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# The Need for Safe and Healthy Homes in Order to Aging in Place: Evaluating Rebuilding Together San Francisco's Impact

Rachel Fontenot

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The Need for Safe and Healthy Homes in Order to Aging in Place:

Evaluating Rebuilding Together San Francisco's Impact

Submitted by

**Rachel Fontenot** 

for

EMPA 396 Graduate Research Project in Public Policy

Golden Gate University

San Francisco, California

**Faculty Advisors** 

Dr. Joaquin Gonzalez and

Dr. Mick McGee

March 3, 2014

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#### ABSTRACT

This study focuses on the impact that home repair and safety modifications completed by Rebuilding Together San Francisco, a non-profit organization, has on making it possible for the elderly homeowners they serve to age safely in their homes. Various perspectives were sought to measure this impact. Homeowners who requested service but did not receive home repair assistance were surveyed to determine if not receiving service adversely affected their ability to remain safe and healthy in their home. Next, homeowners who did receive home repair and safety modifications were surveyed to explore the impact the services they received had on their ability to remain safe in their homes since repairs were made. Finally, key stakeholders were interviewed to obtain insights on what factors do and do not make the services provided by Rebuilding Together San Francisco vital to allowing seniors to age in place.

The number of seniors within the City of San Francisco is growing and challenging the existing public service system to meet their housing and health care needs at a time when financial resources are limited. As people age, there are frequent changes and modifications required and made in their living environment to help eliminate risks of falls and potential health hazards. Rebuilding Together San Francisco is a community based organization that leverages volunteer labor with corporate donations to provide repairs and install safety modifications, free of charge, to low income seniors in the City of San Francisco.

#### **Chapter 1 - Introduction**

#### **Research Questions**

This study researched the impact that services provided by Rebuilding Together San Francisco had on allowing senior residents of the city of San Francisco, California to age in their homes. In an effort to determine if the hypothesis that Rebuilding Together San Francisco is making the homes of low income seniors safer and healthier can be supported, the following research questions were explored:

- Why is the issue of seniors remaining safe and healthy in their home important?
- 2. What factors of home health and safety affect an older individual's ability to remain in their home as they age?
- 3. What impact has Rebuilding Together San Francisco had on making the homes of senior's safe and healthy places to live?

The research methodology was initiated with a review of pertinent literature focusing on the impact that the aging population currently has on public policy as well as the anticipated impact this growing demographic is expected to have in the near future. Further literature and study data was reviewed to identify the specific indicators determined to be relevant to making it possible for individuals to remain in their homes; while experiencing declines in mobility associated with the natural aging process. Finally, interview data generated from this study was reviewed to determine if the nonprofit organization, Rebuilding Together San Francisco, is affecting change on the household they serve. The results of this study may provide information that can be used to strengthen public and non-profit partnerships to adequately assist the growing number of aging residents in San Francisco that will make it possible for more low-income seniors to age in place.

#### **Background and History**

Rebuilding Together is a national non-profit organization that was created from a grass roots effort of citizens helping neighbors whose homes had fallen into disrepair. Originally called Christmas in April when organized in 1973, the mission of neighbors helping neighbors grew around the United States with citizens groups providing one day of service to their neighbors in the month of April. This movement grew organically until 1988, when a national office was established along with their formal non-profit status. Today, the national organization is comprised of 166 affiliates located around the United States (Rebuilding Together, 2014).

Rebuilding Together San Francisco was established as an affiliate in 1989 as the result of grassroots collaboration among several local businesses and community organizations in response to housing damages from the Loma Prieta earthquake, in which hundreds of low income neighborhoods were damaged. As with other affiliates, the primary funding model for operations and projects has been generated through sponsorships from banks and local corporations as well as grants from philanthropic foundations. Current operations call for Rebuilding Together staff to interview prospective home owners who have requested assistance to determine if they qualify as low-income and in need of appropriate repair services. Corporations are then asked by

Rebuilding Together San Francisco to provide funding to purchase materials for the project. Volunteers are typically recruited from the sponsoring company as well as churches and other community organizations to provide the repairs to the home. The level of repairs often vary, dependent upon the volunteer's skill level, from painting, repairing broken fixtures, curtain rods, and doors.

After a period of ten years in which low income homeowners in San Francisco were helped, several trends became apparent. The majority of home owners being served were minority women, over the age of 65, who were unable to afford to purchase needed repairs and modifications for their home. According to their most recent Annual Report, 81% and 75% of the low-income homeowners receiving home repairs are minority and women respectively. Furthermore, the average household income of households served report income that is 50% of the Average Median Income (Rebuilding Together San Francisco Annual Report, 2012. p.9). Over time, the scope of need has gradually become more essential than cosmetic. The original issue of homes being in disrepair had escalated into homes needing significant modifications in order for the homeowners to remain in the home.

