

Bacca
913-233-4572

Some career helpful
in hog, research

Not CPD
Havent had re this

**PHOTOCOPY
PRESERVATION**

THE OFFICE OF FAIR HOUSING AND EQUAL OPPORTUNITY



FACSIMILE TRANSMITTAL SHEET

FROM: Bonnie M. MilsteinOFFICE: Program Compliance & Disability RightsOFFICE NUMBER: (202) 708-2618 x207FAX NUMBER: (202) 708-1251NUMBER OF PAGES: 4 (Including Cover Sheet)TO: DIANA FORTUNA

COMPANY NAME: _____

OFFICE NUMBER: _____

FAX NUMBER: 456-7431REMARKS: _____

If you do not receive all pages, please call:

(202) 708-2618



U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT
THE SECRETARY
WASHINGTON, D.C. 20410-0001

December 15, 1995

Ms. Becca Vaughn
National Action Coalition for
Disability Rights in Housing
Suite 100 - B
501 SW Jackson
Topeka, KS 66603

Dear Ms. Vaughn:

I am writing to thank you and all of the members of the National Action Coalition for Disability Rights in Housing for meeting with me on November 8, 1995. The Coalition raised several important issues that I take very seriously.

First, we discussed nursing homes and the Section 232 program. I was impressed by your description of the role that nursing homes have played in desensitizing the public's attitude toward housing people with disabilities in large, institution-like settings. As I said at the meeting, I do think that our conducting hearings to sharpen the issues generated by the Department's Section 232 program is a good idea. I have asked Chris Greer, Acting Deputy Assistant Secretary for Multifamily Housing to take the lead on this task.

In connection with this issue, we had some discussion about the Department's funding disability-specific and diagnosis-specific housing. I told you that we would review the policy decisions that we have made on these issues, and I am sure that we will have further discussions about them.

Second, the Coalition asked that the Department establish an office on disability issues that would address the ways in which the Department's programs, policies, and practices affect HUD's customers with disabilities. As I said, this, too, is a good idea. I do not want this office to supplant the AIDS Housing Office, which has provided constructive and meaningful assistance to the Department. I do want to locate the new office in one of the program areas, where the money is, so that our funding supports our civil rights policies. We have begun the discussion, within the Department, that precedes the creation of any new office and we would appreciate your input as to the location, function, and leadership of the office. In addition, I hope that you will take advantage of my offer to meet with National Action Coalition and other disability rights advocates on a bimonthly basis.

Third, you talked about the Department's failure to enforce the new construction provisions of the Fair Housing Act, and you used HUD's approval of the Chicago Housing Authority's plan to replace highrises with townhouses as an example of how HUD bears responsibility for the creation of inaccessible housing. As I promised, I did talk to Mr. Edwin Eisendrath, my representative in Chicago, and I expect to hear back from him shortly.

In addition, the Office of Fair Housing and Equal Opportunity has notified all 46 of the Department's Field Offices that enforcement of the new construction requirements is to be a priority in the coming year. This means that focused training, increased technical assistance and education, and meaningful enforcement actions, in coordination with the Department of Justice, when appropriate, are being planned now, to take effect in 1996. We will also explore ways in which the "affirmatively furthering fair housing" requirements of the Community Development Block Grant funds can be used to further this effort. I appreciate the concept of "visitability," and I believe that it will be helpful in our promotion of the Act's requirements.

Fourth, you correctly criticized the Department for lagging in its enforcement of the disability rights laws. Although HUD did propose Section 504 regulations in 1978, the Department did not succeed in publishing final rules until 1988, shortly before the enactment of the Fair Housing Act and the Americans with Disabilities Act. We finally succeeded in creating a disability rights division, in 1994, in the Office of Fair Housing and Equal Opportunity, and have been steadily staffing it with committed career employees who are experts in disability rights. We hope to recreate the 504 Coordination Team, that consists of Field personnel who are knowledgeable about disability rights. With Field and Headquarters personnel, we have begun to coordinate civil rights enforcement with program personnel responsible for Assisted and Public Housing, Community Planning and Development, and staff from the Inspector General's Office and the Office of Policy Development and Research. Your identification of specific non-compliance problems will help us focus on the Department's limited enforcement resources.

Fifth, you recommended that communities create "access modification funds" that would be available to low income tenants and homeowners with disabilities. This too, is a very good idea, and one that seems doable. I have asked my staff to explore the possibility of using Community Development Block Grant funds and other Departmental resources, both monetary and persuasive, to support the creation of such funds.

Sixth, the Coalition asked that we organize a national disability housing conference. As I said, I prefer a series of seminars, with a limited number of invited participants, to discuss a prepared agenda. It has been my experience that such seminars are more likely to produce useable products than large conferences.

I have asked Betsy Julian, Acting Deputy Assistant Secretary for Policy and Initiatives, and Bonnie Milstein, Director of the Office of Program Compliance and Disability Rights, to be my contacts with you. I have marked January 13, 1996 as our next meeting, and I look forward to our continuing to work together.

Sincerely,


Henry G. Cisneros

Mar 12 -
1.811 NoFA
HR 2. Esda
HC 3. New Court

New Congr. Monitoring Compliance - 3/12
504, FHA - 3/12 more

STABILITY Hc raised
Blue 2 - Hc added to simet
- Bonnie pentcraft, 5 days
comment

AGENDA FOR
Meeting with Secretary Cisneros
February 17, 1996

PHA's - must include,
not small

- | | | |
|----|---|-----------------------|
| 1. | Introduction/Meeting Overview | 202's bnd;
5 Mins. |
| 2. | Office on Disability | 20 Mins. |
| | <div style="margin-left: 100px;"><i>where isn't satisfied</i></div> A) Progress Report from Secretary Cisneros
B) NACDRH Proposal/Discussion | |
| 3. | Rewrite all program RFPs; NOFA's | 10 Mins. |

A) Progress Report from Secretary Cisneros

B) 011, proposal from NACDRH

UD 8 *discrepancy Mar 12; Cassie; comes out in May* 25
Compliance, Enforcement & Visitability Issues

(Demands #3, 4, 5 from 11/8/95 meeting) *New technical access* 20 Mins.

A) Progress Report from Secretary Cisneros
B) NACDRH Discussion

5. Work Sessions (Demand #6 from 11/8/95 Meeting) 10 Mins. *no stop entrance*

A) Progress Report from Secretary Cisneros
B) NACDRH Discussion

6. Confirm attendance at National Customer Forum
May 19, 1996 -- Houston, TX — ~~NA~~ NA/CAC + ADP

7. Set next meeting date

There: Bonnie
Jackie Lawry
Diane Cook-lee
Cheryl
Burt Ven

ADJUT: no home / mortgage
F#A/VA - Guaranteed - no home shv defunded
5 Mins.

Sec'y Essay - booklet: help
- they'll assist
- work on on Mar 12

Chic townhouses (Beto): Garden, &
other options - 50%
Habitat - selecting devices

Access Mod fund; identify 2-3 models + send
out best practices
Done by 3/12?

Proposal for the Creation of an Appointed Position
Special Advisor on Customers with Disabilities
Office of the Secretary
Department of Housing and Urban Development

Historically, HUD has consulted with and designed programs in response to the advice, needs and political influence of the housing industry. According to the principles of Vice President Gore's reinvention efforts, HUD's customers are not those in the housing industry, but are those individuals who are eligible for HUD programs - housing consumers. Therefore, HUD needs to design programs in response to consumers' needs and guidance. One of the largest groups of HUD consumers is the population of persons - young and old - with disabilities. It is imperative that the Clinton Administration does not ignore the strong, clear message from persons with disabilities: most of HUD's programs for persons with disabilities are discriminatory and ineffective. The Clinton Administration should have in the Office of the Secretary of HUD a Special Advisor on customers with disabilities. Such an advisor would ensure that housing programs: 1) are nondiscriminatory based on disability; 2) meet the needs of persons with disabilities; and 3) are consistent with independent living and consumer/survivor philosophies.

Particulars of the Position

Title: Special Advisor on Customers with Disabilities

Location: Office of the Secretary of the Department of Housing and Urban Development

Status: Appointed Position

Grade level should be equivalent to other Special Advisors, but no less than GM 15

Reports to: Secretary of HUD
Domestic Policy Advisor to the President

Responsible to: Customers with Disabilities
Disability Advocacy Groups
Administration

Coordinates with: Domestic Policy Advisor to the President
Deputy Assistant Secretaries, or equivalent
All other federal agencies

Supervises: Staff of four
One civil rights specialist
One legislative specialist
One housing specialist
One administrative support staff

Examples
of Responsibilities:

- Act as an advisor to the Administration, which would include the White House, the Secretary and the Assistant Secretaries, as well as the Attorney General, on the development of housing and fair housing policy regarding persons with disabilities.

- **Establish and maintain regular communication with customers with disabilities (including national and local disability advocacy groups), national disability organizations and fair housing agencies.**
- **Advise the Administration about the housing needs and political temperaments of persons with disabilities.**
- **Review all proposed legislation and proposed housing programs for alignment with progressive disability policy.**
- **Coordinate with all other departments and offices within HUD, especially the Office on Disability within FHEO and the AIDS office, to ensure consistent policy and strong advocacy for persons with disabilities.**

JAN-25-1996 15:19

National Action Coalition
for
Disability Rights
in
Housing

FAX TRANSMITTAL

DATE:

1-25-96

TO:

Diana Fortuna
Domestic Affairs for the
White House

FROM:

Berco Vaughn

MESSAGE:

Please see memo's -
-talk to you soon-

TOTAL PAGES

3

**National Action Coalition
for
Disability Rights
in
Housing**

January 25, 1996

To: Diana Fortuna, Office on Domestic Affairs, The White House
From: Becca Vaughn, The National Action Coalition for Disability Rights in Housing.
RE: Disability and Housing Forums

Dear Diana this memo is to follow up with you concerning the National Action Coalition for Disability Rights in Housing and Secretary Cisneros meeting of 11/8/95. We meet with you after our meeting with the Secretary to summarize that meeting and confirm some agreements between the Secretary and members of the Coalition. If you recall this meeting also included representatives from ADAPT.

