

Issues Impacting Work-Life Quality for People with Mobility Limitations Living in New York City

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Introduction

Work-life and work-family studies have grown in the past two decades as researchers examine the benefits and conflicts between overlapping work, home and family domains. Theories of positive and negative spillover between domains have encouraged empirical research into the overlapping ecosystems of home and work domains and the variables that can create conflict between domains.¹ Less research has been devoted to the transition between the two domains, but more recent research has examined the impact of commuting on wellbeing.² New York is unique in the United States because it provides multiple commute mode choices, but many of these options are out of reach for the small portion of the population with mobility impairments. In addition to difficulties traveling between home and work, this group also faces

challenges in finding accessible housing and employment. This may partially explain why the state of New York has a smaller percentage of disabled citizens than national³ and state averages.⁴

The types of problems studied in the work-family literature are likely to be more pronounced for the disabled. This group has disproportionately low earnings and low educational attainment in comparison with the general population.⁵ It's important to first understand the measurements of disability and how mobility disability fits into this equation. Because of Americans with Disabilities Act in 1990 and its subsequent amendment, the definition of disability has expanded to include short-term disabilities and diseases that go into remittance, increasing the number of disabled, along with the number of employment discrimination lawsuits.⁶ The ADA has been instrumental in bringing some positive changes to the built environment, and has expanded the notion of disability rights internationally, inspiring Disabilities Discrimination Act in Great Britain, and the U.N. Convention on the Rights of the Persons with Disabilities in 2006.⁷ Still, employment rates have been largely unchanged, and many other issues remain unresolved for people with mobility impairments.

Second, it's important to note how mobility disability stands out from the broader umbrella of disability because of specific physical limitations. The struggle involves environmental discrimination caused by inaccessible structures, most of which were built long before the ADA became law. Wheelchairs are arguably the most visible type of assistive device, and the most expensive for private and public entities to accommodate, an often mentioned reason that renovations are not made to include ramps or other wheelchair accessible features. As disability advocates frequently point

out, accessibility improvements made for wheelchair users benefit all of society, and anyone can join the disabled minority at anytime. Nearly 25 years after the ADA was signed into law, there are still a great number of physical barriers in New York City that impact work-life quality for people with mobility impairments. As workers advance through different life phases, especially retirement, removing these barriers will become increasingly important.

Third, the framing of those with mobility impairments as the only group needing universal access, along with the litigious framework of the ADA seem to have caused further division and a resistance to accommodating mobility limitations. Including groups like the aging, caretakers, and women with young children when assessing and planning accessibility improvements, and framing universal access as a humane endeavor rather than a liability may be a way forward for the goals of the disability rights movement.⁸

Part 1. Inclusions and Definitions

Expanded Definition of Disability

The 1990 version of the ADA recognized walking and standing as major life activities, and was amended in 2008 to clarify the definition of disability in regards to the term “substantially limited”: *“To have an ‘actual’ disability (or to have a ‘record of’ a disability) an individual must be (or have been) substantially limited in performing a major life activity as compared to most people in the general population.”*

The amendment does not require a particular length of time for an impairment to be considered substantially limiting, and also states, “an impairment that is episodic or in remission is a disability if it would substantially limit a major life activity when active.”⁹

These two revisions to the definition expands the size of the population with ambulatory disability to include individuals with temporary impairments, as well as those with diseases like multiple sclerosis, which can affect their mobility during relapses. These are important distinctions that have the potential to greatly expand the number of disabled people, and judging by the number of EEOC complaints since the amendment, suggests that individuals with disabilities that were excluded in the ADA faced employment discrimination during that time.¹⁰ The numbers create more questions than answers, and more research is needed to understand the reasons behind employment disparity, and how it affects those with mobility impairment.