In 2000, Rebuilding Together San Francisco implemented a Home Safety Program to address these more vital problems. The organization began to install grab bars, raised toilet seats and non-slip mats to reduce injuries in the bathroom and fire, smoke and carbon monoxide detectors to alert homeowners of danger. These modifications are installed by skilled volunteers and financially supported through grants from private foundations and corporations. However, the need expressed by the community continues to exceed the organizations capacity at this time. In 2014, Rebuilding Together adopted standards issued by the National Center for Healthy Housing in an effort to focus repairs on items that would have the most impact on reducing risks in the home and improving the overall health of the aging resident. Each home is assessed to identify risks and a scope of work is developed to address the problem (Rebuilding Together, 2014).

#### **Chapter 2 - Literature Review**

This research seeks to determine if the services provided by Rebuilding Together San Francisco are making the homes of low income seniors they serve safer and healthier. While the focus of this research is focused on San Francisco, national trends and research data were examined to determine the relevance of such services and the potential impact that such services have. Literature reviews examine the anticipated impact that the aging populations will have on public services, as well as the unique characteristics of the aging poor and specific issues associated with aging in San Francisco. Further reviews explain specific indicators of safe and healthy housing that impact an individual's ability to live in a safe and healthy home.

#### Impact of Aging Demographics

The American population continues to get older. According to the Joint Center for Housing Studies of Harvard University, "the 50-and-over population is projected to increase about 20 percent by 2030, to 132 million. In just 15 years, one in five people will be at least 65" (Joint Center for Housing Studies, 2014, p.1). The American Association of Retired Persons further explains, "In 2011, the first of the baby boom generation reached what used to be known as retirement age. And for the next 18 years, boomers will be turning 65 at a rate of about 8,000 a day (American Association of Retired Persons, 2014, p.1).

The Stanford Center on Longevity conducted a study on the characteristics of aging in place by interviewing 19 aging in place experts and reviewing over 100 published studies addressing community characteristics that impact elder health, wellbeing, and the ability to age in place. They have defined this phenomenon as "the ability to remain in one's own home or community in spite of potential changes in health and functioning in later life (Stanford, 2013, p.5).

Housing was identified as a key indicator in a person's ability to age in place. Researchers revealed that most of the housing stock in the United States is not conducive to aging in place because they narrow doorways and hallways, steps, and bathrooms on various floors of the home. This is reflective of the fact that almost 29% of homes owned by individuals over the age of 65 were built before 1950, before ADA standards and recommendations were considered relevant, (Stanford, 2013)

#### Poverty and Aging

The Federal Interagency Forum on Aging-Related Statistics released a report entitled, Older Americans 2012: Key Indicators of Well-Being in 2012. This forum is comprised of sixteen federal agencies and provides a comprehensive view of the state of well-being derived from statistics collected from all federal agencies. For the purposes of this review, indicators related to safe and healthy housing elements (Federal Interagency Forum, 2012).

Economically, the report revealed that although there was an overall decrease in the number of seniors living in poverty, the number of blacks and those without high school educations reported fewer financial resources. As of 2009, approximately 40% of older Americans reported spending over 30% of their household income on housing and utilities (Federal Interagency Forum, 2012, p. XV.). Additionally, the statistics showed that older women were more likely to live in poverty than men, 11% and 7% respectfully, in 2010. Furthermore, the study showed that people age 65-74 had a poverty rate of 8%, compared to 10% of those ages 75 and older" (Federal Interagency Forum, 2012, p. 12). The Federal Interagency Forum also reported that in 2009, about 41% of individuals over the age of 65 reported some degree of functional limitation. Of these, 12% reported problems with completing such tasks as fixing meals, getting to appointment and cleaning and 25% had trouble completing self care (Federal Interagency Forum, 2012, p. 45). This level of impalement is associated with one's ability to remain independent in their home.

#### Safe and Healthy Living Indicators

The U.S. Department of Housing and Urban Development published a report highlighting key issues related to aging and housing in the fall of 2013 and reports that the anticipated strain the growing aging population will have on federal agencies will increase federal debt to an estimated 61.8% by 2020 and will restrict funding for other federal programs in order to funnel additional funds to Social Security, Medicare and Medicaid. (US Dept of Housing, 2012, p. 2) The report also indicated that aging in place initiatives have the potential to relieve this anticipated cost and emphasized the impact that home modification can have on reducing the likelihood of in home injuries.

