



# ADVANCING ECONOMIC JUSTICE for People with Disabilities

# Acknowledgments

## Authors

### National Disability Institute

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**RAMONIA ROCHESTER**  
PhD, Research Director

**ELIZABETH JENNINGS**  
MAPP, Deputy Director

### Asset Funders Network

---

**JOE ANTOLIN**  
President and Chief Executive Officer

**CHRISTI BAKER**  
Director of Strategic Initiatives

Written in partnership with the following practitioners, funders, and thought leaders:

**DONNA WALTON**  
The DIVAS WITH DISABILITIES Project

**EUSEBIO DIAZ**  
Health Forward Foundation

**JOSE ROSADO**  
MetLife Foundation

**DANA HUBER**  
The New York Women's Foundation

## AFN Editors

**ANNIKA LITTLE**  
Managing Director

**JENNIFER FARLAND**  
Communications Strategist

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# Table of Contents

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Introduction	4
Background	5
Historic Preclusions to Wealth Building by Persons with Disabilities	7
Data Invisibility	8
Characteristics of People with Disability	10
Financial Characteristics	15
Banking, Access to Credit, Savings, and Retirement	15
Housing	19
Small Business Ownership	19
The Cost of Living with a Disability	20
Net Wealth Among People with Intersecting Identities	22
Identifying and Addressing Key Systemic Barriers to Wealth Building and Economic Mobility	23
Policy Change Proposals to Transform Systemic Barriers	30
Reflections: Responsive Changes to Internal Operations and Grantmaking Practices	38
Conclusion	46

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# Introduction

Investing to help people with disabilities build wealth and advance economic mobility is a core part of the economic justice agenda. Inclusive and intentional strategies are needed to support the more than 41 million people in the United States (12.6% of the population)<sup>2</sup> who have disabilities to achieve economic security and build assets. Because of historical systemic barriers and pervasive attitudes, these individuals have been relegated to the bottom of the economic ladder or left to cope with the additional costs of disability on their own.

Currently an array of physical, programmatic, attitudinal, and systemic issues limits the participation—and pathways to success—in the workplace for people with disabilities, as business owners, in wealth building, and across other opportunities that lend to economic mobility. Disabled people with intersecting racial, ethnic, or gender identities suffer economic injustice more acutely. The compound discrimination faced by people with intersecting identities warrants attention, including development of both intentional strategies and focused supports and solutions.

The disability community is the largest American minority population. It is the only group any one of us can become part of due to changes in life circumstances (for instance, through chronic illness or accidental injury). A person with a disability may be an employee, a business owner, or a job seeker. Those engaged in the workforce may do so with the aid of accommodations or supports provided by the employer or the individual. Others are unable to work, whether or not the disability is recognized under a governmental definition. People with disabilities also fall along the lifecycle of wealth building. Some would benefit from programs and services that support their efforts to gain economic stability and cover basic needs; others need programs and services to help them transform disposable income into savings or investments, or opportunities to build and protect assets.

People with disabilities live along the spectrum of socioeconomic statuses, have financial goals for themselves and their families, and participate as contributing members

Some in the disability community view disability as being a core component of identity, much like race and gender, and use identity-first language in place of person-first language. Other members of the community, such as people with intellectual and developmental disabilities, prefer person-first language. In this publication, we use “person with a disability” and “disabled person” interchangeably, following the lead of other work in this area.<sup>1</sup> Throughout, we use the Americans with Disabilities Act (ADA) definition of disability, but of necessity also rely on data that uses other definitions to determine disability status.

in their workplaces, communities, and the economy. While a great deal of data has been collected on this population, the data are often not useful for building strategies to improve the economic security of people with disabilities for a fundamental reason: the definition of who is a person with a disability is not stable, but varies depending on the statutory or research purpose for the data collection. The result is a lack of intentional inclusion of people with disabilities and a failure to recognize unique barriers to their participation or inclusion in services, programs, and policy efforts to improve the economic mobility of populations with low and middle incomes and increase economic equity.

This brief will explore philanthropic strategies that can level the playing field for people with disabilities, in the workforce or owning businesses, and the efforts needed to eliminate the systemic disadvantages for those whose disability limits their ability to work.

**Grantmakers can catalyze systemic change and support more responsive programs and policies that mitigate the multiple barriers to wealth building, asset protection, and economic mobility faced by people with disabilities.**

# Background

## WHO ARE PEOPLE WITH DISABILITIES?

There is no single definition of disability. The definition of disability depends on context and legal standards. Some legal or governmental definitions focus on health condition or function, while others focus on the interaction between the person and their environment.

Disparities in public research data often can be understood as reflections of the variations in how different entities or statutory schemes define who is a person with a disability. For this reason, research and policies are often less inclusive and do not fully represent or account for all persons living with disabilities. Here are the primary definitions in use:

### GOVERNMENTAL DEFINITIONS

Governmental definitions focus on function or on medical severity.

The U.S. Census Bureau survey uses a functional definition, defining disability based on limitations in seeing, hearing, remembering, dressing, or climbing stairs; the limitations are captured through a six-question survey. The six questions rely on self-identification, which means that factors such as

individual perception of one’s abilities or cultural views on reporting personal limitations may play a role in how questions are answered. The surveys yield an array of disability prevalence rates as a percentage of the adult population, ranging from 11.6% to 27%. Census data about people with disabilities are steady across surveys, capturing a consistent population that self-identifies as having a disability.

AMBULATORY	COGNITIVE	INDEPENDENT LIVING	HEARING	SELF-CARE	VISION
Does this person have serious difficulty walking or climbing stairs?	Because of a physical, mental, or emotional condition, does this person have serious difficulty concentrating, remembering, or making decisions?	Because of a physical, mental, or emotional condition, does this person have difficulty doing errands alone such as visiting a doctor’s office or shopping?	Is this person deaf or do they have serious difficulty hearing?	Does this person have difficulty dressing or bathing?	Is this person blind or do they have serious difficulty seeing even when wearing glasses?

The Americans with Disabilities Act (ADA) provides a broad functional definition, reflecting a civil rights standard that has been developed to address the multiple barriers people with disabilities face. The ADA defines a person with a disability as one who has a physical or mental impairment that limits one or more major life activities, has a record (or history) of such an impairment, or is perceived as having such an impairment. For the ADA, these impairments may affect movement (especially climbing stairs), cognition (concentrating or remembering), independent living, hearing, self-care, or vision.

Legal definitions for public benefits program eligibility are much narrower, although they take a hybrid approach, focusing on ability to work alongside medical severity. Congress enacted the Social Security Disability Insurance (SSDI) definition of disability in 1954, and amended it in 1967, as the inability to engage in substantial gainful activity (SGA) due to a physical or mental impairment that is expected to last for at least 12 months or result in death.

Review of the ability to work takes into consideration the person's age, education, and work history. The same definition was adopted when Supplemental Security Income (SSI) was created in 1972. The definition is intentionally strict and excessively complicated; assessing whether an individual satisfies it requires a great deal of administrative detail. Individuals must demonstrate both well-documented medical severity and an inability to work, not only in their current field or job experience, but at any employment opportunities that exist in significant numbers, even if such a job is not available where the applicant lives. Overall, fewer than 30% of applicants who apply for Social Security disability benefits are found eligible at initial application.<sup>3</sup>

For health care programs, predictably, definitions rely on medical severity. The medical evidence burden is more challenging for those on Medicaid; using free clinics; or disabled as a result of multiple impairments, chronic pain, or mental illness. Those with one or more medical conditions that are not easily categorized and those who have limited access to medical treatment may have difficulty proving that they have a disability that qualifies them for public benefits programs. Some individuals can appeal these decisions, but others who are denied eligibility return to work at limited levels (sometimes to the detriment of their health), and those who are unable to work at all and unable to access the safety-net programs under the SSDI/SSI definition must find ways to survive on their own, usually with limited resources.

Different definitions of full and partial medical disability apply to military veterans whose conditions were caused or worsened while in service<sup>4</sup>, unionized employees, and those seeking payment under workers compensation insurance and other disability insurance policies provided by public and private employers.

**Government data** provide an incomplete picture of the full population of persons with disability and their economic activity. For example, neither the Department of Labor's Consumer Expenditure Survey nor the Federal Reserve Board's Survey of Consumer Finances asks respondents about their disability status.

### THE SOCIAL MODEL OF DISABILITY

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Today's disability rights movement defines disability as the dynamic interaction between an individual's health condition or impairment and the environment. In this view, persons with disabilities are limited by barriers imposed by society, including inaccessible environments, marginalizing social structures, and restrictive attitudes toward disability. Using this framework, the disability rights movement calls for an end to discrimination and oppression against people with disabilities through education, accommodation, universal design of buildings, and programs that address the needs of all.

The social model of disability recognizes that disability is a natural part of life and that the challenges an individual faces lie within society. Society creates barriers—physical, programmatic, attitudinal, and systemic—that profoundly limit the advancement of persons with disabilities in the areas of wealth building and economic mobility. Rather than requiring disabled people to adapt to systems, the social model of disability places the responsibility for adapting to the needs of people with disabilities on institutions (government, business, financial institutions), nonprofits, and grantmakers. For people with disabilities, the shift from a medical definition of disability to the social model goes hand in hand with economic justice.

## Historic Preclusions to Wealth Building by Persons with Disabilities

The historic treatment of people with disabilities in the United States is a grim story of persistent discrimination, inadequate funding of critically needed services, and a struggle for civil rights yet to be fully realized. Stigma associated with being physically different has abounded since early societies. Fear, coupled with non-scientific ideas and beliefs about physical and cognitive differences and non-neurotypical behaviors, have resulted in many persons with disabilities being social and economic outcasts.

### Historical Discrimination

EUGENICS MOVEMENT TO RESTRICT WEAK AND INFERIOR SPECIES – 1900s		
1900s	1907	1938
<b>Ugly Laws</b>	<b>Immigration Act of 1907</b>	<b>Fair Labor Standards Act</b> (will expire December 1, 2024)
People with disabilities and people of color segregated and institutionalized in “special schools”	Immigrants with disabilities denied entry to the U.S.	Lower wages to those with limited functionality due to a disability

The disability rights community of the 1960s and 1970s fought for meaningful anti-discrimination protections, the removal of policy barriers, and affirmative action. Their fight produced substantial advances for people with disability:

- The Rehabilitation Act of 1973 precludes discrimination against people living with disabilities across all federally funded programs.
- The Fair Housing Act of 1973 makes it unlawful to refuse to make reasonable accommodations to rules, policies, practices, and services for people with disabilities in the sale or rental of a home; however, homeowners are responsible for the costs associated with modifications to the residence and for restoring the home to its original condition upon exit.

- The first comprehensive civil rights law for people with disabilities, the American with Disabilities Act, enacted in 1990, expanded access for people with disabilities and set an expectation for equal treatment across society.
- The landmark Supreme Court decision in *Olmstead v. L.C.* (1999) held that Title II of the Americans with Disabilities Act requires states to provide education, services, and support in the person’s community, in the most integrated settings appropriate, as opposed to more restrictive environments, such as institutions and nursing homes. This integration order also requires that workers with disabilities receive the supports they need to work in mainstream, competitive employment alongside workers without disabilities.

## Anti-discrimination Protections

DISABILITY RIGHTS MOVEMENT			
1973		1990	1999
<b>The Rehabilitation Act of 1973</b>	<b>The Fair Housing Act of 1973</b>	<b>American with Disabilities Act</b>	<b>Supreme Court decision in Olmstead v. L.C. (1999)</b>
Requires states to provide education, services, and support in the person’s community, in the most integrated settings	Requires reasonable accommodations to rules, policies, practices, and services for people with disabilities in the sale or rental of a home, but makes homeowners responsible for modification costs	Expanded access for people with disabilities and set an expectation for equal treatment across society	Title II of the Americans with Disabilities Act requires states to provide education, services, and support in the person’s community, in the most integrated settings and facilitates competitive desegregated employment and supports for workers with disability

## Opportunities for Philanthropy

While this public policy arc offers a promising foundation for equality, U.S. policies continue to fall short of creating true equity. Public policy support and funding for needed services remain inadequate, opening an opportunity for philanthropy to advance economic justice for people with disabilities:

- Despite the *Olmstead* decision, in 2021 approximately 656,000 people with disabilities across the U.S. remain on waiting lists for Medicaid-funded home and community-based services (HCBS).<sup>5</sup>
- Secure housing that meets the needs of disabled people is largely unavailable. Barriers to housing accessibility include inadequate housing stock, the cost burden of modification, and low incomes among people with disabilities. Although federal housing assistance is available for people with low incomes, 18 million eligible people with disabilities are not receiving it.<sup>6</sup> Further, 6.8 million households (5%) report having difficulty navigating or using their home, impacting health and housing stability. Unsuitable housing is disproportionately more common among households with a disabled person; over 1/5 reported having difficulty maneuvering in their homes.<sup>7</sup>
- Although multiple laws promote the employment of people with disabilities or prohibit discrimination, individuals who disclosed their disability status during the interview process received 26% fewer expressions of employer interest than those who did not. In addition,

employees reported extended probationary periods, promotion denials, or disparate treatment than coworkers without disabilities.<sup>8</sup>

- Asset and income limits for publicly funded programs constrain the ability of many with disabilities to build credit or assets, protect assets, or work and maintain adequate healthcare.<sup>9</sup>

### DISABILITY RIGHTS AND DISABILITY JUSTICE

Disability rights and disability justice are two related but distinct concepts. The disability rights movement focuses on ensuring legal protections and equal access and treatment for people with disabilities in areas such as education, employment, and public accommodations.

Building on the disability rights movement, disability justice takes a comprehensive, structural, and intersectional approach to disability, considering the ways that multiple systems of oppression, such as racism, sexism, and ableism, amplify and reinforce one another. Centering the community, the disability justice movement aims to address the root causes of injustice and transform societal structures to create a more just and equitable world for people with disabilities and other historically excluded identities, such as women, people of color, immigrants, and LGBTQIA+ people.



## Data Invisibility

We know a great deal about people with disabilities who self-identify through Census surveys, but important research gaps remain, particularly with regard to individuals who live at the intersections of disability, race, ethnicity, and gender. The federal government collects extensive data on demographics such as race, ethnicity, gender, employment, and economic indicators, but those data are not cross-referenced with respondents' disability status. Thus, the picture is incomplete.

For the purposes of this brief, data invisibility is defined as the gaps in data that limit our understanding of individuals with disabilities who have intersecting racial, ethnic, gendered, and socioeconomic identities. Centuries of institutionalized racism, ableism, and sexism have limited full participation in the economy for these individuals. These limitations impose a disproportionate level of financial vulnerability on individuals with historically and presently intersecting marginalized identities. For example, disabled women of color operate in the economy within multiple sets of longstanding systemic barriers (racism, sexism, and ableism) to financial security and wealth building. Intersectional data and approaches can address the root causes of economic hardship for people with disabilities who are Black, Indigenous, Latinx, Asian and Pacific Islander, and Southwest Asian/Middle Eastern/North African (SWANA/MENA) or who have other systemic barriers to economic security and wealth building.

Important contextual data on living/housing conditions (homeownership versus renting versus congregate settings), retirement and other savings, participation in the financial economy (debt and credit status), and geographies (urban versus rural) are typically not part of the standard reports provided by governmental agencies. Data invisibility obfuscates the financial insecurity of individuals with disabilities and the various needs within the diverse disability community, resulting in missed opportunities to shape public policy, programming, services, and philanthropic funding. Disaggregated and intersectional data are needed. Grantmakers can support research using such data conducted by people with disabilities and intersecting identities to elevate the visibility of the disability community and identify gaps and opportunities for systemic change.

## INTERSECTIONALITY

The term *intersectionality* was coined by Kimberlè Crenshaw to describe a theoretical lens that accounts for how various forms of inequality operate in concert to systemically oppress individuals across their various identities, such as race, socioeconomic status, gender, and sexual orientation. This lens was originally used by Crenshaw to describe the oppression experienced by Black women in the United States due to their dual statuses as both Black and female; Crenshaw disputed the notion that the "Black experience" could be separated from the "female experience" in a legal setting.<sup>10</sup> The term has been subsequently used to describe the experiences of individuals holding any combination of identities.<sup>11</sup> Rather than attempting to address each identity separately, an intersectionality approach comprehensively addresses all barriers for individuals who identify with multiple marginalized groups and considers the interconnected systems of oppression that shape certain identities' experiences and opportunities

## ABLEISM

Ableism<sup>12</sup> is discrimination or prejudice against people with disabilities through systems, policies, and practices. Ableism is based on socially constructed ideas of normalcy, productivity, desirability, intelligence, excellence, and fitness and is rooted in colonialism, eugenics, and other historic oppressions. Individuals as well as institutions, policies, and communications can be sources of ableism.