Measuring Mobility Disability: City, State and National Comparisons

The American Community Survey was born of a necessity to reduce the cost and burden of using a long form survey tool for the decennial census. Measurement of the prevalence of disability has therefore been a recent addition to the census, including specific questions related to disabilities for the first time in the 1990's. Further modifications have continued to better quantify different types of disabilities, with changes to the type of information collected appearing in the survey as recently as 2008.¹¹ By separating the disability by type, the census now collects information on populations with what they term ambulatory difficulties, or "serious difficulty walking or climbing stairs." National surveys on the use of wheelchairs and other assistive devices show a huge increase in use from 2000¹² to 2010. The number of wheelchair or scooter riders has more than doubled in ten years, from 1.7 million to 3.6 million (1.5 percent), and users of other mobility devices, such as canes, crutches, and walkers has grown from 6.1 million to 11.6 million (4.8 percent).¹³

According to the ACS, the percentage of New York City's population over the age of five with ambulatory difficulties is 6.5 percent, nearly 500,000 people.¹⁴ Of the population over the age of 65, over 27 percent have difficulty climbing stairs. These numbers are low compared to the national average, where 9.2 percent of the total population, and 39.4 percent of those over 65 have difficulty climbing a flight of stairs.¹⁵ In the same survey, 4.1 percent (222,000) of the working age population in New York City had an ambulatory difficulty, but this group made up only 1.54 percent of the total workforce, or about 54,000 people.

State census data before 2010 shows some trends in New York that are difficult to make sense of. In 1990, census data shows that 10.6 percent of New York residents in the non-institutionalized population ages 16-64 had a disability.¹⁶ By 2000, the percent aged 21-64 with a disability doubled to 21 percent,¹⁷ but in 2010, the non-institutionalized population with a disability aged 18-24 dropped dramatically to 8.5 percent.¹⁸ It's unclear if the variation of the age groups account for the shift, or if other economic factors or the standard of measurement account for the change. In looking at more recent data, the change from 2006-2011 also shows a drop in the number of people with ambulatory difficulties living in New York City. Even leaving out the seemingly anomalous numbers from 2000, there has been a two percent drop in the disabled population between 1990 and 2010, a troubling sign that this group may be facing more obstacles today than when the ADA was first passed.

Part 2. Quality of Life for People with Mobility Disabilities

There are multiple studies that examine the quality of life, or life satisfaction among those reporting severe disability, and the findings are not surprising. Positive

correlations exist between life satisfaction and employment, income, education, job satisfaction, leisure activities, and social integration.¹⁹ Studies related to unemployment also show a negative correlation between quality of life, financial strain and unemployment.²⁰ A more recent national survey of the disabled found a gap of 27 percentage points in those with disabilities saying they are very satisfied with life in general than those without disabilities (34 percent versus 61 percent, respectively). Of the group surveyed, 73 percent of unemployed were unable to work due to their disability or health problem, 42 percent thought they couldn't get the accommodations needed to perform their job and 32 percent worried that the income would make them ineligible for federal health benefits.²¹

While the disabled generally have higher levels of unemployment, many of the quality of life issues still affect those with mobility impairments that are employed. According to the survey, the disabled group as a whole experiences reduced levels of leisure activities and social integration as compared to the general population. Below, I will outline the disparities in *employment, housing and transportation*, analyze policies that attempt to remove barriers for people with mobility disabilities, and recommend measures to improve their effectiveness.

Employment Barriers

The negative impacts of unemployment affect an estimated 168,000 New York City residents with ambulatory difficulties who are unemployed or no longer in the workforce, and the causes of unemployment can include economic recession, disparities in educational attainment, workplace discrimination, poor workplace accommodations, transportations difficulties, and disincentives of federal and state health benefits. They

are generally overrepresented in low-status jobs, and underrepresented in occupations requiring manual skills, and higher-paid managerial roles.²² The ADA attempts to limit employment discrimination based on perceived and actual disability, but there is little data about discrimination by type of disability. Still, the EEOC lists physical disability discrimination as one of the top three bases of complaint.²³

The Kessler Foundation/NOD 2010 Survey of Employment of Americans with Disabilities was the third of its kind, surveying over 400 human resource managers and executives at companies larger than fifty employees. Their findings show a persistent gap in hiring disabled employees, with only 21 percent of people with any type of disability being employed, as compared to 59 percent of the general population.²⁴

Despite an increase from the previous survey in managers wanting to hire more disabled people, 66 percent of managers reported having a hard time finding qualified candidates with disabilities, and another 39 percent didn't know where to look for disabled candidates.