Subsequently the National Center for Healthy Housing; a broad, voluntary coalition of over 140 organizations working to improve housing conditions nationwide, in partnership with the American Public Health Association developed a list of standards that reflect the most recent connections between housing conditions and health. The standards are based of thousands of peer-reviewed studies and are expected to reduce

risks in the home allowing safer and healthier aging in the home. (National Center for Health Housing, 2014) The focus of these standards rests of "Seven Principle of Healthy Homes: Keep it dry, clean, Pest-free, safe, contaminate-free, well ventilated and maintained "(National Center for Healthy Housing, 2014. p. 5). From these principles, twenty-two items were incorporated into a check list that has been adopted by Rebuilding Together in their effort to make homes safer and healthier:

- 1. A working smoke alarm is on each floor, including the basement and outside each bedroom.
- 2. A working carbon monoxide alarm is in place for homes with combustion appliances or an attached garage.
- 3. A currently dated Class ABC fire extinguisher is available in or near the kitchen.
- 4. Vented combustion appliances exhaust outside.
- 5. No known electrical hazards are present and kitchens and baths have GFCI's.
- 6. The homeowner has access to a working sink, toilet, bathtub and/or shower.
- 7. The homeowner has access to a working refrigerator, range, and water heater
- 8. Main rooms and stairs have adequate lighting for occupants to safely move about.
- 9. Main rooms and stairs are free of tripping hazards.
- 10. Elevated porches and decks have secure guardrails and stairs and ramps have secure handrails.
- 11. Windows and exterior doors open effectively, close securely, and seal well.
- 12. Rainwater is effectively directed away from the structure.
- 13. The home is free of active water leaks and serious moisture problems.
- 14. If the home has a clothes dryer, it is vented outside with metal duct and unobstructed airflow.
- 15. If the home has an exhaust fan in a bathroom or kitchen, it is working and vented outside.
- 16. The attic is vented through soffits and either a ridge cap or gable vents.
- 17. The homeowner can maintain the interior temperature in a comfortable range.
- 18. Interior paint and wall covering is intact.
- 19. Exterior walls have no gaps, cracks or holes larger than 1/8 inches.
- 20. The home is free of live infestation of pests and sources of attraction have been removed.
- 21. Old "ratty" wall-to-wall carpeting has been replaced, preferably with a durable floor covering.
- 22. The numerals in the property's address are clearly displayed on the property.

### Aging in San Francisco

The San Francisco Department of Aging and Adult Services Area Plan for 2012-2016 further highlights the impact that seniors have on the City's public services and the impact that the City's economy has had on senior resident's ability to receive supportive services. They also report that almost two-thirds of service recipients reported some level of housing crisis that put them at risk of not being able to remain in their home. In most cases residents were unable to afford to make necessary modifications to their homes in order to remain there safely. (San Francisco Department of Aging, 2011)

M. Scott Ball presents an argument for local government to be "smarter" and create communities that prepare for the life cycle of its entire population. (Ball, 2012) Ball asserts that communities need to address the need for affordable, appropriate and safe housing in addition to transportation and supportive services. Without looking at the larger implications of an aging population, cities are limiting their future and making it very hard for residents to remain in their neighborhoods. He describes the need for the home to be just as accessible as the community the home resides in.

Once a home has been modified to accommodate the mobility needs of an aging resident, there continue to be personal needs that must be accessible outside of the home. The need for safe accessibility outside of the home requires even sidewalks and safe access to public transportation, which is currently lacking in many low-income neighborhoods in San Francisco. Furthermore, a person requiring modifications for mobility deficits will also, more than likely, require assistance with other activities of daily living such as meal preparations, house cleaning, and coordinating medical services.

Home modifications alone will not meet these needs and continue to make an aging person vulnerable. Ball asserts that planning and zoning entities must be made aware of the needs of an aging society in order to cities and town a supportive environment for their residents and the availability of services to assist with activities of daily living are paramount to an aging individuals ability to age in place: modifying a home is only part of the solution. (Ball, 2014. p. 8)

Richard Walker provided additional insight as to why the peculiarities of the San Francisco landscape make the area a unique obstacle to its aging residents. A look back into the history of San Francisco's development reminds us of its rugged beginning. The discovery of gold in 1849 and the railroad boom of 1860 provided much of the foundation for the development characteristics of the city (Walker, 1995). In order for wealthy settlers to separate themselves from the rest of the city, miles of Victorian row houses were built to separate the classes (Walker, 1995, p.36). This style of architecture typically includes stairs, narrow hallways and doorways, and steep roof lines which are easily managed by young and mobile inhabitants.

These housing features that were so popular and appealing in the late 1800's also create obstacles for aging residents. Because the naturally occurring aging process makes stairs difficult to climb, narrow hallways and doorways impossible to fit through if a walker or wheelchair is necessary this architecture is not considered aging friendly. Furthermore, the landscape of San Francisco, with its hills and steep streets and property lines, make it difficult for an aging person to navigate.

The unique characteristics of housing stock provide tangible barriers to an older person's ability to remain in their home as they age. However, the economic realities of today's society present additional obstacles for a large portion of the aging population. The extremely high cost of living in San Francisco accompanied by the reality of a low income make matters more complicated.

#### **Chapter 3 - Research Methodology**

This study was designed to determine if the housing repair and modification services offered by Rebuilding Together San Francisco are making the homes of low income elderly safer and healthier. To date, there has been no research targeting the scope of services provided by this type of service organization and the impact they have on older individuals in a metropolitan city such as San Francisco.

