maintenance and repairs that will benefit all residents over specific accommodations needed by disabled residents. Some of this work supports residents with disabilities, such as maintaining elevators in good working condition and replacing them at the end of their useful life. However, according to residents and housing providers in our focus groups, an overall lack of funds means that housing providers may focus on making the easiest and least costly accommodations. Lower-cost examples include changing fixtures and handles and adding grab bars in the bathroom—a costlier option would be expanding the size of a bathroom to add a roll-in shower.

“The easiest [accommodation] is something they were already planning to do, or something that is very cheap. The hardest would be the reverse, something that is expensive. It would cost a pretty penny to fix the elevator, for example.”

—resident participant

Determining Needs and Solutions Is Not Straightforward

Residents with disabilities have difficulty accessing information on available unit and building characteristics. Participants in the resident focus group told us that they often lacked general information about the physical structure of units prior to move-in. For example, one person said that it can be hard to find information such as the number of stairs present to gain entry to a unit. Another participant mentioned that it’s challenging to ensure that information is accessible to people who are blind and need to have information read aloud.

It can be hard to align accessible units with specific needs. Housing providers in our public housing focus group discussed the challenges that arose when housing applicants did not make specific accommodation requests on their application. Instead, these incoming residents often waited until after they were assigned a unit to make requests if the housing assigned to them would not meet their needs.

Sometimes this resulted in these tenants living in a suboptimal environment until an appropriate unit became available. Multiple public housing focus group members mentioned that a common request was to transfer to a larger unit, such as one with more bedrooms. However, there is often a lack of larger units and long waiting lists, which means that larger units are not always available to meet these residents' needs.

Housing provider participants in our focus groups did not seem to follow a clear strategy to match available accessible units with residents who need certain features, even when housing providers know of resident needs in advance. Instead, they usually offer units to households based on their application or waitlist order. Some property managers explained that they needed to fill units quickly regardless of residents' needs for a particular unit's accessibility features. Others discussed the difficulty and length of time it takes to properly match an accessible unit with a resident who has a specific need for its features. These challenges mean some residents receive accessible features they do not need while others do not receive the accessibility features they need.

Requiring medical documentation to consider and approve accommodation requests is a fraught (and questionable) process. Some public housing focus group participants discussed requiring medical documentation or discussing accommodation needs with medical doctors, while others said they did not "do a lot of back and forth with doctors." Those who did claimed it was necessary to determine if the requested accommodation was the only way to meet the residents' need or if there were other alternatives. LIHTC focus group participants expressed dissatisfaction with medical provider engagement, stating that medical providers sometimes approved requests that, when discussed with them in further detail, turned out to not be the most effective housing accommodation for a particular resident's needs. These participants' concerns included medical providers who were known for approving the exact same requests across multiple residents in a property, leading staff to wonder if the provider was using a standardized form when residents might in fact have different needs.

Disability experts made it clear in interviews that requiring medical documentation is a questionable practice. Some told us that housing providers often ask for verification when it is not necessary, for example when a resident who uses a wheelchair requests grab bars in the bathroom.

Lack of Respect and Resources Can Hinder Solutions

Attitudes and biases of service providers shape how they treat people with disabilities. These attitudes also influence residents' confidence in asking for reasonable accommodations. One resident participant described the general negative attitudes they believe that staff hold toward people with disabilities. Another participant believed their requests just disappear, either because of a housing provider's disregard for their needs or a lack of time to review and approve requests. Some participants echoed that they felt like a burden to housing agency staff who seemed busy with other responsibilities.

“Some people are just angry at disabled people for no reason. They try to make their lives as complicated as possible.”

—resident participant

These concerns make some residents with disabilities hesitant to ask for accommodations even when they need them. In more extreme instances, residents thought discrimination might limit the services and housing opportunities they would be able to receive. One resident participant said that racism also affects the services and housing opportunities they are offered. Overall, participants in our resident focus group believed that the attitudes and biases of housing providers may cause residents to not get the accommodations they require.

A lack of resources can appear as a lack of respect, slowing the process down and sometimes resulting in inequitable outcomes. Inadequate funding gives landlords an incentive to avoid unnecessary requests for accommodation. Housing providers report that this problem leads to trade-offs between simplifying the process and preventing fraudulent requests. Those who participated in our housing provider focus groups expressed concerns about giving accommodations to one person and then having everyone else want the same thing, even if others did not require the same accommodation. Some mentioned trying to avoid this scenario by establishing precedents, since consistency is legally required but some requests can be costly.

