

Housing Options for Older Adults

By Wesley E. Wright and Molly Dear Abshire, as published in the Houston Chronicle Senior Living Section on May 1, 2002.

Elder law attorneys are often faced with introducing older clients to housing options available in the community. The types of housing differ depending on the community the client seeks to live in. It is generally accepted by those in a position to advise such clients that the overall goal should be to try to allow the older person to live in the least restrictive environment possible. The person's medical condition and ability to accomplish various activities of daily living (ADLs) will factor into in this decision. Let's consider a person's possibilities in light of these points beginning with the least restrictive environment first, and progressing toward more restrictive arrangements.

Most people will want to stay at home as long as possible. Planning in advance is the key. Staying at home can be financially challenging if sitters or nurses are required, especially if the person hopes to stay there long-term. Maximizing personal investments and community assistance or having a long-term care policy which covers home care, may be part of the solution. However, be aware that some people learn that there is a price to pay for staying at home. Some people experience invasion of privacy feelings because of the presence of the attendants hired to help in the home. You may end up wishing you had moved somewhere else as opposed to this complication.

The cost of 24 hour care can be formidable, quickly reaching \$60,000-\$80,000 per year. For those who have children or a spouse as a caregiver, issues may arise regarding the continuing ability of the caregiver to care for a family member on a long-term basis. Eventually, it is not uncommon for a spouse-caregiver to get sick, or even reduce their own life expectancy, trying to care for the other spouse beyond the time which they should have.

Supplementing a person's care with public benefits may help extend the person's ability to stay at home. Services furnished by programs which are funded through Title III of the Elder Americans Act, such as Meals-on-Wheels, bathing or limited home health services, adult day care and care management services, should be considered. Information regarding these resources can be sought from organizations such as your local Agency on Aging, and the Alzheimer's Association in your community.

Other ways of extending the stay at home would include electronic devices for calling medical help and modifications to the home for the accessibility of disabled persons. Sometimes downsizing the home, or moving to a retirement community which focuses on persons 55 years of age or over, helps. Another option for living may include moving in with a relative, such as a son or a daughter. If staying at home is not a viable option, then other arrangements such as foster care, may be available. This is a social program which places a person into the home of a willing family. These programs vary in costs and are not available in every community.

Congregate care living usually means living in groups such as apartments with usually one or more daily group meals served centrally. This type of living is sometimes subsidized by federal housing programs.

Room and board facilities, or personal care homes, are available in most communities and are operated by individuals, married couples and companies. They provide room and board and usually some oversight and assistance with an individual's ADLs. Larger facilities of these types are usually referred to as assisted living. Then there are Continuing Care Retirement Communities (CCRC's) that provide shelter, health and support services usually for a large entrance fee, and monthly fees as well.

Finally, the person may require nursing facility care. Although no one ever wants to go to a nursing facility, we should all consider a plan for such just in case.