# Characteristics of People with Disability

A great deal of data about people with disabilities exists, but much of it is either not disaggregated or is very specifically tied to a governmental definition that provides narrow insight. Funders can use what we do know to reference the national data on people with disabilities, include disability in economic justice frameworks, and consider systemic solutions that disrupt economic exclusions and equitably build wealth for people with disabilities.

**More than 41 million adults in the United States, almost 13% of the population, have some type of disability.**<sup>13</sup> The prevalence of disability increases with age. Almost ¼ of adults between the ages 65 and 74, and half of adults 75 and older, have a disability.<sup>14</sup> Slightly more women than men have a disability. Across all races, American Indian/Alaska Native people had the highest percentage of disability, while Asian people had the lowest.<sup>15</sup>

## Prevalence of Disability, Breakdown by Age<sup>16</sup>

	NUMBER OF PEOPLE WITH DISABILITIES	PERCENTAGE OF PEOPLE WITH DISABILITIES
<b>Children 0 to 17 years</b>	3,270,678	6.4%
<b>18 to 34 years</b>	5,048,681	6.8%
<b>35 to 64 years</b>	15,489,048	12.4%
<b>65 to 74 years</b>	7,549,170	24.1%
<b>75 years and over</b>	9,697,915	47.4%

**SOURCE:** American Community Survey, Table S1810 Disability Characteristics, ACS 2021 - 5 year estimates. Subject Tables. Retrieved from <https://data.census.gov/table?q=United+States&t=-Disability&g=010XX00US&tid=ACST1Y2021.S1810>

## Disability Rates by Gender<sup>17</sup>

	NUMBER OF PEOPLE WITH DISABILITIES	PERCENTAGE OF PEOPLE WITH DISABILITIES
<b>Female</b>	21,070,852	12.8%
<b>Male</b>	19,984,640	12.5%

**SOURCE:** American Community Survey, Table S1810 Disability Characteristics, ACS 2021 - 5 year estimates. Subject Tables. Retrieved from <https://data.census.gov/table?q=United+States&t=-Disability&g=010XX00US&tid=ACST1Y2021.S1810>

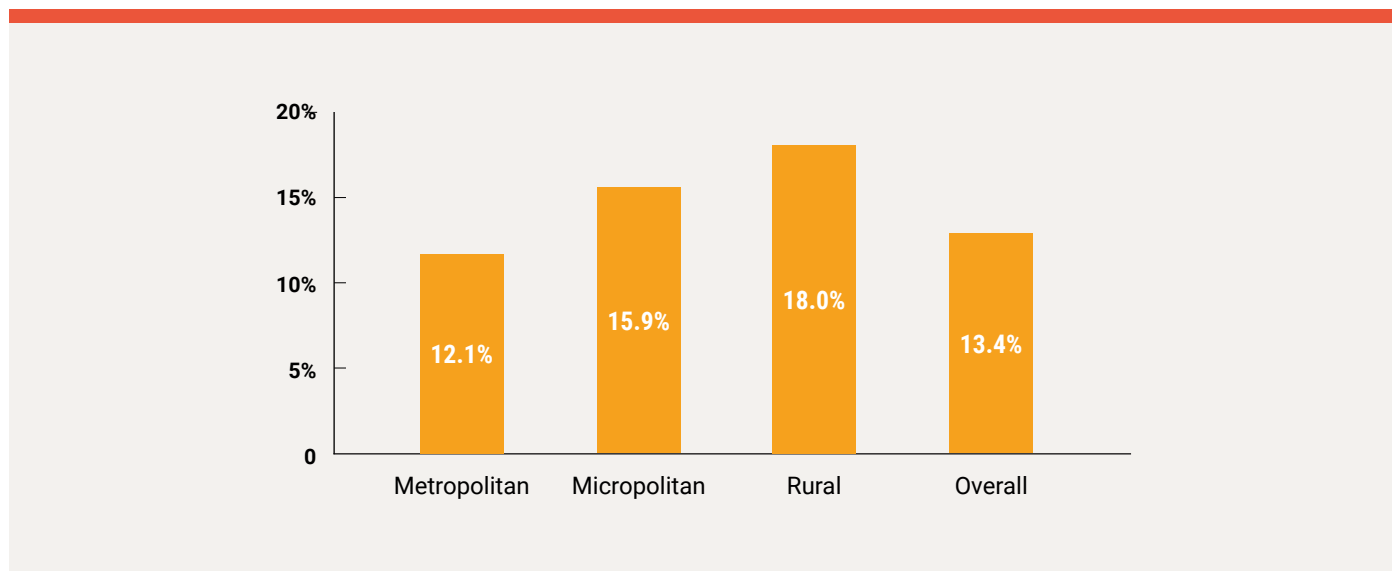
## Disability Rates by Race/Ethnicity<sup>18</sup>

	NUMBER OF PEOPLE WITH DISABILITIES	PERCENTAGE OF PEOPLE WITH DISABILITIES
American Indian / Alaska Native	443,539	16.3%
Black	5,618,600	14%
White	26,915,355	13.9%
Native Hawaiian and other Pacific Islander	69,832	11.6%
Latinx	5,587,005	9.3%
Asian	1,360,757	7.3%
Two or more races	2,379,217	10.5%
Some other race	1,682,578	9.3%

**SOURCE:** American Community Survey, Table S1810 Disability Characteristics, ACS 2021 - 5 year estimates. Subject Tables. Retrieved from <https://data.census.gov/table?q=United+States&t=Disability&q=010XX00US&tid=ACSST1Y2021.S1810>

People live with disabilities at marginally lower rates in urban counties (12–16%), compared to rural (18%) and non-core areas.

## Percentage of Persons with Disabilities by Geography<sup>19</sup>



**SOURCE:** Paul, S., Rafal, M., & Houtenville, A. (2021). Annual Disability Statistics Compendium: 2021 (Table10.3). Durham, NH: University of New Hampshire, Institute on Disability. Note: The contents of this section were provided by the Research and Training Center on Disability in Rural Communities (RTC: Rural) at the University of Montana using the U.S. Census Bureau. (2019). American community survey, 5-year estimates, which is subject to sampling variability

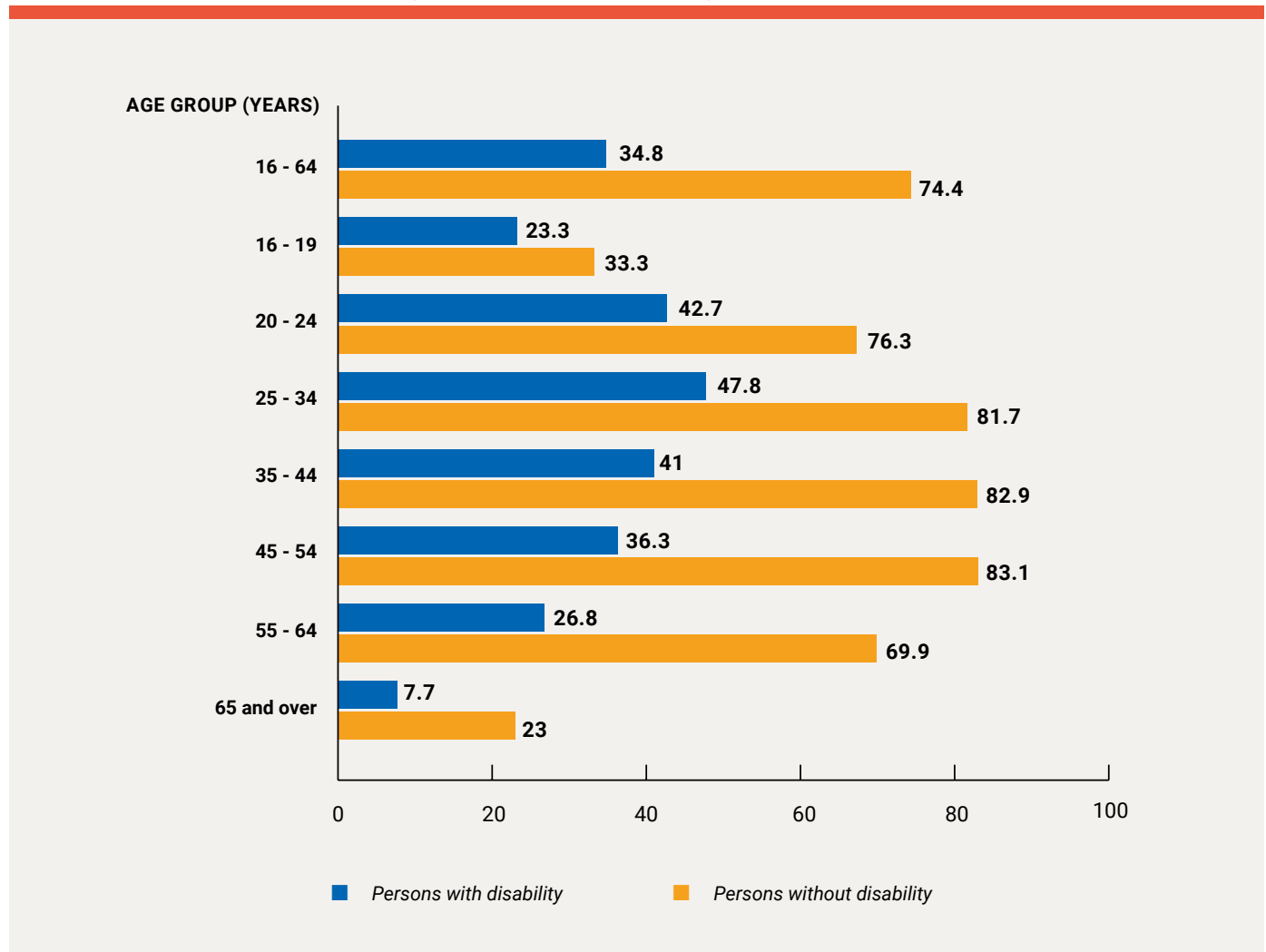
## Educational Attainment

Across all educational attainment groups, unemployment rates for persons with disabilities are higher than those for persons without disabilities.<sup>20</sup> Working-age adults with disabilities are less likely to have a bachelor’s or higher degree, compared to those without a disability (15% compared to 35%).<sup>21</sup> Women with disabilities continue to be the least likely to attain a bachelor’s degree (19.7%) compared to men with disabilities (21.5%) and people without disabilities (women 38.5%, men 41.3%) who are 25 years and older.<sup>22</sup>

## Employment Status

In 2022, 21.3% of persons with disabilities ages 16–64 were employed, in comparison to 65.4% of people without disabilities.<sup>23</sup>

## Percentage of the Disability Population Employed



SOURCE: 5 U.S. Bureau of Labor Statistics (February 2023). Economic News Release. Persons with a Disability: Labor Force Characteristics Summary. Table 1. Retrieved from <https://www.bls.gov/news.release/disabl.t01.htm>

## Income Status

People with disabilities live across the income spectrum. Many people with disabilities work, but some are partially or wholly dependent on income assistance due to their level of earnings.

### Percentage of People with Earnings in Past 12 Months<sup>24</sup>

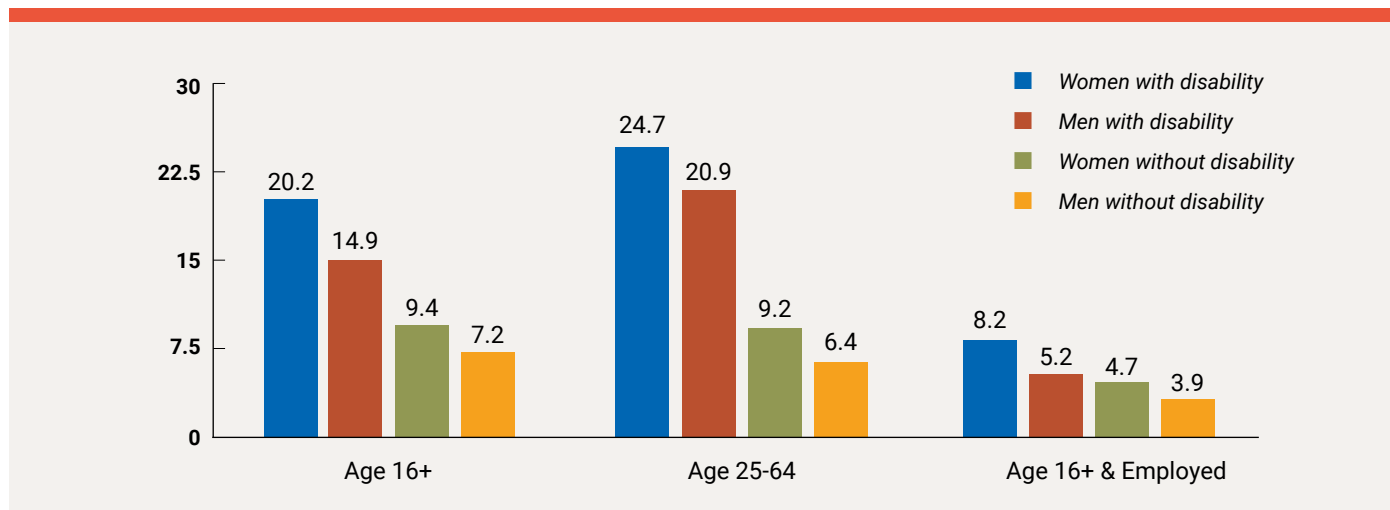
POPULATION AGE 16 AND OVER WITH EARNINGS	DISABILITY	NO DISABILITY
\$1 to \$4,999 or less	14.8%	8.2%
\$5,000 to \$14,999	18.8%	12.2%
\$15,000 to \$24,999	13.8%	11.7%
\$25,000 to \$34,999	12.8%	12.9%
\$35,000 to \$49,999	13%	15%
\$50,000 to \$74,999	13.1%	17.3%
\$75,000 or more	13.7%	22.8%
<b>MEDIAN EARNINGS</b>	<b>\$26,733</b>	<b>\$39,740</b>

**SOURCE:** American Community Survey, Table S1811 Selected Economic Characteristics for the Civilian Noninstitutionalized Population by Disability Status. ACS 2021 - 5 year estimates. Subject Tables. Retrieved from <https://data.census.gov/table?q=United+States&t=Disability&g=010XX00US&tid=ACSS1Y2021.S1811>

### INDIVIDUALS WITH DISABILITIES LIVING BELOW THE POVERTY LEVEL

People with disabilities live in poverty at a significantly higher rate than people without disabilities (19.6% versus 11.6%).<sup>25</sup> Reflecting compounded injustices, a greater proportion of women with a disability who are employed live in poverty than employed men with a disability. And they live in poverty at over double the rate of employed men without disabilities. In 2021, 8.2% of women with disabilities who were gainfully employed were also living in poverty.

### Percent of Population Below the Federal Poverty Level, by Gender and Disability<sup>26</sup>

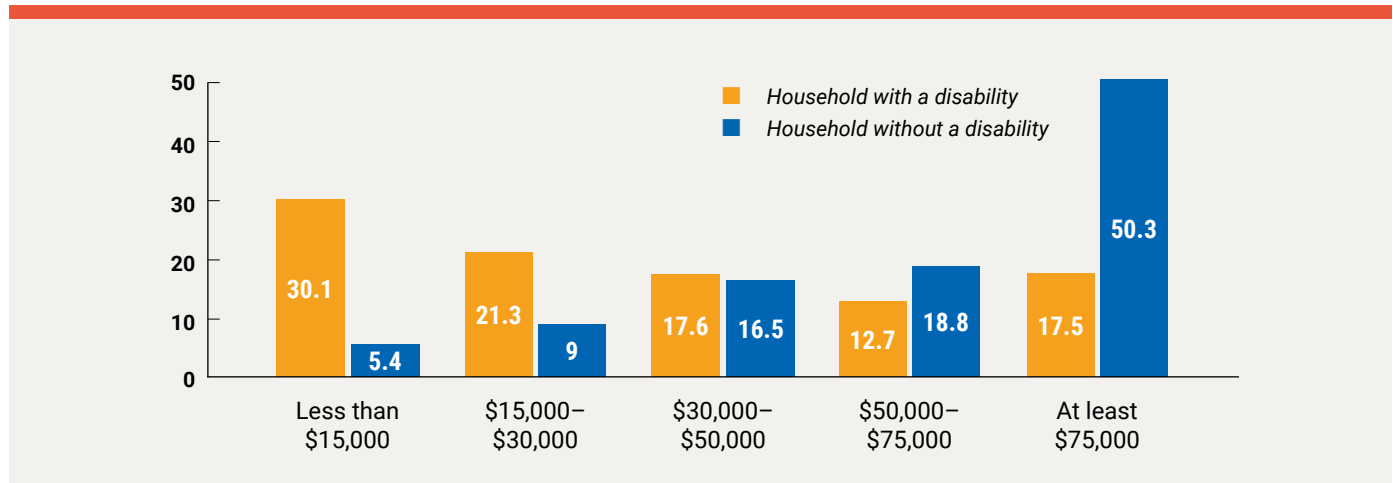


**SOURCE:** Office of Disability Employment Policy, Spotlight on Women with Disabilities, U.S. Department of Labor, March 2021.