I have attached a copy of a memo to Secretary Cisneros from Stephanie Thomas of ADAPT requesting the Secretarys attendance at a national disability gathering. We would like to ask for your support of this request be conveyed to the Secretary. We know that you have been very instrumental in assisting us to establish on going meetings with HUD and we feel that your support of his attending will improve the chance of his participation at the May 19, 1996 meeting in Houston Texas.

The Coalition would also like to extend an invitation for you to participate with this forum. It would be a great opportunity to meet with a large group of disability advocates. I know you are very concerned with the housing issue for people with disabilities and know this forum would offer much insight to many issues. Please let me know if there is a possibility of you attending and thank you for contacting Secretary Cisneros.

I look forward to meeting with you in February. Our meeting with the Secretary was rescheduled for February 17 at 10 am. I or Karen will contact you about your availability to meet on the 17th at 1:00 pm.

Again thank you for attention to these issues. Take care.

Becca Vaughn
Sat



ADAPT

FREE OUR PEOPLE

1319 LAMAR SQ. DR. #101 AUSTIN, TEXAS 78704 (512) 442-0252

TO: Henry Cisneros, Secretary HUD
FROM: Stephanie Thomas, National Organizer ADAPT
RE: Disability and Housing Forums
DATE: 1/12/96

This memo is to follow up on your 11/8/95 meeting with ADAPT and the National Coalition for Disability Rights in Housing. We would like to invite you to take part in a forum in Houston Texas on May 19, 1996. We will have a large group (around 500) of disability advocates from across the country meeting there at that time to discuss a range of disability issues. Your attendance at a forum in conjunction with this gathering seems like an excellent opportunity for all of us.

At the 11/8/96 meeting we discussed, among other things, a series of forums with HUD and our two organizations to gather input on the disability community's housing needs and desires. At that time you had offered to attend the first of these forums to kick off the series. Since that meeting however, we realized that if you were to attend a forum in Houston it would allow participation by people from areas where we are not able to schedule forums.

We really hope you will be able to join us in Houston. We believe your participation at this event will be a sign of the Administration's commitment to involving people with disabilities on housing issues.

THE OFFICE OF FAIR HOUSING AND EQUAL OPPORTUNITY



FACSIMILE TRANSMITTAL SHEET

FROM: Bonnie M. MilsteinOFFICE: Program Compliance & Disability RightsOFFICE NUMBER: (202) 708-2618 x207FAX NUMBER: (202) 708-1251

NUMBER OF PAGES: _____ (Including Cover Sheet)

TO: DIANA FORTUNA

COMPANY NAME: _____

OFFICE NUMBER: _____

FAX NUMBER: 456-~~5578~~ 7431REMARKS: _____

If you do not receive all pages, please call:

(202) 708-2618

JUL 21 1995

MEMORANDUM FOR: Henry G. Cisneros, The Secretary

FROM: Elizabeth K. Julian, Deputy Assistant Secretary for Policy and Initiatives, EP

SUBJECT: White House Meeting on Housing and Disability

On July 5, 1995, Diana Fortuna and Molly Brostrum of Carol Rasco's Office of Domestic Policy staff invited representatives from each of HUD's program offices to meet with them. I attended the meeting along with Helen Dunlap and Margaret Milner, Office of Housing; Mary Ann Russ, Office of Public and Indian Housing; Marge Turner, Office of Program Development and Research; and Clare Doyle and Thea Spires, Office of the Secretary. (Jacquie Lawing was unable to join us and asked Clare to represent the Office of Community, Planning and Development.)

Ms. Fortuna explained that the Office of Domestic Policy had received numerous letters from disability advocates from around the country complaining about both current HUD policies and policies that the Department has enunciated in its Reinvention Blueprint. Specifically, Ms. Fortuna focused on the complaint by the disabled advocates that the Department is promoting and funding segregated, diagnosis-specific housing and service connected housing that made continued tenancy dependant on compliance with involuntary treatment.

I and representatives from CPD had recently met with a Coalition of Disabled persons who had raised these issues, and requested that we reconsider our position on "Section 6" which provides the legal authority for disability-specific housing. I was in the process of preparing a memo for you when this meeting came up, so I decided to wait and roll it all into one.

At the meeting with the DPC folks, each of us briefly described the housing programs currently available to people with disabilities, and the problems associated with them. For example, MaryAnn Russ explained that all public housing authorities are required to make at least 5% of all of their units accessible to people with mobility impairments and 2% of their units usable by people with vision and hearing impairments. In spite of the Department's efforts to enforce these requirements and the Housing Authorities' willingness to comply, it was impossible to do so without sufficient modernization funding.

Similarly, MaryAnn explained, the debate among the elderly and non-elderly people with disabilities stemmed largely from the lack of accessible, affordable housing anywhere in most communities except in housing for the elderly. A long-term solution to the

problem would be compliance with the Fair Housing Act's requirement that all multi-family housing built after 1991 be structurally accessible. Yet, throughout the country, compliance is practically nil.

Helen Dunlap talked about the increased flexibility that the Office of Housing has built into their assisted housing programs. Non-profits may now use Housing funds to purchase cooperative shares or condominium units for people with disabilities in mainstream multifamily buildings; providers may provide services, but the services may be separate from the housing units and providers may not make accepting services a condition of occupancy; and non-profits may apply for Section 811 funds to create or to purchase housing units scattered throughout the community.

On the other hand, Helen explained, under the Reinvention legislation the funding now provided for Section 811 housing, like the Section 202 housing, would be included in the Affordable Housing Fund. AHF grantees would be able to choose whether to use all of the funds for housing development, or whether to provide project-based assistance for some or all of the housing developed for people with disabilities. The Department had concluded that preserving the block of funding now designated for the 202 and 811 programs was more politically prudent than separating the rental assistance portion (approximately 55% of the total) from the development portion and transferring the rental assistance portion to the Housing Certificate Fund. Had the funds been separated thus, and the residents' interests severed from that of the providers, the funding for those vouchers might well become more vulnerable to the same cutbacks that threaten the Section 8 voucher program.

Clare Doyle described the merging of 60+ programs into the Affordable Housing Fund and the continuation of the continuum of services approach of CPD. The focus of the AHF will be greater local discretion, including permitting the creation of disability-specific, diagnosis-specific, and service-connected housing. Unlike housing for the elderly, in which elders are housed without regard to the variety of disabilities they bear, housing for non-elderly people with disabilities may be limited by municipalities to segregated, diagnosis-specific service and housing treatment programs. It is this provision of our legislation that has drawn the most fire from the disability advocates, since it makes possible something that would otherwise be not be allowable under 504 and the Fair Housing Act. They contend that this sends exactly the wrong policy signal on the importance of allowing disabled people to integrate into community.

I related that there had been discussion in the Department on this specific issue, and that the policy call was not unwittingly made. I reiterated that CPD felt that there were other parts of the

disabled community, particularly those associated with the providers of housing and services, that strongly supported both disability specific housing and service-linked housing, and that the policy call had been essentially made in their favor on the issue of the AHF. On the other hand, the HCF clearly moved toward greater flexibility and choice for those who prefer housing assistance de-linked to location and services.

In summing up, Ms. Fortuna reflected that the current and proposed HUD programs appeared to contain some inherently contradictory messages on the issue of disability housing policy. On the one hand, the programs were moving toward providing housing consumers, including disabled people, with greater choice and flexibility in the housing made available to them. On the other hand, civil rights-related housing decisions affecting the disabled are being returned to local governments who will not necessarily use their increased control over housing dollars to promote desegregated housing opportunities. The fact that the Affordable Housing Fund would provide the legal support for local governments to create segregated, disabled-only housing appears to some in conflict with the choice and integration mandates of the Department's civil rights laws and the vision of the Blueprint.

Ms. Fortuna concluded that she and Ms. Rasco would continue to meet with disability advocates, but I don't think she felt comfortable with our efforts to reconcile the various messages. I don't know if you care to revisit these issues, but if you would find it useful, MaryAnn, Marge, Helen, Jacquie and I would be happy to reprise our discussion with you.

While the argument can be made that we should use our limited resources to only support choice and independence, deciding that "choice" really involves making both types of housing available, is defensible from a policy standpoint. It is also consistent with our approach on the need to provide decent and comparable housing opportunities both within and without minority areas, recognizing that true choice means making both available.

While it may be too late, and/or politically unwise to consider articulating clearer civil rights requirements into our legislation, the question continues to arise. I believe we may be called to a follow-up meeting with Carol Rasco, and it might be well to have a more coordinated statement of policy than that reflected in the separate program approaches.

Please let me know if you want further information or discussion on this issue.

E X E C U T I V E O F F I C E O F T H E P R E S I D E N T

16-Apr-1996 01:06pm

TO: Diana M. Fortuna

FROM: Molly Brostrom
 Domestic Policy Council

CC: Jeremy D. Benami

SUBJECT: RE: FYI; Do you know if HUD has a position on this?