“I live in a property owned and managed by a large nonprofit. They understand they are supposed to accommodate me because I have a disability, but I try not to ask for too much because they make me feel like a nuisance. I think my property manager is very busy and she has so many things to keep track of, so she doesn’t have that much mental space to dedicate to my accommodations.”

—resident participant

The Process Creates Burdens for Both Residents and Housing Providers

Residents feel that they have to know their rights and advocate for themselves to get what they need. Some resident focus group participants pointed to unhelpful housing staff who might mean well but avoid answering requests by claiming ignorance. One example was of staff who advised residents to look things up on the internet to find answers on their own. One resident participant noted how this can

be a burden on residents who do not know how to find the resources they may need, particularly when there are few neighbors willing to help one another out. This makes self-advocacy a necessity.

“In my experience, you have to be a specialist in your own area in order to get the help you need. Even people who mean well just don’t know enough to do what they need to do. We have a compliance officer whose job it is to stay within the laws and regulations, but they are just looking to get paid. You really have to know your own rights.”

—resident participant

The thresholds for what counts as reasonable are unclear. It’s not clear what the legal grounds are for refusal that protect housing providers from being found liable for discrimination. Housing providers in our focus groups expressed a clear desire to meet the requirements of the law but discussed a variety of gray areas that make it difficult to apply the law consistently and avoid legal conflicts. There was a general sense that a housing provider could try their best and still get things wrong, either legally or satisfactorily, by not meeting residents’ accessibility needs. The need for consistency also presented challenges in adopting and altering policies, making nuanced decision making under pressure difficult, particularly when a resident wants timely answers.

“You cannot start altering your policy based on circumstance. If you are treating residents differently, then you are opening up to fair housing issues.”

—housing provider focus group participant

Housing providers in our focus groups said they do their best to train their staff, but the lack of clear federal standards and regulations leave important questions unanswered. The participants in our housing provider focus groups who are responsible for property management and compliance communicated what “reasonable” meant for their properties, but the definition of “reasonable” was not consistent across participants. For example, one participant had established a standard that the first request for an emotional support animal was always reasonable, while additional requests were determined case by case; others decided every request for an emotional support animal on a case-by-case basis (Box 3).

BOX 3

Emotional Support Animals: Are They Reasonable?

Requests for emotional support animals are typically an inexpensive accommodation to approve, as they involve few costs for a housing provider. However, housing providers in our focus groups described challenges in applying a consistent standard in properties where pets are not allowed by right or are only allowed with an additional fee or deposit that covers potential wear and tear on the property. For example, housing providers mentioned facing challenges after they have approved an emotional support animal for one resident as an accommodation and other residents start requesting emotional support animals without having medical verification of disability status. No national certification for emotional support animals exists, yet residents may obtain an online certification for their animal, thinking this is a legitimate and required documentation for their request. In other cases, residents may want to have multiple animals approved with no verified need of medical necessity. Without a clear standard for allowing emotional support animals in federally assisted housing, housing providers continue to make different decisions in this area, increasing their legal risk and the potential that a resident may be denied an accommodation they need because of disability status.

Lack of Standards and Training Lead to Inconsistencies and Bias

Standards and processes for reasonable accommodations in federally assisted family housing vary greatly, increasing the likelihood of inequitable treatment of residents with disabilities across providers or properties. Timelines for reviewing requests and reaching decisions differed across participating housing providers, ranging from 15 days to 6 months or more. Thresholds for approving or denying requests run from quite lenient to very reserved. Some housing provider participants discussed starting from a position of yes and telling residents they would figure it out and do it, while others did not want to say yes immediately. Those with stricter thresholds had typically experienced conflicts with past requests, including conflicts with local laws or accommodations costing more than anticipated. Housing providers also discussed how reasonable accommodation decisions are made by different types of staff with different roles at a property, including facilities staff, a property manager, an agency director, legal counsel, and compliance staff. Some housing providers reported that their facility managers were empowered to make a set of common, low-cost accommodations, while others stated that every request was reviewed and approved by the same individual. Some housing providers said that their organization or agency had a clear appeals process for rejected requests, while other providers did not have such a process. If these agencies are typical, this lack of consistency could lead to inequitable processes and outcomes for residents making requests, as the same request could be approved by one housing provider and denied by another.