Hiring Incentives

In New York City, the employment gap between those with and without a disability is 43 percent.²⁵ There is a plethora of federal and state tax benefits for employers who hire employees with a disability, including a reimbursement of up to \$4,200 of wages, 100 percent reimbursement of the first 160 paid hours under "work try-out," the ability to deduct alterations to a work environment to bring space up to ADA standards, and up to \$15,000 annually for architectural/transportation tax deductions to remove barriers for employees or the general public.²⁶ Recently, the *VOW to Hire Heroes Act* was passed

to encourage employers to hire permanent employees who were injured in battle, and President Obama is pushing to make the tax cuts permanent.²⁷

Despite the number of incentives available, a study published in 2003 showed that 77 percent of businesses didn't take advantage of these incentives.²⁸ Additionally, the types of jobs typically deemed suitable for those with mobility impairments are low-skilled and low-wage jobs with little opportunity for advancement. Advocacy groups with a mission to help the disabled find employment are sometimes in inaccessible buildings, and are paid on a per-client basis, which encourages them to place the disabled in jobs as quickly as possible, even if it is not the best opportunity.²⁹

Economic Factors Affecting Employment Among the Disabled

Analysis of the recent 2007-2009 recession revealed a drop in employment for the disabled population during this time, from 5.4 million to 4.9 million. Meanwhile there was no significant change in the number of labor force participants without disabilities.³⁰ This study also found a 17.8 percent decline in employment for people with mobility disabilities between October 2008 and June 2010. More recently, Bureau of Labor Statistics show a decline in the employment rate by those with disabilities, and an increase in the number of people who dropped out of the labor force. Meanwhile the employment of the general population increased.³¹ Kaye (2010) attributes the increase in unemployment and withdrawal from labor market to an increase in social security benefits.

The cost and effectiveness of both Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI) have been debated recently as the number of people claiming benefits has increased in the last decade. The problems inherent in the

programs are two-fold, as those with mobility impairments receiving government assistance must weigh the amount of benefits they receive against additional income that may cause them to lose SSI benefits. Also, if they haven't worked long enough to sufficiently pay into social security, they may not qualify for SSDI benefits. The complexities of unemployment and paucity of financial assistance puts almost a third of the disabled population of New York City under the poverty line.³² An article in the New York Times last year described what is essentially a "Disability Trap" that keeps those with disabilities in a very low-income bracket.³³ The structure of disability eligibility provides only a minimal safety net while severely limiting the incentive to be financially self-sufficient for fear of losing the safety net altogether.

Disabled employment has fallen from 32 percent in 1981 to 21 percent today, due to a failure dating back to 1974 by the Social Security Administration to structure the program in a way that motivates work. Information retrieved from the SSA's website highlights this disincentive, "*Social Security's definition of disability is based on your inability to work. Usually, if you are working and earning above a certain amount you are not considered "disabled" and, therefore, you cannot get any type of disability benefit.*"³⁴ Recipients must have little or no income, and can't have more than \$2,000 in a savings account. Supposed work incentives allow some income, but earnings that "*exceed \$65 per month reduces the amount of benefit received...plus one-half of the amount over \$65.*" The monthly payment in New York for SSI for a single person is \$797/month.³⁵ This amount is \$161 lower than earnings that would put a person at the poverty line, a measure that some argue is also insufficient for high-cost cities like New York.³⁶

Recommendations for Improving Employment Tax Incentives/Disincentives

Information on tax deductions and other tax incentives for employers may not be reaching the intended audience, as evidenced by the low utilization rate. An information campaign could be beneficial to inform business owners, but the types of incentives offered to both businesses and job placement agencies don't go far enough to address the wage gap and lack of advancement opportunities for those with disabilities.

Disability payments are a necessary support for many, but the insecurity of refusing benefits for the uncertainty of employment keeps many from working at all.