I'll doublecheck, but based on our 97 budget, HUD should be quite supportive of the Sec. 8 assistance for the disabled -- in general, HUD/OMB believe that the elderly have enough assisted housing and that families and pwd's have a greater need for scarce resources. The 97 budget decreases the number of new elderly units and increases new units for the disabled, with almost half of the assistance for the disabled in the form of vouchers.

I believe the change included in the Extender Bill that makes it easier to designate pub hsg as elderly-only was one of those moving trains that we couldn't get in front of -- HUD did not support it, but couldn't oppose publicly.

I'll let you know if I learn anything further or differently.

Second, the Department is concerned about one component of the provision governing admissions and evictions to public and assisted housing. Namely, the House Substitute utilizes a reasonable cause standard that is too vague and that may implicate constitutional concerns. The House substitute allows a PHA to admit applicants for housing assistance or evict tenants based upon a PHA's reasonable cause to believe that an individual's current, or pattern of, illegal drug use or abuse of alcohol may interfere with the health, safety, and right to peaceful enjoyment of the premises by other tenants.

The word "may" implies future actions that may be completely hypothetical. This standard is particularly troublesome when applied to patterns of behavior, since a PHA would be allowed to deny a benefit based on an individual's status, even if that status is protected as a disability under the Fair Housing Act and Section 504 of the Rehab Act. Additionally, the lack of certainty as to what conduct triggers this analysis and the lack of any description of what constitutes reasonable cause to believe such a threat exists would make it almost impossible for an agency to administer this provision. Instead the standard should be reasonable cause for the PHA to believe that a persons drug or alcohol use "would" interfere with the health, safety or right to peaceful enjoyment of the premises by other tenants. The word "may" should therefore be replaced with "would".

Third, the Department has a few concerns about the provisions which streamline the ability of public housing agencies to designate housing for the elderly only. The Department agrees that the current law governing designated housing is too administratively burdensome and procedurally complex. However, the Department believes strongly that the designated housing process must be fair and provide sufficient housing resources to both the elderly and nonelderly disabled persons. To this end, plans should be required, and not just allowed, to show how a public housing agency will continue to serve nonelderly disabled families and what additional resources will be secured for this purpose. As originally drafted in HR 117, this provision was acceptable. The bill should also provide authorization for additional resources, such as tenant-based assistance, to be made available to persons with disabilities.

Additionally, notice of designation should be reasonable, not just practicable. Expedited extensions of designated housing plans must be conditioned on continued compliance with the requirements of the plan. Finally, care should be taken to ensure that persons with disabilities are not overconcentrated in housing which is not suited to their needs. To avoid this situation, disability-only housing should serve specialized needs of individuals with disabilities who choose this type of assistance.

Housing / Disability

Achtenberg: who? wldn't hire alg that they stren object to;
ass't secy housing;

811, 202; not ph; spec ass't to secy

cpd or housing

aids: cpd

National Action Coalition

for Disability Rights in Housing

*CC Bonnie McIlhenny comes to them
*Asks for help on investigating
who in Fed govt builds hsg.

TO: Secretary Cisneros

FROM: The National Action Coalition for Disability Rights in Housing

DATE: November 8, 1995

1 Advisor + career staff

1) Establish an Office on Disability within the Office of the Secretary. The Office on Disability would be a true link to HUD's customers with disabilities. Require consumer participation in the development of all relevant legislation and review of all current programs.

2) Amend all housing program guidelines, RFP's and NOFA's to be consistent with Fair Housing laws, and to prohibit segregation on the basis of and type of disability. - incentives are gd.

3) Require that all new construction and rehabilitation with public funds be architecturally accessible to persons with disabilities. Prohibit construction of buildings, particularly townhomes, that are not in compliance with access laws. - incentives/pt systems in NOFA's

4) Impose significant penalties such as withholding funds on entities who are in significant non-compliance of the Fair Housing Act, Section 504 and other civil rights laws. - is there a %

5) Require each community to develop an access modification fund to be available to low income tenants or homeowners with disabilities. - COn: can't mandate; OK, encourage

6) HUD fund a national disability housing conference where the agenda would be established, and presenters be coordinated by NACDRC and other disability rights groups.

WE ASK THAT HUD MEET THESE DEMANDS BY THE END OF 1995

CORRESPONDENCE CAN BE DIRECTED TO BECCA VAUGHN AT (913) 233-4572

501 SW Jackson Suite 100-B Topeka, Ks. 66603

v/tdd 913-233-4572 fax 913-233-5072

Decker - NAPAS - FHP - HUD speakers, lawyers

Jan 13 - 10am
every 2 mos - meet

HC: revisit

60% beyond % ment
USDA - FmHA
FEMA

full fledged
complaint
process to cities

FEMA - talk to them
Bonnie re fair hsg

Hearings - HUD sponsored
forum - 9
first in DC - w/Adapt.
They will make service to HUD HHS?

Emphasis on salaries
they oppose

NC - Ctr on Access Hsg
Cisneros - no to fair hsg
waivers

Quomo
maraca
Next steps

94 Conference started this yr.
94 Conference started this yr.

RATIONALE FOR INCREASING THE CURRENT LEVEL OF ARCHITECTURAL ACCESS IN FEDERALLY-ASSISTED MULTI-FAMILY RENOVATIONS--LE, MAINTAINING THE PRESENT % OF FULLY ACCESSIBLE UNITS AND ADDING BASIC ACCESS TO THE OTHER UNITS WHENEVER PRACTICAL

Current Practice:

Current practice for HUD-assisted multi-family housing renovation is to make a small set percentage of units "handicapped accessible" according to a relatively extensive list of requirements, while leaving the other units entirely without access, regardless of the ease with which the other units could be modified.

Drawbacks of the Current Practice

When a few units have full access while all the other units have none, some of the unfortunate results include the following:

--people with mobility-impairments are segregated from others, isolated in their own homes, and cut off from the gatherings, meetings, friendship-building and other important life experiences that take place as people visit one another.

--when non-disabled persons occupying inaccessible apartments develop an impairment, they must disrupt their lives and their families' lives by attempting to find a new place to live or waiting until expensive renovations can be done. Meanwhile they often remain severely confined in their inaccessible home, or unable to return home from a hospital, or sent prematurely to a nursing home because of lack of access

--in reality, many low-income people who develop mobility impairment do not ever have the opportunity to move because of the difficulties involved. Instead remain in inaccessible apartments which are unsafe, a demeaning and frustrating. A resident in these circumstances t cannot enter or leave the apartment without being carried because there is no ramp, and the resident can not use the bathroom because the door is too narrow.

--the current system of having a small percent of apartments with full access and the rest with no access deprives apartment complex managers of flexibility in renting. Accessible apartments may sit empty because no appropriate user comes along soon enough, so the manager naturally and rightly rents the unit to a non-disabled renter in need of a place to live. Then a disabled person arrives and the apartment is already occupied--so they have to look elsewhere. If there were many units with basic access, the disabled person could move in to one of those, and then transfer if desired when a more fully accessible unit opened up.

--Construction guidelines already exist for the extensive renovation of designated handicapped accessible units; but no specific guidelines exist as a master plan for less extensive, cost-effective renovation for simple, basic access. Therefore, developers are doing "all or nothing" because they lack a model for doing "a little something." Yet this "little something"--e.g., attention only to interior door widths and apartment entrances --would render apartments visitable by all mobility-impaired visitors, and in fact rentable by most.

This situation could be easily remedied: CASE IN POINT:

Progressive Redevelopment Inc. in Atlanta GA received federal assistance in a public-private partnership to renovate an abandoned 8-story hotel into efficiency and one-bedroom apartments. The building is to be gutted, with only the floors and stairwells remaining. When disability activists asked to see the architectural drawings, we discovered two major problems. First, while the 15% "handicapped units" had 32-inch clear bathroom doors, all of the other 85% of the units were slated to have new 26-inch bathroom doors, which would not permit passage of a wheelchair. Second, all of the designated "handicapped units" were efficiency, while all other prospective residents would be offered a choice between one-bedroom and efficiency. We asked that the plans be redrawn, and the plans now include 32-inch bathroom doors on all units and a mix of efficiency and one-bedroom for the 15% fully accessible units.

These changes will add zero cost to the project. The original plans unfortunately met existing guidelines.

Goal of Proposed Change

Create economically feasible, significantly increased basic access in federally-assisted renovations of multi-family housing projects, both public housing and public-private partnerships. The percent of units rendered fully accessible would remain consistent with current HUD guidelines. The remaining units would be evaluated individually to see if they are economically feasible for the construction of lesser, basic access features. When feasible, this basic access would be constructed. As a result, each of major drawbacks listed on the previous page would be significantly addressed.

Segments of Proposed Project

- (1) Designate which construction features will constitute "visitable" features, i.e. features which achieve basic but not full access.
- (2) Develop guidelines by which each unit of a multi-family building or development can be evaluated to determine whether the unit is feasible for access features to be added in a cost-effective way.
- (8) Research and apply means whereby increased access can be encouraged immediately, without lengthy processes, such as revising the point systems through which funds are awarded. Reward those projects which include the maximum access which is practical in the given project.