The research question being studied is: Is Rebuilding Together San Francisco making the homes they serve safer and healthier? This researcher's hypothesis is: Rebuilding Together San Francisco is making the homes they serve safer and healthier.

The independent variable in this research is Rebuilding Together San Francisco's services and the dependent variable is the impact result of making the homes of seniors safer and healthier. Although there is only one organization called Rebuilding Together San Francisco, the scope of their service can vary according to funding and volunteer labor. This organization also categorizes potential clients based on the nature of their need. If callers report the need for safety equipment, they are put on a list for volunteers to install home safety equipment. If they report needing larger scopes of work, such as painting, step repairs and roofing, they are added to a list that is matched with larger volunteer groups and sponsors. For the purposes of this research, all individuals who had requested services were merged into one list and sorted randomly.

The dependant variable, making homes safer and healthier, is expected to be a subjective evaluation made by the individuals being served and key informants.

Specific standards have been developed by the National Center for Healthy Housing that have been determined to represent a safe and healthy home, as stated on page 11 of this paper. However, clients who have received services from Rebuilding Together San Francisco have not received training on this material.

#### **Terms and Definitions**

For the purposes of this research, the following operational definitions were used:

- Rebuilding Together San Francisco is non-profit organization located in San Francisco California that leverages volunteers to provide home repairs.
- 2. A home is a dwelling, either single or multi-family, whose legal owner is the individual being served.
- Seniors will refer to individuals, over the age of 60 who received services from Rebuilding Together San Francisco during the 2014 calendar year.
- 4. The terms safer and healthier will refer to the standards identified by the National Center for Healthy Housing targeting twenty-two risk factors associated unsafe and unhealthy homes described on page11 of this paper.

#### Data Collection Process Overview

Primary data was collected by conducting telephone interviews with two groups of seniors as well as key Informants. Group One was comprised of seniors who had received services from Rebuilding Together San Francisco; Group Two had requested services but had not received services as of the time of the interview; Key Informants consisted of professionals in the fields of aging and Rebuilding Together San Francisco administration. The purpose of the interview was to determine what, if any, impact Rebuilding Together San Francisco had by providing or not providing services.

A list of 168 names and phone numbers was provided to this researcher by Rebuilding Together San Francisco and identified as individuals who had received services from the organization during the 2014 calendar year. A similarly compiled list of 50 individuals who had requested services but had not received services to date was also provided. These lists did not include any service or need related information.

Group 1, those who had received services from Rebuilding Together San Francisco were asked to respond to four questions which were designed to obtain information about the impact, if any, the services provided to them had made on the health and safety of their home. Group 2, who had requested but not received services were asked three questions to determine if they were able to coordinate home repair needs without the assistance of Rebuilding Together San Francisco.

Four key informants were surveyed to obtain their perspective on the needs of aging individuals in San Francisco and the impact Rebuilding Together San Francisco has made toward helping this population age in place. Anne Hinton; Executive Director of the San Francisco Department of Aging and Adult Services, represents the City agency responsible for advocating, coordinating and funding services for older adults and individuals with disabilities. Patty Clements, Director of Aging Services for Catholic Charities in San Francisco, leads a large community based effort to provide support to aging individuals in order to allow them to age in their homes. Karen Nemsick, Executive Director of Rebuilding Together San Francisco, has extensive experience in coordinating home modification and repair services to low income seniors in San Francisco. Timothy Dupre, President of Rebuilding Together San Francisco's Board of Directors, has experience as a rebuilding project leader for teams that conduct repair services as well as the administrative vision for Rebuilding Together San Francisco.

#### Controlling for Internal and External Validity

Potential factors affecting the internal validity of this study include unexpected health conditions of the individuals being interviewed. Many conditions cannot be eliminated or prevented through the implementation of health and safety modifications and may prevent an individual from remaining in their home despite the availability of a safe environment. Additionally, personal finances may prohibit an individual from being able to pay required mortgages, taxes or utilities in order to remain in their home.

In order to reduce the impact of these internal variables, the individuals included in the two interview groups had been screened for financial eligibility and have been determined to be in no immediate risk of eviction by Rebuilding Together San Francisco prior to providing the list to this researcher.

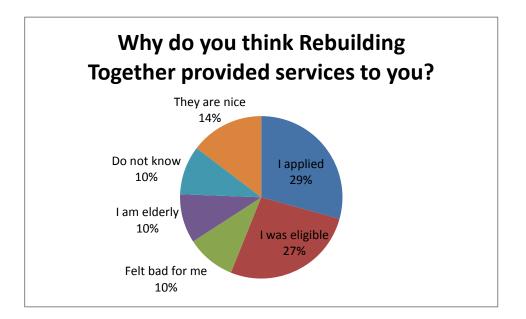
This research is externally valid to other national Rebuilding Together Affiliates of similar size to Rebuilding Together San Francisco. There are currently no other nonprofit community based organizations that offer free home repair and safety modification services to low income home owners in the San Francisco area. However, this research would be pertinent to medical service organizations that offer health care to low income seniors, families as well as the general public. The issue of safe and healthy housing has the potential to impact everyone because the home environment can impact all aspects of personal health.