Federally assisted housing owners and managers lack sufficient training on the reasonable accommodation process and how to avoid bias in their decision making. Housing providers discussed their efforts to train staff on how to recognize reasonable accommodation requests, regardless of the form they come in, and make consistent decisions. Despite this training, some housing providers

mentioned challenges with staff approving requests for accommodations that were later deemed unreasonable by others in the organization. Housing providers also noted a tendency for staff to let past negative experiences affect new requests, instead of treating all requests at face value. Staff particularly struggled with maintaining objectivity when receiving the same types of requests at the same time from multiple residents. These types of inconsistencies and biases in staff decisions could prevent requests from residents with disabilities getting a fair response.

“We coach all of our staff to recognize if something may be a reasonable accommodation request, like someone talks about having trouble getting in and out of the tub but they may not necessarily be asking for something.... We tell our site staff to accept it in whichever way it comes.”

—housing provider participant

Challenges of Providing Services with Inadequate Resources

One goal of our research was to gain insight about service environments for disabled residents in federally assisted housing. While our research did not yield as much insight as intended, the handful of experts and service coordinators with whom we were able to speak highlighted challenges that are well-documented by other research (Sanders et al. 2022; Scally et al. 2021). These include the lack of alignment between housing and service systems, inadequate funding for providing on-site services, and lack of access to transportation and/or broadband internet required to access off-site services.

Housing and Services Are Two Fragmented Systems and Alignment Is Challenging

Our expert interviewees consistently emphasized how housing and services systems function independently, even though they must be connected to better serve residents with disabilities and to help them remain stable. Several examples of this disconnect were provided by our experts:

- Someone may find a unit with the right physical accommodations or design, but without the right services for their needs. If it takes too long to get services and available housing units to line up, the person with the disability will lose the unit to someone else. This raises the risk that the person with the disability may be institutionalized.
- Because there are often no service coordinators on site to provide case management, multiple outside case managers may need to come on site to provide services. It is challenging for a

housing provider to build relationships with every social worker working with an individual resident in their building.

- There is a physical fragmentation of services at the state and local level. Applicants need to go to one location to apply for tenant benefits, another to apply for health insurance, and yet another for transportation benefits.

Providers Struggle to Fund On-Site Services with Federal Funding

Our expert interviewees described funding challenges, particularly that there is no federal funding for onsite resident services and programs in federally assisted housing. This is partly due to assumptions that services are available and adequately funded in the community. There is an implicit expectation that housing authorities have onsite services and support, but funding remains a primary barrier. In some cases, housing authorities and project-based units receive funding for resident service coordinators, however, they are not always trained in serving people with disabilities and knowing the regulations and resident rights. The funding for service provision often comes from state funds and other sources, which housing authorities must piece together. Housing providers also must often rely on community partners to deliver services such as food assistance, transportation, and health care. The COVID-19 pandemic drove home many of these issues (Box 4).

BOX 4

COVID Has Highlighted Challenges, Such as the Need for Internet Access and On-Site Services

A service coordinator said that residents face challenges using technology to access information about the types of resources that are available: “Even though we have set up computers at different sites to help individuals, there is still a disparity in how often the computers are being used. This could be due to a lack of computer literacy or needing additional assistance.” Housing providers said that COVID increased isolation and exacerbated service-access issues for disabled residents. To help fill the gap, at least one housing provider hosted a vaccine clinic on site to enable tenants to access COVID vaccines, a common approach adopted by public housing agencies during the pandemic.

Source: Mica O’Brien and Susan J. Popkin, “Public Housing Authorities are Supporting Equitable Vaccine Distribution among Communities Hardest Hit by COVID-19,” Urban Wire (blog), May 4, 2021, <https://www.urban.org/urban-wire/public-housing-authorities-are-supporting-equitable-vaccine-distribution-among-communities-hardest-hit-covid-19>.