Contact persons:

Eleanor Smith
Concrete Change
1371 Metropolitan Ave. SE
Atlanta GA 30316 phone: (404)378-7455

Becca Vaughn
Topeka ILRC
501 SE Jackson, Suite 100
Topeka KS 66603 phone: (913)233-4572

RATIONALE FOR INCREASING THE CURRENT LEVEL OF ARCHITECTURAL ACCESS IN FEDERALLY-ASSISTED MULTI-FAMILY RENOVATIONS--LE. MAINTAINING THE PRESENT % OF FULLY ACCESSIBLE UNITS AND ADDING BASIC ACCESS TO THE OTHER UNITS WHENEVER PRACTICAL

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--in reality, many low-income people who develop mobility impairment do not ever have the opportunity to move because of the difficulties involved. Instead remain in inaccessible apartments which are unsafe, a demeaning and frustrating. A resident in these circumstances cannot enter or leave the apartment without being carried because there is no ramp, and the resident can not use the bathroom because the door is too narrow.

--the current system of having a small percent of apartments with full access and the rest with no access deprives apartment complex managers of flexibility in renting. Accessible apartments may sit empty because no appropriate user comes along soon enough, so the manager naturally and rightly rents the unit to a non-disabled renter in need of a place to live. Then a disabled person arrives and the apartment is already occupied--so they have to look elsewhere. If there were many units with basic access, the disabled person could move in to one of those, and then transfer if desired when a more fully accessible unit opened up.

--Construction guidelines already exist for the extensive renovation of designated handicapped accessible units, but no specific guidelines exist as a master plan for less extensive, cost-effective renovation for simple, basic access. Therefore, developers are doing "all or nothing" because they lack a model for doing "a little something." Yet this "little something"--e.g., attention only to interior door widths and apartment entrances --would render apartments visitable by all mobility-impaired visitors, and in fact rentable by most.

Milstein:

11/7/95

couple of changes since we met in July; Betsy then wrote memo to Secretary; she will fax to us; Lori surprised we knew

1. '92/'93 regs allowed de-mixing and allows elderly only; consumer gps like regs; only a few housing auths applied; Hill turned this around; HR 117 amendment to Lazio's housing bill, which reauthorizes progs, and prohibits da&a from elderly; allows disabled-only or elderly-only housing; sap: no problem, good bec. elderly should be separate, regs are difficult

Ellen Webber, Legal Action Center

2. ADAPT showed up saying stop funding nursing homes and instead support . So Nick Retsinas, Assistant Secy of Housing (Dunlop, Millner); made some commitment, but she doesn't know -- Assisted Housing

Eleanor Smith: complain re failure to enforce req for new public housing being accessible

Townhouses: public housing: Mary Ann Russ (will be Kevin Marchman)

3. Section 236 low-income housing program that Congress defunded: HUD told folks in Calif that 504 doesn't apply; not true; should be easy; Julian's office is investigating

1. de-link housing and service: dislike HUD reinvention; Affordable Housing Fund; permits non-profits to get \$ for people w/AIDS, CP, MH, etc.; Also don't like that

Cuomo theory; homeless people, need to get their lives together, on pain of losing housing

Was always a policy, but reinvention reiterated

2. how much they dislike segregated housing

3. only listens to providers, not consumers

(tenant based vouchers, etc.)

May 24
Last NOFA for 811 (hsg for pwd): can turn the money into rental vouchers instead of tenant-based housing; Congress did algo; but HUD said services and housing don't have to be linked

811 created in '90; 202 still elderly

Sec 232 insurance program for nursing homes
Sec 236, 221d3: assisted housing: denying 504

**National Action Coalition
for
Disability Rights
in
Housing**

November 8, 1995

To: Secretary Henry Cisneros

From: The National Action Coalition for Disability Rights in Housing

Dear Secretary Cisneros,

Please review the enclosed information and past correspondence which will hopefully assist you in recalling our continued efforts to meet and communicate with you over the last several months.

Through this time our objective has been to meet with you and establish meaningful dialogue toward creating an equal housing policy that reflects the civil rights of people with disabilities. Our mission has remained constant and we are certain that your intentions are the same.

While your past attempts to acknowledge our communications by assigning us to members of your staff have been at least an acknowledgement of our existence. We feel that those marginal attempts have failed to foster true and meaningful interaction. We want to work with you and the HUD staff to make meaningful changes not a continuation of the same rhetoric.

This is a time of constant change and the housing crisis is continuing to grow. You must today begin to show true leadership and a strong commitment to working with the actual customers of HUD, people with disabilities.

Thank you for your attention to this urgent request for equality, justice and civil rights in our country.

**501 SW Jackson, Suite 100-B, Topeka, KS 66603
V/TDD 1913-233-4572 / fax 913-233-5072**

**National Action Coalition
for
Disability Rights
in
Housing**

WHO WE ARE.....

The National Action Coalition for Disability Rights in Housing is a national grassroots network of individuals with disabilities, disability advocates and organizations, and customers of federal programs, who have extensive experience in local and national housing arenas.

The National Fair Housing Summit held in Washington D.C., January 1994, was the catalyst for the formation of the coalition.

The coalition includes individuals, groups and advocates of persons with all types of disabilities. We operate in ways which affirm the civil and human rights of people regardless of disability, gender, race, ethnicity, national origin, religion, sexual orientation, age or color.

WHAT WE DO.....

Through an array of activities such as education and outreach, advocacy, direct action and publicity, we work on the federal, state and local levels to insure that the civil and human rights of persons with disabilities are recognized and fully honored in provision of housing. We work to insure that the independent living and consumer/survivor models based on CONSUMER CONTROL AND CHOICE, INTEGRATED LIVING, VISITING OPTIONS AND FREEDOM FROM MANDATED SERVICES are followed in the provision of housing.

Through ongoing grassroots networking we gather and circulate information and advocacy strategies on a wide range of housing and fair housing issues. Our national network, provides our local coalition members the ability to utilize the replicate model housing and fair housing programs and successful advocacy strategies.

GOALS.....

- * Continue development of model outreach and advocate training toward building a grassroots action coalition
- * Activity train people with disabilities to participate in housing policy and related legislative processes such as
 - * development of Consolidated Plan
 - * participation in local and state housing groups
 - * delivering testimony at local, state, national levels
- * Understanding and using housing laws and regulations to defend housing rights for people with disabilities
 - * Fair Housing Act
 - * Section 504
 - * Community Reinvestment Act (CRA)
 - * Farmers Home Administration
 - * Public Housing Manuals
 - * other agencies which are involved with various aspect of housing
- * Intensively work to promote and incorporate the coalition's position in the activities of other housing and disability organizations
- * Build coalition in all 50 states with a goal of outreaching to 10 states per year
- * Create and disseminate a newsletter on regular schedule
- * Secure funding to sponsor coalition representatives to attend conferences and activities related to local, state or national housing issues
- * Organize and sponsor national grassroots housing conference aimed at providing education, advocacy training and local coalition building to people with disabilities
- * Expand current and develop new information packets on activists strategies to effectively address housing concerns
- * Elimination of discriminatory housing and mortgage practices through continued direct action and consumer control
- * Secure additional resources needed to continue to achieve our goals

ACCOMPLISHMENTS.....

- * Identified and established a core group of individuals with similar concerns regarding housing issues for people with disabilities.
- * Developed a formal communications network among members via
 - * monthly tele-conference calls
 - * weekly faxed information bulletins
 - * developed data-base of new members
 - * mass mailings of coalition information packets to individuals and disability groups nationwide
- * Brought core membership together and 2 weekend conferences to
 - * develop mission statement and goals
 - * develop national strategies and plan coalition's scope of activities
- * Developed and widely disseminated written report and recommendations in response to HUD's Re-invention Bluespring, with the endorsement of 25 individuals and organizations (see attached).
- * Coalition members have used our written document to
 - * defend and further the housing rights and choice of people with disabilities in their local communities and states
 - * education, outreach and local coalition building
 - * expand national membership
- * As the only grassroots, disability and customer driven group, we successfully negotiated and established ongoing meetings with top officials from HUD headquarters to address:
 - * lack of enforcement of Section 504 and Fair Housing laws
 - * delinking of mandatory services from housing
 - * elimination of diagnosis specific housing
 - * the increased availability of tenant-based Section Eight vouchers and certificates
 - * current and future housing policy
- * Each coalition member has developed educational materials and strategies for national housing advocacy, specific examples include
 - * successfully met with Habitat for Humanity in 7 states to promote "basic access" in all new houses built
 - * successfully obtained and disseminated among membership, lists of federal housing fund recipients in an effort to monitor regional and national enforcement of Section 504 and Fair Housing laws
 - * model home mortgage program was developed in two additional states as a result of coalition networking
 - * strategies for impacting local and state development of "Consolidated Plan"
 - * promotion of the participation of people with disabilities in fair housing testing

**I SUPPORT THE NATIONAL ACTION COALITION
FOR DISABILITY RIGHTS IN HOUSING**

NAME:

ORGANIZATION:

ADDRESS:

TELEPHONE:

FAX:

E-MAIL:

OTHER:

YES, I WANT TO SUPPORT THE ADVOCACY WORK OF THE NATIONAL ACTION COALITION FOR DISABILITY RIGHTS IN HOUSING. MY SUPPORT FEE WILL ASSIST THE COALITION WITH THE COST OF KEEPING ME INFORMED ABOUT IMPORTANT ISSUES AFFECTING HOUSING RIGHTS AND CHOICE OF PEOPLE WITH DISABILITIES.