## Income Inequality

Households with disabilities earn less than their non-disabled counterparts. In 2021, 5.6 times more households with disabilities earned less than \$15,000 per year compared to households without disabilities (30.1% versus 5.4%).<sup>27</sup>

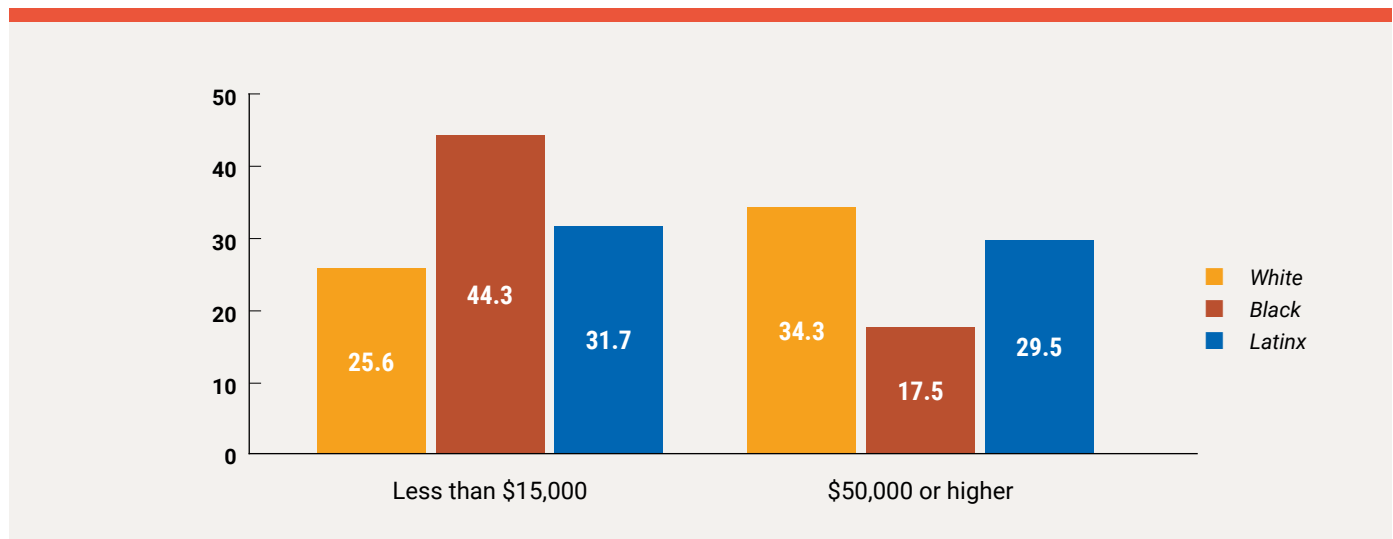
### Annual Household Income by Disability Status – 25 to 64 Years



SOURCE: FDIC 2021 National Survey of Unbanked and Underbanked Households.

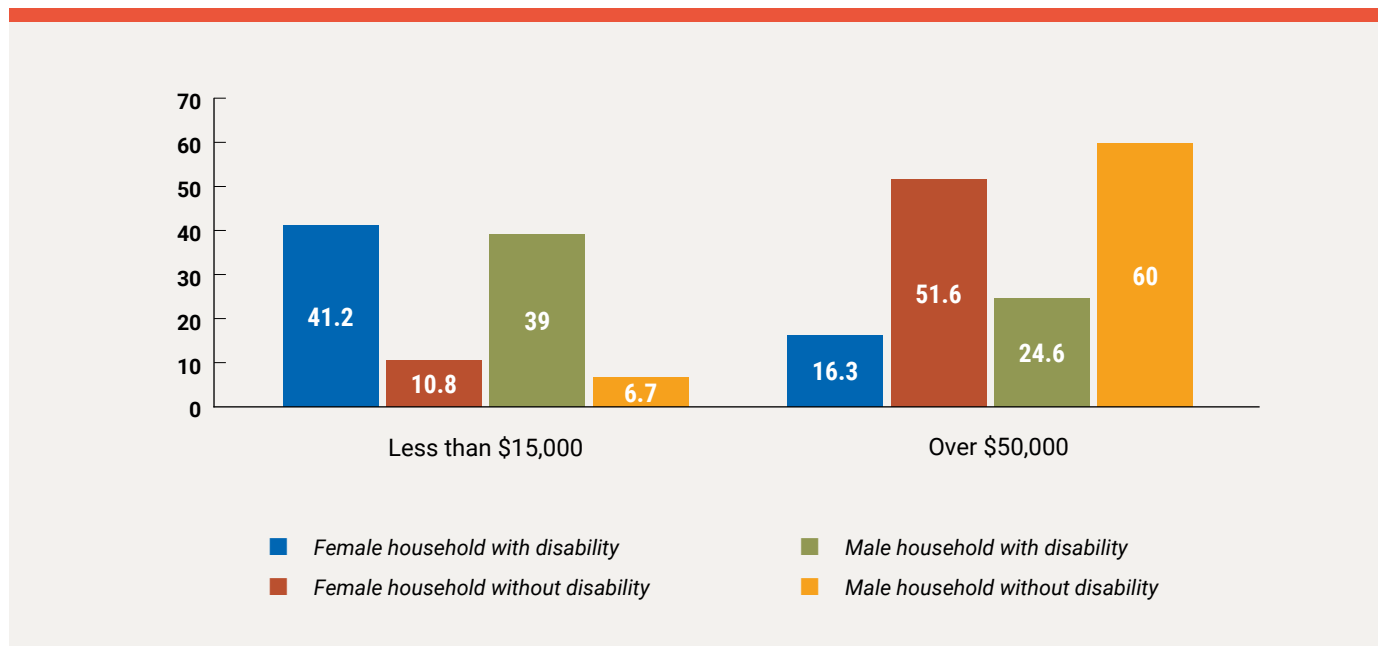
As in the wider population, income inequality within the population of people with disabilities runs along racial lines. More Black (44.3%) and Latinx (31.7%) households with disabilities earn less than \$15,000 per year than White households (25.6%). In tandem, fewer Black (17.5%) and Latinx (29.5%) households with disabilities have annual incomes of \$50,000 or higher, compared to their White counterparts (34.3%).<sup>28</sup>

### Percentage of Households with Disability per Income Bracket and Race



Income inequality along gender lines, evident in the population as a whole, is also present among people with disabilities. More female-headed households with disabilities earn at the lower end of the salary scale, with 39% earning less than \$15,000 per year, compared to 24.1% of male-headed households. Males also continue to out-earn females in higher income brackets, regardless of disability status. Only 16.3% of female households with disabilities earn \$50,000 or more per year, compared to 24.6% of male households with disabilities. In tandem, 51.6% of female households without disabilities earn \$50,000 or more per annum, versus 60% of male households without disabilities.<sup>29</sup>

## Annual Household Income by Disability Status and Gender



SOURCE: FDIC 2021 National Survey of Unbanked and Underbanked Households

## What Do We Know About the Financial Lives of People with Disabilities?

The community of people with disabilities falls along the lifecycle of wealth building. Some would benefit from programs and services that:

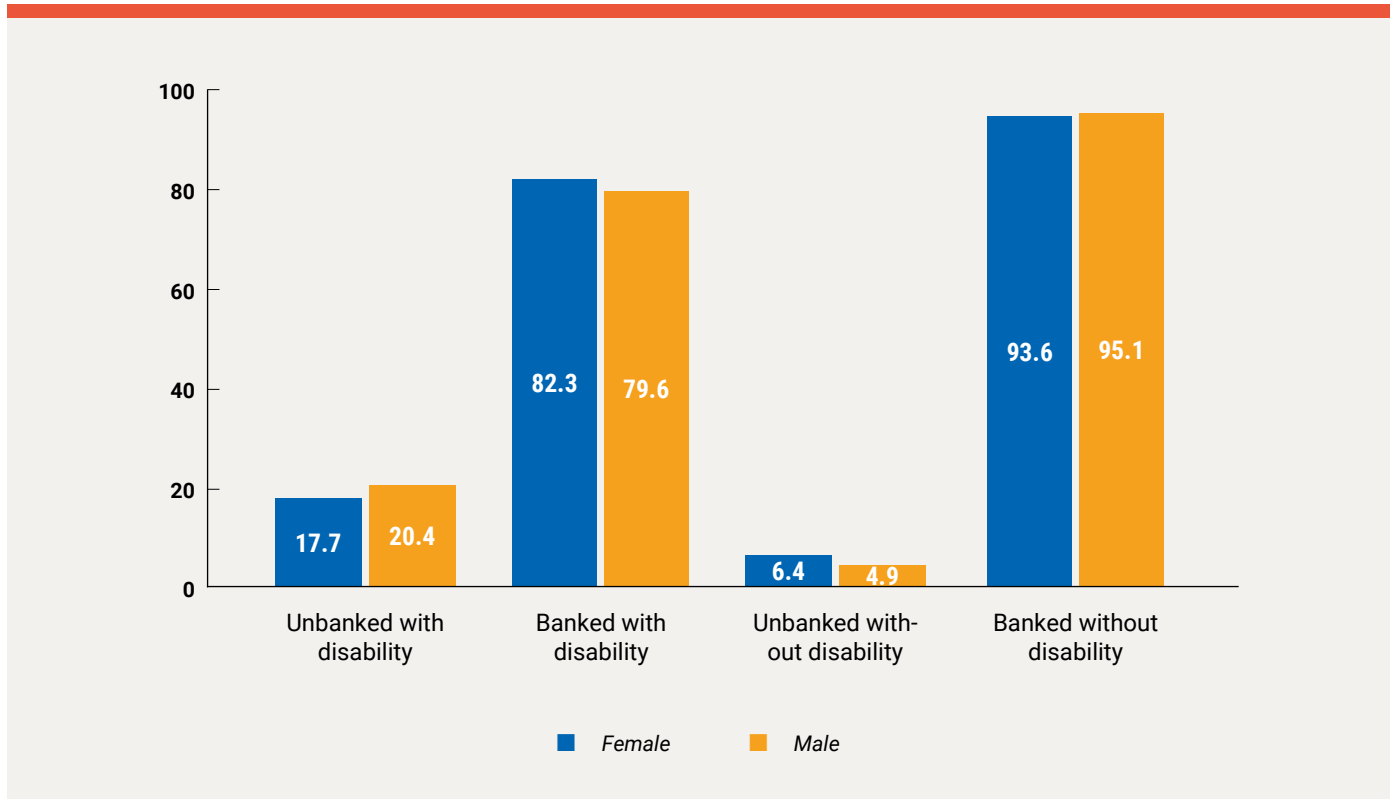
- Support their efforts to gain economic stability to cover basic needs,
- Assist them in transforming their disposable income into savings or investments, or
- Provide access to products to safely build and protect assets.

Recent data indicate that only 60% of individuals with disabilities reported being “financially okay” in 2021.<sup>30</sup> Financial behavior indicators point to persistent levels of financial vulnerability for women and individuals of color living with disabilities due to historic and ongoing discrimination and exclusion from mainstream financial services.

### Banking, Access to Credit, Savings, and Retirement

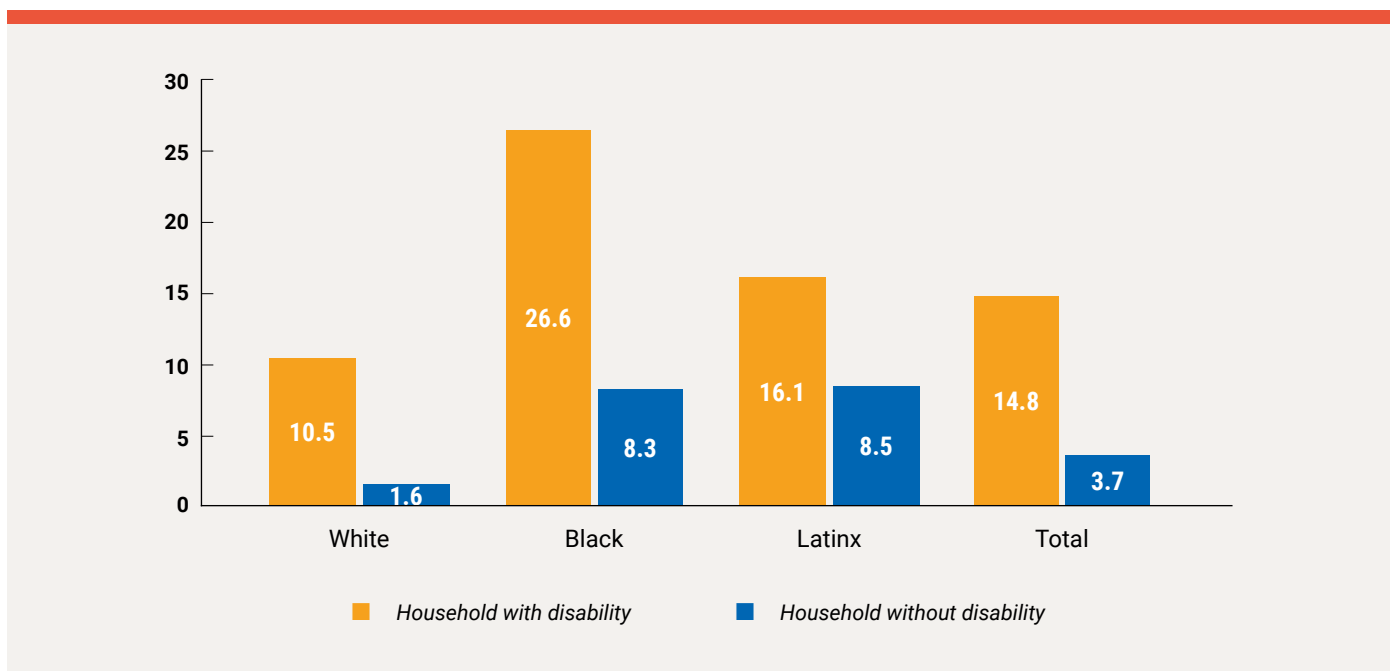
In 2021, a total of 14.8% of households with a disability were unbanked, compared to 4.5% of households without disability. Unbanked households do not use traditional financial services such as savings and checking accounts, opting instead for alternative services such as payday lending and check cashing.<sup>31</sup> The percentage of unbanked households is more than 3.6 times higher in households with a disability, with disparities across race, ethnicity, and gender. Compared to White households with disabilities, the percentage of unbanked households is 2.5 times higher in Black households with a disability and 1.5 times higher in Latinx households with disabilities (Black 26.6%; Latinx 16.1%; White 10.5%).<sup>32</sup>

## Household Banking Status by Disability Status



SOURCE: FDIC 2021 National Survey of Unbanked and Underbanked Households

## Percentage of Unbanked Households



SOURCE: FDIC 2021 National Survey of Unbanked and Underbanked Households



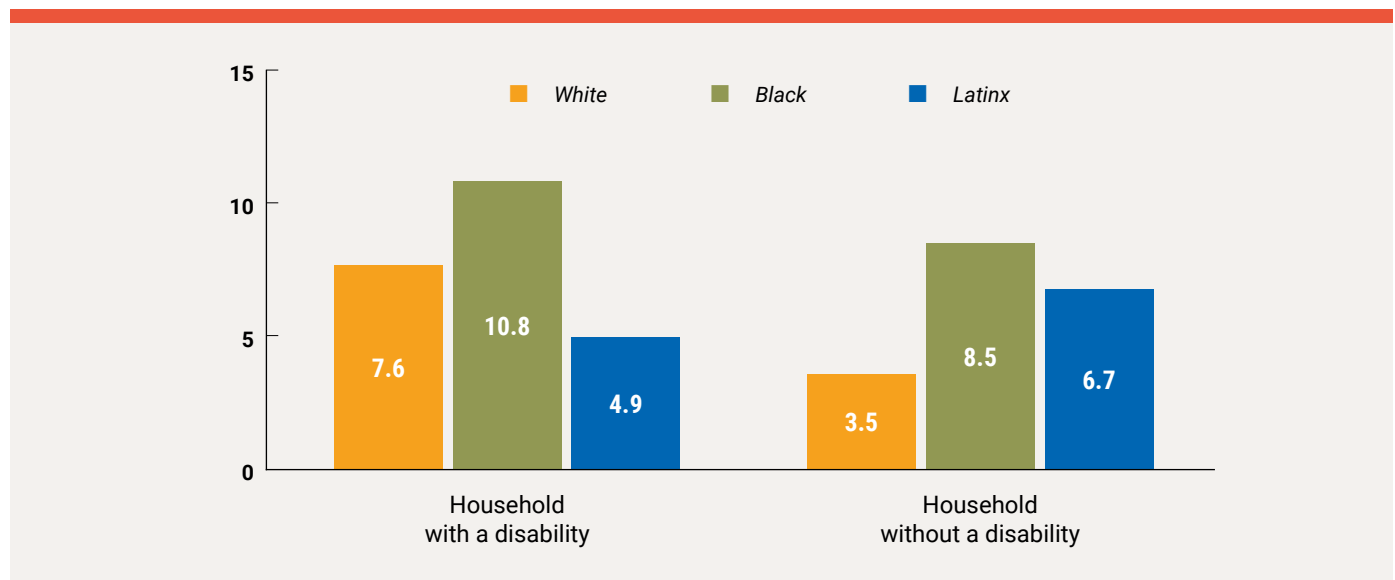
**UNMET CREDIT NEEDS AND PREDATORY LENDING**

The percentage of households with an unmet need for bank credit is almost 1.7 times greater among households with a disability than among those without a disability. Just under 8% of households with a disability have an unmet need for credit, compared to 4.8% of households without a disability. A household with an unmet need for credit is defined as one that was denied credit (for a major credit card, personal loan, or line of credit from a bank), not given as much credit as requested, did not apply for credit due to fears of being

rejected, or utilized a non-bank credit product (such as payday loan, pawn shop loan, rent-to-own service, refund anticipation loan, or auto title loan).<sup>34</sup> Although there is some variation across income levels, households with a disability are generally more likely than those without a disability to use alternative, often predatory, lending services.