Residents Face Numerous Challenges in Accessing Transportation

Many research participants, including service coordinators, housing providers, residents, and expert observers, discussed how transportation is important to mobility, relationships, and accessing services. Resident focus group participants and expert interviewees noted how transportation is critical for access to basic needs. In some cases, public housing is located in communities without access to affordable, healthy food. In others, gentrification has caused affordable supermarkets and other

amenities to move out of neighborhoods and more expensive options to move in. In these cases, transportation is needed to access food and other necessities. Participants in the resident focus group discussed relying on relatives, friends, and neighbors for transportation because they lacked other options. Other research participants noted that even if transportation options were available, individuals with mobility impairments may struggle to access them. Multiple housing providers said they needed to purchase a wheelchair-accessible van to help their residents.

Both service coordinators who were interviewed described transportation as a primary barrier for residents who need to access services. They both suggested that transportation challenges can decrease residents' ability to access essential services and increase feelings of disconnect from their community. Tenants with mobility impairments may face additional challenges, such as being unable to come down to let a service provider into the building.

“When residents cannot access the transportation services, the residents are frustrated, and they feel cut off from services/resources and disconnected.”

—service coordinator participant

Recommendations for Improving Accommodations and Services Access

There are several ways to ensure more equitable processes and outcomes for disabled residents of federally assisted housing who need accommodations and access to services to live their healthiest lives without barriers. These include boosting funding, clarifying definitions and processes, and ensuring adequate training for housing providers.

Provide more federal funding for reasonable accommodations in federally assisted housing to allow housing providers meet legal requirements. Significant one-time outlays and/or an ongoing dedicated annual funding stream for housing providers to pay for accommodations would show the federal commitment to funding and enforcement of the law. An ongoing boost to public housing operating funds or project-based rental-assistance payments could cover the administrative costs associated with reasonable accommodation requests and ensure a fair response process. LIHTC properties without additional federal financial assistance may need additional supports to meet resident needs while balancing their budgets.

Establish a clearer standard for “reasonableness” to promote consistent access to accommodations across diverse federally assisted housing programs and providers. The law would be most effective if all residents were treated equally and could access the same accommodations from all housing providers receiving federal financial assistance. A clearer standard on financial and administrative burden would help. The standard could be part of a more adaptive policy on reasonable accommodation that performs well under both anticipated and unanticipated conditions and contexts and that has clear mechanisms for making adjustments when significant changes make the policy inefficient or ineffective (Carey et al. 2015). For example, the policy could have a review process when new funding or advancements in construction technology affect the policy.

As currently interpreted across a wide array of housing providers, the standard is uneven. When possible, public housing providers provide options to accommodate tenants, such as making an accommodation to their current residence, moving them to larger units, moving them to another property, or placing them on the waitlist for a voucher so they can find a unit on the private market that better meets their needs. But these options have underexplored cost implications for public housing agencies. The reasonableness threshold seems higher for some LIHTC properties, which have fewer options to offer tenants within a single property and can lack operating support dollars. As the largest source of affordable rental housing in the US, LIHTC properties should not face budget constraints in implementing reasonable accommodations for their tenants with disabilities.

Increase uniformity in reasonable accommodation request processes to ensure equitable treatment and outcomes for residents with disabilities. There is no federally prescribed process for reasonable accommodations requests. The lack of uniformity puts the burden of knowing the many rights and processes on residents with disabilities. For housing providers, the desire to avoid discrimination and legal challenge is high, but clear procedural guidance on how to protect against such challenge is low. In addition to the lack of clarity on what is “reasonable” (discussed above), the process is marred with uncertainties, including the following:

- how to proactively conduct outreach to residents with disabilities to inform them of their rights, the available housing choices, and the reasonable accommodation request process
- how and when to match resident needs with available accessible units
- how to identify a reasonable accommodation request when tenants do not use those exact words to communicate their needs
- whether and how to work with medical providers on assessing needs and determining the best accommodation while respecting tenant privacy
- how to treat each request fairly and without bias
- how to access counsel from HUD or other legal authorities on whether a proposed accommodation is in violation of the law prior to implementing it
- how to implement accommodations in the least disruptive way to residents with disabilities

There are practical differences across housing providers that make it difficult to develop and implement a completely uniform process. These include property size, staffing, building age and structure, budget, and the hard-to-predict needs of residents with diverse disabilities. However, a set of standards developed in concert with housing providers, disability advocates, and residents with lived experience could lay out viable process considerations for different scenarios.

