

**Employment, Labour and Social Affairs
Policy Briefs**

**A crisis on the horizon:
Ensuring affordable, accessible
housing for people with disabilities**

Please cite as: OECD (2021), "A crisis on the horizon: Ensuring affordable, accessible housing for people with disabilities", Employment, Labour and Social Affairs Policy Briefs, OECD, Paris.
oe.cd/il/housing-disability-2021

Webpage url: oe.cd/ahd

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Funded by the European Union Programme for Employment and Social Innovation "EaSI" (2014-2020).

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Co-funded by the
European Union

A crisis on the horizon: Ensuring affordable, accessible housing for people with disabilities

Employment, Labour and Social Affairs Policy Briefs



People with disabilities continue to struggle to access affordable, accessible housing and face big financial and informational barriers in the housing market. There is a shortage of accessible housing solutions that enable them to live safely and independently, and insufficient attention to the design features that make housing liveable for people with a broad range of physical, mental, intellectual and sensory impairments.



Around one in four people in OECD and EU countries report some form of disability that limits their everyday activities. Compared to the population without disabilities, people with disabilities tend to be older, live alone, have lower incomes and are more likely to be overburdened by housing costs.



The challenge will intensify in the coming decades, as population ageing accelerates and chronic diseases affect more people. Yet despite the growing scale of the challenge, issues around housing for people with disabilities remain under-researched and underfunded.



This brief takes a broad view of people with disabilities, addressing the housing challenges and needs of people with different *types of impairments*, different *severity levels of impairment*, as well as, data permitting, *adults of all ages* who report a disability. Accordingly, the population covered in the brief, and the type and extent of their housing needs, is highly heterogeneous.



Most countries provide both mainstream housing supports (such as social housing and housing allowances), as well as disability-specific housing supports (including financial support for accessibility upgrades, support services to enable people with disabilities to live independently, and housing expertise and advice). But it is unclear how much countries invest in accessible housing or how many people benefit from existing housing supports.



There is a long way to go to ensure that people with disabilities are able to access affordable, accessible housing solutions. The issue warrants much more attention to fill persistent data, knowledge and funding gaps. Policy actions could include:

- ▶ Improve the evidence base on people with disabilities, their housing needs and the extent to which current public supports meet their needs.
- ▶ Develop tools to match people with available accessible housing and supports.
- ▶ Strengthen accessibility standards that apply to new residential construction and consider minimum accessibility requirements to renovations that exceed a certain threshold, as well as those that benefit from public financial support.
- ▶ Provide financial incentives, as well as direct financial support, such as loans and income-tested grants, to make existing housing more accessible and suited to the diverse needs of people with disabilities.
- ▶ Pursue integrated approaches to housing and support needs that span different policy domains, including, *inter alia*, health, transport, long-term care and the labour market.
- ▶ Ensure that people with disabilities benefit from increased investments in accessible, affordable and social housing.

1. What is the housing situation of people with disabilities?

For people with disabilities, the ability to live in accessible housing that is suited to their needs can provide a solid foundation for their economic security, health, well-being and independence (see Box 1.2). Recent decades have seen growing international consensus to enable people with disabilities to choose where, how and with whom they live. The United Nations Convention on the Rights of Persons with Disabilities, adopted in 2006, established that people with disabilities should be able to enjoy all human rights and fundamental freedoms, and that adaptations should be made to enable people with disabilities to fully exercise their rights – including in the housing market. Goal 11 of the Sustainable Development Goals emphasises the need for stronger inclusion of people with disabilities in all spaces of public and private life, while the 2018 UN Flagship Report on Disability and Sustainable Development Goals highlighted the housing situation of people with disabilities as a key challenge for the next decade. In sum, there is clear international support to promote greater independence and choice in the housing market for people with disabilities.

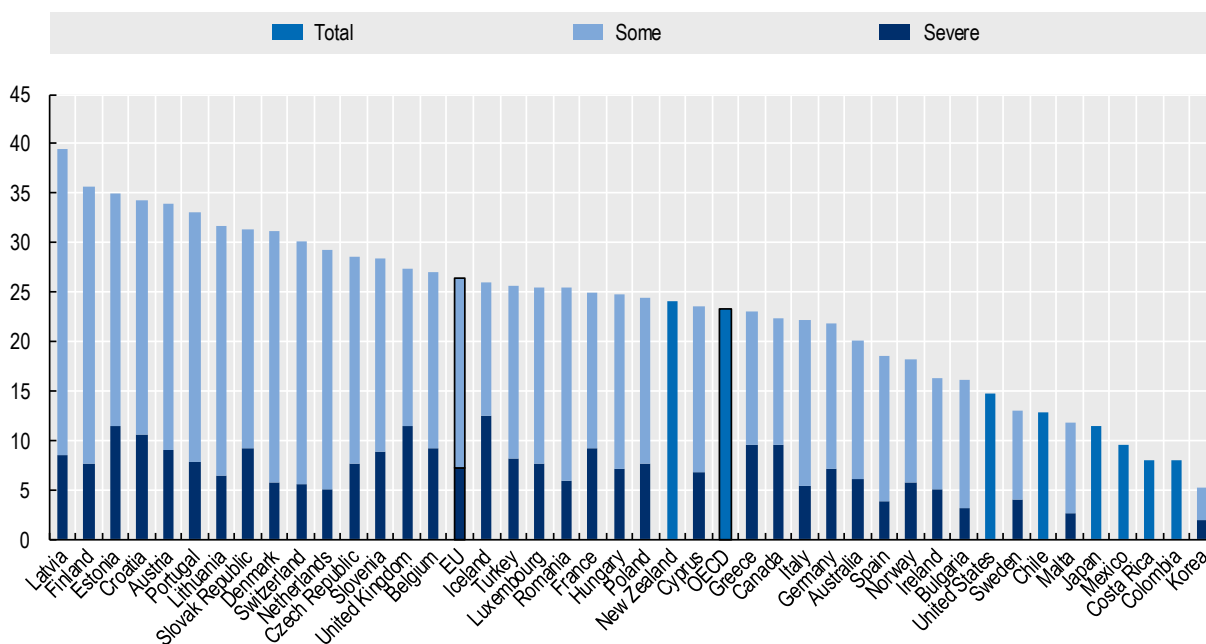
Yet across OECD and EU countries, people with disabilities continue to struggle to access affordable, accessible housing. First and foremost, there is a lack of accessible housing solutions that enable people with disabilities to live safely and independently in private dwellings, and insufficient attention to specific design features that can make housing accessible and liveable for people with a broad range of needs. These include, for instance, mobility-related features in and around the dwelling for people with reduced mobility, or those with sensory (sight, hearing) impairments (such as no-step entries, guardrails, ramps or open floorplans). For people with intellectual, cognitive or sensory disabilities, attention to lighting and sounds, the incorporation of tactile design features as well as household features that are generally easy to manipulate and operate in and around the dwelling are especially important. In addition, people with more complex needs often require additional support services to ensure that they can live safely and independently at home, but it can be a challenge to identify their needs, to secure quality services, and to pay for such support.

Beyond a shortage of suitable, accessible housing, many people with disabilities also face considerable financial and informational barriers in the housing market. Housing costs are the biggest household spending item and have been growing for most households (OECD, 2021^[1]). Moreover, people with disabilities are more likely to have a low income (especially, but not only if their impairment prevents them from working), making it harder to afford housing and related services that meet their needs, or to pay for necessary dwelling adaptations. Physical and financial barriers are compounded by informational barriers: it is often difficult for people with disabilities to find suitable housing because up-to-date information on the available stock of housing options is not readily available. Even when suitable housing exists, it is not necessarily inhabited by people who require such amenities.