\$10.00 _____ INDIVIDUAL

\$20.00 _____ ORGANIZATION

\$0.00 _____ I AIN'T GOT NO DOUGH, BUT PLEASE SEND ME
THE INFORMATION

_____ I WANT TO MAKE A DONATION TO SUPPORT THE
ONGOING WORK OF THE COALITION!!

CONTACT: BECCA VAUGHN - NACDRH
501 SW JACKSON, SUITE 100-B
TOPEKA, KS 66603
PHONE# 913-2334572
FAX# 913-233-5072

**National Action Coalition
for
Disability Rights in Housing**

**What We Want and Do Not Want
in Housing Legislation**

Legislation must:

- 1. Provide for more housing vouchers for ALL persons with incomes at or below 30% of Median Family Income (MFI).**
 - a. At least 50% of the vouchers must go to persons whose income is at or below 30% of MFI.
 - b. Vouchers must be usable for homeownership or rental.
 - c. The process for determining fair market rents (FMRs) must be reviewed and improved in ways that make more rental housing available. FMRs for accessible units must accurately reflect market rates for *comparable, accessible* units.
- 2. Provide for the conversion of all project-based assistance, that now goes to public and private housers, into vouchers that will go directly to persons of low-income.**
 - a. Convert all project-based 811 funds into vouchers for persons with disabilities.
 - b. Provide for community advocacy organizations, not housers like the public housing authorities or service providers, to administer the rental voucher program.
- 3. Provide for a "reasonable modification" fund for persons with disabilities who need to make structural changes to a home/rental unit.**
- 4. Include statutory language that requires all housers, banks and mortgage companies to treat a federal assistance housing voucher as "income", and include language that makes any discrimination on the basis of a person's status as a holder of a voucher illegal.**
- 5. Retain the current "federal preferences" and clarify that :**
 - a. Those individuals who are "homeless" must be the top priority of all states and communities;
 - b. The definition of "homeless" includes those persons with disabilities who are in institutions. State psychiatric hospitals, nursing homes, intermediate care facilities, group homes, so-called "transitional" facilities, "shared living" programs and residential treatment facilities are "institutions".
 - c. Housing that is "inaccessible" is "substandard".
 - d. If someone cannot return to her/his home for reasons related to her/his disability, that person is to be considered either "homeless" or "involuntarily displaced" (depending upon the individual's circumstances.)

6. Allow local and state preferences, but only if they are secondary to federal preferences, and only if the local and state preferences:

- a. are based on low-income status;
- b. are based on demonstrated need for housing;
- c. do not violate civil rights and fair housing laws.

7. Use the Fair Housing Act's definition of "disability" (i.e. having a physical or mental impairment that significantly affects a major life activity.)

8. Make "having a disability" an "enhancer" of any federal, state, or local preference.

9. Require the creation of advisory and "citizen" boards. Require that a disability advisory board be established at the federal level, and require that "citizens boards" (that must include advocates and persons with disabilities) be established at state and local levels.

10. Prohibit "set-asides" or "targeting" based on subgroups of persons with disabilities or TYPE of disability.

- a. Prohibit "targeting" based on service needs.

11. Prohibit use of funds for services unrelated to housing. Prohibit the use of any federal housing funds, including and especially any portion of monies identified for housing for persons with disabilities, to pay for service coordination, services, or any other non-housing related activities.

12. Exempt persons with disabilities from any program requirements related to work.

13. Require that all new single-family homes and multifamily projects are "visit-able". All newly constructed homes must have at least one entrance that is wheelchair accessible.

14. Require that at least 2% of all new single-family homes and multifamily projects are accessible to persons with multiple chemical sensitivity or environmental illness. At least 2% of all newly constructed homes must be free of materials that are known toxins to

many individuals with the disability of multiple chemical sensitivity or environmental illness.

14. Require that all expenditure of federal monies be in ways that are consistent with independent living and consumer-survivor models.

15. Prohibit forced segregation on the basis of diagnosis, disability, category of disability, service need, or service use. Prohibit group homes, apartment buildings, floors or wings, "transitional" or "supportive" housing, or any other form of housing from segregating on the basis of diagnosis or service need or use.

16. Prohibit linkage of housing with services. Prohibit any linkage of services to housing. Prohibit all mandatory service requirements related to development of housing programs, eligibility for housing, tenancy or ownership, eviction, or foreclosure, and intimidation or coercion (including actions to force involuntary treatment), or any other illegal use, or threat of withdrawal of services related to housing.

17. Prohibit diagnosis- or category-specific disability organizations from administering housing programs.

18. Establish an "access tax credit" for housing providers who make structural modifications and/or programmatic accommodations needed by persons with disabilities.

19. As a condition of receiving CDBG funds, require communities to include in their code enforcement the monitoring of residential new construction for compliance with the Fair Housing Act.

20. Require that a primary purpose of federal housing funds is to guarantee the fair housing rights of persons with disabilities.

TYPES OF HOUSING PROGRAMS

Housing Legislation Must <u>Provide for</u>	Housing Legislation Must <u>Prohibit</u>
<u>Homeownership</u> 1. Voucher and Mortgage Programs examples: · single family · condo · co-op 2. "Reasonable modification" fund for persons with disabilities who need assistance making housing (including housing programs) accessible.	Prohibit project-based assistance, for example: · group homes · shared living · segregated apartments** · disability-specific** · disability-only** · elderly-only · family-only Prohibit services linked to housing, for example: · transitional housing · supportive housing · group homes · residential treatment facilities
<u>Rental</u> 1. Voucher Program examples: · private apartments · private homes · private room · with others of choice · emergency shelters · temporary housing 2. "Reasonable modification" fund for persons with disabilities who need assistance making housing (including housing programs) accessible.	Prohibit traditional homeless shelters based on the "shared living" model (anything that provides less privacy than a private sleeping area for each person.)

** Unless such housing meets the Section 504 condition that such segregated housing is necessary in order to provide housing for a specific group that is as effective as housing for other groups. For example, in order to provide housing for persons with environmental illness or multiple chemical sensitivity, that housing may need to be segregated from other housing because of the toxic materials that are present in "standard", integrated housing.

ADMINISTRATION OF PROGRAMS

Housing Legislation Must <u>Provide for</u>	Housing Legislation Must <u>Prohibit</u>
<u>A federal disability advisory board</u> comprised only of: -persons with disabilities -advocates of persons with disabilities	Prohibit any non-consumer-controlled housing or service providers, but, especially, disability-specific providers of housing and/or services, from being on the federal advisory board, or the state and local boards.
<u>State and local citizen boards</u> -must include persons with disabilities.	
<u>Types of agencies</u> that may administer voucher or mortgage programs: -community-based -non-housers -non-service providers	Prohibit any non-consumer-controlled housing or service providers, but, especially, disability-specific providers of housing and/or services, from administering any housing programs.
<u>Independent living and consumer-survivor models:</u> -require that all expenditure of federal monies be in ways that are consistent with independent living and consumer-survivor models.	Prohibit industry-owned and managed "special" housing for persons with disabilities. Prohibit "behavioral contracts", special terms and conditions, "voluntary treatment agreements", or any other attempts to reduce/deny the civil and fair housing rights of persons with disabilities.
<u>Housing only</u> -require that federal housing funds be used only for housing - not for non-housing services, nor for institutions (eg. group homes, supportive housing, etc.)	Prohibit use of funds for "supportive services", "service coordinators", meals, transportation, medical treatment, and any other service unrelated to housing.
<u>Prohibit linkage of housing with services.</u> Prohibit all mandatory service requirements related to development of housing programs, eligibility for housing, tenancy or ownership, eviction, or foreclosure, and intimidation or coercion (including actions to force involuntary treatment), or any other illegal use, or threat of withdrawal of services related to housing.	
<u>Prohibit forced segregation on the basis of diagnosis, disability, category of disability, service need, or service use.</u>	
<u>FMR determination process to be improved</u> -the process for determining fair market rents (FMRs) must be reviewed and improved in ways that make more rental housing available. -FMRs for accessible units must accurately reflect market rates for comparable, accessible units.	Prohibit the FMR for accessible units to be the same as, or less than accessible units unless there is documentation that comparable, accessible units are truly equal to or less than the cost of inaccessible units.

VOUCHER PROGRAM

Housing Legislation Must <u>Provide for</u>	Housing Legislation must <u>Prohibit</u>
<u>Conversion of all project-based assistance into vouchers that will go directly to persons of low-income.</u> a. convert all project-based 811 and 202 funds into vouchers for persons with disabilities. b. convert all other project-based assistance, that now goes to public and private housers, into vouchers for all eligible households.	Prohibit project-based assistance, especially to disability-specific, gender-specific, race-specific, and other illegal projects.
<u>Vouchers for three types of housing programs:</u> -homeownership -rental -emergency shelter	Prohibit restrictions on use of vouchers: -all eligible households must be allowed to use the vouchers to live anywhere they choose (eg. a homeless person must be allowed to use the voucher to purchase a home - if they are otherwise qualified.) -there must be no residency requirements
<u>Reasonable modification fund</u> -for both rental and homeownership programs, must be a fund for modifications needed by persons with disabilities.	"Modernization" monies should not be provided to public housing projects nor to private projects - but, rather, funds should be given directly to the individuals to make whatever structural changes they need wherever they want to live.
<u>Voucher equivalent to "income"</u> -voucher must be treated as "income" by <u>all</u> housers, banks, mortgage companies, etc. -adverse treatment because of status of holder of a voucher must be illegal.	Prohibit denial of housing or any other discrimination because of a person's status as a recipient of a voucher.
<u>Portability</u> - must be able to take and use a voucher anywhere in the country.	Prohibit residency requirements or geographic limitations on the use of vouchers.
<u>Prohibit the linkage of voucher availability to services, service needs, involuntary commitment or any other non-housing or "treatment" requirements.</u>	
<u>Prohibit the requirement that persons with disabilities perform any type of work in order to be eligible for a voucher. However, a person with a disability may not be prohibited from VOLUNTEERING to participate in a work program.</u> - the housing program that requires others to work must provide for child care, transportation, personal attendant and other costs associated with individuals participating in the work program.	