Train and involve more than one person per housing provider and property in reasonable accommodation request decisions to create a more transparent and fair process. One housing provider in our focus group highlighted the importance of consistency, including laying out an explicit policy and making sure residents are aware of it. They underscored the importance of training site managers to improve their confidence in implementing reasonable accommodation requests. Other participants suggested that facilities management staff could be trained to make a set of easy, low-cost accommodations without needing approval from a manager or compliance staff. For more involved or costly requests, a clear review process that engages multiple staff would ensure consistency and fairness. One participant also suggested having an unbiased third-party, other than the resident and the property manager, review every request to help eliminate bias and ensure consistency.

Improve training, technical assistance and learning opportunities for housing providers to strengthen reasonable accommodation request processes. Providers noted a lack of resources available for troubleshooting challenges and workshopping solutions. They noted a need for clearer examples of standards and processes, as well as access to targeted technical assistance on reasonable accommodations and fair housing practices. Focus group participants said they appreciated participating in the focus group, suggesting value in peer learning experiences that bring providers together to share ideas and learnings, or even establish a community of practice.

Improve relations between housing managers and tenants with disabilities. Housing providers in our focus groups acknowledged the need for more staff training and technical assistance on trauma-informed approaches to management and service delivery for tenants with disabilities. They also noted shortcomings in how they communicated with residents during the reasonable accommodation request process, saying they could provide status updates more frequently to residents who are awaiting important answers.

On the tenant side, residents with disabilities want to be given the attention and help they need when they ask for assistance, without being viewed as a burden. To help facilitate communication and resolve issues, housing providers could appoint an ombudsman for addressing housing complaints.

Give housing providers access to adequate resources to help address residents' service and support needs. We know from other research that service coordinators play a vital role in helping disabled residents access social, health, and behavioral health services (Sanders et al. 2022; Scally et al. 2021). All housing providers who serve these residents need access to funding that allows them to hire service coordinators who can be on their properties for a sufficient number of hours and maintain manageable caseloads—currently a single service coordinator may serve hundreds of households. Having more service coordinators would create the time to build trust, understand resident needs, help

residents apply for necessary services and supports, and follow up to ensure residents have the services they need. More specific needs include:

- Funding to support staff who help develop and maintain partnerships with community organizations and who provide guidance, supervision, and quality assurance of service coordinator activities.
- Funding to support on-site programming, such as helping expand residents' digital literacy and access to technology on site, which could support residents' social connections and access to services and benefits.
- Communication resources to assist housing applicants and residents who do not speak English, are Deaf, or have other communication disabilities.

Ideally, Congress and HUD should provide housing providers with sufficient funding to help support service-related needs. They should also explore funding collaborations with other federal agencies that serve residents living in public housing and that receive mutual benefit from residents receiving on-site services. Housing providers also need guidance in seeking out philanthropic or state grants that can provide funding for additional programming and, if they undertake redevelopment, for building service endowments into their financing plans.

Notes

¹ We did not focus on properties designated to serve only older adults or people with disabilities, including supportive housing programs such as Section 811 or older-adults-only properties financed through Section 202. These often have other resources available to support services. We also did not look at the voucher program that helps people pay rent owed to private landlords.

² "Section 504: Frequently Asked Questions," US Department of Housing and Urban Development, accessed August 9, 2022, https://www.hud.gov/program_offices/fair_housing_equal_opp/disabilities/sect504faq

³ "Disability and Health Overview: Impairments, Activity Limitations, and Participation Restrictions," Centers for Disease Control and Prevention, accessed on September 11, 2022, <https://www.cdc.gov/ncbddd/disabilityandhealth/disability.html>; "Disabilities: Definitions, Types and Models of Disabilities," Disabled World, accessed September 11, 2022, <https://www.disabled-world.com/disability/types/>

⁴ "Picture of Subsidized Housing, 2021," US Department of Housing and Urban Development Office of Policy Development and Research, accessed on September 11, 2022, <https://www.huduser.gov/portal/datasets/assths.html>

⁵ "Section 504: Frequently Asked Questions," US Department of Housing and Urban Development, accessed August 9, 2022, https://www.hud.gov/program_offices/fair_housing_equal_opp/disabilities/sect504faq

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About the Authors

Corianne Payton Scally is a senior fellow in the Metropolitan Housing and Communities Policy Center.

Ebonie Megibow is a research analyst in the Metropolitan Housing and Communities Policy Center.

Susan J. Popkin is an institute fellow in the Metropolitan Housing and Communities Policy Center.

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Washington, DC 20024

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