

**House Financial Services Committee
Subcommittee on Housing and Community Opportunity
Hearing on H.R. 1408, the Inclusive Home Design Act
September 29, 2010**

Testimony – Rep. Jan Schakowsky

Thank you, Madame Chairwoman, for holding this hearing on my legislation, the Inclusive Home Design Act of 2009. I would also like to thank all the witnesses who are here today, including Beto Barrera of Access Living in Chicago, who I have known and worked with for a long time. The Inclusive Home Design Act is a forward-looking and common-sense initiative that would make more new homes accessible for people with disabilities. In addition to benefiting individuals with existing disabilities, including disabled veterans, it will also help to accommodate our increasingly-older population by allowing seniors to age in place.

The bill's requirements are simple: the Inclusive Home Design Act would require that, when practical, all newly-built single-family homes receiving federal funds would have to meet four specific accessibility standards:

First, the home must have at least one accessible (“zero step”) entrance into the home.

Second, the doorways on the main level of the home must be wide enough to accommodate a wheelchair.

Third, electrical and climate controls (such as light switches and thermostats) must be placed at reachable heights from a wheelchair.

And finally, the main floor must have at least one wheelchair accessible bathroom. (For this requirement, accessibility means additional floor space for maneuvering and reinforced walls that could bear the weight of a bar added later.)

Adopting those standards for a single-family home is not prohibitively expensive. The average added cost for homes built with accessibility features is between \$100 and \$600. Retrofitting a home, on the other hand, can cost thousands of dollars.

Homes with these basic features benefit all of us. For individuals who have a long-term disability, it expands the number of homes that they can buy or rent without having to make substantial, expensive renovations.

We also need to provide for our brave servicemen and women, too many of whom have returned from combat with lifelong injuries. We have worked closely with the Paralyzed Veterans of America in developing this legislation, and they support the bill.

In addition, many of us will face some short-term disability during our lifetime. Being able to heal in your home rather than in a hospital bed is both good for the healing process and reduces the cost of a hospital stay.

It also benefits individuals who have friends or family members with disabilities, by allowing their loved ones to visit. Disabled people – from children to the elderly – can become socially isolated because architectural barriers in homes prevent them from visiting their friends, neighbors and extended family. This is one of the reasons we use the term “visitability.”

Finally, I want to talk about our aging population and the concept of aging in place. In 2000, there were 30.5 million people between 65-84 years old; that number will grow to 47 million by 2020.

There has been a lot of focus on the baby boom generation and what is going to happen over the next several decades as they retire and age. There’s a lot of talk about making sure that Social Security and our pension systems are strong so that seniors can retire comfortably. And there’s a lot of talk about the need for doctors to specialize in geriatrics and we have made great efforts to support people going into the health care field because an older population is going to need a lot of care.

But there is a whole piece missing in that debate right now – and that is housing.

Nearly 3 in 5 seniors over the age of 80 suffer from some kind of physical impairment. Often, the prohibitive cost of making existing homes accessible deprives seniors of their independence and pushes them into nursing homes. They can be isolated there. The cost of nursing home care is expensive and a large proportion is paid for with public dollars under Medicare and Medicaid.

The national median rate for a year in an assisted living facility is more than \$38,000, while nursing home care can cost up to \$75,000 a year. Those figures can be much higher in areas of the country with higher costs of living.

We could save a lot of money if individuals could continue to live in their own homes and receive in-home nursing if they need it.

Some seniors don’t end up in nursing home facilities but instead are homebound by their disability, unable to get in and out of their homes because of physical limitations. Having housing that allows for increased mobility can drastically improve their quality of life and overall health.

But incredibly, entire developments are being built and marketed as senior communities – thousands of homes – that people are going to have to leave as they age because they don’t include basic accessibility features.

Allowing more people to age at home will both save taxpayers money and help improve the quality of life for our seniors.

And this idea is doable – it’s been done before! For almost two decades and all over the country – since 1992, more than forty cities and local communities have implemented either mandatory or voluntary ordinances for including basic accessibility features in newly-constructed, single-family homes.

This list includes Bolingbrook, Illinois; Atlanta, Georgia; Iowa City, Iowa; St. Petersburg, Florida; Pima County, Arizona; Vermont; Texas; Kansas; and Minnesota. From north to south and east to west, communities are having great success in building inclusive homes.

Pima County, Arizona, passed an ordinance in 2002 – largely due to the efforts of our colleague, Rep. Raul Grijalva, who was then a member of the Pima County Board of Supervisors – and in the last eight years, more than 21,000 homes have been built. According to Pima County Chief Building Official Yves Khawam, the county’s ordinance was “at first resisted by builders based on the fact that they would require costly changes to conventional design and construction practices, [but] it became evident that with appropriate planning, the construction could result in no additional cost. Indeed, the jurisdiction no longer receives builder complaints regarding the ordinance and the ordinance has been so well incorporated into the building safety plan review and inspection processes that there is no additional cost to the County to enforce its requirements.”

There is no magic to how homes are built now – just habit.

If you break your leg, you should be able to heal in your home. If you have a spinal cord injury, you should still be able to live in your home. And if you are getting older, and moving around is harder, you shouldn’t be forced to move to a nursing home, you should be able to stay in the home you already have.

And if it’s not you, but your cousin has a broken leg or your sister has a spinal cord injury or your mother is having trouble with stairs – they should still be able to visit you in your home!

The Inclusive Home Design Act is common sense, cost effective, and forward-looking.

As the economy continues to recover, homebuilding will start to pick up, and the homes that are built should be ones that anyone can live in and anyone can visit.