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#### **Chapter 4 - Results and Findings**

Telephone interviews with Group 1, individuals who have received services, were conducted after 4:30 P.M. during week days and between 10:00 AM and 4:00 PM on weekends. The list of 168 names provided by Rebuilding Together San Francisco names were presented in alphabetical order. This list was then sorted to select every third name. There were a total of 41 responses to this telephone interview.

Question 1 asked participants why they thought Rebuilding Together San Francisco provided services to them. The responses were very similar in nature with 29% (12) stating they applied, 27% (11) indicated they were eligible, 14% (5) responded that they received services because the organization was nice, 10% (4) stated they did not know and the remaining 20% (9) indicated that their service was the result of being elderly, or the organization felt bad for them.

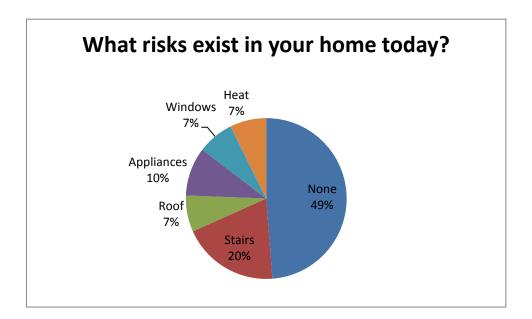


It is apparent from data that, although respondents were grateful, their

understanding of why they were helped was not clear to them.

Question 2 asked this group what risks existed in their homes today.

49% of respondents indicated there were no risks in their home after receiving services from Rebuilding Together San Francisco. However, the remaining 51% of respondents identified remaining risks in the areas of roofing (7%), stairs (20%), appliances (10%), windows (7%) and heat (7%).

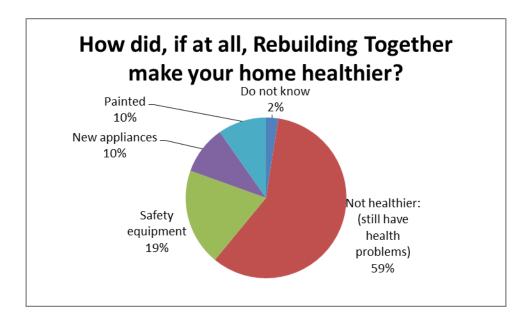




The majority of respondents identified unmet need and continuing risk factors despite having received some level of service from Rebuilding Together San Francisco.

Questions 3 asked how did, if at all, Rebuilding Together San Francisco make your home healthier?

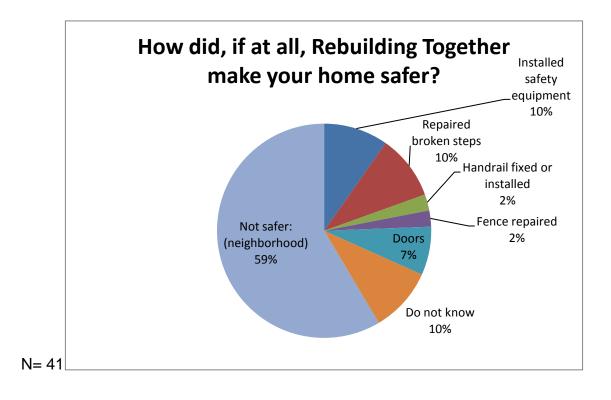
Respondents identified tasks and services that had been provided by Rebuilding Together that they felt made their homes healthier. The provision of new appliances and painting were reported by 20% of respondents and the installation of safety equipment was reported by 19% as making their homes healthier. One respondent reported that they did not know how the services they received made their home healthier. However, an overwhelming 59% indicated that Rebuilding Together San Francisco did not make their homes healthier because they continued to experience health problems even after Rebuilding Together San Francisco had provided services to them.





Questions 4 asked how did, if at all, Rebuilding Together San Francisco make your home safer?

Respondents identified tasks and services that had been provided by Rebuilding Together that they felt made their homes safer. Activities such as installing safety equipment, repairing broken steps were identified by 20% of the respondents and 4% reported that installing handrails and repairing a fence made them feel safer. Additionally, 7% identified door repair as the activity that made their home safer. An overwhelming 59% reported that the services they received from Rebuilding Together San Francisco did not make them feel safer, primarily because of the neighborhood they lived in.



During the telephone interviews with Group 1 respondents, it became apparent that they interpreted questions 3 and 4, asking how Rebuilding Together made their homes safer and healthier, to imply their personal health and safety and not their home environment. Comments to these questions included:

"I am still sick."

"I still worry about being safe in my neighborhood"

"People still try to break into my house."

Group 2, individuals who have requested but did not receive services from

Rebuilding Together San Francisco were asked three questions to determine how their

need for assistance currently impacted them.