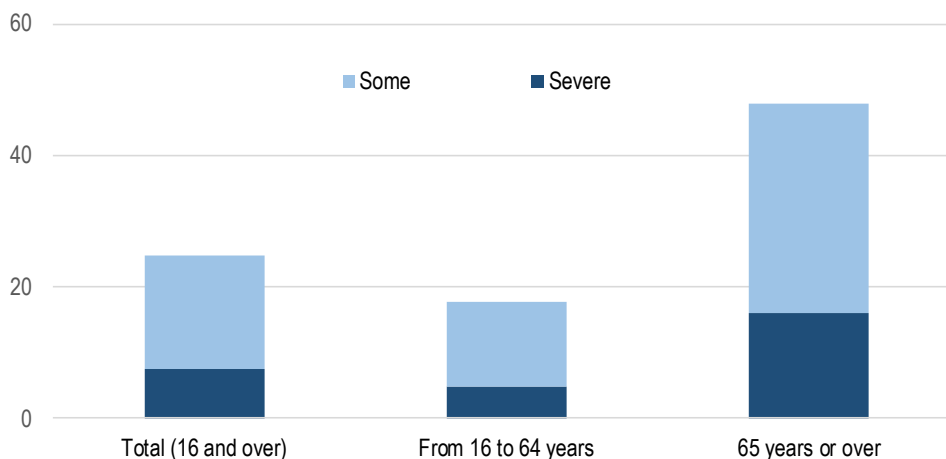
The challenge is not minor and is expected to grow in the coming years. At present, around one in four people aged 16 and over in the OECD and EU report living with some form of disability that limits their participation in everyday activities, with important differences across countries (Figure 1.1 – Panel A). The vast majority are seniors. Just under half of people aged 65 and over report a disability, compared to around 18% of the working-age population – although, on average, the severity of disability does not dramatically increase with age (28% of the working-age population with a disability report severe activity limitation, compared to 32% of seniors) (Figure 1.1 – Panel B). The population with disabilities will continue to grow in the coming years, as population ageing accelerates and chronic disease affects more and more people. By 2050, around 28% of the OECD population will be over 65 years old, compared to just over 18% today (United Nations, 2019^[2]). In light of the widespread preference to remain at home for as long as possible – or to “age in place” – major adaptations will be required to the dwelling stock to meet households’ changing needs.

Figure 1.1. Around one in four people report a moderate vs. severe level of disability in OECD and EU countries – many of whom are seniors

Panel A. Percentage of adults who report to be limited or strongly limited in activities because of health problems, or who reported a disability, 2019 or last year available



Panel B. Percentage of adults aged 16 and over who report being limited in their daily activities because of health problems by level of limitation by age group, EU average, 2019 or last year available



Note: Panel A: Data reported draw on EU-SILC for European countries, and on national surveys for non-EU countries; therefore they are not always fully comparable. For European countries: people with disabilities are defined as people reporting to be limited or strongly limited in activities because of health problems. For Australia, disability refers to "any limitation, restriction or impairment which restricts everyday activities and has lasted, or is likely to last, for at least six months". For Canada, the Canadian Survey on Disability (CSD) targets respondents who not only have a difficulty or impairment due to a long-term condition or health problem but also experience a limitation in their daily activities; the CSD definition of disability includes anyone who reports being "sometimes", "often" or "always" limited in their daily activities due to a long-term condition or health problem, as well as anyone who reported being "rarely" limited if they are also unable to do certain tasks or can only do them with a lot of difficulty. Data for Colombia refer to people who have difficulty in carrying out a few basic, universal activities in a scale of 1 to 4. Information is

Note by Turkey: The information in this document with reference to "Cyprus" relates to the southern part of the Island. There is no single authority representing both Turkish and Greek Cypriot people on the Island. Turkey recognises the Turkish Republic of Northern Cyprus (TRNC). Until a lasting and equitable solution is found within the context of the United Nations, Turkey shall preserve its position concerning the "Cyprus issue".

Note by all the European Union Member States of the OECD and the European Union: The Republic of Cyprus is recognised by all members of the United Nations with the exception of Turkey. The information in this document relates to the area under the effective control of the Government of the Republic of Cyprus.

presented of person with disability according to the recommendation of the Washington Group, which identifies people with disabilities as those who report severity levels 1 or 2 in any of the activities. For Chile and Mexico, people with disabilities are defined as people who report either difficulties to 1) Walk, move, go up or down; 2) See, even wearing glasses; 3) Talk, communicate or converse; 4) Hear, even with hearing aid; 5) Dressing, bathing or eating; or 6) Pay attention or learn simple things. Otherwise people without disabilities are defined as those who reported having no physical or mental difficulty. Data for Japan in this survey refer to people who report chronic restrictions in daily activities. For Korea, legally defined disabilities include the following: physical disability, brain lesion, visual impairment, hearing impairment, speech impairment, intellectual disability, autism, mental disability, kidney dysfunction, cardiac dysfunction, respiratory dysfunction, hepatic dysfunction, facial dysfunction, intestinal-urinary dysfunction and epilepsy (15 types in total). For New Zealand, disability is defined as any self-perceived limitation in activity resulting from a long-term condition or health problem lasting or expected to last 6 months or more and not completely eliminated by an assistive device; people are not considered to have a disability if an assistive device such as glasses or crutches eliminated their impairment. For the United States, people with disabilities are defined as any one reporting at least one of six disability types: hearing difficulty (deaf or having serious difficulty hearing); vision difficulty (blind or having serious difficulty seeing, even when wearing glasses); cognitive difficulty (because of a physical, mental, or emotional problem, having difficulty remembering, concentrating, or making decisions); ambulatory difficulty (having serious difficulty walking or climbing stairs); self-care difficulty (having difficulty bathing or dressing); or independent living difficulty (because of a physical, mental, or emotional problem, having difficulty doing errands alone such as visiting a doctor's office or shopping). Data for Costa Rica refer the adult population experiencing difficulties in carrying out basic activities of daily living; disability is defined as any self-perceived limitation in activity resulting from a long-term condition or health problem lasting or expected to last 6 months or more and not completely eliminated by an assistive device. Data for Australia and Canada refer to the population aged 15+; for EU countries, Chile, Mexico and the United States to the population aged 16+; for Costa Rica and Japan to population aged 18+; and for Colombia, Korea and New Zealand to the total population. For further discussion, see (Plouin et al., 2021^[3]). OECD and EU averages refer to unweighted averages. The present publication presents time series which end before the United Kingdom's withdrawal from the European Union on 1 February 2020. The EU aggregate presented here therefore refers to the EU including the UK. In future publications, as soon as the time series presented extend to periods beyond the UK withdrawal (February 2020 for monthly, Q1 2020 for quarterly, 2020 for annual data), the "European Union" aggregate will change to reflect the new EU country composition.

Source: Panel A: OECD calculations based on EU-SILC for European countries, QuASH 2021 (Australia, Australian Bureau of Statistics (ABS 2018), Statistics Canada, Canadian Survey on Disability, 2017, Colombia Ministry of Health and Social protection (2019), Costa Rica National Survey on Disability (ENADIS 2018), Korea: Disability Survey 2017 (KIHASA), Statistics New Zealand (Disability Survey 2013), Chile (CASEN 2017), Mexico (ENIGH 2018), Japan (JHPS 2018), United States American Community Survey (ACS2019). Panel B: EU SILC-Eurostat 2019.

This brief intentionally takes a broad view of people with disabilities. This corresponds to growing international consensus, as well as national statistical approaches, that defines disability beyond a purely medical or impairments-based approach, to also incorporate the social and environmental factors that affect an individual's ability to participate in everyday activities (for further discussion of definitions, including those developed by the United Nations and the World Health Organization, refer to the OECD Affordable Housing Database and Plouin et al. (2021^[3])). This brief focuses on the adult population with disabilities living outside institutions, drawing on data from the European Union Survey of Income and Living Conditions (EU-SILC), national population census and dedicated disability surveys, as well as country responses to the 2021 OECD Questionnaire on Affordable and Social Housing (QuASH). It covers people with different types of impairments (e.g. physical, sensory, intellectual and/or psychosocial), different severity levels of impairment (from moderate to severe limitations in everyday activities), and, data permitting, adults of all ages who report a disability (from young adults to the elderly). As a result, the population covered in this brief, as well as their needs for housing support and related services, is highly heterogeneous.

For some people with disabilities, mainstream housing policy supports, such as social housing or housing allowances, can be sufficient to overcome housing market barriers, provided that they are accessible. However, mainstream supports are not always enough. As will be discussed, evidence suggests that social housing is not always accessible or suited to the needs of people with disabilities, while housing allowances can fall (well) short of making housing affordable for people with disabilities who cannot work and/or who have a low income. The provision of financial support, such as grants and loans, to enable people to modify their dwellings is necessary for many people with a range of physical, mental, intellectual or sensory impairments, as well as for ageing households to enable them to age in place. Meanwhile, people with more complex needs may also require housing-related services (e.g. to prepare food, to get dressed) that enable them to live safely and independently.