- *Employer and job placement incentives should include provisions that reward tenure of employment, not just initial hiring.*
- *Supplemental income should reflect the variation in cost of living and allow earnings up to the poverty line. Stipulations about personal savings should be eliminated or increased to encourage employment and personal asset accumulation among the disabled.*

Accessible and Affordable Housing

Quality of home or family life for people with mobility disability is greatly overshadowed by the difficulty in finding accessible housing. Less than 9 percent of housing structures in New York were built after 1990,³⁷ and there are disturbing new revelations that many new large housing developments have failed to build their developments up to standards set by five separate federal and state guidelines; The Architectural Barriers Act of 1968, Rehabilitation Act of 1973, Fair Housing Act of 1988, Americans With Disabilities Act of 1990, and the New York Local Law 58 of 1987.³⁸

In addition to difficulties for people with limited mobility in finding accessible housing, affordability can also pose problems. While the NYCHA offers affordable housing for low-income families, there is currently a waiting list for virtually all accessible housing units, and as of 2009, there were only 7,000 wheelchair accessible apartments in NYCHA buildings.³⁹ The Disability Network of New York also points out that the typical low-income rental unit costs twice the monthly SSI payment.⁴⁰ A search for accessible housing on nyhousingsearch.gov resulted in only two immediately available options, with restrictions on income; qualified tenants must earn between \$36,651 and \$47,520.⁴¹ More modern apartment buildings vary in price, and a studio apartment in a luxury elevator building, Avalon Morningside Park (recommended as accessible housing by Columbia University) would require an annual salary of 125,000.⁴² The housing search is likely very difficult for anyone earning salaries between \$50,000-\$125,000 per year. Even within apartments that are accessible from the outside, many do not meet universal design guidelines inside, and can make home life difficult without personal assistance.⁴³

While federally funded housing projects must meet HUD guidelines that 5 percent of units be wheelchair accessible⁴⁴ there seems to be a gap in regulating private construction, and guidelines only apply to structures with more than five units, not individual homes or small rental properties. In federally funded public housing, there are also problems with elevator maintenance, another barrier to a seamless home-to-work transition. NYCHA recently settled a lawsuit brought by the New York Legal Assistance Group because of the continuous lack of maintenance within the housing complexes.⁴⁵ As part of the settlement, NYCHA agreed to move people with mobility

impairments to apartments on lower levels of their buildings. As the population ages, the need for truly accessible housing will continue to increase, and not just in the public housing sector.

Recommendations to Expand Availability of Accessible Housing

Building codes have proven to be confusing for some developers because there are federal and state requirements with overlapping rules that are not always clear. The enforcement of accessible construction appears to be skewed to impact public housing projects that receive federal funding, resulting in further segregation of people with mobility disabilities. To reduce confusion between building codes, encourage universal accessibility in new construction, and gradually increase accessible housing stock over time, a single accessible standard should apply to all ground floor residences. Additional incentives should offer tax deductions for new construction and renovations that provide wheelchair accessibility.

- *Amend the building code to require accessible entries for new construction on ground floor apartments in large buildings and multiple-family rental units.*
- *Create a system of monetary incentives to encourage development of new accessible housing units that partially covers the cost of construction, while reducing the threat of litigation and ensuring expansion of accessible housing stock affordable for various income levels.*

Transportation Barriers

Transportation is often cited as a reason for high unemployment, as well as reduced leisure and social integration among people with disabilities. Nearly all modes of transportation are permeated with barriers for those with mobility issues. Considering

the economic status of the disabled community, and the improvements that have already been made to the MTA bus fleet, I'll focus on two mode choices, walking and the subway.

Walking (Wheeling)

Often, the biggest barrier for people with limited mobility is the sidewalk. The prevalence of curb cuts in New York City has improved since the Architectural Barriers Act of 1968 was passed, but for many wheelchair users, the lack of a single curb cut can be a barrier to independence. After settling a nearly decade-long lawsuit from the Eastern Paralyzed Veterans Association (EPVA), the DOT agreed to invest \$213 million in pedestrian ramps throughout the city.⁴⁶ According to the DOT website, "the City has installed pedestrian ramps at 97,664 locations (reflecting 61.5 percent of the City's 158,738 corners)."⁴⁷ This figure supposedly includes 80 percent of Manhattan curbs, but it's difficult to verify, and is a claim that hasn't been updated since 2002.⁴⁸