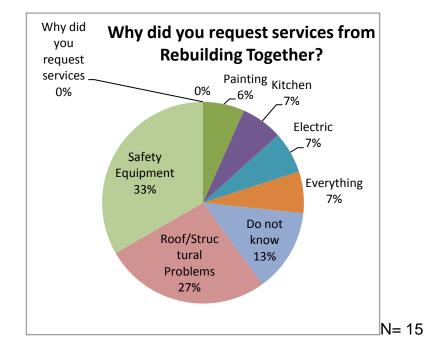
Question 1 asked respondents why they had requested services from Rebuilding

Together. The need for painting, kitchen and electrical repairs were identified by 20% of

respondents, 7% reported they needed help with everything and 13% reported that they

did not know what services they needed. The need for safety equipment was reported

by 33% and structural and or roofing repairs where identified by 27% of respondents.

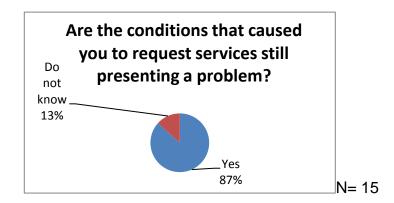


Running Head: The Need for Safe and Healthy Homes in Order to Aging in Place 25

Question 2 asked this group of respondents if the condition that caused them to

request assistance from Rebuilding Together San Francisco still presented a problem.

An overwhelming 87% reported that the conditions continued to present a problem while 13% reported that they did not know.

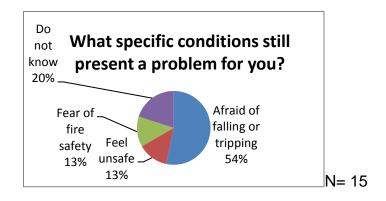


Question 3 asked respondents to identify the specific conditions that continued to present a problem.

The primary concern for 54% of respondents was the fear of tripping or falling.

While fear of fire and feeling unsafe were identified by 13% each as ongoing concerns.

20% of respondents did know what conditions continued to present a problem.



#### Key Findings from Survey Data

As the survey data indicates, service recipients did not associate the services they received from Rebuilding Together San Francisco with making their homes safer and healthier. The majority of respondents associated the terms safe and healthy with their personal safety in their neighborhood and their personal health conditions. These respondents recognized the changes that had been made to their home but did not recognize the home as being safe and healthy.

Survey data clearly showed that individuals who had not received services from Rebuilding Together San Francisco but had requested assistance, had not been successful in finding alternative methods to having the needed repairs made. Furthermore, data reflected falling, tripping and safety as a primary concern for all individuals who had and those who were still waiting for services.

The research data reflects unmet need among some service recipients. This researcher has concluded that the repairs remaining as needed are costly and require a greater level of skill than smaller repairs. Roofing problems, windows, furnace replacement and other structural problems are very expensive to perform.

Key Stakeholders were selected based on their familiarity and experience in the field of aging services in San Francisco and their knowledge of services provided by Rebuilding Together San Francisco. Two questions where presented and their responses follow: 1. What do you see as the biggest barrier to seniors being able to age safely in their homes in San Francisco?

Anne Hinton, Director San Francisco Department of Aging and Adult Services

"Being able to afford the costs associated with repairing their homes when the need arises. I would image this is especially true for the old who may of out lived their savings."

**Patty Clement**, Director of Aging Services for Catholic Charities in San Francisco

"In San Francisco we have many who I call house rich and cash poor. They have the homes they purchased many years ago, but not enough residual cash to maintain their homes as they would like.

The homes become run-down to where safety is a concern, in order for them to remain in the home. This is a growing need and concern. Also, many seniors do not reach out for assistance until they are in such dire straits that sometimes it is too late. They are very proud and do not want to have to ask for help. They are also afraid that if they do ask for help someone, a family member, or government will come in and take over their lives. I do feel we need to educate the population that services are available and the sooner they reach out the better. If they understood the goal of keeping them home safely was everyone's goal it may make a difference. But the community overall is just not aware of services available in the community and are still afraid to reach out for help."

Karen Nemsick, Executive Director Rebuilding Together San Francisco

"Aging homes and dwindling pensions. Seniors tend to be less physically and financially able to keep up with basic maintenance in their homes. As they age, balance issues increase the probability of falls in the home. However, even a simple fix like installing grab bars in the bathroom could be cost prohibitive. Larger repairs, including updating inefficient and unsafe appliances, repairing exterior stairs, installing handrails are critical to a homeowner's health and wellbeing, but are completely out of reach financially. By keeping their own home safe, seniors on a limited income can remain in their own homes, which are often the most affordable place for them to live since mortgages have been paid and property taxes are low."

**Timothy Dupre**, President Rebuilding Together San Francisco Board of Directors

"Cost of living is the biggest opportunity for seniors In San Francisco. A large group of seniors can barely afford to pay their bills let alone keeping up with basic home repairs or safety modifications."