ELIGIBLE AND PRIORITY POPULATIONS

Housing Legislation Must <u>Provide for</u>	Housing Legislation Must <u>Prohibit</u>
<u>Basic Eligibility Categories:</u> - persons with disabilities - families with children - elderly	Prohibit eligibility criteria related to ability to work.
<u>Definition of "Disability"</u> use Fair Housing Act's definition of "disability".	Prohibit eligibility criteria that includes asymptomatic conditions as "disabilities".
<u>Homeless: highest priority population</u> - retain current definition - include persons with disabilities in institutions - include persons who are living in inaccessible units as living in "substandard" housing	Prohibit disability-specific and work-related priorities. Do not require individuals or families to stay in shelters to be considered homeless.
<u>2nd Priority: involuntarily displaced</u> if someone cannot return to her/his home for reasons related to her/his disability, that person is to be considered either "homeless" or "involuntarily displaced" (depending upon the individual's circumstances.)	
<u>3rd Priority: paying more than 50% of income for housing</u> includes those in group homes and other institutions who must surrender almost all of their monthly income for "housing" and "services" (including meals).	
<u>"Having a disability" as an "enhancer" of any priority status.</u>	
<u>Income Targeting</u> at least 50% of federal resources should be targeted at persons who are at or below 30% of MFI.	Prohibit income targeting aimed at those with higher incomes and that excludes those with lower incomes.
<u>State/local preferences</u> - allowable only if they are secondary to federal preferences - must be based on severity of housing need - must be for very low-income - may not violate civil rights and fair housing laws	Prohibit preferences that are based on residency, ability to work, diagnosis, service need, or other irrelevant criterion.
Any preferences must be based on <u>severity of housing need</u> . Any preferences or set-asides based on "disability subgroups", diagnosis, service need, age, ability to work or other irrelevant criterion <u>must be prohibited</u> .	

Access

Housing Legislation Must <u>Provide for</u>	Housing Legislation Must <u>Prohibit</u>
<u>Visit-ability</u> · at least one entrance of all new single-family and multifamily homes built with federal assistance must be "visit-able".	
<u>Environmental illness/MCS access</u> · at least 2% of all new single-family and multifamily homes built with federal assistance (including mortgages) must be made accessible to persons with multiple chemical sensitivity or environmental illness. · all renovations using federal financial assistance must use materials and practices that are non-toxic to persons with mcs/ei, in general.	
<u>Access tax credit</u> · a federal "access tax credit" must be established for housing providers who make structural modifications and/or programmatic accommodations needed by persons with disabilities.	
<u>Local code enforcement of FHAA new construction guidelines</u> · as a condition of receiving any HUD funds (including CDBG funds), communities must be required to include in their code enforcement the monitoring of new residential construction for compliance with the Fair Housing Act.	
<u>Local commitment to Fair Housing Laws</u> · as a condition of receiving any HUD funds, communities must have a fair housing compliance procedure and must clearly prohibit segregation of any individuals on the basis of "considerations" prohibited by the Fair Housing Act and Section 504 (i.e. race, color, religion, sex, nationality, familial status, or disability)	

NATIONAL ACTION COALITION
FOR
DISABILITY RIGHTS IN HOUSING

Review of HUD's "Reinvention" Bill:
"American Community Partnership Act"

"The Congress finds that the realization of this goal now and into the 21st century requires a fundamental restructuring of the ways and means of pursuing it, in order to make Federal housing programs more responsive to those they serve." [Sec.2(b), pg. 7]

If this bill is suppose to reflect HUD's idea of being more responsive to those HUD "serves", HUD clearly must believe that it "serves" the *housing industry*, because, by sanctioning such things as "targeting" to subpopulations of persons with disabilities, segregation on the basis of diagnosis, and the linkage of services to housing for persons with disabilities, HUD is "being responsive" to what is wanted by the housing industry. Persons with disabilities do not want targeting, segregation nor services linked to housing.

HUD also appears to believe that it "serves" "State, community and neighborhood decisionmakers" - not persons with disabilities who are in need of housing. In the "Purposes" section and throughout the Act, it is clear that HUD is being "responsive" not to actual persons with disabilities, homeless individuals or families with children, but, rather, by giving decision making power to politicians and bureaucrats at the local and State levels, HUD is being responsive to the politicians and bureaucrats (and, again, the housing industry that can afford to lobby and influence those "decisionmakers".)

"The purposes of this Act are...to enable low- and moderate-income families...to have greater power to make decisions about their lives and support their quest for self-sufficiency" [Sec. 2(c)(1), pg. 8]

When it comes to housing for persons with disabilities, this Act does just the opposite of its stated purpose of empowering individuals "to make decisions about their lives". By allowing (actually encouraging, if not requiring) housing that is "targeted" and segregated on the basis of diagnosis, eligible families do not have a choice about where they will live. While eligible families without disabilities are given certificates and therefore the resources to make decisions about where they will live in a community, persons with disabilities are restricted to diagnosis-specific *projects* and, consequently, are denied any power to make decisions.

"The purposes of this Act are... to permit decisionmakers at the neighborhood, local, and State level maximum flexibility to design and utilize Federal resources..." [Sec. 2(c)(2), p 8]

The problem is that these "decisionmakers" are the persons who are ALREADY discriminating against low-income individuals, and especially low-income individuals with disabilities. There wouldn't be the enormous problems of homelessness, discrimination and disability-ghettos if the local "decisionmakers" were knowledgeable and fair. Giving power to neighborhood, local, and State "decisionmakers" is like empowering the fox to guard the hen

house. Most of these individuals are not only ignorant about, they are also hostile toward, persons with disabilities, the homeless, racial and ethnic minorities, and other groups traditionally served by HUD.

By giving decisionmaking power to hostile and ignorant local and state politicians, HUD is abdicating its responsibility to protect those who are most vulnerable to oppression in our country.

...to allow residents of the community a say in decisions through a consolidated local planning process...[Section 2(c)(3), p 8]

It is a fantasy to think that those who have the greatest stake in federal housing policies - those eligible for the assistance: low-income persons with disabilities, homeless individuals, families with children, etc. - will be able to participate (in more than a pitiful, token degree) in a "consolidated planning process" where they will be outnumbered and "out-resourced" by the housing industry, hostile neighborhood groups, oppressive service providers, and other bureaucrats and politicians who are susceptible to political and systemic pressures that are rooted in discriminatory attitudes that created the housing problems in the first place.

A "consolidated planning process" requires direct, on-going, informed participation in a process that is structured and conducted according to the caucasian, patriarchal, english-speaking, able-bodied, free-of-child-care-responsibilities, access-to-computers-and-photocopy-resources meeting style. A style that is an effective barrier to non-caucasian, non-hierarchical, non-english-speaking, disabled, child-care-responsible, computer- and photocopy-less persons - i.e. the vast majority of individuals eligible for federal housing assistance.

This "consolidated planning" process places the responsibility for articulating need and advocating for resources on the victims of discrimination and neglect, themselves: "Hey, everyone had a chance to express themselves, so if your needs didn't get met that means you didn't do a good enough job advocating."

HUD alludes to this problem in Purpose #7: "...national ideals that *may be difficult to sustain locally*, especially serving poor and vulnerable populations such as the homeless and disabled and advancing fair housing" (emphasis added) - but, nevertheless, HUD does not include a mechanism to ensure that the needs of the most disenfranchised will be recognized, adequately assessed, and effectively addressed.

"The purposes of this Act are...to end the physical and social isolation of low-income populations..."[Sec. 2 (c)(6), p.8]

But, since this same Act allows segregated and stigmatizing housing (such as group home facilities, transitional facilities, diagnosis-specific facilities) for persons with disabilities - facilities that definitely isolate persons with disabilities both physically and socially, it appears that HUD only cares about ending isolation of those low-income populations that are **without** disabilities. HUD intends to not only allow, but to encourage continued isolation and ghettoization of persons with disabilities.

"The purposes of this Act are...to assert the view that the Federal government has an essential and appropriate role in supporting national ideals that may be difficult to sustain locally, especially serving poor and vulnerable populations such as the homeless and disabled and advancing fair housing. [Sec. 2(b)(7), p.8]

a. By admitting basic housing "ideals" may be "difficult to sustain locally", HUD is admitting that the "consolidated planning process" is likely to not effectively address the needs of precisely the population that is eligible for federal housing assistance: "poor and vulnerable populations". HUD cannot have it both ways. Either there is a need for federal control of housing resources to ensure the housing needs of eligible populations are met (Purpose 7), or, the local "decisionmakers" should be given maximum flexibility to design and utilize federal resources (Purpose 2).

The fact is that, even though HUD has done a poor job of meeting the housing needs of the "poor and vulnerable populations", if left up to local "decisionmakers", homeless and disabled individuals would be in even worse shape.

b. HUD says it is the agency's role to advance fair housing, but then deliberately includes a section (Section 6, p.18) designed specifically to eliminate the civil rights of individuals with disabilities to not be denied housing resources because of their disability. Rather than advancing fair housing, HUD is attempting to reverse the fair housing rights of persons with disabilities.