In households with a disability, marginally higher percentages of Black households with a disability have an unmet need for credit compared to Latinx and White households with a disability (Black 10.8%; Latinx 4.9%; White 7.6%).<sup>35</sup>

**Percentage of Households with Unmet Need for Credit**



SOURCE: FDIC 2021 National Survey of Unbanked and Underbanked Households

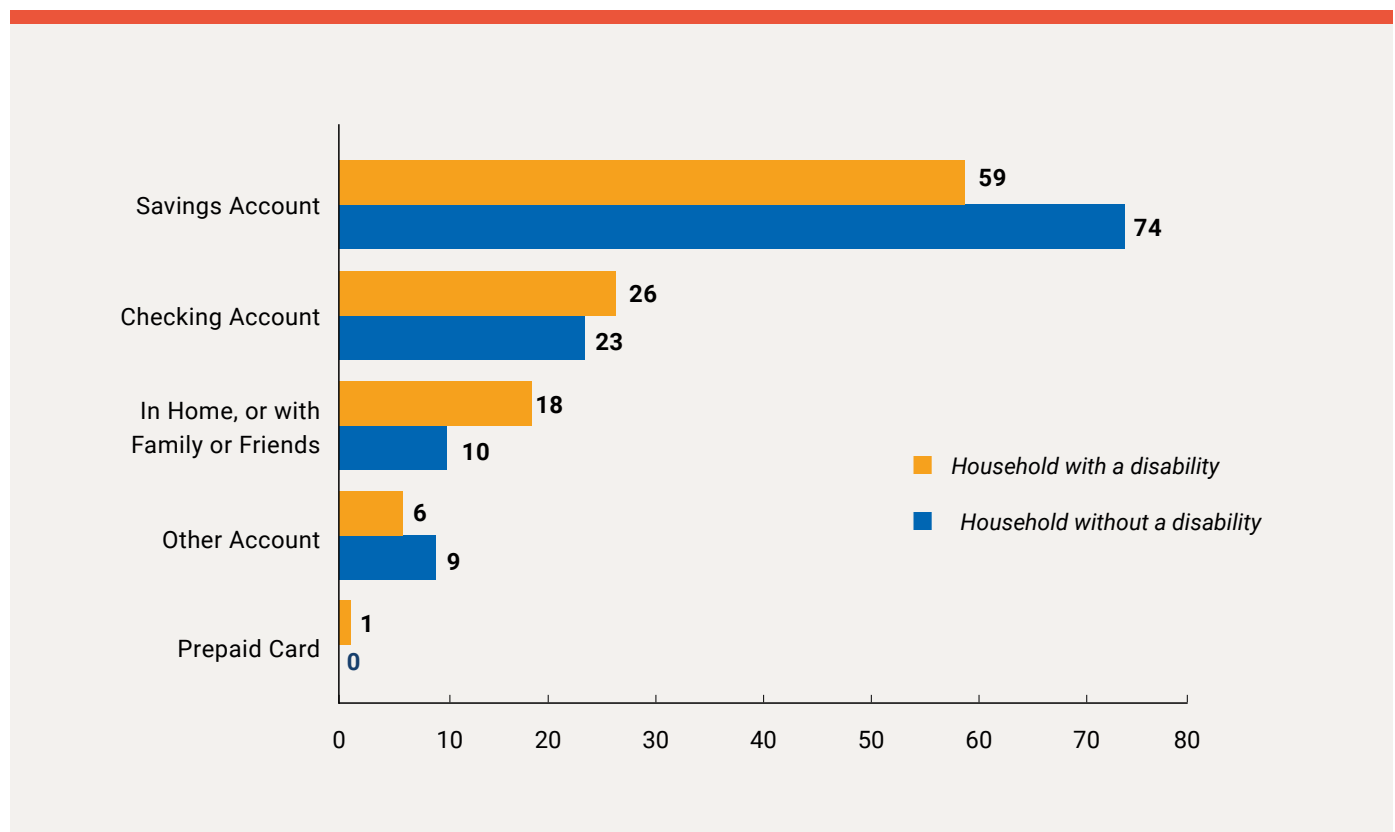
**FINTECH P2P SERVICES**

While technology is providing the unbanked and the underbanked increased and more convenient opportunities to access financial services,<sup>36</sup> the fact that so many households with disabilities do not have access to home-based, high-speed internet services (20.3%) or cannot afford access (22.3% of working-age adults ages 25–64)<sup>37</sup> suggests that individuals who live at the intersections of disability, race, and gender are at a significant disadvantage for participating in a digital financial system. Households of color with disabilities that are unbanked, but do use digital financial services, are more likely to use peer-to-peer (P2P) payment systems.<sup>38</sup> P2P services are often attractive for their flexible payment plans and offerings of no or delayed interest payments (such as credit programs with no interest charged on purchases paid in full within six months). Unfortunately, P2P services are highly vulnerable to frauds and scams and have limited or no protections compared to traditional debit and credit cards or checks. Even when they are equipped to participate in the digital economy, households of color with disabilities remain at a disadvantage due to being underbanked or fully unbanked, or having limited income.

**SAVINGS**

More than 60% of people with disabilities ages 25–64 had no savings for unexpected expenses<sup>39</sup>, compared to 40% of persons without disabilities in 2020.<sup>40</sup> Compared to White households with a disability (44%), Black (29%), Latinx (30%), and Asian (24%) households were less likely to save for unexpected expenses,<sup>41</sup> a gap that likely reflects disparities in income, banking, and other financial realms. Among households that saved, those with a disability were much more likely to save at home or with family or friends, rather than using a savings or checking account, compared to those without a disability (18% versus 10%).

**Percentage of Households that Use Specific Saving Methods, by Disability Status<sup>42</sup>**



**RETIREMENT INVESTMENTS**

Fewer individuals with disabilities (31%) have figured out their retirement savings needs than persons without disabilities (41%). Individuals with disabilities are less likely to have a retirement account (40% versus 62%) and less willing to take a risk on financial investments (36% versus 24%).<sup>43</sup> One plausible reason for these lower take-up rates is that a portion of the population of people with disabilities—including those who are unable to work because

of their disability—receive public income supports. For these individuals, efforts to increase income, accumulate assets, or save for retirement may result in the loss of public benefits (SSI, SSDI, Medicare, Medicaid, SNAP, and housing assistance) that are critical for basic survival.<sup>44</sup>

On average, about 60% of people with disabilities of retirement age are dependent on Social Security retirement benefits, which are inadequate for many due to prior low wages and shaky connections with the labor market.<sup>45</sup>

## Housing

### HOMEOWNERSHIP

Working-age households with a disability are far less likely to own their own home. In 2021, only 14% of persons with disability were homeowners, compared to 48% of persons living without disabilities.<sup>46</sup> The U.S. Department of Housing and Urban Development (HUD) notes that discrimination against individuals who attempt to use disability income toward the purchase of a home is persistent.<sup>47</sup> Discrimination, a lack of affordable and accessible homes, and financial disparities due to structural barriers to employment and wealth building that make it harder for many to afford buying a home also contribute to the homeownership gap.

### RENTERSHIP

Millions of renters with disabilities are overly burdened by housing costs. Approximately 7 million people in this group spend more than 30% of their income on rent, and 4 million pay more than 50%.<sup>48</sup> Sixty-five percent live in houses, nearly 25% live in apartments, and nearly 10% in mobile homes.<sup>49</sup>

### AT RISK AND HOMELESS

Thirty-four percent of working-age adults with disabilities living in the community across the U.S. reported housing cost burden, compared to 22% of working-age adults without disabilities. Housing cost burden, widespread housing discrimination, and a severe lack of accessible units leaves individuals with disabilities at a much greater risk of eviction and homelessness. On any given night, nearly 25% of the homeless population in homeless shelter counts are individuals with disabilities.<sup>50</sup>

### NEED FOR ACCESSIBLE HOUSING

Almost 7 million households (about 5% of the total population) reported difficulty getting around in their homes; just over 1/5 of households with a disabled resident reported having a hard time navigating their homes, especially with entering their homes and using their kitchens or bathrooms.<sup>51</sup>

## Small Business Ownership

Nearly 2 million small business owners have one or more disabilities.<sup>52</sup> Individuals with disabilities engage in self-employment at a higher rate than those without disabilities (17% versus 11%). Self-employment is often a way for individuals with disabilities to create their own income and engage in asset building as independent contractors, certified disability-owned business enterprise owners (DOBEs), or non-DOBE small business owners. Despite unprecedented levels of small-business ownership and innovation in recent years, DOBEs continue to struggle with ableism and discrimination.

A survey of small business owners and self-employed persons with disabilities documented several barriers to success. Among them are the lack of a disability-specific business support community, challenges accessing credit and other financial resources, and in some cases, concerns over potential loss of publicly funded supports and benefits.<sup>53</sup> A National Disability Institute study of small business enterprises found that, despite many small business owners with disability being able to leverage their experiences with disabilities to develop innovative, marketable products and services, up to 61% face unreasonable levels of ableism from both investors and customers.<sup>54</sup> While 45% indicated that they were uncomfortable taking on debt due to their disability, 24% noted that they did not apply for business financing due to fears that they would not qualify for various reasons, including poor credit.<sup>55</sup>

### Barriers to Small Business Access to Capital

FINANCIAL CONCERNS	
<i>Concern that the income from their business will affect their access to disability benefits or services</i>	<b>61%</b>
<i>Uncomfortable taking out a loan because of their disability</i>	<b>45%</b>
<i>Did not think their credit application would be accepted</i>	<b>24%</b>

**SOURCE:** Annotated findings from National Disability Institute, Small Business Ownership by People with Disabilities, 2022.

Other study participants cited challenges with loan processes in general, including difficulty understanding the legal jargon, particularly for the Deaf and hard of hearing.<sup>56</sup> Additionally, 61% expressed concern that their income and increased assets would negatively affect their ability to access public benefits.<sup>57</sup>

## Barriers to Small Business Ownership for Persons with Disabilities

ABLEISM	AGREE OR STRONGLY DISAGREE
<i>Need to demonstrate superior knowledge in order to be taken seriously</i>	<b>61%</b>
<i>People believe they don't not have enough energy to run their business due to their disability</i>	<b>39%</b>
<i>Customers do not think they can compete on equal footing with business owners without disabilities</i>	<b>26%</b>
SUPPORT NEEDS	
<i>A disability-specific network is needed</i>	<b>71%</b>
<i>An industry-specific network is needed</i>	<b>78%</b>
<i>Needed help with technological access, but did not receive help</i>	<b>45%</b>

**SOURCE:** Annotated findings from National Disability Institute, Small Business Ownership by People with Disabilities, 2022.

## The Cost of Living with a Disability

One in four persons will become disabled during their working years.<sup>58</sup> One in three persons can expect to have a disability for 90 days or longer, and one in seven can expect to have a disability for five years or longer. In a 2019 study, 62% of those with serious disabilities report living with long-term disability.<sup>59</sup>

The extra expenses associated with a disability mean that a household with an adult who has a disability that limits their ability to work requires, on average, 28% more income (or an additional \$17,690 a year) to reach the same standard of living as a similar household without a member with a disability.<sup>60</sup> This is a systemic burden not relieved by publicly funded income programs. Means-tested public programs do not consider the additional cost of living with a disability when determining eligibility based on income and asset limits.<sup>61</sup> As a result, millions of people with disabilities do not

qualify for major health and social welfare programs that offer supplemental support, such as SNAP, Medicaid, access to health insurance subsidies, refundable tax credits, and other income supports.

**Individuals who experience a disability onset during midlife are four times more likely to be asset poor than those who have never been work-disabled.** Just under half of these individuals also report using up all their savings to cover medical expenses, accessible transportation, and adaptive services.<sup>62</sup> Disability is the cause of almost 50% of home foreclosures,<sup>63</sup> and just under 45% of bankruptcy filings in 2019 were at least partially due to medically related work loss.<sup>64</sup>

Having a disability, even when employed full time, imposes additional costs on the household balance sheet. Managing a chronic disease, autoimmune disease, or serious injury imposes health, therapy, and drug costs, in addition to income lost while not working. This additional burden is

akin to fees and fines for having a disability or becoming disabled. Some disabilities may also require modifications to the home and incur direct costs for powered wheelchairs, other assistive devices, or home healthcare not covered by health insurance. Higher medical premiums also drain resources.<sup>65</sup> Once a person is unable to work and in need of

publicly funded income supports such as SSI or Medicare, the complex process of documenting and proving eligibility, along with extensive application waiting periods, require these cash-constrained households to expend resources while they wait for support.

## Financial Challenges of Seriously Ill Persons Living with Long-Term Disability<sup>66</sup>

FINANCIAL CHALLENGE	PERCENTAGE WITH A DISABILITY
<i>Used up all their savings</i>	<b>44%</b>
<i>Unable to pay for necessities like food, heat, and housing</i>	<b>29%</b>
<i>Want to work, but are unable to</i>	<b>64%</b>
<i>Unable to do their jobs as before</i>	<b>58%</b>

Requirements, benefits provisions, and waiting periods vary across short-term and long-term disability coverages.<sup>67</sup> Regardless of the type or length of the disability, individuals with short-term disabilities (usually lasting less than a year)<sup>68</sup> may not be guaranteed job protections at the end of the disability period, and income replacement coverage typically

provides no more than 75% of an individual's base salary.<sup>69</sup> Consequently, persons who become disabled may find themselves unemployed after a short stint with disability, or fully incapable of meeting their financial obligations during and after a disability, adding to the trauma of illness.