While progress has been made to broaden our understanding of disability, significant data and knowledge gaps remain. A cross-national assessment of the extent of disability in OECD and EU countries is challenged by differences in prevailing definitions, as well as widespread and persistent data limitations (see the OECD Affordable Housing Database and Plouin et al. (2021^[3]) for an overview of the issues). Importantly, official statistics on disability leave some people out – namely children and people living in institutions, neither of whom are included in household survey data. Data on the beneficiaries of long-term care can provide an imperfect estimate of the size of the institutionalised population in OECD countries (Box 1.1). Further, based on the OECD QuASH, only eleven countries currently report data on disability by different types, and the categories differ across countries. In terms of the housing stock, comprehensive cross-country data to assess its physical accessibility are lacking, and there is little consensus on what constitutes "accessible." The recent adoption of the European Standard EN 17210 on the accessibility of the built environment is an important step forward.

Box 1.1. Estimating the number of people with disabilities living in institutions, drawing on long-term care data

Because household surveys do not cover people living in institutionalised settings, data on long-term care recipients can provide an imperfect estimate of the share of people who are not in a position to live independently. However, it is not possible to ascertain from long-term care data the number of people living in institutions who also report a disability. EU-SILC data for Europe suggest that around three-quarters of households with a member in need of long-term care has a disability.

Today, the OECD population living in institutions outside hospitals accounts for over 6 million people in the 32 countries for which data are available – representing less than 1%, on average, of the total population across countries (OECD, 2019^[4]). Despite the avowed political shift away from institutional settings, the increasing number of elderly people have led to an increase in the institutionalised population in some countries. Seniors aged 65 and over make up around 86% of the total institutionalised population, representing around 4% of all seniors aged 65 and over. Moreover, the majority (57%) of seniors living in institutions are over age 80, representing around 11% of all seniors aged 80 and over. Meanwhile, working-age adults (aged 18 to 64) make up around 12% of the total institutionalised population, on average. In 18 countries for which data are available, around 21 000 children under age 18 live in institutions (including but not limited to children with disabilities), representing less than 0.5% of the total institutionalised population.

Source: : (OECD, 2019^[5]; OECD, 2019^[4]; OECD, 2020^[6])

While many countries have policies in place to support accessible and affordable housing for people with disabilities, it is unclear how much countries invest in housing for people with disabilities, and how many families benefit from such support. Despite the scale of the challenge, persistent and significant data, knowledge and funding gaps remain.

This brief is organised into three sections:

- ▶ **Section 1** summarises the primary housing outcomes of people with disabilities, relating to housing accessibility, affordability and living arrangements.
- ▶ **Section 2** discusses existing policy supports in OECD and EU countries to enable people with disabilities to be safely, affordably and independently housed.
- ▶ **Section 3** outlines a series of recommended actions for policy makers to improve housing outcomes for people with disabilities.

1.1. The housing stock falls well short of meeting the needs of people with disabilities – a challenge which is likely to worsen in time as the population ages

The heterogeneity of the population with disabilities, in terms of the type and severity of impairment, means that there is no “one-size-fits-all” housing solution. It also makes it difficult to comprehensively assess the suitability of the existing housing stock, given the wide range of features that can make housing and the surrounding environment liveable for people with very different impairments. Several challenges stand out: a lack of dwellings that are accessible to people with disabilities, including people with reduced mobility; a shortage of alternative living arrangements that meet the needs of people with diverse needs; and the general challenge of providing integrated housing-related and community services to people with more complex needs. A comprehensive assessment of the accessibility of the housing stock is hampered by persistent data gaps.

1.1.1. There is a shortage of accessible housing for people with disabilities, including people with reduced mobility, who need specific physical adaptations, though data are patchy.

A number of adaptations to dwellings and the surrounding environment are necessary for people with diverse impairments. These can include various design features relating to a person’s mobility, as well as his or her overall well-being and possibility to function in the dwelling. For instance, for people with reduced mobility or those with sensory (sight, hearing) impairments, the physical characteristics of dwellings and the surrounding

environment can render them impracticable without specific design adaptations, such as no-step entries, guardrails and open floor plans that facilitate movement. As people age and are more likely to develop multiple impairments, they can face increasing difficulty to climb stairs, get into the shower or use kitchen counters (Vespa, Engelberg and He, 2020^[7]). Meanwhile, for people with intellectual, cognitive or sensory impairments, specific attention to the management of light and sound (well-lit spaces, sound-reducing windows), tactile design features, as well as the ease of use of various household objects (doorknobs, cords, light fixtures, heating systems) within the home are especially important. Such features can be fairly easily accommodated in the design phase of the dwelling, but in many cases are not regularly considered.

Unfortunately, comprehensive, comparable cross-country data on the accessibility of the existing housing stock do not exist. This is due, in part, to definitional differences in what constitutes an “accessible” dwelling (Box 1.2), distinctions between voluntary standards and legal obligations, as well as the absence of regular, up-to-date housing accessibility assessments. A handful of countries have conducted an accessibility assessment in recent years, reporting data on the approximate share of dwellings that meet at least some physical accessibility or barrier-free features, though the coverage varies widely:

- ▶ According to Sweden’s National Board of Housing, Building and Planning’s housing market survey for 2020, more than half of municipalities report a deficit in suitable housing for people with disabilities (OECD 2021 QuASH).
- ▶ Less than half of multi-family buildings in Austria – which make up roughly 46% of the total dwelling stock (OECD, 2021^[5]) – are equipped with elevators, making them potentially wheelchair accessible (OECD 2021 QuASH).
- ▶ Less than 10% of the housing stock in the Slovak Republic had reduced barriers in 2011, compared to around 1.5% of the housing stock in Germany in 2019 (OECD 2021 QuASH).
- ▶ An Australian survey found that nearly three-quarters of households with a member with a disability lived in housing that did not meet, or only partially met, their needs (Wiesel, 2020^[9]).
- ▶ A recent assessment in the U.S. on “ageing accessibility”, which focused on mobility-related features, found that while most dwellings had at least one ageing-accessible feature, only about 10% were “ageing-ready”, in having a step-free entryway, a bedroom and bathroom on the ground floor, and at least one bathroom accessibility feature (Vespa, Engelberg and He, 2020^[7]).

In light of these country-specific assessments, it is safe to assume that a minority of the existing housing stock is accessible and adapted to the needs of people with reduced mobility. Comprehensive, cross-country data on the extent of other disability-sensitive design features in the housing stock (relating to lighting, sound or tactility) do not exist.

1.1.2. Alternative housing and living arrangements may be suitable options for some people with disabilities.

Nonetheless, accessible housing goes well beyond physical adaptations to dwellings. In several OECD countries, small supported group settings integrate tailored services to support daily living. In the United States, for instance, small group settings designed for people with autism and Asperger’s are being piloted, driven largely by the parents of children with mental and intellectual disabilities, in response to the absence of suitable housing opportunities in the private market. Such communities differ in their size and scope, but may offer, in addition to independent housing in a small community environment, life skills training and educational activities, in addition to other integrated services and supports. There may also be other communal facilities, including art, sports and recreational spaces, group kitchens, a library or even farms.

While there is an intentional focus on the collective aspect of such living arrangements, these environments nonetheless represent a departure from formal institutional settings, as they aim to enable people with a range of needs and capabilities to live independently, facilitate social interactions and engage with the broader community. Innovative approaches to develop smaller, community-based housing have also emerged in France and the United Kingdom. However, such opportunities are not widely available (less than 1 000 such units, including those in the planning stages, existed in the U.S. in 2019 (Bernick, 2019^[10])), nor are they always affordable.

Box 1.2. What is “accessible” housing?

There is no universal definition of what constitutes an “accessible” dwelling. The main principles of accessibility can be summarised as construction and design that facilitates i) easy entry and exit from the dwelling; ii) easy navigation and functionality within and around the home; and iii) relatively easy and cost-effective solutions to adapt the housing to changing needs of residents over time (Wiesel, 2020^[9]). Various approaches reflect the degrees to which housing can be considered liveable for and adapted to the needs of people with different types and severity of disability; the universal design approach reflects the broadest conception of designing for people with a range of needs, including people with disabilities:

- ▶ **Wheelchair-accessible housing** refers to housing that enables wheelchair-bound individuals’ full mobility to access and move around within the dwelling. This means that inside the dwelling, bathrooms, kitchens and bedrooms must be sufficiently large to facilitate the 360-degree turn of a wheelchair, and adaptations are required in kitchens to ensure that appliances and workspaces are accessible to wheelchair users. This also means that access to the dwelling is wheelchair-accessible, for instance via a step-free entryway or ramp.
- ▶ **Universal design**: Universal design takes a broader approach to design and aims to ensure that housing and all other aspects and activities of everyday life are accessible to people of a wide range of characteristics, including age, height and type of disabilities. Universal design is so named because its features aim to make housing, products and public spaces more usable, safe and comfortable for everyone, including children, families, seniors and people with disabilities. Universal design covers all features of barrier-free design, in addition to others, such as automatic

Throughout this brief, “accessible housing” should be understood in the broadest sense, following the universal design approach. This includes adaptations to facilitate the movement of people with reduced mobility, in addition to other design features that enable people with a wide range of physical, cognitive, sensory and other impairments to live safely and independently in private dwellings.

