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*With 21 volunteer
board members from
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Testimony of Julia Evans Starr
Connecticut's Legislative Commission on Aging

The Planning and Development Committee

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Senators Osten and Cassano, Representatives Miller and D'Agostino, and esteemed members of the Planning and Development Committee, my name is Julia Evans Starr, and I am Executive Director for Connecticut's Legislative Commission on Aging. I thank you for this opportunity to comment on the before you today regarding temporary health care structures.

As you know, Connecticut's Legislative Commission on Aging is the nonpartisan, public policy and research office of the General Assembly. It has been an effective statewide leader in improving the quality of life for older adults and persons with disabilities for 22 years. With just 4 employees and 21 volunteer members from across the state, we shape innovative public policies, promote government accountability, establish diverse partnerships and coalitions, and analyze demographic trends to prepare Connecticut for a growing older adult population.

We thank you for the opportunity today to comment on SB 88: An Act Concerning Temporary Health Care Structures which seeks to allow Connecticut residents to install temporary health care structures on their property. Temporary health care structures are self-contained living areas, located on the property of the caregiver. They are a type of accessory dwelling unit and represent one of a broad range of accessible, affordable and creative housing options emerging for older adults or persons with disabilities who may need assistance with the activities of daily living but may be unable or hesitant to reside directly in-house with a caregiver.

This General Assembly, through the passage of Public Act 13-109, charged the Commission on Aging with spearheading an ongoing, statewide livable communities initiative. The initiative works to ready local, regional and state leaders to plan for Connecticut communities with an increasingly older, longer-lived demographic. At least 20% of almost every town's population in the state will be 65 years of age or older by 2025, with some towns exceeding 40%. Between 2010 and 2040, Connecticut's population of people age 65 and older is expected to grow by 57%, with less than 2% growth for people age 20 to 64 during the same period.ⁱ Increased longevity, declining birth rates, and declining mortality are all converging



to create a new, long-term reality—older adults will comprise an increasingly large proportion of the population.

One of the guiding values of the livable communities initiative and the Commission's broader work in general is the notion of choice—promoting personal dignity and functional independence across the lifespan by creating a broad array of choices, in housing and otherwise, to meet each person's evolving needs. Temporary health care structures represent an additional choice for families seeking creative solutions to supporting loved ones in their aging journey and also may help to meet Connecticut residents' desires for space to support older parents, while affording additional privacy and separation that many older adults seek.

SB 88 follows the broader local trend across the state toward allowing accessory dwelling units (ADUs). Allowing ADUs is a creative and cost-effective solution toward diversifying the state's housing stock. Nearly 70% of occupied homes in Connecticut are single-family, which will present challenges as demand continues to grow for other housing types. Moreover, the majority (59%) of Connecticut's housing stock was built before 1970, and the remaining stock (41%) built after 1970 may not meet the needs of Connecticut's changing demographics.ⁱⁱ

Accordingly, Connecticut's Legislative Commission on Aging supports policy that encourages temporary health care structures and other types of accessory dwelling units, as a strategy to help older adults receive long-term care in their homes and communities and with the support of loved ones—the far-preferred and cost-effective way.

But in actualizing this policy, we urge you to consult with other states, like Virginia and North Carolina, who have implemented this policy and local planners and their partners, through the Connecticut Chapter of the American Planning Association and other conduits—to consider strategies that address many specific areas not considered by bill as drafted. Those include, but are not limited to, mechanisms to ensure that temporary structures do not remain permanent and to allow relevant local authorities to regulate the physical placement, size and appearance of the structure.

Thank you for the opportunity to testify today.

ⁱ These figures were calculated by Connecticut's Legislative Commission on Aging in partnership with the Connecticut State Data Center. For more detailed information, see our Interactive Data Story at www.coa.cga.ct.gov.

ⁱⁱ Partnership for Strong Communities. Housing Data Profiles: Connecticut, 2015. http://pschousing.org/housingprofiles2015/PSC_2015HsgProfile_CT.pdf