## Average Short and Long-Term Disability Benefit Considerations

	ABSENCE FROM LABOR FORCE	BENEFITS/ WAITING PERIOD	BENEFITS COVERAGE PERIOD	NOT COVERED
<b>SHORT-TERM DISABILITY</b>	<i>6 to 12 months</i>	<i>Full, half, or no salary</i>	<i>26 weeks on average</i>	<i>Some illnesses or injuries, time off to caretake, pre-existing conditions</i>
<b>LONG-TERM DISABILITY (LTD)</b>	<i>Minimum 24 to 28 months to prove LTD</i>	<i>3 to 6 months</i>	<i>12 months to lifetime</i>	<i>Healthcare</i>

The ongoing COVID-19 pandemic will continue to exacerbate economic free fall with the emergence of a new class of disability, “long COVID.” A person with long COVID has a disability if the person’s condition or any of its symptoms create a physical or mental impairment that substantially limits one or more major life activities.<sup>70</sup>

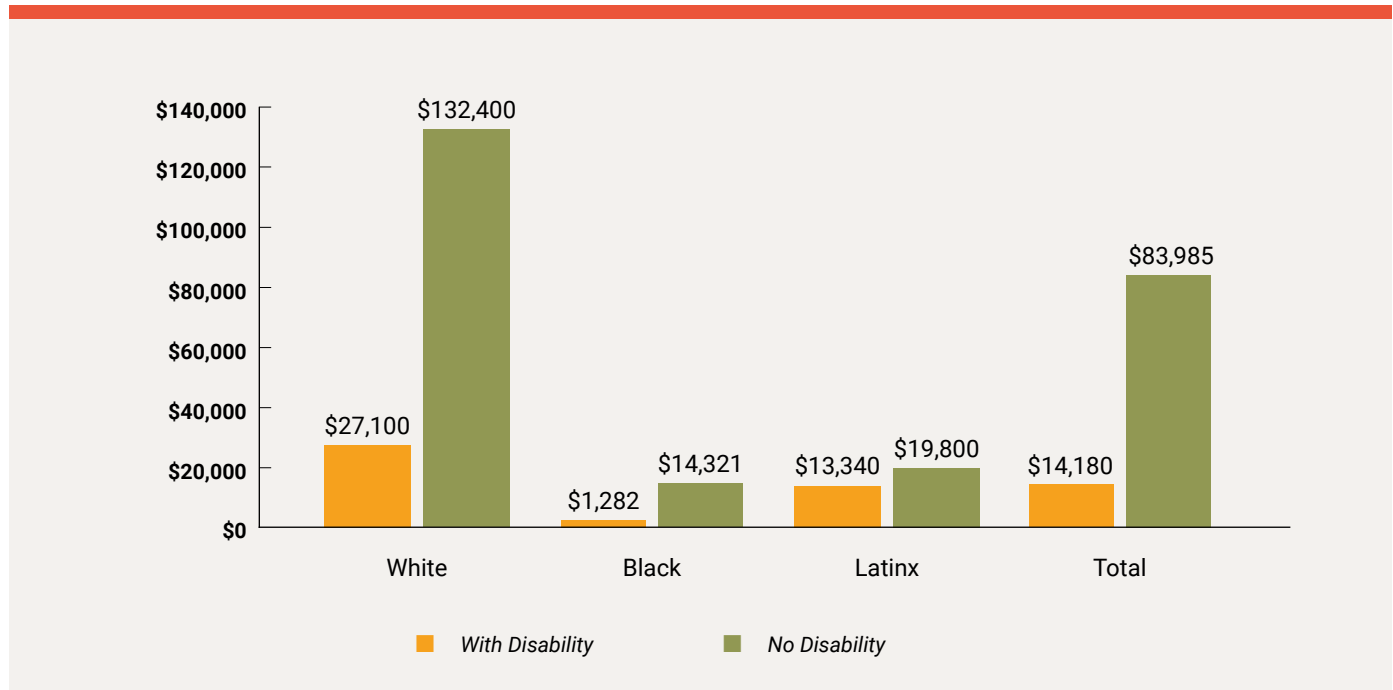
- About 10% of short-term disability claims in 2021 were directly related to COVID-19 (not including mental health and behavioral claims).<sup>71</sup> Approximately 3–5 million U.S. adults have experienced activity-limiting post-COVID conditions (PCC) lasting one month.<sup>72</sup> PCC occurred most often among adults ages 50–64.
- About 30% of those diagnosed with COVID-19 develop long COVID.<sup>73</sup> Several cognitive and physical impairments have been reported for long COVID, including difficulties with memory or concentration, walking or climbing stairs,

or self-care activities such as dressing or bathing. An individual is considered to have long COVID if symptoms persist beyond three months.<sup>74</sup> While the incidence of long COVID varies across ethnic groups, more cases are found in Latinx persons, people under 65, women, and individuals without college degrees.<sup>75</sup>

### Net Wealth Among People with Intersecting Identities

The intersection of race with disability creates significant disparities among households. For example, Black households with a person of working age with a disability have the lowest average net wealth, at \$1,282. In comparison, Latinx households with a person of working age with a disability have an average net worth of \$13,340; for White households, average net wealth is \$27,100.<sup>76</sup>

### Net Worth Gaps Between Individuals Living with Disabilities and People without Disabilities



SOURCE: National Disability Institute analysis of U.S. Census Bureau (2019) Survey of Income and Program Participation Microdata, 2014 Panel, Wave 4.



# Identifying and Addressing Key Systemic Barriers to Wealth Building and Economic Mobility

Disability economic justice is the assertion that opportunities created through public policy, financial services, human services, and philanthropy must include a disability lens to ensure that people with disabilities can fully participate and experience the same outcomes as their non-disabled peers.

Philanthropy has the opportunity—and responsibility—to invest in systemic solutions that eradicate longstanding barriers to wealth building and advance economic justice for disabled people, especially disabled women of color. People with disabilities continue to face systemic barriers to economic security and wealth acquisition due to a higher cost of living, public policy exclusions, discrimination, and bias. High levels of medical and educational debt, inadequate (or expensive) medical insurance coverage, employment sector segregation, income volatility and unfairly low wages, discrimination (sexism, racism, and ableism), disproportionate reliance on predatory financial services, unmet needs for credit, public policy–imposed income and asset limitations, and inadequate supports for small business ownership or wealth building for people with disabilities remain significant challenges. These negative effects are compounded when individuals with disabilities have intersecting racial, ethnic, gender, and socioeconomic identities.

Our focus is on key barriers that uniquely impact people with disabilities and funders' support for efforts to mitigate such obstacles. These barriers limit economic mobility by negatively impacting economic security and the ability to access programs designed to stabilize finances, protect

assets, or accumulate wealth. They affect both those with a disability who are still working or able to work and those who are not able to work due to their disability and are receiving or seeking Social Security Disability benefits.

## **Entrepreneurs with disabilities experience systemic barriers when trying to use self-employment and small business development as a pathway to financial mobility.**

Nearly 2 million small business owners have one or more disabilities.<sup>77</sup> Nonetheless, individuals with disabilities face distinctive challenges in building financial stability through self-employment and small business ownership.

DOBEs have unique needs that coalesce around a range of issues, including ableism, inadequate access to traditional financial channels for credit and capital, a lack of assets, and public benefits–related issues.<sup>78</sup> Addressing these issues with intentionally targeted flows of capital, alternative lending risk assessment, public-private startup or expansion funds, or informed legal and technical assistance are potential solutions.

### FEDEX ENTREPRENEURSHIP FUND<sup>79</sup>

In late 2022, the FedEx Entrepreneurship Fund, in collaboration with Hello Alice, a free platform for small business owners, and the Global Entrepreneurship Network (GEN), a nonprofit that supports the entrepreneurship ecosystem, awarded \$300,000 to 30 small businesses owned by people who are veterans or have disabilities. The initiative provides access to funding, resources, and networks to targeted small business owners to help them grow and succeed. In addition to identifying as an entrepreneur who has disabilities or is connected to the military, all grantees had fewer than 25 employees and made no more than \$7 million in annual gross revenue in 2021. The Fund received more than 12,500 applications, 40% from entrepreneurs with disabilities, indicating strong demand for dedicated small business support. For more information, see [grantees](#) and [FedEx's entrepreneurship investments](#).

## Without favorable insurance, targeted income supports, and support for asset preservation, workers who incur a disability, including long COVID, free fall into financial distress and asset loss.

Asset building is more attainable for people with disabilities who are also able to work. However, individuals who experience onset of a disability during midlife are four times more likely to be asset poor than those who have never been work-disabled,<sup>80</sup> in part due to the medical-financial pressures, lack of employer or public income support, income loss, and depleted savings from covering medical and other needed expenses. Just under half of these individuals reported using all their savings to pay for medical expenses, accessible transportation, and adaptive services.<sup>81</sup>

Many people with disabilities can continue to work if the employer offers leave time, provides adequate health and short-term disability insurance, and makes accommodations when needed.<sup>82</sup> Because one in four persons will become disabled during their working years, one in three people can expect to have a disability for 90 days or longer, and one in

seven people can expect to have a disability for five years or longer,<sup>83</sup> systemic solutions are needed along the continuum to enable a person with disability to continue working avoid free falling into financial distress.

Yet today, many workers experience financial stress in addition to the trauma of disabling illness (chronic or sudden onset such as COVID) or injury. Individuals may find themselves unemployed after a short stint with disability, or fully incapable of meeting their financial obligations during and after onset of disability. For example, persons who have had long COVID will exhaust leave time, incur more debt for medical care, and are about 3% less likely to be employed than those who had COVID but did not experience symptoms lasting more than three months.<sup>84</sup> Similar economic fallout occurs with other disabilities requiring regular health care, rehabilitation, and other interventions that take time and availability away from the workplace.

Important advocacy agenda items include establishing short-term disability benefits to help COVID long-haulers; shortening Social Security disability application processing times; updating SSI benefits to at least 100% of the federal poverty level; reforming outdated policies such as asset limits that lend to continued financial insecurity; removing waiting periods between benefit approval and payment and access to health insurance; and enacting a permanent federal paid family and medical leave law for serious illnesses.<sup>85</sup>

### DISABILITY ECONOMIC JUSTICE

The Disability Inclusion Fund (DIF) at Borealis Philanthropy supports U.S. groups run by and for people with disabilities that are leading transformational change, including the American Association of People with Disabilities (AAPD). AAPD is a national convener, connector, and catalyst for change related to the political and economic power of people with disabilities and issues with COVID. With support from the New America Foundation and Blue Meridian Partners, AAPD gathered and compiled [stories and policy recommendations](#), including suggestions for public benefits reform, from disability advocates and people with disabilities impacted by COVID.



## Key disability benefits limit income, restrict assets, and can create unjust debts in the form of overpayments, creating financial precarity.

The disability community, as defined by the ADA, is comprised of a diverse continuum of people who have differing needs for support. Some people with disabilities never interface with disability programs, while others will need support at some point over the course of their lives. Still others are supported by one or more publicly funded disability income and service supports.

Individuals whose disabilities are severe enough to prevent them from working may be eligible for SSDI or SSI benefits. Those whose disability meets a range of medical eligibility requirements, including a determination that they need services to live in the community (as opposed to an institution), may receive services under Medicaid Home and Community Based Services (HCBS) Waiver programs.

SSI, SSDI, and HCBS Waivers are public supports that provide a safety net for people experiencing complicated challenges due to their disability. However, the income and asset limits of each program can trap individuals in poverty and limit their financial stability and wealth accumulation.

## Public Benefits Programs for People with Disabilities as of 2023<sup>86</sup>

PROGRAM	INCOME LIMITS FOR ELIGIBILITY	EARNINGS LIMITS	ASSET LIMITS
<b>SSI</b>	\$914 per month/individual \$1,371 per month/couple <i>Note: These numbers also represent the maximum monthly cash benefit amount.</i>	Monthly cash benefits are reduced \$1 for every \$2 earned once earnings exceed \$65	\$2,000/individual \$3,000/couple, does not include the house lived in and one car
<b>SSDI</b>	None; Required to have enough quarters of coverage to collect Social Security. Maximum Benefit is \$3,627, average benefit is \$1,483	\$1,470 per month for non-blind individuals \$2,460 per month for blind individuals	None
<b>HCBS WAIVER</b>	Varies by state. Maximum: \$2,742 per month/individual \$5,484 per month/couple No cash benefit. Individual receives a range of support services.	All earnings are counted towards the monthly income limit, along with social security cash benefits and all other sources of income.	Varies by state. \$2,000 to \$3,000 in most states

Social Security Administration. Fact Sheet. 2023 Social Security Changes. Retrieved from <https://www.ssa.gov/news/press/factsheets/colafacts2023.pdf>

## ASSET LIMITS

Some resources do not count toward the asset limits for SSI and HCBS Waivers, such as the home the individual lives in and one car used to travel to medical appointments or work. However, even when these programs allow a person with a disability to own or keep an asset, the absence of rules to protect the asset can erode the asset's value or even eliminate it. Asset limits prevent the individual from maintaining savings to protect current assets (such as setting aside funds to address car repairs, replace the roof of the home, or cover insurance deductibles in case of an accident or natural disaster). They also prevent beneficiaries from saving for emergencies, current needs (such as the purchase of a car or home), and future needs (such as retirement).

## BELOW POVERTY INCOME SUPPORTS

As an income support, the SSI maximum monthly cash benefit rate either supplements low SSDI benefits limited by low wages and low levels of unearned income (such as spousal support) or comprises the entire monthly income. Yet, the maximum income provided by SSI is below the 2023 Federal Poverty Limit for individuals (\$914 for SSI benefit versus FPL of \$1,215 monthly) and couples (\$1,341 for SSI benefit versus FPL of \$1,643 monthly).<sup>87</sup> SSI and HCBS Waivers do not take household size into account, only considering the individual with a disability and their spouse with a disability. As a result, only 2.7 million<sup>88</sup> of the 4.2 million<sup>89</sup> SSI recipients between the ages of 18 and 64 have income over the poverty line.

## LIMITS TO WORK

Across all three programs, working beneficiaries typically work part time due to the severity of their disability. The decision to work is often complicated by fears of losing critically needed healthcare benefits or being overpaid and owing the government money. Employment does not guarantee healthcare coverage; even for those who can participate in an employer-sponsored private health insurance plan, that insurance is not always equal to Medicaid or Medicare coverage. Obtaining a job that can result in the loss of public health insurance also has increased risk. There is no guarantee that the job will endure, leaving beneficiaries with concerns that a job loss could leave them without healthcare altogether. Nonetheless,

beneficiaries who obtain and maintain employment are likely to experience an overpayment.

## OVERPAYMENTS

Social Security overpayments occur when a beneficiary receives income support that they are later determined to not have been eligible to receive. Benefit eligibility is complex. Any one of several factors can reduce the amount an individual is entitled to receive, such as a change in income, earnings of a parent of an SSI child under 18, change in marital status, change in living arrangement, an inheritance, acquisition of an asset, or incarceration. Beneficiaries are required to report such changes to SSA, but the guidance on how and when to report is inconsistent at best. Even those who report in a timely manner may not prevent an overpayment because SSA also has to process the change in a timely fashion.

Overpayments may also function as a disincentive to work.<sup>90</sup> An estimated 40% of those who receive SSI or SSDI had at least one overpayment over a 10-year period, due to work activity.<sup>91</sup> Overpayments create a debt burden that fosters new financial challenges. On average, beneficiaries must pay back \$4,363 (the equivalent of 5.5 months of SSI payments).<sup>92</sup> A subset of individuals are further debt burdened by fines that can total more than two times the overpayment.<sup>93</sup> Although this approach is typically applied when the overpayment was due to fraud, there are documented cases of beneficiaries whose debt was elevated by fines even though the individuals believed they were entitled to the cash benefits they received.<sup>94</sup>

Policy changes within SSA are needed. Tenable solutions include moving the enforcement process out of the national payment service centers, where staff have many other responsibilities, to local field offices; limiting how far back in time SSA can go when calculating an overpayment (the look-back rule); and canceling overpayment debt that totals up to six months of benefits payments when overpayments are due to administrative error or beneficiaries would incur hardship due to this debt.<sup>95</sup> For those with lower overpayment costs, overpayments provide an opportunity to explore and meet their financial goals and needs through financial counseling or coaching. Funders can support training programs that equip financial coaches with the

knowledge and tools to advocate for overpayment appeals and waivers and support individuals in negotiating a repayment plan.

Support from benefits counselors has been found to help benefits recipients manage their overpayments, as well as maintain employment.<sup>96</sup> A Promoting Opportunity Demonstration (POD) project conducted by the SSA noted that beneficiaries who contacted POD counselors after receiving overpayment notices received assistance

to understand the notice, identify the reason for the overpayment (such as administrative error or late reporting of earnings), and weigh options for responding to the notice (such as applying for a waiver, setting up a repayment plan, submitting missing information, or requesting a reconsideration). In other cases, POD counselors were able to help participants make timely reports, preventing an overpayment in the first place, or anticipate overpayments ahead of time.