1.1.3. The provision of household services is essential to help some people with disabilities live safely and independently at home, whilst maintaining connections to the community.

Moreover, as discussed further in Section 2, housing support for people with disabilities also includes a range of formal and informal support services provided in the home and in the community to help with everyday activities and maintain social engagement. Such services are essential to ensure that people with disabilities, including seniors as they age, can live safely and independently at home, and avoid transitioning to more institutional settings. Home services may include, inter alia, support with self-care, mobility, cognitive or emotional tasks, health care, household chores, property maintenance, meal preparation or community transport services. In many countries, additional services (such as day centres) are offered outside the home, in order to provide people with disabilities opportunities to build and maintain social networks and engage with the community. The types of support needs vary depending on the type and severity of the disability. Nonetheless, it can be a challenge to reach this population (for instance, especially those living in rural areas), to secure the diverse range of quality services required, and to pay for such support.

1.1.4. Demand for accessible housing will grow in the future

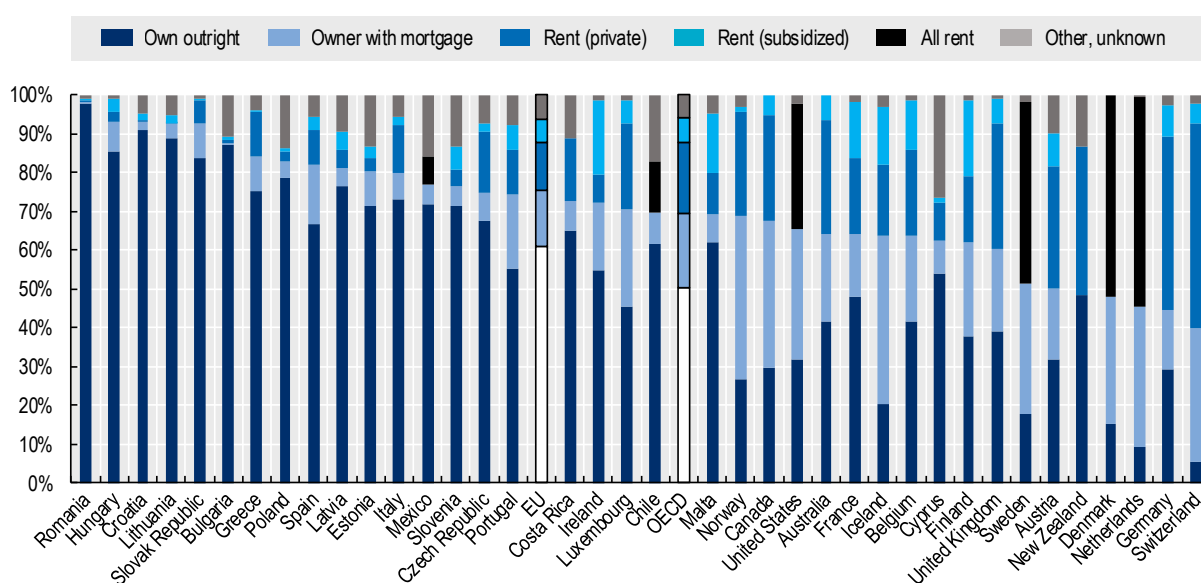
The demand for accessible housing and related support services that are accessible to people with a range of impairments will increase in future. The share of people with disabilities will grow, as population ageing accelerates and chronic disease affects more people. By 2050, around 28% of the OECD population will be over 65 years old, on average, compared to just over 18% today. In many countries, the scale of much-needed adaptations to housing and public spaces will be significant in a relatively short period of time (OECD, 2019^[5]).

1.2. In most countries, the majority of people with disabilities live in owner-occupied housing, yet data limitations hamper a more complete understanding of housing tenure

As is the case for the population as a whole in OECD and EU countries, the vast majority of people with disabilities live in owner-occupied housing in most – but not all – countries (Figure 1.2). The large share of seniors among the population with disabilities is one factor, given that older people are more likely to be outright homeowners than other age groups as they have had more time to pay off their mortgage. Moreover, given that the prevalence of disability increases with age, the impairments of some elderly homeowners with disabilities likely appeared later in life. Yet age is not the only factor. Because most tenure data are reported at the household level, it is not possible to determine whether it is the person with a disability who owns the dwelling, or whether s/he lives with the homeowner (who may be a partner, parent or child, or someone else). Country studies report that some people with disabilities continue to live at home with ageing parents well into adulthood, due in part to the shortage of affordable alternatives that are adapted to their needs. Data from the United Kingdom, for instance, which assess housing tenure at the individual, rather than household, level find that people with disabilities are less likely to own their home than people without disabilities of the same age, and that adults with disabilities (aged 25 to 54 years old) are more likely to live with their parents (Office for National Statistics (United Kingdom), 2019^[11]). Efforts to collect data on housing tenure at individual level in other countries would help to fill these data gaps.

Figure 1.2. Most people with disabilities live in owner-occupied housing, on average

Share of adults with disabilities in different tenure types, in percent



Notes: See note in Figure 1 for definitions and scope of disability. 1. Tenants renting at subsidised rent are lumped together with tenants renting at private rent in Chile, Denmark, Mexico, the Netherlands and the United States, and are not capturing the full extent of coverage in Sweden due to data limitations. Data for "Other, Unknown" category is not available for Australia and Canada. 2. Data are not fully comparable between EU and others countries. For definitions of disability, refer to (Plouin et al., 2021^[3]).

Source: OECD calculations based on EU-SILC for European countries, QuASH 2021 (Australia, Australian Bureau of Statistics (ABS 2018), Statistics Canada, Canadian Survey on Disability, 2017, Costa Rica (Conapdis-INEC 2018)), Chile (CASEN 2017), Mexico (ENIGH 2018), United States American Community Survey (ACS2019)).

While owner-occupied housing is the most common form of tenure among people with disabilities in most countries, other forms of tenure bring additional challenges. Australia, Germany, New Zealand, Switzerland, the United Kingdom and the United States report a large share of people with disabilities in the private rental market. Renters with disabilities can face dual affordability and accessibility challenges: not only have rent prices risen considerably in recent years (OECD, 2021^[11]), major accessibility improvements can be harder to introduce to rental dwellings. Moreover, standard tenure collection methods and classifications do not fully capture the range of living situations among people with disabilities, such as the alternative housing and living

environments discussed above, designed to support people with different types and levels of severity of disability (e.g. supportive housing).

1.3. People with disabilities are more likely to be overburdened by housing costs and face other financial difficulties.

People with disabilities are slightly more likely to be overburdened by housing costs and to face other financial difficulties, compared to people without disabilities. On average, around 11% of people with disabilities in the OECD spend over 40% of their disposable income on housing costs and are thus considered “overburdened” by housing costs, compared to around 9% of people without disabilities (see indicator HC4.2 in OECD Affordable Housing Database; (Plouin et al., 2021^[3]). Many people with disabilities also face other financial challenges. In the EU, around 13% of people with disabilities report great difficulty in making ends meet – almost double the share of people without disabilities (7%). People with disabilities are also at a higher risk of poverty (28%), compared to the population without disabilities (18%) – the threshold is set at 60% of the national median equivalised disposable income after social transfers (Eurostat, 2021^[12]). The higher overburden rate and financial challenges facing people with disabilities is in part due to barriers in the labour market, which reduce their purchasing power and exacerbate affordability issues. Balancing the accessibility and affordability objectives to provide housing that is adapted to the needs of people with disabilities is a major challenge for policy makers (Box 1.3).

Box 1.3. Balancing affordability and accessibility objectives for housing for people with disabilities

Developing housing solutions and services that are both accessible and suited to the needs of people with disabilities, as well as affordable to a population that tends to face greater financial hardships, is a major challenge for policy makers. This challenge has multiple dimensions.