The DOT website also states that by New York law, property owners are required to "at their own cost, install, construct, reconstruct, repave and repair the sidewalk adjacent to their properties, including the intersection quadrant and pedestrian ramps for corner properties, in accordance with DOT specifications."⁴⁹ Violators will be ticketed, and they can make improvements themselves, or let the DOT make the repairs and send them the bill. Receiving a citation is sometimes surprising for building owners, and the gray area of accountability confuses even local pedestrian advocacy groups calling on DOT to repair curb cuts and ensure smooth sidewalks.⁵⁰ Some building owners can get free repairs; recently the NYC Parks Department received federal funding to replace sidewalks damaged by tree roots.⁵¹

Recommendations for Improving Sidewalk Access:

While the DOT has made some projects and improved pedestrian safety in many areas, there is still much work to be done to improve the overall quality of the sidewalk network to remove cracks and other obstacles that are difficult to navigate for wheelchair users, and elderly people using other assistive devices.⁵² Sharing the responsibility of a public asset with individual property owners appears to lead to inaction, especially if many are unaware they must maintain certain standards, or simply don't want to pay for repairs. Sidewalks should be public property, as they are essential to the most basic mode choice of millions of New Yorkers, and an objective oversight entity should evaluate the quality of sidewalks rather than Department of Transportation.

- *Change Section 19-152 of New York's Administrative Code to make sidewalks the responsibility of the DOT, and engage a separate city department to supervise progress and handle complaints of inaccessible walkways.*
- *Find a way to standardize curb cuts to reduce construction costs.*

Subway: 100 Accessible Stations vs. 100 Percent Accessibility

As part of an agreement with the Federal Transit Administration (FTA) in 1992, the MTA agreed to make 100 “key stations” accessible by 2020, but are under no obligation to make the system completely accessible. Using a simple equation $(n)(n - 1)/2$ to measure the number of trips possible between 100 accessible stations, and the total 468 stations in the system, people with ambulatory disability will be able to make about 4.5 percent of the possible trips as those who have no problem climbing stairs (4,950 vs. 109,278). A more in-depth analysis of ridership by station would be required to weigh the impact of key stations, but the general principal of universal access seems to

have been forgotten, and the need for costly paratransit service will continue to rise for a system with limited accessibility. Inconsistent mobility aids and other inaccessible features in the subway only make the problem worse.

During an audit performed between 1994-2002, NYC Transit noted the absence of wheelchair users in the system, and identified a number of areas that weren't ADA compliant, including excessive gaps between platforms and cars, incorrect signage, out-of-service elevators, a lack of elevator redundancy, and no notification system for non-functioning elevators.⁵³ Even for stations with elevators, the other barriers that fail to be corrected make the small number of stations with elevators inaccessible. As of 2008, 167 elevators and 169 escalators were still plagued with problems, and one in six elevators were found to be out of service, with variation in parts, faulty construction, and poor technician training cited as reasons for the breakdowns.⁵⁴ An investigative article in 2011 found that *"194 elevators in 73 stations, and its 178 escalators in 52 stations, work far more often than not. Elevator availability was measured at 95.3 percent in the second quarter of this year, compared with 96.8 percent in the same period last year; escalators held steady at 92.8 percent."*⁵⁵ Additionally, there are about 10 "out-of-service" elevators and 13 escalators, which are owned and operated by private companies, break down frequently, remain in a state of disrepair for long periods of time, and are not accounted for on the MTA's list of non-functioning elevators.⁵⁶

By all appearances, the MTA seems content to make the key stations accessible, but not much above the 100-station minimum. In two separate subway station renovation projects, they failed to include plans for elevators and both stations opened without elevators, or other considerations for accessibility. The first, the 1 at Dyckman

St. in Washington Heights, was modified after a class action lawsuit, and an elevator on the southbound station was promised as part of the settlement.⁵⁷ The second, at Smith-9th Street station on the F and G lines opened recently to disappointment, but no legal challenge as of yet.⁵⁸ The projects cost \$45 million and \$32 million, respectively, but MTA claimed “prohibitive costs” when questioned about the lack of elevators.