2. What impact do the services provided by Rebuilding Together San Francisco have on making homes of seniors safer and healthier?

Anne Hinton, Director San Francisco Department of Aging and Adult Services

"Well, for the folks who receive your services it is directly connected to my first answer. I have known of older adults who were only able to stay in their home because of the work that Rebuilding Together did to make the environment livable and safe. In some cases people had some money to do repairs but not enough and in other cases they had nothing so Rebuilding Together was the only answer. Without some peoples only option would be to sell and find another community to live in, which is a very difficult thing to do."

**Patty Clement**, Director of Aging Services for Catholic Charities in San Francisco

"A large impact is made. Senior who might otherwise have to move out can remain at home once Rebuilding comes in. Major changes are made and housing is made safe and habitable when it might not have been when work is first started. If we could reach many earlier, the task would be easier and many more could be helped because the jobs would be less complicated and expensive. I have seen many amazing changes made with the rehabs."

Karen Nemsick, Executive Director Rebuilding Together San Francisco

"Installing grab bars in the bathroom and hand rails on the stairs reduced the probability of falls at home, helping senior homeowners age in place without the risk of falling. Repairing exterior stairs in the front and back of the home allows for safe egress in case of emergencies like fire or earthquake. Updating appliances not only save the homeowner money on energy bills, they often reduce the risk of carbon monoxide leaks in the home. Rebuilding together also installs smoke and CO detectors to provide further safety from fires and carbon monoxide poisoning."

**Timothy Dupre**, President Rebuilding Together San Francisco Board of Directors

"Rebuilding Together provides assistance to elderly San Franciscans by rehabilitating homes. RTSF focuses on repairs that include painting, carpentry, plumbing, electrical, weatherization, clean up, and yard work. Improving the material integrity of one's home instills personal dignity, allowing safe and independent living as well as renewed pride in the home and one's history."

#### Key Findings from Interview Data

Key informants unanimously identified lack of funds as the primary barrier to seniors being able to age safely in their homes. Because the homes in San Francisco are predominantly multi-floor, modifications will more than likely be required to assist aging home owners with going up and down stair, using the bathroom and safely maneuvering narrow hallways. Lack of knowledge of available resources was also reported as a barrier. Key Informants clearly supported the research hypothesis that Rebuilding Together San Francisco is making the homes they serve safer and healthier.

#### Significant Findings from All Data

Research data clearly highlighted the areas in which Rebuilding Together San Francisco is successfully helping the low income seniors they serve. Safety modifications and minor repairs were reported as having a significant impact of the service recipients. However, data also pointed out that this organization does not currently have the capacity to address the more expensive and structural repairs that are needed by a large number of seniors. Additionally, key informants clearly expressed their belief that Rebuilding Together San Francisco is making the homes of the seniors they serve safer and healthier, however, the majority of service recipients' did not agree. It is worth pointing out that the difference in responses is reflective of the service recipients' lack of clinical understanding of a safe and healthy home.

#### **Chapter 5 - Conclusion and Recommendations**

Conclusion 1: Based on the majority of responses obtained from Group 1, aging individuals would benefit by receiving education on health and safety risk factors in their homes. Data revealed that most respondents considered a state of health and safety to be applicable to their person and not their homes. Materials and training could help educate older residents of potential dangers and risks in their homes. However, it is also interesting to note that several respondents claimed that they did not know why they were referred or what the nature of their needs was. A possible explanation for this response could be that these individuals had a representative who requested assistance on their behalf, leaving the respondent unaware of the nature of the risks in the home

Conclusion 2: Due to lack of funding, Rebuilding Together San Francisco is currently unable to perform repairs that are expensive and structurally complicated. The unmet needs remaining for service recipients represented in Group 1 consists of stairs, windows, furnaces and foundations. Additional public funding for home repairs and modifications would allow a large portion of low income seniors to be served and allow Rebuilding Together San Francisco to make a greater impact.

Conclusion 3: The scope of repairs Rebuilding Together San Francisco is able to complete is limited by their funding and skill capacity. As survey data indicated, some needed repairs were not addressed due to funding limitations and the skill needed to install the modification. Additional funding would allow Rebuilding Together San Francisco to purchase the supplies and skill required to make such repairs.

Conclusion 4: Rebuilding Together San Francisco does not have the name recognition necessary to obtain additional funding from private corporations and donors. Additionally, low income seniors may not be aware of the assistance available from Rebuilding Together.

#### Recommendations

Recommendation 1: By December, 2015, Rebuilding Together San Francisco should develop educational materials addressing safe and healthy housing. Such materials should provide to seniors and families when being assessed and oriented for service. This material may also be shared with other direct service providers who serve the aging population in an effort to reach as many seniors as possible.

Recommendation 2: By August 1, 2015, Rebuilding Together San Francisco should contact the City of San Francisco Mayor's Office on Housing and Community Development to request additional funds. An initial funding request of \$300,000, leveraged with volunteer labor and discounted materials would make it possible for Rebuilding Together San Francisco to address approximately 50% of the unmet need identified in this research.