First, in most countries, there is simply not enough affordable housing overall (see (OECD, 2021^[11]). Waiting lists for social housing are long, and even when people with disabilities are considered priority cases – as is the case in 19 countries (see indicator PH4.3 in the OECD Affordable Housing Database) – they may still wait years for suitable housing. The scale of the housing shortage for people with disabilities cannot be understated. For instance, in early 2021 the French government announced a EUR 90 million commitment to accelerate the development of adequate housing solutions in France for the more than 6 000 French adults with significant disabilities who receive public support to cover the costs of housing and support services that they receive across the border in Belgium (Secrétariat d'Etat Chargé des Personnes Handicapées, 2021^[12]; Agence Régionale de Santé Hauts-de-France / Grand-Est, 2019^[13]; Inspection générale des affaires sociales, 2016^[14]).

Second, adaptations to existing dwellings require additional financial resources – which, depending on the scale of the adaptation – can make them out of reach for very low-income households, particularly if such interventions are not fully covered by public supports. While not all types of housing adaptations require expensive investments (installing grab bars, handrails or ramps, adding tactile design features or improving lighting or sound management may be feasible at limited costs, for instance), the costs for families of people with disabilities to ensure suitable housing for a family member with limited or no income can be extremely high over a lifetime. In the United States, for instance, tax-free savings accounts in commercial banks have been introduced to encourage families of children with disabilities to begin saving early to pay for suitable housing when their child turns 22 years old, when a range of public supports expire, signifying a major policy support gap (Joint Center for Housing Studies of Harvard University, 2016^[15]).

1.4. Overcrowding is slightly less prevalent among people with disabilities, as they are more likely to live alone.

People with disabilities are slightly less likely than people without disabilities to live in overcrowded housing conditions (13% vs. 15%, on average; for definition of overcrowding, see indicator HC2.1 in the OECD Affordable Housing Database). However, people with disabilities are more likely to live alone. More than one

in three people with disabilities live alone, compared to less than one in five people without a disability. This trend is not only driven by elderly with disabilities who live alone; it also holds among working-age people with disabilities. Evidence from Australia, for instance, finds that people with disabilities are more likely than those without disabilities to live alone or as single parents, and less like to live with a spouse or partner (Australian Institute of Health and Welfare, 2020^[16]). The large share of single-person households may put people with disabilities at a higher risk of social isolation and point to a potential gap in informal support from family members; such risks became an even bigger concern during the COVID-19 pandemic (Box 1.4). More research is needed to understand how different forms living arrangements contribute to the well-being of individuals with disabilities.

Box 1.4. The COVID-19 pandemic brought both familiar and new housing challenges for people with disabilities

For people with disabilities, the COVID-19 pandemic and the associated lockdown measures brought familiar and new challenges. Staying at home was not altogether unfamiliar for some people with disabilities, who face daily obstacles that prevent them from enjoying unrestricted mobility within their communities. Nonetheless, depending on their living situation, people with disabilities faced other obstacles. People living in institutions risked higher infection and mortality rates from COVID-19, while people living alone risked social isolation and an interruption in essential support services.

People with disabilities living in independent housing: Evidence from Canada

People with disabilities living in independent dwellings faced diverse challenges relating to their living arrangements during the COVID-19 pandemic. First, they were deemed at heightened risk of contracting COVID-19 and of developing more severe cases of the disease. The reason is twofold: many rely on outside caregivers or support to help with their daily lives, and many also suffer from underlying health conditions. In addition, some people with disabilities may have faced challenges in accessing their usual support services, if their usual day centres were closed or if their caregivers were unable to provide their typical support services. Second, the extended lockdown periods could also contribute to social isolation, in light of the large numbers of people with disabilities living alone; in Canada, for instance, almost one-fifth of people with disabilities (1.96 million people) lived alone. Moreover, Canadian authorities reported that people with disabilities are also less likely to use the internet – around one-fifth of people with disabilities, compared to just 10% of Canadians overall – which may have made it harder to stay informed and connected during the pandemic. Nevertheless, the pandemic also underscored the limited accessibility of the Internet (including online-based services) for people with disabilities.

People with disabilities living in institutional settings: Evidence from the United States

People living in institutions or collective housing were at a higher risk of contracting the virus. Evidence from the United States, for instance, found that people with intellectual and developmental disability in New York state were more than four times more likely to contract COVID-19 than the general population (Landes et al., 2020^[17]). People in congregated settings were also nearly twice as likely to die from the virus as the general population; similar disparities were registered in at least four other U.S. states (Landes et al., 2020^[17]; Landes, Turk and Wong, 2021^[18]).

Specific measures to support people with disabilities during the pandemic

In addition to the emergency housing measures introduced by governments at the outset of the pandemic to provide general support to households, several countries launched specific housing supports for people with disabilities. Australia and Ireland developed plans to identify and reach out to people with disabilities in need; “Community Call” in Ireland aimed to ensure that people with disabilities were receiving adequate care by calling people directly and sharing information with responsible agencies. In Canada, people with disabilities were eligible to receive additional financial support, aligned with the severity of their disability (2021 OECD QuASH).

Source: (Landes et al., 2020^[17]; Landes, Turk and Wong, 2021^[18]); 2021 OECD QuASH

2. What type of housing support is currently available for people with disabilities? What challenges remain?

2.1. National frameworks outlining the rights, legal protections and benefits for people with disabilities exist in most countries

The vast majority of OECD and EU countries have introduced national frameworks that outline the rights, formal legal protections and/or benefits afforded to people with disabilities. These include, inter alia, Brazil's Statute for People with Disabilities, Chile's Law on Equal Opportunities and Social Inclusion of People with Disabilities, Costa Rica's Law 7600 on Equal Opportunities for People with Disabilities, England's Equality Act 2010, Estonia's Social Welfare Act, Korea's Act on the Welfare of People with Disabilities, Lithuania's Law on Social Integration of Persons with Disabilities, Turkey's Law on Disabled People, and the United States' Fair Housing Act.

In most countries, legal frameworks cover the full range of rights and responsibilities relating to people with disabilities. In the United States, there is a dedicated national legal framework that focuses on the rights of people with disabilities in the housing market. National frameworks may also mandate periodical surveys to assess the prevalence, living conditions, and welfare and housing needs of people with disabilities, as in the case of Korea, for instance. They may also lay out the support services for which people with disabilities may be eligible, as well as the responsibilities of public authorities to provide such services. Indeed, local and/or regional authorities are responsible for providing housing support and services to people with disabilities, for instance, in Australia, Brazil, Chile, the Czech Republic, Denmark, Estonia, Japan and Lithuania, among others. A comprehensive assessment of the suitability of such frameworks is beyond the scope of this brief.

2.2. Most OECD and EU governments provide housing support to people with disabilities

The diversity in terms of the type and severity of disabilities calls for a range of policy and support solutions. Concretely, this implies that – depending on the impairment – many different types of living environments, adaptations to housing and the surrounding environment and support services are needed. For some people with disabilities, mainstream housing policy supports, such as social housing or housing allowances, can be sufficient to overcome many housing market barriers. However, mainstream supports are not always enough. Such supports are not in sufficient supply or provide sufficient levels of support, nor are mainstream supports such as social housing systematically made accessible to people with disabilities.

Country responses to the 2021 OECD QuASH suggest that indeed a wide range of housing supports for people with disabilities are provided (Table 2.1):

- ▶ A large share of public spending to support the housing needs of people with disabilities comes in the form of financial support for housing-related costs allocated to individuals and/or households (23 countries). This can take the form of tax relief, grants or loans to cover the costs of accessibility upgrades to private dwellings, for instance, as well as additional financial support to cover rent that goes above and beyond income-tested cash allowances for housing that are available to a broader range of eligible households in most countries (see indicators PH 3.2 and 3.3 in the OECD Affordable Housing Database).
- ▶ In 20 countries, housing-related services – either at home or in the community – are provided to help people with disabilities live independently. These include services to facilitate everyday life, as well as specific supports introduced in response to the COVID-19 pandemic (see Box 1.4).
- ▶ The direct provision of housing to people with disabilities is available in 20 countries; priority access to social housing for people with disabilities is by far the most common form of housing.
- ▶ In 18 countries, public authorities provide housing information, expertise and advice to people with disabilities and their families. These include accessibility guidelines and advice about low-cost improvements to make dwellings more liveable and accessible, as well as public registers of available accessible housing in the community, in order to improve matching between households in need and available housing opportunities.

