

## Study examines financial sustainability of affordable housing-with-services models for older adults

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A study published in the journal *Research in Aging* sheds light on the financial challenges of housing-with-health-services models for low-



income older adults. The report explores strategies for ensuring the sustainability of these beneficial efforts.

The study was conducted in partnership with Hebrew SeniorLife, a Harvard Medical School-affiliated nonprofit organization serving older adults in the Greater Boston area. It drew on insights from 31 key informational interviews and three focus groups with payers, housing providers, and community partners.

The Right Care, Right Place, Right Time (R3) Program deploys wellness teams in affordable housing sites. These teams include coordinators and nurses who adopt an "eyes-on" approach, training all housing staff to observe and contribute to care coordination for residents. The teams bridge housing and health care efforts, supporting residents where they live and aiming for better health outcomes and prolonged independence.

Despite the recognized potential of these programs to enhance the lives of <u>low-income</u> older adults, finding reliable funding sources is a significant hurdle.

Key findings from the study, "Promoting Sustainability in Housing with Services: Insights from the Right Care, Right Place Right Time Program," include the following:

- Recognized Value: Participants unanimously recognized the value of housing-with-services programs in improving the well-being of older adults.
- Funding Need: There was little consensus on how to secure ongoing funding for these programs. The responsibility for individuals in housing sites is distributed across health insurers, hospitals, and community service providers, making it challenging to incentivize investment.
- Government's Role: The study suggests that governmental



mechanisms, possibly at the federal level, are needed to channel funding toward supportive services. Without reliable funding sources, replicating these housing models for low-income older people will be difficult.

"The study emphasizes the need for innovative solutions to secure funding for supportive services," said co-author Marc A. Cohen, co-director, LeadingAge LTSS Center, Department of Gerontology, University of Massachusetts. "Sustaining and financing these models has proven to be a complex issue, given the separate systems of publicly-funded housing and health care," he said.

Housing models that integrate supportive services have proven popular among better-off individuals who can afford private-pay environments. Yet options for older people with fewer resources have remained limited due to scarce public financing.

The Section 202 low-income housing program, established by the U.S. Department of Housing and Urban Development, has been one option for affordable housing for people aged 62 and older. Service coordinators were added to the program in 1990; yet it has remained limited in scope and poorly funded over the years, leaving many older adults without access to supportive housing environments.

"We expect these findings to contribute to a broader understanding of how housing-with-services models can be developed and maintained to benefit low-income older adults," said Kim Brooks, chief operating officer, senior living, Hebrew SeniorLife.

The study examined the experiences and perspectives of individuals involved in the Boston-area Right Care, Right Place, Right Time Program, which enrolled 400 <u>older adults</u> across seven intervention sites. Four sites were operated by Hebrew SeniorLife and three were operated



by partner providers, including Milton Residences for the Elderly and WinnCompanies.

**More information:** Pamela Nadash et al, Promoting Sustainability in Housing with Services: Insights From the Right Care, Right Place, Right Time Program, *Research on Aging* (2023). DOI: 10.1177/01640275231196904

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