Recommendation 3: By April 1, 2015, Rebuilding Together San Francisco should expand their reach into multiple funding options and investigate additional funding from health care institutions, medical insurance providers and long term care providers. Recommendation 4: By September 1, 2015, Rebuilding Together San Francisco should develop a marketing plan to guide the organization to new level of exposure and access to funding options.

These recommendations are expected to improve Rebuilding Together San Francisco's capacity to provide the help most needed by low income seniors in order for them to safely age in place.

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### Appendix A - Interview Questions

The following questions were presented to a random sample of individuals over the age

of 65 who received services from Rebuilding Together San Francisco from January 1,

2014 to December 31, 2014. Questions were presented during telephone interviews.

#### Interview Questions - Received Services

My name is Rachel Fontenot and I am currently completing my master's degree in public administration at Golden Gate University. I am inviting you to participate in a brief survey to obtain your personal perspectives on the impact that Rebuilding Together San Francisco has had on your household. The survey should take approximately 5 minutes to complete and is being conducted over the telephone. Neither your name nor ID number is required to complete this survey. Your answers will be kept confidential and anonymous. The survey will only be used by me for the purpose of completing my project. I will not publicly release your responses or other information about you. Thank you in advance for participating and for helping me complete my research study. Your participation and input is important.

- 1. Why do you think Rebuilding Together provided services to you?
- 2. What risks exist in your home today?
- 3. How did, if at all, Rebuilding Together make your home safer?
- 4. How did, if at all, Rebuilding Together make your home healthier?

Appendix B - Interview Questions - Requested But Did Not Receive Services

My name is Rachel Fontenot and I am currently completing my master's degree in public administration at Golden Gate University. I am inviting you to participate in a brief survey to obtain your personal perspectives on the impact of not receiving services from Rebuilding Together San Francisco had on your household. The survey should take you approximately 5 minutes to complete and is being conducted over the telephone. Neither your name nor ID number is required to complete this survey. Your answers will be kept confidential and anonymous. The survey will only be used by me for the purpose of completing my project. I will not publicly release your responses or other information about you. Thank you in advance for participating and for helping me complete my research study. Your participation and input is important.

1. Why did you request services from Rebuilding Together San Francisco?

2. Are the conditions that caused you to request services from Rebuilding Together San Francisco still presenting a problem for you?

3. What specific conditions in your home still present a problem for you?

### Appendix C – Raw Data Group 1

Received Ser	vices			
41/168	Why Risk	ks today safer?	Healthier?	
				Many respondants had a different understanding of
1	Y	Y	Ν	what health and safety indicators were.
2	Y	Y	Ν	
3	Y	Y	Ν	
4	Y	Υ	Y	1. Why do you think RTSF provided services to you?
5	N	Y	Ν	2. What risks exist in your home today? 3.
6	N	Υ	Υ	How did, if at all, RTSF make your home safer? 4.
7	Y	N	N	How did, if at all, RTSF make your home healthier?
8	Ν	N	N	
9	Y	N	N	
10	N	Y	Υ	
11	Y	N	N	
12	N	Y	Υ	
13	Ν	N	Υ	
14	Y	N	N	
15	Ν	N	N	
16	Ν	Ν	?	
17	Y	N	Y	
18	Ν	Ν	N	
19	Y	Y	Υ	
20	Y	Υ	Υ	
21	Y	N	Y	
22	Y	Ν	N	
23	N	Y	Υ	
24	Y	Y	Υ	
25	Ν	N	N	
26	Ν	N	N	
27	Ν	N	Ν	
28	Y	N	N	
29	Ν	N	N	
30	N	N	N	
31	Y	Y	Υ	
32	Y	N	N	
33	Y	Y	Υ	
34	N	Y	Y	
35	N	Y	N	
36	N	N	Ν	
37	Y	N	N	
38	N	N	Ν	
39	N	Ν	Ν	
40	Y	N	γ	
41	Y	Y	Y	

## Appendix D- Raw Data Group 2

#### 15/65 Received No Services

What service whet service whet we have a construction of the service whet we have a construction of the service whet service whet service we have a construction of the service we have	vices did you	Conditions still a problem	
1 Painting	stairs	Y	same as called for
2 kitchen	livingroom	У	
3 smoke/fir	e bathtub	у	afraid of falling
4 deck	electric	У	tripping on deck-fire
5 everythin	g	у	falling, unsafe
6 remodel	roof	У	house is falling apart
7 smoke ala	ırm	У	fire
8 ?		?	referred by social worker did not know
9 railing		У	falling down steps
10 roof		У	
11 porch fall	ing	У	unsafe
12 ?		?	Referred by MOW not sure what problems were
13 grab bars		у	falling
14 free alarn	ıs	у	fire
15 bathtub		У	falling