Table 2.1. Types of housing-related supports for people with disabilities in OECD and EU countries

Drawing on country responses to the OECD Questionnaire on Affordable and Social Housing (QuASH)

Type of housing support	Number of countries	Examples of support measures
<p>Financial support for housing (e.g. tax relief, grants and loans for adaptations to dwellings; financial support to develop housing adapted to the needs of people with disabilities; one-time financial support in response to the COVID-19 pandemic)</p>	23	<ul style="list-style-type: none"> ▶ Australia: Financial support for simple, minor and complex home modifications; specialist disability accommodation (SDA) solutions for eligible people with very high support needs; one-time payments to registered service providers to help cover unexpected costs related to the COVID-19 pandemic ▶ Canada: Financial support for seniors in First Nations communities (on-reserve) for home adaptations; funding to help modify housing in communities (on-reserve) to accommodate the needs of persons with disabilities; one-time tax-free payments to support people with disabilities ▶ Costa Rica: National Financial System for Housing and the Mortgage Bank for Housing ▶ Czech Republic: One-off grant to support home adaptations ▶ England (United Kingdom): Reductions to council tax bills ▶ Japan: Financial support to cover housing costs for low-income people with disabilities; other financial supports are available from municipalities to install assistive equipment; tax credits to support home renovations for the elderly and people with disabilities ▶ New Zealand: Housing modification funding for people with disabilities ▶ Norway: Grants and loans to cover part of new adapted housing ▶ Sweden: A housing supplement for people with disabilities to help cover housing costs
<p>Provision of housing-related and neighbourhood services (e.g. services to facilitate everyday life; specific supports during the COVID-19 pandemic; etc.)</p>	20	<ul style="list-style-type: none"> ▶ Czech Republic: The Social Services Act ensures the provision of services to people with disabilities by regional authorities ▶ England (United Kingdom): Tailored support services during the COVID-19 pandemic; regular COVID-19 testing for staff and residents in supported living facilities; guidelines for service providers who support the elderly and people with disabilities ▶ Greece: Provision of domestic assistance ▶ Ireland: Launch of the “Community call” initiative during the COVID-19 pandemic under which local authorities and other state agencies ensured that medical needs of people with disabilities, seniors and other vulnerable populations were met ▶ Japan: Comprehensive assistance for everyday activities (bathing, cooking, cleaning, washing) for people with disabilities living at home ▶ Latvia: Municipalities provide services for activities outside the home ▶ Turkey: Local governments are responsible for providing services to people with disabilities
<p>Direct provision of housing (e.g. priority allocation of social housing units to people with disabilities; required share of some new developments reserved for people with disabilities; etc.)</p>	20	<ul style="list-style-type: none"> ▶ Australia, Austria, Bulgaria, Colombia, Czech Republic, Denmark, Estonia, Finland, France, Iceland, Ireland, Japan, Latvia, Lithuania, Luxembourg, Malta, the Netherlands, Portugal, Slovenia, United Kingdom, United States: People with disabilities are considered priority cases in the allocation of social housing units ▶ Israel: Supported housing provides two levels of housing services, depending on needs ▶ Italy: Additional EUR 90 million to support independent housing and services for people with disabilities, as part of the COVID-19 recovery plan of July 2020 ▶ Turkey: 5% of the total number of housing units in a project are reserved for people with disabilities ▶ United States: Section 802 and Section 811 programmes to subsidise rental housing that is adapted to the needs of low-income seniors (Section 802) and people with disabilities (Section 811); as part of the CARES Act, USD 77 million was allocated to support additional housing choice vouchers for people with disabilities under the Section 811 programme
<p>Housing information, expertise and advice (e.g. housing expertise or advice to people with disabilities; development of guidelines for accessible, adapted housing; public registries of accessible, adapted housing for people with disabilities)</p>	18	<ul style="list-style-type: none"> ▶ Australia: “Livable Housing Design Guidelines” and “SDA Design Standard”; non-government accessible housing online platforms ▶ Denmark: Municipalities provide advice on available social services, including housing ▶ Estonia: Local authorities help identify housing solutions for people with disabilities ▶ Lithuania: services to adapt housing and the living environment ▶ Norway, Scotland (United Kingdom), United States: public authorities operate online public registries of accessible housing/buildings for people with disabilities

Source: Country responses to 2021 OECD QuASH, 2019 OECD QuASH (for issues relating to direct provision of housing)

2.3. Coordinating supports for a highly heterogeneous population, along with data, skills and knowledge gaps, remain among the major challenges for policy makers

Nevertheless, policy makers face a number of challenges to effectively meet these diverse housing needs. Country responses to the 2021 OECD QuASH identify the following common difficulties:

- ▶ **Meeting complex housing needs**, especially where affordable housing is in short supply: Devising and delivering housing policies and services that meet such a diverse range of housing and support needs – particularly in the context of a shortage of affordable and social housing (OECD, 2021^[11]) – makes it even harder to ensure access to accessible housing. The social housing stock is not necessarily adapted to the needs of people with disabilities. In some countries, small municipalities in particular face difficulties to accommodate specialised needs (Section 3.2).
- ▶ **Data, skills and knowledge gaps**: Building the evidence base on people with disabilities and their housing needs remains a major hurdle for policy makers (Section 3.1). Skills gaps in the construction industry to implement accessibility standards, as well as knowledge of cost-effective solutions for accessible housing are a barrier to expanding the supply (Section 3.4).
- ▶ **Reaching people who qualify for public support and matching suitable housing with those who need it**. Identifying and reaching people with disabilities who are eligible for public supports is a common challenge, particularly people living in rural areas. Indeed, even when potential beneficiaries of public support services have been identified, it is not always straightforward to reach them (U.S. Department of Housing and Urban Development, 2015^[19]). There is a limited supply of accessible housing, and information on the accessible housing stock is not readily available. This makes it even harder to match available, suitable housing to the people who need it (Section 3.2).
- ▶ **Providing an integrated response to support people with disabilities**: Co-ordinating housing supports with other policy areas, such as transport, employment, long-term care, and other social services, and across different levels of government, in order to ensure that people with disabilities have the opportunity to live independently and be fully integrated into society (Section 3.5). Depending on the country, while the national authorities set out a general framework and guidelines to support people with disabilities, local and regional governments that are responsible for providing housing and related services may lack the financial resources and/or technical capacity to deliver them.

2.4. Accessibility policies exist in most countries, yet fail to cover the majority of the housing stock

Accessibility policies, defined in different ways (see Box 1.2), are in place in the building sector in the vast majority of countries, although the coverage and stringency of such policies varies considerably. Given the absence of comparable cross-national data, Table 2.2 does not make the distinction between voluntary accessibility standards and legally-binding accessibility requirements. In terms of the coverage of the building stock, Sweden has one of the more expansive approaches to accessibility, requiring that all buildings (with the exception of holiday homes of no more than two dwellings and some work premises) meet minimum accessibility requirements; accessibility in new or renovated dwellings is assessed at the building permit stage. In many countries, however, accessibility requirements only apply to new construction – or, in rare cases, to significant renovation projects of existing dwellings (such as France). In addition, they are applicable to only a portion of the residential stock – such as multi-family dwellings (in some cases, with a minimum number of units) and/or dwellings that have been financed or are managed by public authorities. Some countries require that a minimum level of accessibility be met in all public buildings; others mandate a minimum level of accessibility in all public buildings and spaces. There remain considerable gaps in the accessibility of public space, including public transport networks, across OECD and EU countries. As a result, the current approach fails to deliver a significant stock of accessible housing.