PURPOSES.— The purposes of this Act are... [Sec. 101 (b), pg 21]

If HUD were being honest, HUD should say that the primary purposes of this Act are:

1. to meet the needs of the housing industry (including and especially the nonprofit providers of so-called "housing" for persons with disabilities);
2. to meet the needs of providers of services to persons with disabilities;
3. to meet the needs of state and local politicians (who are puppets of the housing, service provider, and nursing home/residential treatment industries).

"The goals of the department are...to protect American's rights to fair housing and equal opportunity, as guaranteed by law and the Constitution" [(c)(5)", p.10]

It is HUD's intention to ~~eliminate~~, not "protect" the fair housing rights of persons with disabilities. By allowing "targeting" of resources to "subgroups" of persons with disabilities [Section 6, p. 18], HUD is attempting to legalize what is now illegal segregation and illegal denial of housing on the basis of nature of disability.

By allowing federal housing resources to be used instead for disability-specific *treatment facilities* (e.g. group homes, "transitional" housing), and then to allow "beds" in these institutions to be counted as meeting a community's responsibility to provide "housing" for persons with disabilities, HUD is denying not protecting the rights of persons with disabilities to have equal opportunity to obtain REAL housing in their communities.

HUD knows better, but is allowing these blatant injustices, once again, in service

subservience to the housing and nonprofit industries (especially the providers of housing and services to persons with AIDS, and providers of housing services to persons with various "developmental disabilities".)

"The goals of the department are...to ensure that every family in America[] can live in dignity in a decent home..." ["(c)(8)" p.11]

Group homes and segregated, diagnosis-specific housing are not "decent" housing and living in them is not a "dignified" way of life - if it were, this type of housing would be made available to ALL other Americans. Allowing treatment facilities to be called "housing", allowing disability-related services to be required only in housing for persons with disabilities, allowing targeting of resources to particular subgroups of persons with disabilities, and other similarly discriminatory, stigmatizing, humiliating "housing" policies that HUD is proposing for persons with disabilities do not "ensure that EVERY family in America can live in dignity in a decent home", but, instead, ensures that those American families with members who have disabilities will be kept in humiliating, degrading institutional ghettos - just as the nonprofit housing industry wants.

"The Secretary shall...oversee the provision of federal housing assistance in a manner that maximizes the exercise of individual choice.. ["(b)(5)", p. 12]

Housing restricted on the basis of diagnosis and housing that requires participation in services does the opposite of "maximizing choice" for persons with disabilities. By allowing such housing, the Secretary is in blatant violation of this part of the Act.

"The Secretary shall...support local initiatives that reduce dependency, increase individual choice and improve people's lives." ["(b)(12)" p. 13]

Group homes and other treatment facilities that link participation in services ~~increases~~ rather than ~~decreases~~ dependency, ~~decreases~~ rather than increases individual choice, and destroys rather than improves the lives of persons with disabilities.

The term "person with disabilities" means a person who...(A) has a disability as defined in section 223 of the Social security Act; (B) is determined, pursuant to regulations issued by the secretary, to have a physical, mental, or emotional impairment which - (i) is expected to be of long-continued and indefinite duration, (ii) substantially impedes his or her ability to live independently, and (iii) is of such a nature that such ability could be improved by more suitable housing conditions; or (C) has a developmental disability, as defined in section 102 of the Developmental Disabilities Assistance and Bill of Rights Act. This term shall not exclude persons who have the disease of acquired immunodeficiency syndrome or any conditions

arising from the etiologic agent for acquired immunodeficiency syndrome. [Sec. 4(b), p.15]

This section is degrading, archaic, nonsensical, and unfair.

This "definition" is really four different definitions, and is based on some ridiculous division of disability into four "categories" (it is suspiciously convenient that the nonprofit housing industry is similarly segregated): physical disabilities, mental disabilities, "developmental" disabilities, and HIV/AIDS. Furthermore, the different criteria for the different disability "groupings" are significantly divergent and, with regard to HIV and AIDS, transparently political. ←

It makes no sense - except to perpetuate the current segregated, discriminatory structure of the housing industry - to divide persons with disabilities into four categories. If there have to be any categories at all, there should be only two, and those should be for purposes of definition only: mental disabilities and physical disabilities. "Developmental" disabilities ARE physical and/or mental disabilities. AIDS IS a physical disability.¹ These two categories are the same two categories used in the Americans with Disabilities Act and the Fair Housing Act.

The first part of the definition considers individuals who meet the definition of disability in the Social Security Act as "disabled" because of their inability to engage in ONE major life activity - work.² The second part of the definition requires that an individual have an impairment that "**substantially impedes**" the person's ability to "live independently", and requires that the impairment is of such a nature that one's ability to live independently could be improved by "more suitable" housing. The third part of the definition is the toughest yet, and requires that an individual whose impairment meets the definition of "developmental disability" must have a "severe" disability that "results in substantial functional limitations in **THREE** or more...areas of major life activity", and "...reflects the individual's need for a combination and sequence of special, interdisciplinary, or generic services..."³ Finally, in a new addition to HUD's traditional definition, it appears that HUD is saying that persons who are HIV-positive are eligible for housing even if they have NO impairments or NO functional limitations, and even if they are fully able to work. It appears that HUD is proposing that such individuals would be eligible for housing simply because they have "any conditions arising from the etiologic agent for acquired immunodeficiency syndrome" - even if such conditions do not impair any activity of daily living. ←

It is bizarre and blatantly discriminatory that HUD proposes to impose different eligibility requirements on different groups, and to impose NO requirements on some persons who are HIV-positive (which is a policy the AIDS housing and service providers have been lobbying hard for.) ←

HUD's definition of disability should be the same for all persons with disabilities, regardless of their diagnoses, and should be consistent with other relevant federal definitions of disability - specifically in the Fair Housing Act, Section 504 and the Americans with Disabilities Act - and

¹ HUD appears to not quite understand that AIDS is a "disability". In publicity material about HUD's reinvention, HUD repeatedly used the phrase "the homeless, the frail elderly, disabled people, and persons with HIV/AIDS." HUD doesn't seem to understand that "frail" elderly and persons with AIDS ARE all "persons with disabilities." The issue of whether persons who are asymptomatic HIV-positive are "persons with disabilities" is addressed later.

² 42 U.S.C. §423 (d) (1) (A)

³ Section 102 of the Developmental Disabilities Assistance and Bill of Rights Act

should include the additional proviso that the disability "is expected to be of long-continued and indefinite duration".

The following is a composite definition of disability based on the criteria noted above:

A person with a disability is a person with a physical or mental impairment, as defined by the Fair Housing Act⁴, which -

- i. substantially limits one or more major life activities⁵, and
- ii. is expected to be of indefinite and long-continued duration

"Major life activities" means functions such as caring for one's self, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning and working.⁶

"This term shall not exclude persons who have the disease of acquired immunodeficiency syndrome or any conditions arising from the etiologic agent for acquired immunodeficiency syndrome." [Section 6, p. 18]

It is not clear what is meant by "any conditions". Is asymptomatic HIV-positive status a "condition" arising from the etiologic agent for acquired immunodeficiency syndrome? If the answer to this question is yes, then it would appear that this provision of this definition means that asymptomatic, HIV positive persons would automatically be eligible for HUD housing programs - even if they are not impaired in any major life activity. If that is the meaning of this part, it should be eliminated because it is wrong and grossly unfair.

This provision is wrong because it applies a lesser standard to those with a particular diagnosis - which is unfair to others who are in greater immediate need.

There are not enough resources for every person who needs federal housing assistance. Priorities must be established. Priorities should be based on severity of current need. Where disability is an eligibility criterion, the disability should be such that it currently affects major life activities. Simply having a diagnosis of a disease or injury that does not currently affect the individual's major life activities - regardless of whether that disease/injury may eventually have serious affects on the individual's major life activities - is not a reasonable

⁴ 24 CFR §100.201: "Physical or mental impairment" includes: (1) Any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the following body systems: Neurological; musculoskeletal; special sense organs; respiratory, including speech organs; cardiovascular; reproductive; digestive; genito-urinary; hemic and lymphatic; skin; and endocrine; or (2) Any mental or psychological disorder, such as mental retardation, organic brain syndrome, emotional or mental illness, and specific learning disabilities. The term "physical or mental impairment" includes, but is not limited to, such diseases and conditions as orthopedic, visual, speech and hearing impairments, cerebral palsy, autism, epilepsy, muscular dystrophy, multiple sclerosis, cancer, heart disease, diabetes, Human Immunodeficiency Virus infection, mental retardation, emotional illness, drug addiction (other than addiction caused by current, illegal use of a controlled substance) and alcoholism.

⁵ The Fair Housing Act, as amended, 42 U.S.C. §3602 (h) (1) and regulations at 24 CFR §100.201; Regulations implementing Section 504 of the Rehabilitation Act of 1973, as amended, 24 CFR §8.3; The Americans with Disabilities Act, 42 U.S.C. §12102 (2) and regulations at 28 CFR §35.106.

⁶ 24 CFR §100.201

nor fair criterion.