*In 2018, Citi, with a \$2 million investment, teamed up with the City of New York and National Disability Institute (NDI) to launch [Empowered Cities](#), a national initiative to improve financial inclusion and security for lower-income people with disabilities. As subject matter experts with lived experience, NDI provides technical assistance, tools, and resources to municipalities to serve clients with disabilities and is building field knowledge about best practices and replication.*

*A collaboration with the City of New York, specifically the Mayor's Office for People with Disabilities (MOPD), the New York City Department of Consumer and Worker Protection (DCWP) Office of Financial Empowerment (OFE), and The Poses Family Foundation, the first municipal pilot was EmpoweredNYC. This pilot built upon the existing NYC Financial Empowerment Center model of free financial counseling and coaching to offer specialized and targeted outreach and guidance on issues such as handling overpayment debt, managing SSI and SSDI benefits, and transitioning to work to New Yorkers with disabilities to build their financial security. To provide the best assistance possible, EmpoweredNYC designed and implemented a new training and ongoing*

*learning community for financial counselors. In addition to individual coaching and counseling, EmpoweredNYC offered a monthly webinar series for service providers, caseworkers, and other professionals who work with people with disabilities to better understand and address the unique financial situations of people with disabilities. To be more inclusive, EmpoweredNYC launched a [groundbreaking citywide marketing and awareness campaign](#) to raise awareness of the service and how it helps people with disabilities and their families improve their financial stability.*

*By the close of the three-year pilot in 2021, EmpoweredNYC provided financial counseling to more than 1,000 people with disabilities, helping them reduce their debt by more than \$442,000 and save nearly \$26,000. As of January 2022, the program was moving into its next phase to integrate a portion of EmpoweredNYC services into the Financial Empowerment Centers. Empowered Cities has now expanded to include Boston, Chicago, Los Angeles, and San Francisco.<sup>97, 98</sup>*

## Housing affordability, quality, and accessibility do not meet the needs of people with disabilities.

America is facing a housing affordability crisis, and people with disabilities are acutely impacted. The lack of safe, accessible housing within their budget is a barrier to both renters and homeowners. People with disabilities are more likely to be burdened by high housing costs.<sup>99</sup> Homeowners with disabilities, particularly those who incur a long-term disability during their working years, are twice as likely to have their home foreclosed upon, compared to those without a disability.<sup>100</sup>

Market solutions and experiments with new financing models and community-based lending, land trusts, co-ops, and other approaches for homeownership are being conducted by nonprofits, financial institutions, and local governments. New models for rental housing are being explored. Economic development funding is supporting affordable housing development with advocacy and support from philanthropy and public-private partnerships.

*The Kelsey, a nonprofit in San Francisco, develops affordable, inclusive housing communities and advocates for disability inclusion with community partners across the United States. In its advocacy and development work, The Kelsey centers the perspectives of people with disabilities to accelerate and scale housing development. The Silicon Valley Community Foundation and other public, private, and philanthropic partners have supported The Kelsey to co-develop 240+ mixed-income, mixed-ability residential communities that are accessible for people with a range of disabilities and access needs.*

*The Kelsey is leveraging its expertise and experience in the Bay Area to replicate and [advance inclusion](#) in other communities. For its disability-inclusive housing, The Kelsey led a nine-month organizing and pre-development process with teams of cross-sector stakeholders in the Bay Area. Lessons learned through the process include how to turn advocacy into policy; define innovative design standards; establish strong cross-sector partnerships; center leaders with disabilities as experts, advocates, and paid partners; and unlock new funding and resources for inclusive housing.*

## Programs designed to increase the economic security of individuals with low to moderate incomes underserve people with disabilities.

Like other populations with low incomes, the financial lives of people with disabilities are complicated by limited incomes, high and unpredictable expenses, limited access to safe and affordable credit, and little to no emergency savings.

Community-based programs designed to increase the economic security of individuals and families, such as free tax preparation programs, financial counseling/coaching programs, credit-building programs, homeownership assistance, education scholarships, and asset-building programs, often underserve this population. Frequently, a handful of practices create programmatic barriers to service. The pervasiveness of these challenges is difficult to determine because many organizations do not track clients' disability status.

The accessibility of services (online and in person) is a persistent challenge that can be solved with resources and commitment. Most entities do not ensure their website and other technology tools are accessible, with a shocking 97% of the top one million websites used not meeting web accessibility requirements.<sup>101</sup> While web accessibility may not always be visible during the provision of services, it impacts how people with disabilities find these services and other information they need to build economic security and wealth. Web accessibility is particularly important for organizations that provide access to benefits, financial products, and other tools directly and through referrals. For example, disability advocates report common accessibility issues for managing student loans, signing up for benefits, and receiving workplace training on federal websites.<sup>102</sup>

Many nonprofits will need technical information, training and technical assistance from experts, and dedicated funds to make the needed changes and develop accessibility infrastructure. Investing in the development of virtual products and services tailored to specific population needs emerged as a key recommendation in AFN's [The Impact of COVID-19 on Financial Capability Services](#).

A lack of awareness often limits individuals to “disability services” that do not consistently focus on activities that support financial inclusion. Organizations can improve access to services for people with disabilities by rethinking limited marketing approaches and instead conducting outreach to the community to create awareness of available services. With support from local funders, organizations or coalitions can also take stock of what they are already providing, what additional community resources exist, and what the disability community needs and establish partnerships, develop an effective referral system, or identify and fill service gaps to advance disability and economic justice.

Another challenge is that economic security program staff often lack the technical knowledge to confidently serve people with disabilities. A survey of financial coaches and counselors found that only 39% reported being “comfortable” or “very comfortable” serving people with disabilities. More than 75% of financial coaches and counselors said they were not sure of the services clients with disabilities may need. More than 50% reported that they did not want to give advice that would be detrimental to the client’s ability to access benefits.<sup>103</sup> These knowledge gaps can be remedied through technical training and by making expert resources available for counselors to consult.

*In Louisiana, the Kessler Foundation, the Greater New Orleans Foundation, and JPMorgan Chase & Co. funded a 2-year pilot with Disability Rights Louisiana (DRL). The program, which began in 2019, was focused on increasing the economic security of returning citizens with disabilities, who are disproportionately impacted by incarceration, poverty, unemployment, and debt.*

*In response to the lack of reentry programs for people with disabilities locally and nationally, DRL established the [Financial Access Inclusion and Resources \(FAIR\) program](#) which addresses the unique barriers faced by people with disabilities who are returning citizens and improves their employment and financial outcomes through coaching and wraparound services. Together, clients and coaches assessed, prioritized, and addressed barriers. Services included support in applying for benefits, navigating needs for reasonable accommodations for housing financial services, and addressing court fines, fees, and attachments through the Justice and Accountability Center of Louisiana.*

*Over the 24 months of the pilot, 130 adults enrolled and 91 actively participated—all of them in the Greater New Orleans area. Participants had disabilities, had been incarcerated, and wanted to work. The majority of the active participants were Black men, and just less than half had less than a GED or high school diploma. The pilot demonstrated its ability to build economic security for people with disabilities and intersecting identities. On average, active participants increased income by three times and reduced debt by 35% by the end of the pilot. Additionally, more than half (49) secured jobs, 58% improved access to healthcare, and 48% improved access to safe and affordable housing. The reincarceration rate for participants was only 4%, compared to 27% in the state of Louisiana.*

*Due to the success of the pilot at filling an unmet need, DRL is continuing this program with the support of Baptist Community Ministries, the Greater New Orleans Foundation, JPMorgan Chase & Co., and the RosaMary Foundation.*

# Policy Change Proposals to Transform Systemic Barriers

As noted in AFN’s report *From Relief to Resilience: Reimagining Investments*, systems-level changes provide opportunities for grantmakers to address root causes and reduce structural inequities that foster racial and gender wealth gaps. Associated policy changes must take people with disabilities into consideration in both planning and implementation to realize economic justice for this population and ensure that the wealth gap does not widen for them.

Several disability-specific policy changes are needed to create economic justice and address systemic barriers. A range of opportunities exist for removing barriers to wealth building, stabilizing income to position individuals for asset building, fostering opportunities for wealth building, and protecting assets when individuals incur a disability. Philanthropy can help catalyze the needed policy changes by providing focused support for narrative change to make the need and the solution compelling, support for power-building efforts, funding for research and advocacy, and in some cases funding to test new strategies.

## Policy Change Proposals to Transform Systemic Barriers

IDENTIFYING AND ADDRESSING KEY SYSTEMIC BARRIERS	POLICY CHANGE PROPOSALS TO TRANSFORM SYSTEMIC BARRIERS
Entrepreneurs with disabilities needlessly experience systemic barriers when trying to use self-employment and small business development as a pathway to financial mobility.	<ul style="list-style-type: none"> <li>▶ 1. Create a government-wide disability small business contracting priority to foster growth of small businesses owned by people with disabilities.</li> </ul>
Workers who incur a disability, including long COVID, free fall into financial distress and a loss of assets without favorable insurance policies, targeted income supports, and asset preservation.	<ul style="list-style-type: none"> <li>▶ 2. Protect the income, assets, and wealth of workers through improved short-term and long-term disability policies that provide comprehensive support during episodes of chronic health conditions and disability.</li> </ul>
Key disability benefits limit income, wrongly restrict and erode assets, and create fines called overpayments that need to be reduced, cured, or eliminated.	<ul style="list-style-type: none"> <li>▶ 3a. Increase monthly income limits and remove asset limits from publicly funded income supports and health insurance.</li> <li>▶ 3b. Advance equity by allowing for additional tax credits and a disability adjusted FPL to reflect additional expenses incurred due to a disability.</li> </ul>
Housing affordability, quality, and accessibility do not meet the needs of people with disabilities.	<ul style="list-style-type: none"> <li>▶ 4. Protect home affordability via measures that increase affordable, accessible housing stock, and provide relief in times of financial instability.</li> </ul>
Programs designed to increase the economic security of individuals living at low to moderate incomes underserve people with disabilities.	<ul style="list-style-type: none"> <li>▶ 5a. Intentionally include people with disabilities in guaranteed income design and pilots.</li> <li>▶ 5b. Expand use of ABLE accounts to support this opportunity for wealth building among people with disabilities.</li> </ul>

## 1 | Create a government-wide disability small business contracting priority to foster growth of small businesses owned by people with disabilities.

The federal government has a goal to increase procurement from small, disadvantaged businesses from the current 5% to a modest 15% by 2025. Currently, small business owners with disabilities are competing in a larger pool of “economically disadvantaged” applicants, with no programs tailored or funds earmarked to support their unique needs and circumstances. While roughly one-third of US government contracting dollars go to various classes of small businesses, such as disadvantaged businesses, women-owned small businesses, veteran-owned businesses, and service-disabled veteran-owned small businesses,<sup>104</sup> the current design creates a huge funding gap between potential and awarded funds for persons with disabilities. The SBA 8(a) Business Development Program provided more than \$34 billion in contracts during fiscal year 2020.<sup>105</sup> Though the 8(a) Program targets support to small businesses owned by “economically and socially disadvantaged” individuals, it does not include disabled Americans within its “socially disadvantaged” framework, except for disabled veterans.<sup>106</sup> This gap presents opportunities for intentionally designed programs geared specifically toward aiding the economic advancement of self-employed people with disabilities. Such programs expand efforts to increase equity in small business contracting.

Philanthropic opportunities could test and prove the value of bridging several gaps within the DOBE space and for self-employed persons with disabilities. Efforts could also pay special attention to women of color with disabilities who are working to overcome their historical financial disenfranchisement and establish thriving businesses that benefit themselves, their communities, and the wider society. Possible innovations in this area include:

- a. Improving access to high-quality financial education and counseling, entrepreneurial mentorship, and interpersonal network supports for DOBEs and self-employed individuals with disabilities. This effort could include restricted grants to ensure these services are targeted and available.

- b. Increasing availability of income-boosting supports and tax credits to incentivize investors and other businesses to contract with and support DOBEs.
- c. Connecting entrepreneurs to affordable, fiscally sound financial products and services that facilitate business growth and expansion, debt reduction and elimination, and accumulation of emergency funds. This effort should include more targeted and inclusive lending programs (with direct capital investment or loss reserves to lenders from philanthropy) that offer business capital.<sup>107</sup>
- d. Setting a targeted percentage of federal procurement of products and services from small businesses owned by people with disabilities and tracking and reporting on it annually.
- e. Sponsoring and publishing ROI analyses of the contribution of DOBEs to economic growth and impact, job retention and growth, and local and state tax revenue.
- f. Supporting research initiatives that explore issues faced by entrepreneurs at the intersections of disability, race/ethnicity, and gender and promising policy and programmatic solutions that improve the economic impact of DOBEs for people with intersecting identities.
- g. Funding advocacy for changes to tax laws and asset limits that unduly restrict wealth-building initiatives for entrepreneurs with disabilities who need the benefit of public health insurance assistance, through programs such as Medicaid and Medicare, by testing and documenting promising alternatives.

Philanthropic investments in these strategies respond to the need to help small business owners and self-employed persons with disabilities build wealth and achieve economic security through innovation and modernization of the current systems in ways that increase equity.

## 2 | Protect the income, assets, and wealth of workers through short-term and long-term disability policies that provide comprehensive support during episodes of chronic health conditions and disability.

Government can ensure that individuals with disabilities do not become cash poor and lose vital financial assets as a result of a health condition and short- or long-term disability, but it must be persuaded to do so. Starting with a focus on prevention and insurance, public policy and funding can ensure that everyone has some form of short-term or long-term disability insurance coverage; institute more favorable tax provisions (tax credits) that remove tax liability from short-term or long-term disability benefit payments; and provide better financial cushions through expanded social benefit programs.

At least 50 million working adults do not have disability insurance.<sup>108</sup> Only five states—California, Hawaii, New Jersey, New York, and Rhode Island—and Puerto Rico require employers to provide short-term disability insurance coverage. Ten states have medical leave laws that require employers to pay health insurance premiums for individuals on short-term disability. The long waiting periods for public benefits, especially Social Security disability determinations, also mean that many workers with disabilities, who are already income constrained and often cash poor, will expend their savings and many other resources before they have access to public support.

Philanthropic funding of state and local advocates for mandatory short-term disability coverage and medical leave rights in every state is needed to prompt systemic change that will ameliorate the financial fallout for those who suffer a short-term disability. Approaches may include working with insurers and employers open to exploring:

- a. Innovative, short-term gap medical insurance plans at special rates to cover individuals who have a short-term disability.
- b. Lower premiums for COBRA coverages, as a result of regulated premiums or public policy and platforms to make COBRA more readily available. Greater COBRA

accessibility would apply to individuals who lose their health insurance after the required 12-week coverage window passes, who do not have health insurance at all, or whose after-tax costs rise significantly.

If public policy can be moved to require employer-based disability insurance, working-age adults would have vital income replacement to provide for their necessities, and there would be more asset-protecting resources for homeowners and long-term caregivers during these gap periods when they are receiving only partial or no income.

Philanthropists, financial institutions, and national insurers could fund or develop the business case for low-interest, short-term loan products, affordable lost-income insurance, and codicils or riders to help maintain supportive services (such as assistive technology or personal attendant care) and provide individuals with liquid resources while they await their return to work or eligibility for publicly funded disability benefits.

Philanthropy could also strengthen systems by investing in navigators or financial counselors and return-to-work programs to assist individuals with these processes.

### 3a | Increase monthly income limits and remove asset limits from publicly funded income supports and health insurance

Increasing monthly income limits and removing the asset limits from the eligibility criteria for publicly funded programs shifts expectations and improves the wealth-building capabilities and opportunities for long-term financial security of persons with disabilities who receive means-tested benefits.

Eliminating asset limits leads to reductions in administrative costs and increases in household assets and agency. Several states have moved to eliminate asset limits as part of the eligibility criteria for applying for some cash assistance programs, such as Temporary Assistance for Needy Families (TANF) and SNAP, as a precedent for removing asset limits under SSI.<sup>109</sup> One approach is the *Allowing Steady Savings by Eliminating Tests (ASSET) Act*, introduced in the U.S. Senate on February 11, 2020.<sup>110</sup>



Many proponents of the elimination of asset limits in SSI benefits eligibility criteria have also suggested a parallel increase in monthly income to ensure individuals with disabilities have an income at or above the FPL. To raise beneficiary incomes above the FPL, the monthly SSI benefit would need to be raised to a minimum of \$1,215 per month for a household of one and take into consideration household size to accurately reflect the financial needs of the household.

Philanthropy can support the case and help fund financial modeling based on demonstrations to prove the impact of such changes with a willing Social Security Administration.

*Luis shared, "For almost 10 years, I slept on my mother's dining room floor. She had a one-bedroom apartment. And that is how my family helped me. I couldn't save money to get an apartment because, if I saved too much money, I would lose my Social Security benefits, which would severely impact my disability. It did feel like a punishment and contributed a lot to my mental health problems, the stress and feeling like a burden to my family. The loss of independence was hard for me particularly as a Latino, as a man and as the oldest in my family. It felt really weird and uncomfortable—not that I'm ungrateful—that my family had to take care of me. That caused additional stresses for them that I wish they hadn't had."*

### **3b | Advance equity by creating additional tax credits and a disability-adjusted FPL to reflect additional expenses related to a disability.**

Research supported by the FINRA Investor Education Foundation found that a household with an adult with a work-disability (an impairment that limits the capacity to work) requires 28% more income (\$17,690 on average) to achieve a comparable standard of living to households that have no members with a disability.<sup>111</sup> An FPL equivalent for people with disabilities would be approximately \$32,270 from countable income sources, adjusted from the annual FPL of \$14,580 for one person. If tax credit and income support policies changed to recognize the additional cost of living with a disability, more households that have

persons with disabilities would be lifted above the FPL and better positioned to engage in asset building and increase economic security.