Table 2.2. Minimum levels of accessibility in the building stock apply to only a portion of dwellings: Selected country examples

Country	Level(s) of government that set(s) policy	Mandatory?	Types of buildings to which a minimum level of accessibility applies
Australia	National, regional	Depends on local/regional government policies	Regulations at national and regional levels regulate minimum accessibility requirements for common areas of public and residential buildings. National minimum accessibility standards for new residential dwellings at the Silver standard with variation by regional governments. Regional governments require all new public housing to be built to minimum levels of accessibility. Additional variation by region; for instance, unless otherwise specified in Queensland, 30% of social housing apartments in any new multi-unit project must be designed to Platinum Level, with all remaining ground floor and lift-served apartments designed to Gold Level.
Austria	Regional	Yes	Barrier-free standards are required in new construction
Canada	National, regional, local	Depends on local/regional government policies	Regulations at national and regional levels regulate minimum accessibility requirements for common areas of residential building. Building codes regulate accessibility standards for accessible housing, however accessible requirements for multiple unit buildings vary regionally and at local/municipal levels. Voluntary standards from the Canadian Standards Association and others provide guidance on accessible, barrier free and universal design.
England (United Kingdom)	National	Depends on local/regional government policies	Minimum accessibility requirements are in place for all new dwellings; higher optional technical standards may be required by local authorities, according to local needs.
Germany	Regional, local	Depends on local/regional government policies	Accessibility standards are developed in state-level building codes and vary by state. In the model building code, minimum accessibility standards are not required.
Latvia	National	Yes	Public buildings
New Zealand	National	Yes	Hotels, motels, hostels, halls of residence, holiday cabins, groups of pensioner flats, boarding houses, guest houses, and other premises providing accommodation for the public.
Sweden	National	Yes	The main entrances to public buildings, work premises and residential buildings shall be located and designed to ensure they are accessible and usable. For single-family houses, accessibility to the building is satisfied if it is possible to subsequently arrange a ramp to the entrance on the site using simple measures.
Turkey	National, local	Yes	Public buildings, roads/sidewalks/crosswalks, parks, social and cultural infrastructure, public transportation vehicles, and ICT services must be accessible to people with disabilities.
United States	National	Yes	Privately owned and publicly assisted multi-family housing built for first occupancy after March 31, 1991 must meet the design and construction requirements of the Fair Housing Act. Further, housing that is provided or made available by public entities must comply with minimum accessibility standards.

Source: Country responses to 2021 OECD QuASH

3. How can governments improve housing support to people with disabilities?

Policy makers could pursue several avenues to make housing more accessible and affordable to people with disabilities, and to provide the needed services that enables them to live more independent lives. These include building the evidence base on both the demand for and supply of accessible housing; developing tools to identify and match people with disabilities with the housing supports they need to live independently; strengthening the accessibility standards that apply to new residential construction, and housing renovations that exceed a certain threshold (e.g. cost threshold) or that benefit from public support; providing incentives and direct financial support (where required) to ensure that housing meets the diverse needs of people with disabilities; and pursuing integrated approaches to address their housing and support needs. People with disabilities should also benefit from broader public investments in social and affordable housing.

3.1. Improve the evidence base on the housing needs of people with disabilities, as well as the suitability of the housing stock and existing support services

Improving the evidence base on people with disabilities and their housing situation should be a priority for policy makers. To overcome the significant data gaps, governments should aim to conduct regular surveys to assess the housing situation and housing needs of people with disabilities, as well as the extent to which existing public supports meet their needs. To the extent possible, surveys could also aim to address the situation of people living in institutions, who are generally excluded from typical household survey data. To facilitate the collection of policy-relevant data, data on the population with disabilities should be collected to assess disability by type, by support need(s) and severity (which do not currently exist in all OECD countries), and to identify the extent to which the current policy supports sufficiently address their needs. The disability surveys in Australia and Canada provide a good model for other countries, as it is possible to compare outcomes of people with disabilities and those without disabilities, across a range of policy domains (health, housing, employment, etc.). Australia reports data on people with disabilities according to the type of assistance needed, covering supports relating to self-care, mobility, communication, cognitive or emotional tasks, health care, meal preparation, etc. (Australian Bureau of Statistics, 2019^[20]). Such information can help policy makers to identify the diverse range of support needs when designing housing standards, legislation and programmes for people with disabilities.

In addition, policy makers should conduct a comprehensive assessment of the quality, suitability and accessibility of the building stock. Many existing assessments are dated and/or cover only a portion of the dwelling stock. The Czech Republic intends to conduct an accessibility assessment of publicly-owned buildings by the end of 2022 as part of its National Plan for the Promotion of Equal Opportunities for People with Disabilities. Accessibility could be assessed along different dimensions. For instance, some countries have adopted a tiered approach, including the U.S. in its 2011 Accessibility Index; the U.K.'s *visitable dwellings*, *accessible* and *adaptable dwellings*, and *wheelchair-user dwellings*; or Australia's silver, gold and platinum accessibility standards. Another approach is an accessibility assessment, which reports, for example, on the presence of such accessibility features as grab bars, handrails and ramps, as practiced in Germany and the Slovak Republic. While existing assessments focus primarily on physical accessibility, consideration could also be given to other design features, such as those relating to lighting, sound and the presence of universal design features.

3.2. Develop tools to identify and match people with disabilities to the housing supports and services they need to live independently

To better reach potential beneficiaries of public disability supports, the Irish government, in its National Strategy, has committed to developing comprehensive assessments of people with disabilities and their housing needs (undertaken by local housing authorities), along with improving effective inter-agency coordination to help identify people in need of support and match them with necessary housing support. Such individual assessments and matching processes are often best undertaken at local level, where service providers are in closer proximity to people in need of support and can co-ordinate efforts. National governments can require that such assessments take place at regular intervals, and provide the necessary technical and financial resources to local authorities. More recently, the Irish government released a Guidance Document, *Supporting People with Disabilities to Access Appropriate Housing in the Community*, to help housing authorities and service providers improve support to people with disabilities. The Guidance includes tools, links

and other resources for a range of providers and actors. Further, in 2016, guidelines focusing on mental health considerations in housing design, *Design for Mental Health*, could also be an especially useful tool for other countries. Similar efforts can be made to address the evolving housing needs of an ageing population.

Additional tools are needed to match people with disabilities with available accessible, affordable dwellings. This is because even when dwellings may be equipped with features that meet the needs of people with disabilities, they are not always rented or sold to people who require such features. A real estate analysis in the U.S. found that only one in five accessible dwellings was actually inhabited by a person with a physical disability (Warnock, 2020^[21]). In several OECD countries, including Japan, Norway, the United Kingdom and the United States, public registers of accessible housing have been developed to help match people with disabilities with suitable housing. These include public registers at prefecture level in Japan; Norway's *Bygg for alle* ("Buildings for all") website; Scotland's Accessible Housing Register, *Home2Fit*; as well two state-level registers in the United States, *MassAccess* (Massachusetts) and *Housing Link* (Minnesota). When designed at national level, such registers can also help define a common approach to standardising accessible housing. For people with more complex needs, case management services can play a key role, by helping to coordinate various support services and serving as an advocate for people with disabilities and their families (see Section 3.5).

3.3. Strengthen minimum accessibility requirements and promote innovative design solutions for new residential construction

Strengthening accessibility policies, including standards and, where warranted, legislation, for new residential construction is an essential part of the policy solution to expand the supply of accessible housing. This is because the current approach to accessibility policies, which apply to only a small minority of the housing stock, fails to deliver a sufficient supply of accessible housing. Governments should build on existing accessibility policies (Table 2.2) to expand the coverage of a minimum level of accessibility to progressively more types of new housing construction, and to potentially include other universal design features in such standards. This does not mean that all new residential construction should be designed to be fully wheelchair-accessible. Rather, introducing universal design features – relating to, for instance, specifications for the structural design of dwellings in new housing (such as step-free entries, wider doorways, lever door handles, as well as improved lighting, sound management and tactile features) would benefit a range of people, including children, families and seniors, as well as those with different impairments. In the case of residential renovations, a minimum level of accessibility could also be required for renovations that exceed a certain threshold (in terms of cost, for instance, as is the case in France), as well as those that benefit from public financial support.

Further, some accessibility-related structural decisions made at the outset (such as wider corridors or walls in key rooms of the house that can support the future installation of guardrails) make it relatively simple and inexpensive for households to introduce more specific features (grab bars, ramps) down the road, according to their changing needs. Many such features can be introduced at minimal additional cost, and are much cheaper to incorporate in the initial design and construction phase, compared to the generally higher costs of modifying existing dwellings. Canada reports, for instance, that 57% of universal design features have no or negligible extra costs (Canada Mortgage and Housing Corporation (CMHC), 2019^[22]). Sweden's accessibility standards, which cover the majority of new housing, could provide a model, as well as Ireland's Design for Mental Health guidelines (Section 3.2).