Recommendations for Improving Subway Accessibility:

Based on the MTA 2012 Adopted Budget, replacing 11 elevators was listed at a cost of \$44 Million. While the budget lacks project details, other mentions of elevators have costs ranging from \$0.5- \$8.45 Million (for an unknown number of elevators).⁵⁹ A general estimate of \$4 million per elevator would cost an average of \$16 million per station when elevators are necessary. The cost for outfitting the remaining 368 stations (which may not all need elevators) would cost the same amount as operating paratransit for ten years at the current projected cost (\$ 5.9 Million for 2013). Additional ADA upgrades could likely be covered by the 15% annual increase expected for paratransit service in the coming years.

The subway is over a century old, but the MTA analyzes costs and plans budgets in increments of five years. Failing to include accessibility for future generations is shortsighted and defeats the purpose of public transportation. The impact on current residents with mobility disability is exclusion from the “anywhere-to-anywhere” travel the subway provides to the rest of the population, exclusion from choice in residential location, and a harder time being able to get to job opportunities anywhere in the city.

- *Mandate ADA compliance on all station renovations*

- *Budget appropriate amounts for elevator repairs throughout the system, including privately owned elevators*
- *Set additional goals beyond 2020 to create more accessible stations, starting with low-cost renovations on above ground stations*

Part III. Framing Mobility Disability and Universal Design

The European Rail Vehicle Accessibility Regulations of 2008 changed the definition of persons with reduced mobility to include people with disabilities, as well as others that may experience reduced mobility, such as pregnant women, and people travelling with small children.⁶⁰ This inclusive definition expands the demographic that benefits from mobility accessibility improvements from 6-7 percent of the population to 13-14 percent.

As other countries make strides forward in providing greater accessibility to public transportation and public places, New York appears to be stubbornly stuck in a time before handicap accessibility.⁶¹ Resources like the NYC Guidebook to Accessibility and Universal Design⁶² offer additional guidance for architects building for a diverse population, but developers continue to build inaccessible buildings, existing building owners in New York City can easily obtain an ADA waiver to avoid making renovations,⁶³ and people with mobility limitations have one option for improving accessibility; litigation. Some critics of the ADA believe that without a broad social movement, perceptions of disability will take a very long time to change.⁶⁴

For anyone with mobility disabilities who may dream of living and working in New York, or simply visiting, the unfortunate truth is that the city will be far more hostile and unforgiving to them than it is to those without limited mobility. For a city that proudly accepts its title as the capital of the world, New York City is neglectful of its most

vulnerable groups; those with mobility disabilities, mothers with young children, and the elderly. Reframing accessibility as a goal that we *want to achieve* because it impacts people we know, or our future selves, rather than *having to comply with federal law* could make a difference in attitudes towards people with disabilities.

Expanding Mobility for an Aging Generation

The potential for broader support for universal design may also come from a rapidly growing segment of the population. The 65+ population in New York City is set to exceed a million residents before 2020, and continue to rise in the decades to follow.⁶⁵ Some say the nation's housing isn't ready for the looming demographic change, but the realities of an aging population will force many to reconsider designing for both the elderly and disabled, despite those who don't want to face the uncomfortable truth that we will all eventually get older.⁶⁶ Support for the elderly is crucial to ensure continued social integration; reduced mobility increases the tendency to be homebound after reaching a certain age.⁶⁷ The Mayor's office and other city organizations are beginning to pay attention to the needs of the elderly, but most measures don't go far enough or ask the tough questions. One report on making New York City more age-friendly bluntly assesses that the subway is not age-friendly and that more cabs should be wheelchair accessible.⁶⁸

As more New Yorkers retire and find difficulties getting around, they are more likely to become involved in addressing their needs.⁶⁹ Given the voting power of this group, the potential for the elderly community to affect local change is tremendous. Additionally, the rise in numbers of the elderly community will lead to more conversations about the uncomfortable topic of inevitable aging and may lead to more

empathy in the process. Making universal access a personal issue raises the stakes for the entire population, and is key to a broader social movement that can foster permanent change.

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