#### ***Work-disability:***

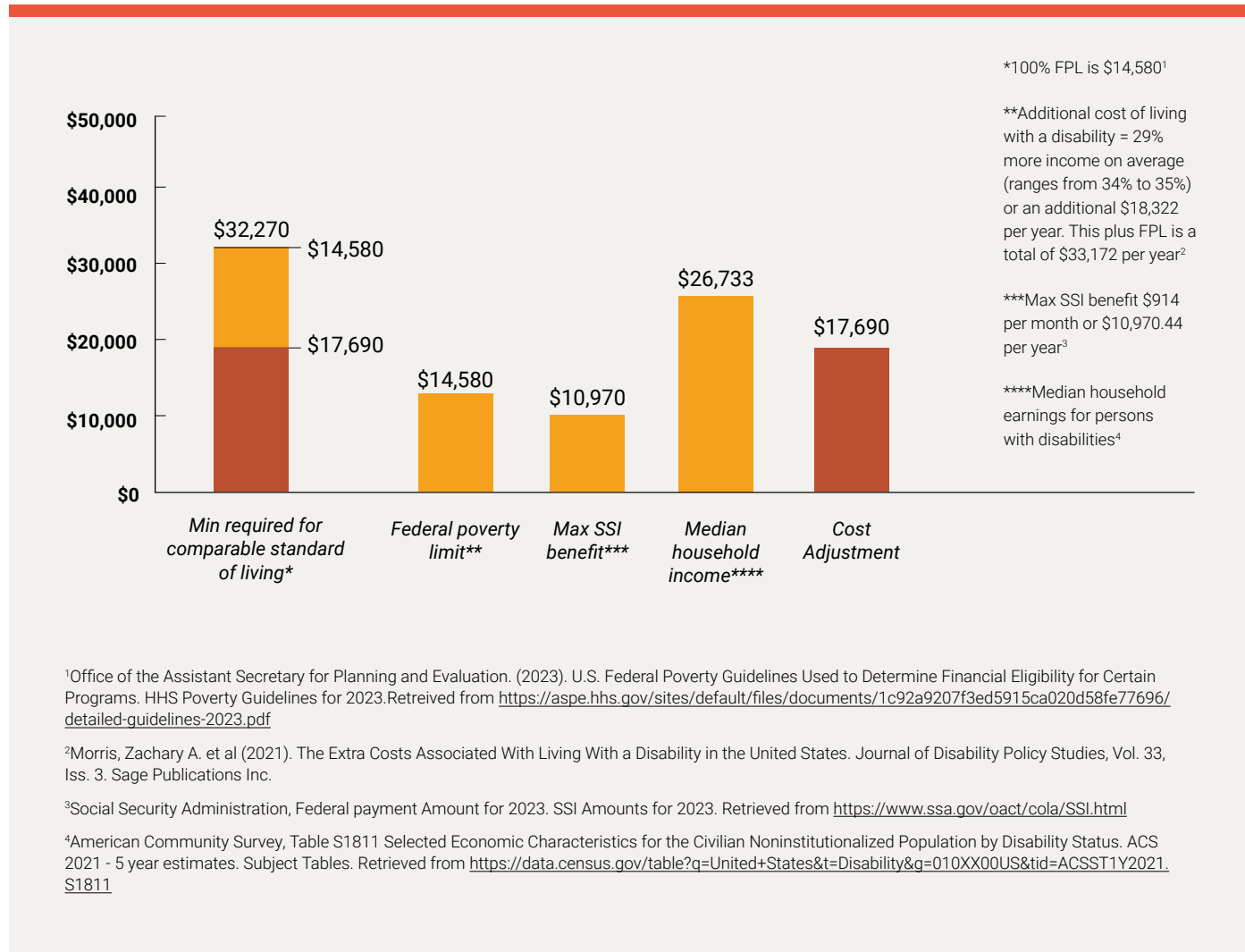
**An impairment that limits the capacity to work.**

The Earned Income Tax Credit (EITC) could be adjusted to allow for an income disregard of the first \$17,690 in annual income for qualifying individuals with disabilities. Due to other eligibility requirements for the EITC, a new credit for people with disabilities could be created to provide a refundable credit of \$17,690 annually for people with disabilities who live at or below the FPL or whose combination of income and EITC would not otherwise equal at least \$32,270 (FPL plus \$17,690).

For individuals with disabilities whose earnings are too high to qualify for the EITC, the IRS could expand the definition of qualified medical expenses to account for the increased costs of accessible housing, special transportation, and other costs that people with disabilities incur to maintain the same lifestyle as their non-disabled peers.

Income support programs that use the FPL measure as an eligibility requirement could increase the FPL for persons with disabilities or allow for an income disregard of \$17,690. This adjustment would expand access to programs and services for people with disabilities with income above the allowable limit.

## Disability Adjusted Federal Poverty Levels 2023<sup>\*112</sup>



This disability-adjusted FPL as a floor could be tested, and its impact documented, through a philanthropy funded or public-private guaranteed income pilot or a demonstration. Studies could capture increases in income security, asset building, reentry to work, and other quality of life measures, as well as any notable impact on use of other publicly funded services, to make the case for public policy support and protect SSI eligibility alongside higher levels of income support. The intersectional aspects of those affected could be captured in the research design, and the effects on asset building would need to be intentionally documented. The effects of changes to tax policies could be documented and evaluated through economic modeling and qualitative research to understand the impact on the economy and the lives of individuals with disabilities.

### 4 | Protect home affordability via measures that increase affordable, accessible housing stock, and provide relief in times of financial instability.

While the affordable housing crisis impacts many low- and middle-income people, it makes it more challenging for people with disabilities to find and retain quality housing that meets their needs due to unique barriers related to housing affordability and accessibility.

#### FOR HOMEBUYERS

Targeted income support and down payment assistance programs that help individuals with disabilities purchase a home or fund renovations to make the home accessible

are key wealth-building strategies. When a household with a disability is considering homeownership, the relevant renovation costs must be factored into planning for the home purchase, as they are crucial for occupant safety and accessibility. Relevant renovations might include ramps or grab bars for individuals with mobility-related disabilities, or visual accommodations such as flashing lights to signal when a fire alarm sounds for individuals who are deaf.

Existing programs to facilitate homeownership within marginalized communities, including people with disabilities, consist of fixed-rate mortgage loans with favorable rates, second loans or grants to cover down payment and closing costs, mortgage buydowns, and the ability to incorporate costs of home modification into the loan.<sup>113</sup> Yet, people with disabilities frequently do not fit within the income qualification guidelines for such programs. Access to homeownership could be expanded by adjusting existing homeownership programs to be more inclusive and creating more dedicated assistance programs for the disability community beyond those disability-oriented housing programs offered only in 11 states.<sup>114</sup>

### **FOR HOMEOWNERS**

Changes in federal income and state property tax policy, as well as how utilities are charged or subsidized, can also help individuals with disabilities purchase and retain an affordable home. For example, the federal mortgage interest deduction credit allows homeowners to deduct interest paid on a mortgage from their income subject to federal income taxes. Since the last round of tax law changes, benefits of the mortgage deduction accrue only to households that itemize deductions, with the largest benefits going to high earners and households with very large mortgages. Equitable public policy could revise this approach with a tax credit for first-time homebuyers and credit structures that facilitate larger credits going to lower-income households.<sup>115</sup>

Tax exemptions that level the playing field should consider income variables that better support lower-wealth homeowners with disabilities.<sup>116</sup> For homeowners with disabilities, state- and county-level tax exemptions should test the value of these benefits for protecting the affordability of housing for low-income homeowners with disabilities and assess the need for sliding-scale exemptions that address

both income level and disability status. Findings from similar approaches for seniors demonstrate that higher-wealth households better weather property value increases, and lower-income households are more likely to become renters who do not benefit from these tax exemptions.

Temporary mortgage payment relief subsidies, as opposed to forbearance, reduce the rate of foreclosures during a financial shock and after.<sup>117</sup> The costs associated with mortgage default and foreclosure are typically high for all involved. Subsidizing homeowners with disabilities who experience financial crises is a viable strategy in ensuring the best outcomes for homeowners. Further, mortgage companies avoid the time, legal, and administrative expenditures associated with the foreclosure process.

### **FOR RENTERS**

Renters with disabilities also have unique needs, including modifications to rental units and more affordable and accessible housing stock. Strengthening housing finance programs could result in affordable housing that is intentionally accessible, integrated, and inclusive. Lifting the private activity bond (PAB) cap incentivizes increased production of affordable housing.<sup>118</sup> In addition, exempting the bond gap from multifamily housing projects means that more projects will meet the PAB requirements and automatically benefit from the 4% Low-Income Housing Tax Credit (LIHTC) established by Congress in 2020.<sup>119</sup> Strengthening the affordable housing market would have ripple effects for renters (and owners) with disabilities who are housing-cost burdened, allowing them to increase their income security and potentially move toward homeownership.

When applying a disability justice lens, housing policies must also consider prospective renters transitioning from group quarters, including institutions. This last group is often overlooked by programs designed for the general population, excluding the hundreds of thousands of individuals with significant disabilities who are wait-listed for home and community-based services and currently reside in family homes, group homes, nursing homes, and other congregate settings. These individuals face the additional challenge of disabilities that significantly limit their ability to work, and so may also require long-term supports. Increases in the

number of HUD housing vouchers available to persons with disabilities and Public Housing Authority (PHA) preferences for people with disabilities in public housing units are needed to serve the full spectrum of renters with disabilities.

The housing crisis is even more pronounced for people with disabilities; solving it will require multisector collaborations and a range of interventions. Opportunities for philanthropy include:

- a. Improving access to high-quality education and counseling for renters, homebuyers, and homeowners with disabilities to connect them to housing opportunities and mitigate discrimination. This effort could include restricted or incentivized grants to ensure these services are targeted and available.
- b. Increasing availability of income supports and tax credits, safe and affordable mortgage products, and flexible capital (for rental assistance, down payment and closing costs, mortgage/rent relief, or modifications) to support renters, homebuyers, and homeowners with disabilities.
- c. Supporting the development of affordable, accessible, and inclusive housing.
- d. Funding advocacy for changes to tax and housing laws that make housing more affordable, accessible, and available for people with disabilities.
- e. Funding advocacy and supports for existing HUD and other housing development programs, such as the housing choice voucher program and accessory dwelling unit (ADU) programs.

## 5a | Intentionally include people with disabilities in guaranteed income design and pilots.

Embodying an ethos of dignity and freedom, guaranteed income programs provide an unrestricted monthly income supplement to a designated group of people to increase economic security. Early research shows that giving \$250 monthly to individuals ages 19 to 65 (regardless of demographic characteristics) who have a child as a dependent reduced childhood poverty to less than 5%.<sup>120</sup> Guaranteed income programs have been found to reduce income volatility, increase levels of full-time employment,

improve health and well-being, reduce depression and anxiety, and create opportunities for individual actions that lead to financial security.<sup>121</sup> Program design for guaranteed income programs must intentionally include the disability community to address barriers to participation such as benefit alignment and messaging across service providers.

More than 90 guaranteed income programs are currently planned or in progress in the United States; most of them rely on philanthropic and American Rescue Plan Act funds. Many programs are still in the pilot phase. The design of these programs, including the structure of accounts, will play a role in how means-tested public benefits will be impacted. To ensure that individuals with disabilities (who receive support from public programs) can make informed choices about participation, programs must include clear guidance on their impact on each beneficiary and provide resources, preferably via trained counselors or coaches, who can accurately advise individuals about how their personal benefits will be affected.

Data on the use and impact of funds can be strengthened by adding a disability question to guaranteed income program demographic surveys, so that data can be disaggregated to assess service levels and program outcomes for the population. Additionally, policy clarity on public benefit programs (including SSI, Medicaid, SNAP, TANF, LiHeap, and ACA subsidies) should be obtained to ensure the disregard of guaranteed income payments in asset tests and income limits. Similar to the disregard of childcare tax credit and earned income tax credit refunds, design efforts that come with administrative guidance or opinions (if not codified rules) that guaranteed income payments do not count against eligibility, as income or as an asset, could be a goal fostered by philanthropic funding to pilots and advocates.

Guaranteed income programs are regarded as viable solutions that grantmakers can advance through direct service, system and capacity building, policy and advocacy, and research and innovation.<sup>122</sup> They also can test and invalidate the paternalistic restrictions on individuals' assets and income in benefit programs in support of narrative and policy changes that center the economic dignity and equity of people with low incomes.

As philanthropy continues to play a key role in funding guaranteed income pilots and research on their effect on low- and moderate-income persons, intentional inclusion of the disability community in design and evaluation will ensure a broad guaranteed-income agenda to advance equity communitywide. Such intentionality will help the field understand the value, nuances, and impacts of including persons with disabilities in these programs.

*The Chicago Resilient Communities Pilot is an intentional guaranteed-income approach to assure the inclusion of individuals with disabilities. A leader from the disability community was engaged in the planning to provide insight and guidance on disability-specific barriers. One barrier identified was the impact of the monthly payments when an individual receives SSI. The Social Security Administration's regional office provided guidance on the impact of the pilot on SSI with an emergency message that stated that the Chicago Resilient Communities Cash Assistance Pilot is designed to tackle poverty and assist residents affected by the pandemic. Beginning June 2022, 5,000 Chicagoans were selected to receive \$500 per month for 12 months; these payments were excluded from income and resource limits for public benefits. Without the intentional inclusion resulting in timely formal guidance, Chicagoans receiving SSI would have missed the opportunity to participate. Pilot evaluation funders include the Builders Initiative, Chicago Community Trust, Pierce Family Foundation, and Polk Bros Foundation.*

## 5b | Expand use of ABLE accounts to support this opportunity for wealth building among people with disabilities.

The Achieving a Better Life Experience Act of 2014 created savings accounts (ABLE accounts) that provide a vehicle for wealth building for qualified individuals with disabilities. ABLE accounts are nontaxable savings accounts that are exempt from current asset limit criteria for SSI, Medicaid, Medicare, and other public benefits programs. Account holders may contribute a maximum of \$17,000 each year; the first \$100,000 of ABLE account balances is exempt from the current SSI asset limit (which is \$2,000).<sup>123</sup> Additionally, employed ABLE account holders who do not participate in an

employer-sponsored retirement plan may contribute savings up to their total compensation within a given tax year, or up to the FPL amount for that year.<sup>124</sup> There are currently nearly 120,000 ABLE accounts nationwide, with an average of \$9,296 in savings and \$1.1 billion invested. More than 4.6 million children ages 0–18 potentially qualify for ABLE accounts,<sup>125</sup> and in 2022 legislation was passed to expand ABLE eligibility to an estimated 6 million more Americans, including one million veterans, by increasing the qualifying onset age from 26 to 45 starting in 2026.



Starting now and continuing when account eligibility is expanded, philanthropic funding could seed ABLE accounts for eligible children and adults with disabilities in traditionally marginalized communities defined by the intersection of disability, race, ethnicity, and gender. These payments could be supported by research that documents the impact of ABLE accounts on quality-of-life measures as well as short-term and longer-term financial needs. Philanthropic funding could also focus on public education and outreach aimed at changing the narrative in marginalized communities toward increasing individual agency to foster asset building through the use of ABLE accounts.

*Cris, a person with a disability, shared, "For me, ABLE accounts represent an opportunity for people with disabilities to exercise self-determination. This is important for BIPOC communities in particular because many of us have limited opportunities to build wealth. This can often force people into making poor financial decisions in the short term to accommodate unexpected expenses. Prior to the establishment of ABLE accounts, it was difficult for me to save for emergencies, contribute toward retirement, and safely invest my money in an account in my own name that I could easily control without worrying about losing Medicaid. I tried many saving strategies before I opened an ABLE account. For example, a piggy bank, prepaid cards, and giving money to my circle of support to hold onto for me. None of those options gave me independent access to my own money or the opportunity to have my money grow in ways that people without disabilities, who are not reliant on public benefits, take for granted. These experiences made me realize the importance of financial literacy for people with disabilities, especially in BIPOC communities."*

# Reflections: Responsive Changes to Internal Operations and Grantmaking Practices

People with disabilities need access to the same opportunities and supports as those without disabilities. Taking a disability economic justice approach supports equal access and full participation by people with disabilities in grantmaking and internal operations.