At the same time, governments can help to develop tools, including skills, training and good practice examples, to assist homebuilders and architects in developing cost-effective ways to introduce such features into the design and construction of new housing, and to communicate the benefits of such design features to the broader public. Pilot projects can demonstrate the potential advantages of universal design features. Another area that merits further exploration is the potential for 3D printing and other digital innovations to help systematise and drive down costs of housing that can be easily and cheaply adapted to evolving needs of their inhabitants. Rapid advances in digital technologies have the potential to significantly moderate the affordability-accessibility trade-off. For instance, 3D printing of entire housing developments is underway in a number of countries, forging a much faster, more affordable and modular way to build housing. For example, Canada has already achieved the first step of a permitted 3D-printed house in Nelson, British Columbia. The goal now is to

advance the technology to the next phase of development to build five two-bedroom homes, ultimately developing Canada's first 3D-printed affordable housing community (World Housing, 2021^[23]).

Moreover, governments should ensure that people with disabilities also benefit from increased public investments in affordable and social housing. This means incorporating the wide range of accessibility considerations in social housing and other publicly-supported affordable housing projects. Such investments in the construction and renovation of social and affordable housing should be a central part of a more sustainable, inclusive economic recovery, reinforced by the EU's "Renovation wave" announced in early 2020 as part of the European Green Deal, which already requires that minimum accessibility standards are met (see (OECD, 2020^[23]; OECD, 2021^[1]). Moreover, the EU also requires that public procurement processes "buy accessible."

3.4. Provide incentives and income-tested direct financial support to ensure housing solutions are adapted to the needs of people with disabilities

Nonetheless, relying on accessibility upgrades in new construction will not be sufficient to meet both the current and the growing need for accessible housing in the coming years. This is due to multiple factors: a general slowdown in new residential construction in many places, barriers to the development of multi-family housing (for instance, through local zoning regulations that restrict development to low-density single-family homes), and the generally higher price tag of newly constructed dwellings, relative to the existing stock. Given the lower average incomes of people with disabilities, the additional cost associated with accessible housing can represent a significant supplementary obstacle in the housing market. Also, many people who may develop impairments as they age would prefer to remain in their home, rather than move to a different dwelling. Thus, in addition to strengthening accessibility standards for new construction, parallel efforts are needed to make the existing stock more accessible.

Population ageing in many OECD countries presents an opportunity to scale up some accessibility upgrades within the existing housing stock. Financial incentives, along with targeted public information campaigns, could be developed to encourage homeowners (including but not limited to ageing homeowners) to anticipate future needs and introduce some basic accessibility features that follow a universal design approach for their homes. This could include, for instance, minimum adaptations (adding ramps and grab rails, replacing door knobs with levers, improving lighting and sound insulation), as well as more intensive upgrades to kitchens, bathrooms, bedrooms and other parts of the house. While direct subsidies could be income-tested to target households in greatest need, loans or tax relief could be provided to a broader share of the population, since some households would be able to afford such accessibility upgrades without subsidies. In Germany, households of any age or income level are eligible for the Barrier Reduction Investment Grant (*Altersgerecht Umbauen Investitionszuschuss*), while more extensive renovations can be financed through a low-interest rate loan (*Altersgerecht umbauen*) (Box 3.1). Rather than restricting eligibility to people with disabilities, expanding eligibility to a broad segment of the population can facilitate housing accessibility upgrades in a bigger share of the housing stock.

There may also be opportunities to review the generosity of income supports for people with disabilities, in cases where it is determined that existing supports fall short. For instance, the Supplemental Security Income, which benefits over 4.6 million people with disabilities in the U.S., does not come close to covering the average rental price of a one-bedroom apartment in any U.S. city, leaving many households in financial distress (Technical Assistance Collaborative, 2021^[24]). In Australia, just under one-third of households who receive rental assistance and who have at least one household member receiving the Disability Support Pension are considered to be in "rental stress" because they pay over 30% of their income on rent (Australian Institute of Health and Welfare, 2020^[16]).

Box 3.1. Financial support in Germany for housing renovation and adaptation in order to stay as long as possible

In Germany, grants of up to EUR 6 250 euros are available to homeowners of any age, as well as owners of rental properties and corporate landlords, to retrofit dwellings with barrier-free features in and around the building. Most grant recipients (82%) are over 54 years old, with more than half over 64 years old. In parallel, the government offers a low-interest loan of up to EUR 50 000, depending on the scale of the work envisaged, to make a residential property barrier-free or to purchase a barrier-free space as a first-time homebuyer. Younger households are more likely to take out loans, rather than grants. Since 2009, the programme has supported barrier-free upgrades in nearly 290 000 dwellings, two-thirds of which via loans. More than a third of households receiving funding through the programme have a mobility-impaired household member. The programme has also been found to generate cost savings to both the government and private households, by helping seniors and people with limited mobility remain in their homes, rather than move into formal care facilities.

Nevertheless, most of the improvements funded through the programme remain relatively small-scale (e.g. installing walk-in showers); the average grant amount in 2018 was around EUR 1 627 and EUR 20 877 on average for loans. While take-up has increased significantly since 2014 (particularly for grants), it would need to significantly accelerate in the coming years, in order to meet the expected demand for barrier-free housing – estimated at 2 million dwellings by 2035.

Source: 2021 OECD QuASH; [Evaluationen/Evaluation-AU_2020.pdf](#)

www.kfw.de/PDF/Download-Center/Konzernthemen/Research/PDF-Dokumente-alle-

3.5. Pursue integrated approaches to address the housing and support service needs for people with more complex needs

Housing for people with disabilities is poised to become an even more pressing challenge for policy makers in the decades to come. Nonetheless, the issue reaches far beyond housing policy, covering health, transport, employment, long-term care and assistive services, education and other areas of social policy. In order for people with disabilities to be fully integrated into communities and society, housing policy issues must also be integrally connected to other policy areas. In Japan, for instance, housing and mobility policies help to ensure that the elderly and people with disabilities have access to suitable housing, on the one hand, and are able to safely and efficiently move around in their communities (Box 3.2). A recent study in the United States of non-elderly people receiving housing assistance and disability benefits found that they had much poorer health outcomes and higher engagement with the health system, relative to the general population, pointing to the potential utility of joined up housing and health interventions (Brucker and Garrison, 2021^[25]). This is also reflected in the high unmet healthcare needs among people with disabilities, particularly in rural and remote areas (World Health Organization (WHO), 2020^[27])

Further, some people with disabilities, including those with higher support needs, can also benefit from more integrated service delivery, which aims to join up services across different policy domains (e.g. housing, health, transport, employment), as well as across different levels of care (see (OECD, 2015^[26])). Integrating services can, from the perspective of service providers, generate cost savings – especially for people with multiple and complex support needs – by providing access to multiple services in one place, by reducing other transaction costs, and by limiting duplication of services to individuals. For people with disabilities, more integrated services can facilitate the provision and navigation of services, and improve the quality of both services and individual outcomes. Case managers can play a key role in supporting the process, particularly for people with complex needs. Integrating services also tends to require more cooperation and coordination across different policy areas and among different service providers; see OECD (2015^[26]) for further discussion and concrete strategies.

Box 3.2. Ensuring the accessibility of both the housing stock and the broader community in Japan

Japanese authorities have taken considerable measures to ensure that the elderly and people with disabilities can access adapted housing and, more broadly, can safely and efficiently move around in their communities. The *The Act on Promotion of Smooth Transportation, etc. of Elderly Persons, Disabled Persons, etc. (Act No. 91 of 2006)* aims to improve both the convenience and safety of seniors and people with disabilities to move around and use facilities. The law includes, for instance, accessibility improvements to public transport, roads, parking lots, parking facilities and buildings; the development of integrated, accessible facilities, buildings and roads; and efforts to raise awareness and participation from citizens to support accessibility issues.

Meanwhile, the *Housing Safety Net System*, launched in 2017, aims to ensure stable, adequate housing for the elderly, people with disabilities, and others who require special assistance by utilising the vacant housing stock. The programme introduced a public registry, managed at the prefecture level, into which owners of vacant rental properties (which meet certain criteria) can provide information about available dwellings that could be rented to tenants who require special assistance. Public authorities provide subsidies to cover the costs of renovation and mitigate housing cost overburden among tenants. Finally, the programme offers matching services and move-in support (2021 OECD QuASH).

Source: 2021 OECD QuASH; <https://elaws.e-gov.go.jp/document?lawid=418AC0000000091>; www.mlit.go.jp/jutakukentiku/house/jutakukentiku_house_tk3_000055.html

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Funded by the European Union Programme for Employment and Social Innovation
"EaSI" (2014-2020).

The opinions expressed and arguments employed herein do not necessarily reflect
the official views of the OECD member countries or the European Union.



Co-funded by the
European Union