## Including Disability in Economic Justice Grantmaking, Policies, and Operations

INTERNAL		EXTERNAL
<p><b>OPERATING</b> Adopt hiring, procurement, and grantmaking policies and practices that are equitable, inclusive, and accessible for the disability community</p> 	<p><b>LEARNING</b> Listen to the needs and values of the disability community.</p>	<p><b>INVESTING</b> Make grants to and support organizations led by people with disabilities that are advancing systems change and/or delivering programs for people with disabilities</p> 
	<p><b>PRACTICING</b> Be intentional about inclusion of and accessibility to the disability community.</p>	
	<p><b>MEASURING</b> Use a trust-based philanthropy framework for learning, evaluation, and accountability in regard to advancing disability and economic justice.</p>	

Small and large grantmakers can accelerate the achievement of financial stability and wealth accumulation for people with disabilities by adding a disability economic justice lens to the ways they learn, practice, invest, operate, and measure. Policies, programs, and services created to support the economic mobility of any group of people will, arguably, include people with diverse disabilities. But when the inclusion is not intentionally understood and measured, we cannot assess the outcomes of that inclusion. Intentional

inclusion of the disability population in all economic security and asset-building grantmaking includes engaging individuals with disabilities and disability organizations as design partners, program providers, research team members, and knowledge translators. Regardless of where you are on your journey toward realizing disability economic justice, this section offers a range of actions that you can start taking today.

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## LEARN about and from people with disabilities.

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*Learning more about and from the disability community can reframe your understanding of disability and inform strategic goals.*

### ACTIONS

- Hold listening sessions with individuals with disabilities. Reflect on the diversity of the disability community, and recruit individuals from multiple races, ethnicities, and life experiences.
- Ask people with disabilities what they need as you identify and design pathways to economic justice.
- Question data that is not inclusive or disaggregated by disability, and use your advocacy to have disability questions included in future data and analyses for public release.
- Explore opportunities to connect partners in various ways to address systemic issues, create new programs, or increase opportunities to better understand the nuance of disability services for financial security, health, small business ownership, or housing.
- Assess and build your staff's confidence and competence in providing accommodations, releasing materials in accessible formats, connecting with people with disabilities, and discussing disability as a component of equity, diversity, inclusion, and economic justice agendas.

### REFLECTION QUESTIONS

1. Do you provide training on disability as a component of your equity or cultural responsiveness efforts? If not, what needs to occur for you to be able to add it?
2. Do you fund, encourage, and internally practice participatory research that is inclusive of people with disabilities?
3. Have you identified disability partners to support you in your listening sessions, design practice, data planning, and system change strategy?

*As part of its learning journey, the Ford Foundation created disability advisory groups. The Disability & Philanthropy Forum offers [guidelines](#) for philanthropy on creating disability advisory groups.*

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## PRACTICE to be intentionally inclusive in your investments.

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*Reviewing your current practices offers a baseline understanding of where you are now relative to disability justice, and where you need to go to be intentionally inclusive of people with disabilities in your investments.*

### ACTIONS

- Assess your current investments to identify where you have been inclusive of people with disabilities.
- Compare your current investments with the reported needs of the disability population in this brief and the communities your strategies focus upon.
- Use disability-inclusive language in requests for proposals, funding guidelines, contract deliverables, and terms of grant awards, and as relevant in reporting requirements.
- Create opportunities for grantees to receive training and resources on disability sensitivity and inclusion.

### REFLECTION QUESTIONS

1. **What do you know about the inclusion of people with disabilities in your current portfolio of economic security and asset-building investments? How can you learn more?**
2. **Do your current grantmaking materials and grant documents identify people with disabilities as a population that you value and intend to impact?**
3. **Are your trainings and networking efforts as inclusive of people with disabilities, including those with intersecting identities, as they could be?**

Some funders are already practicing intentional inclusion, as illustrated by the examples below.

*In mid-2022, [MetLife Foundation](#) announced a global, multipronged strategy aimed at driving inclusive economic mobility by addressing the needs of underserved and underrepresented communities. This strategy builds upon MetLife's 2030 Diversity, Equity, and Inclusion (DEI) Commitments, through which the Foundation pledged \$150 million in funding between 2021 and 2030 in three core portfolios: Economic Inclusion, Financial Health, and Resilient Communities. Over the same period, MetLife committed to originating \$1 billion in investments that advance firms owned by women, people of color, and disabled people. In 2021, MetLife deployed nearly \$100 million of this commitment. In 2022, the Foundation issued its first wave of grants from its pledge, totaling more than \$25 million. Those grants included a new collaboration with NDI to support the financial well-being of Black, Latinx, and medium-sized business owners with disabilities. As part of its DEI commitments, MetLife Foundation has updated its grantmaking language and process to be more inclusive.*



*For its 100&Change Initiative, the MacArthur Foundation commissioned Access Living and Mobility International to assess the impact of proposals on people with disabilities and develop a self-assessment tool for applicants to support inclusivity. 100&Change funds a single proposal that promises measurable progress in solving a critical and timely problem with \$100 million over a two-year period. Two rounds of competition have been completed, with the latest award going to Community Solutions to support its plan to accelerate an end to homelessness in 75 U.S. communities in five years. For all high-impact ideas designated as the Top 100, MacArthur Foundation commits to generating increased impact and support. Information about the future of 100&Change will be made available in early 2023. [The Disability Access and Inclusion Checklist](#) developed for 100&Change applicants is available for any organization that seeks to incorporate disability-inclusive practices into its programs. Meanwhile, the MacArthur Foundation continues to offer the tool to its competition applicants, with the following message:*

*Not all questions in the checklist may be applicable to each specific proposal; however, MacArthur Foundation encourages each applicant to be innovative in their thinking and use each question to start the paradigm shift in thinking towards*

*inclusive practices. The Foundation intends to take responses to this guidance seriously as the selection process moves forward. We encourage the applicants to use this checklist as a way to strengthen their own applications and ensure that the final proposal is truly inclusive.*

*Fiscally sponsored by the Proteus Fund, the Disability & Philanthropy Forum is an emerging philanthropy-serving organization created by the Presidents' Council on Disability Inclusion in Philanthropy to expand philanthropic commitment to disability rights and justice by centering the leadership of the disability community. The Forum has spearheaded a [disability inclusion pledge](#) for philanthropy that includes commitment to eight action items and resources to support funders' learning journey. As of the end of 2022, 72 grantmakers have signed the pledge. A baseline survey of signatories indicated that 28% have written guidance in place for including people with disabilities in community and advisory roles; 30% track disability metrics for their staff; 29% have written internal policies or guidelines to increase the share of their grantmaking that focuses or incorporates people with disabilities; and 33% conduct DEI training for their boards that formally incorporates disability.*

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## INVEST in disability economic justice.

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*Economic justice grantmaking drives you to set relevant and measurable disability-inclusion goals. Your approach may begin with identifying disability organizations that align with your economic security and asset-building strategic funding priorities. In the future, you may set aside funding to strategically invest in disability economic justice by including people with disabilities in all investments.*

### ACTIONS

- Get to know disability organizations in communities where you invest to understand their role, capacity, and competence in advancing economic justice.
- Ensure all investments include funds for accommodation requests.
- Consider non-grant investments (e.g., invitations to events, funding application guidance, leadership training) you can make in organizations that serve people with disabilities, including those with intersecting identities.
- Engage non-disability grantees in conversations about what information and resources they would need to be more intentionally inclusive of people with disabilities.
- Document the stories of a diverse composition of individuals, their needs, challenges, and successes to change narratives, and in turn, policies and systems that would support them.
- Employ participatory grantmaking and trust-based processes to involve members of the disability community, guide funding decisions, foster long-term relationships and organizational sustainability, and cede decision-making power about grants to the disability community that is impacted by funding decisions.

### REFLECTION QUESTIONS

1. Are you aware of, networking with, and funding disability organizations and those serving persons with disabilities that are aligned with your strategic investment goals for systemic change, equity, and economic justice?
2. What is the confidence level of grantmaking staff in making investments in disability economic justice?

The New York Women's Foundation creates an equitable and just future by boldly investing in organizations and leaders that strive for justice, economic security, safety, and health for women, girls, transgender, gender-nonconforming, and nonbinary individuals and their families. The Foundation prioritizes organizations that promote a holistic approach to women's and gender-expansive people's leadership, gender equity, and asset-based community approaches.

In 2019, the Foundation became a founding member of the [President's' Council on Disability Inclusion in Philanthropy](#), committing to a continuing learning and implementation process that will advance systemic change within the Foundation and serve as a model for disability inclusion in the philanthropic sector. Together, members of the Council established the Disability Inclusion Fund, a \$10 million, five-year investment that supports U.S.-based organizations run by and for disabled people to lead transformational change. The Foundation also signed the disability inclusion pledge in 2021.

Upon deepening its engagement with the disability and philanthropy community, the Foundation expanded its investments related to disability justice and inclusion, critical to uplifting the social and economic well-being of all women and gender-expansive people. In recognition that disability justice and inclusion are essential to all of the Foundation's work, from economic liberation to reproductive justice, the strategy is cross-cutting, focused on investing in and supporting efforts by and for women and gender-expansive people of color with disabilities. The goal is to invest in strengthening networks across the disability justice community to deepen understanding of the field and inform collective action while also investing in the leadership of women and gender-expansive people with disabilities. As the Foundation continues to develop its long-term grantmaking strategy, immediate focus areas include:

- **INVESTING IN THE LEADERSHIP OF WOMEN AND GENDER-EXPANSIVE PEOPLE OF COLOR WITH DISABILITIES.** Activists, organizers, and direct service providers are at the forefront of this work and know what the diverse and vibrant community of people with

disabilities needs to thrive. The Foundation invests in emerging organizations with strong leadership to cultivate peer networks among women and gender-expansive people of color with disabilities.

- **BUILDING THE ECONOMIC AND SOCIAL POWER OF WOMEN AND GENDER-EXPANSIVE PEOPLE WITH DISABILITIES.** National, state, and local policies that support the economic liberation of women and gender-expansive people with disabilities are critically needed to address inequities in income and wealth experienced by women and gender-expansive people with disabilities.
- **ADDRESSING THE IMPACT OF THE COVID-19 PANDEMIC ON WOMEN AND GENDER-EXPANSIVE PEOPLE OF COLOR WITH DISABILITIES.** Direct impacts of the pandemic were acutely experienced by women and gender-expansive people of color, including issues around the emergence of long COVID, mental health needs, and access to care.

The Foundation is proud to support a diverse body of grantees exploring ways to build the social and economic power of people with disabilities. Ranging from efforts to support mental health to advocating for women and gender-expansive people with long COVID, grantee partners are building networks among leaders with disabilities around New York and beyond. Current grantee partners include Ramp Your Voice!, The Fireweed Collective, Disability Champions Mentoring Network, Center for American Progress Disability Justice Initiative, Disability and Civil Rights Clinic, Brooklyn Law School, Women Enabled International, Disability Inclusion Fund (Borealis Philanthropy), and Strategies for High Impact.

With support from the Ford Foundation, the Foundation recently conducted an in-depth landscape analysis of disability justice and inclusion efforts that center women and gender expansive people of color across New York City and State. Findings from this exploration will inform the development of a long-term strategy for supporting people with disabilities. The report is scheduled to be released in Spring 2023.

## OPERATE as a disability-inclusive organization.

*Operating as a disability-inclusive philanthropic organization requires repeated and regular application of a disability lens to all aspects of the organization, including hiring practices; board and committee recruitment; accessibility of public-facing materials; diversity, equity, inclusion, and justice (DEIJ) goals; and strategic planning and growth.*

### ACTIONS

- Identify people with disabilities of varying expertise, work experience, and intersecting identities to join the organization as employees, senior staff, consultants, and board members.
- Encourage employees with disabilities to challenge from within organizational approaches to priority setting, funding levels, partner selection, review and ranking of proposals, and grantee success.
- Assess and ensure the accessibility of all electronic tools, human resource portals, and internal and public-facing documents.
- Work with staff with disabilities to ensure that benefits, including medical benefits, meet the unique needs of staff with disabilities.

### REFLECTION QUESTIONS

1. Do your organization's DEIJ goals and processes include people with disabilities?
2. Do people with disabilities have a voice within the organization as leaders, board members, or other influencers?
3. Are your website, any electronic tools, human resource portals, and internal and public-facing documents accessible?

*One funder that ensures representation from the disability community on staff and board is the Northwest Health Foundation. As part of its [public commitment to equity](#), the foundation prioritizes its time, money, and other resources to Black, Indigenous, and other people of color (BIPOC), especially those with disability and geography intersections. In 2021, 84% of grants and 91% of grant dollars, totaling more than \$1.1 million, went to BIPOC-serving groups.*

*Disability is one of the foundation's guiding equity frameworks, as it works to build relationships with disabled BIPOC individuals and communities throughout the region, learn and adapt strategies to meet BIPOC with disabilities where they are; make grants to emerging disabled BIPOC-led organizations; support culturally-*

*specific and cross-racial organizations to learn about disability justice and incorporate disability equity in their work; and make the foundation more inclusive by ensuring our spaces are accessible, choosing only accessible facilities for off-site events, and incorporating access check-ins to normalize having needs and talking about them.*

*In 2021, 11% of total grant dollars went to the disability community. Since 2019, the foundation, in partnership with the Collins Foundation, has sustained the [Advancing Disability Justice](#) initiative to support disabled BIPOC and queer leaders in Oregon and Southwest Washington through coaching, small grants (<\$10,000), and a self-audit tool and build disability justice understanding and inclusion in racial justice organizations.*

## MEASURE for learning, evaluation, and accountability using a trust-based philanthropy framework.<sup>126</sup>

*A disability-inclusive philanthropic organization understands the impact of its internal operating and grantmaking practices on disability and economic justice in the communities it serves.*

### ACTIONS

- Explore grantees’ perception of your foundation’s approach to grantmaking and relationship building related to disability and economic justice.
- Support leaders with disabilities and nonprofits serving people with disabilities beyond grantmaking.
- Take a long-term view (5+ years) to assess the extent to which your funding is contributing to the desired changes toward greater inclusion of and economic equity for people with disabilities.
- Consider progress toward measures for grantees such as people in leadership with disabilities; race/ethnicity, gender, and disabilities of people served; number of people with disabilities served; and activities and services provided.
- Make reporting easy, flexible, and accessible.

### REFLECTION QUESTIONS

1. Do you get regular feedback from grantees on your grantmaking and relationship building approaches related to disability and economic justice?
2. Do you support nonprofit leaders with disabilities and the nonprofit ecosystem serving people with disabilities outside of grantmaking?
3. Are your community impact measures aligned with disability and economic justice and manageable and meaningful to the community, grantees, and you?

While all economic security and wealth-building grantmakers have the opportunity to be more inclusive of the disability community through the general learning, practicing, investing, operating, and measuring practices outlined above, this brief has included specific ideas for action based on funding priorities, such as:

FUNDING PRIORITY	FUNDING OPPORTUNITIES
Employment and Income	<ul style="list-style-type: none"> <li>■ Advocacy for disability benefit, tax policy, and labor reforms</li> <li>■ Intentionally inclusive program design for guaranteed income projects</li> </ul>
Entrepreneurship	Targeted flows of capital and technical assistance
Financial Health	Seeding of ABLE accounts of eligible children and adults
Housing	Capital for accessible housing for renters and owners



## Conclusion

We call upon grantmakers to assess their wealth-building strategies and modify them where necessary to include the disability community, document their reach within the disability community, and support advocacy efforts to dismantle systemic barriers to the full participation of people with disabilities in programs and services that support the financial well-being and wealth accumulation of low- to moderate-income individuals.

The disability community experiences significantly lower net worth, less income, lower employment rates, and greater financial instability than their nondisabled peers. More than a century of exclusion from multiple aspects of society has relegated a sizable percentage of the disability community to the lowest rungs of the economic ladder. Disability often leads to a confluence of life situations that can quickly change anyone's financial circumstances for the worse. The impact of disability on an individual's financial stability and wealth accumulation is further exacerbated by intersecting identities of race, ethnicity, or gender.

To effectively help people with disabilities, and especially women of color with disabilities, grantmakers need to listen to their lived experiences and wisdom, develop relevant and responsive practices that build on existing strategies, and imagine new ones. Grantmakers can leverage the power of philanthropy through participatory grantmaking and trust-based processes that are guided by, collaborative with, and inclusive of the community. They can also invest

in outcomes evaluation and assessment for innovative and impactful programs that intentionally include people with disabilities. Finally, they can invest in system-level efforts to eradicate the many barriers to economic security that people with disabilities face.

For individuals with disabilities who have above-moderate income and resources, inclusive philanthropic support translates into asset-protecting activities in times of widespread economic instability and increased asset and wealth accumulation capacity in the immediate term.

**Grantmakers can lead the way and influence system and policy changes with intentional and inclusive strategies that consider and mitigate the multiple barriers related to wealth building and economic mobility that people with disabilities face.**

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