The argument often given for extending the eligibility to persons who are HIV-positive but asymptomatic is that their condition will deteriorate to AIDS and they will die if they are homeless or live in seriously substandard conditions. This argument is, at best, misleading. It is contrary to fact to suggest that all persons who are asymptomatic HIV-positive will automatically develop AIDS - not all persons do. And what this argument neglects to include is the fact that there are persons with many different types of diseases and disabilities (TB, cancer, diabetes, heart conditions, alcoholism, etc.) whose conditions would be equally likely to deteriorate and who would be equally likely to die if they are homeless or live in seriously substandard conditions.

Even the civil rights laws require that in order to be considered a person with a disability, the impairment must substantially limit one or more major life activities.⁷ HUD's complete departure from reasonable eligibility criteria is clearly a political cave-in to AIDS housing/service providers, and it is an insult to others whose disabilities truly, significantly limit their life activities.

"Amounts set aside under paragraph (1) may only be used for...housing and community development activities in support of desegregation efforts."
[(t)(2)(D)] p 18]

It is important to note here that "desegregation" includes desegregating diagnosis-specific housing for persons with disabilities.

"TARGETING TO SUBPOPULATIONS OF PERSONS WITH DISABILITIES
...Notwithstanding any other provision of law, projects for persons with
disabilities assisted under this Act, or any other authority administered by the
Secretary of Housing and Urban Development, may be targeted, consistent
(as appropriate) with the current consolidated plan (as defined in section 4
(a)), to specific subpopulations of such persons, including (but not limited to)
persons who -- (1) are seriously mentally ill; (2) have chronic problems with
drugs, alcohol, or both; or (3) have acquired immunodeficiency syndrome or
any conditions arising from the etiologic agency for acquired
immunodeficiency syndrome."[Sec. 6, p.18]

Section 6 should be deleted from this bill because "targeting":

1. is a violation of fair housing and civil rights laws (if it were already legal, HUD wouldn't have to bother to try to pass this type of language to attempt to make it legal);
2. perpetuates discriminatory and humiliating types of segregated, "specialized" housing programs;

⁷ The Fair Housing Act, 42 U.S.C. 3602(b)(1); The Americans with Disabilities Act, 42 U.S.C. (2)

3. is immoral and based on ignorance and stereotypes;
4. will result in the more politically and financially powerful getting housing and the most disenfranchised getting little or nothing.

1. "Targeting" is a violation of fair housing and civil rights laws.

This is an outrageous assault on the fair housing and civil rights of persons with disabilities. This is a blatant example of HUD's absolute subservience to the housing and service industries' demands, and reveals HUD's total disregard, even hostility, toward the needs and civil rights of persons with disabilities. And this is a clear example of HUD's double-talking and double standards when it comes to persons with disabilities. Obviously, the HUD administration is willing to play politics with the basic civil rights of persons with disabilities even while it insists that one of HUD's goals is "to protect Americans' rights to fair housing and equal opportunity, as guaranteed by law and the Constitution".⁸

"Targeting" housing resources to diagnosis-specific "subpopulations" of persons with disabilities is equivalent to earmarking resources to certain racial, ethnic or religious "subpopulations". Such targeting blatantly violates fair housing and civil rights laws. In fact, although HUD has been allowing (often actually *requiring*) such "targeting" for years in violation of civil rights laws, HUD apparently proposed this specifically worded section in the hopes of legalizing what is currently totally illegal activity by HUD and by many providers of "disabled housing." And it is primarily the special (financial and selfish) interests of the "disability housing" industry that is driving the "targeting" practice and, no doubt, this section of the proposed legislation.

Housing resources must be made available in a nondiscriminatory manner - without regard to race, color, sex, ancestry, religion, familial status, or DISABILITY - as the laws currently require.

Section 504 of the Rehabilitation Act, the Fair Housing Act and the Americans with Disabilities Act all prohibit denial of housing, segregation, and different treatment because of disability⁹. HUD has finally realized this. So, in order to keep the politically powerful housing and special interest organizations appeased, HUD is proposing this section to legalize what they want to do: continue to develop segregated, oppressive, institutions such as "group homes", "transitional housing", "supportive housing" and "congregate housing" where these special interest groups are able to prosper as housers and providers by ensuring that their particular "market" will be forced to live in this housing because all other housing will likewise be segregated according to other diagnoses.

2. "Targeting" perpetuates discriminatory and humiliating types of segregated, "specialized" housing projects, and perpetuates discriminatory, special terms and conditions for gaining access to such resources.

"Targeting" is just a euphemism for segregating, restricting and denying housing on the basis

⁸ American Community Partnerships Act, Section 3 (a), "Sec. 2(c)(5)", page 10

⁹ Section 504 regulations prohibit "different or separate housing, aid, benefits, or services to individuals with handicaps or to any class of individuals with handicaps from that provided to others unless such action is necessary to provide qualified individuals with handicaps with housing, aid, benefits, or services that are as effective as those provided to others" 24 CFR §8.4(b)(1)(iv). Section 504 regulations go on to say: "A specific class of individuals with handicaps may be excluded from a program if the program is limited by federal statute or Executive order to a different class of individuals" 24 CFR §8.4 (c)(1). The other civil rights laws do not contain this proviso.

of disability. Section 6 says "projects" or "any other authority" may be targeted to specific subpopulations of persons with disabilities. If a housing project is targeted to a particular subpopulation of persons with disabilities, that project: (1) is segregating on the basis of disability and the result is a disability ghetto for that subpopulation (an AIDS ghetto, a ghetto for persons with mental illness, a ghetto for persons with mental retardation); and (2) is denying housing to others - with an equal (or greater) need for housing - simply because they do not have the "right" disability (equivalent to being denied housing because one does not have the "right" skin color, ancestry, or religion...)

For example, in a housing project that is "targeted" for persons living with AIDS, a mother of three who has AIDS will get housing and a mother of three who has terminal breast cancer will not - regardless of the relative degree of need for housing, and, even if the current condition of the mother with breast cancer is more severe. This - and the reverse scenario - is simple, disgusting discrimination. Two mothers who are both seriously ill should not be pitted against each other for housing resources, and one should not be denied needed housing simply because she has the wrong disability.

When, instead of being project-based, the housing resources being "targeted" are certificates or vouchers the discrimination (beyond the basic wrongfulness of targeting) usually occurs in the distribution of the certificates/vouchers. Most often, the resources are given to a service provider who "specializes" in the targeted subpopulation (e.g. community mental health centers, AIDS service providers) and those non-housing entities administer the program. Consequently, whereas persons without disabilities need not go through any additional layers of bureaucracy and screening in order to get access to housing resources, additional, special, discriminatory terms and conditions are imposed on individuals with disabilities: (1) a person with a disability must interact with an added layer of administration - the service agency; (2) in addition to there being an extra layer, the fact that the "layer" is a service provider is an especially offensive and degrading requirement for persons with disabilities; (3) individuals who are already clients of the service provider always get access to the resources more quickly (if not exclusively) than those who are not clients of the provider, so housing resources are being distributed on the basis of status as a service agency client, not status as being in the greatest need for housing.

3. "Targeting" is immoral and based on ignorance and stereotypes.

In addition to being illegal, to being an obvious political pay-off, and to being a clear indicator of the HUD administration's true allegiances to the housing industry (not to people with disabilities) - "targeting" is immoral.

In trying to justify what are really political and self-centered motives, HUD, housers, and the service industries maintain that "targeting" is based on need: need for housing and need for services. This is not only an intellectually dishonest argument, it is a blatantly unethical position. It cruelly pits individuals with one diagnosis against persons with a different diagnosis in efforts to "prove" greater need for housing. Such an argument requires one to believe that all persons with the same diagnosis are identically affected by a medical condition - e.g. 1. ALL persons who are HIV-positive suffer more from homelessness than ANY persons with breast cancer, leukemia, heart conditions, diabetes, depression, etc., and 2. ALL persons with the disease of alcoholism need the SAME services LINKED to their housing. These industry-created, industry-perpetuated suppositions are simply, entirely false.

If all individuals who had a particular diagnosis were assessed according to the effect of that diagnosis on each individual's activities of daily living and need for housing, individuals would be at different, often very different, points along a broad continuum. Simply knowing someone's diagnosis, then, absolutely does not predict that particular person's need for housing or need for services. Some persons who have cerebral palsy are very healthy, do not need any attendant services, and are comfortably housed, whereas others with the same diagnosis need many hours of attendant services, and need housing in the community. Likewise, some individuals with heart disease are terminally ill and need immediate shelter, while others with heart disease do not need services nor housing. It is impossible to say - simply on the basis of diagnosis - that one person NEEDS housing more so than another, or that all persons with the same diagnosis need the same services associated with their housing.

To make generalizations about the housing (and service) needs of individuals based on diagnosis (or race, ethnicity, gender, etc.) violates this country's moral code and is no less offensive than, for instance, racism or sexism. "Targeting" values the lives and welfare of certain individuals more than other individuals - based on the diagnosis of the individuals. Just as it is immoral to place a greater value on the lives of Caucasians than Hispanics, it is immoral to place a greater value on, for instance, the lives of persons with mental retardation than on those with the disease of alcoholism.

4. "Targeting" will result in the more politically and financially powerful getting housing and the most disenfranchised getting little or nothing.

It is not clear whether such "targeting" will occur on the federal, state, or local level, or all three. But, in any case, the "targeting" will be based on political pressure and effective lobbying, not objectively determined housing need. "Targeting" is a euphemism for buying off and/or paying off the politically powerful housing and service providers. Housers (mostly nonprofit organizations associated with a particular disability, such as the ARC, AIDS organizations, providers of mental health services, etc.) who "specialize" in one diagnosis and who have well-funded political lobbying power are able to pressure HUD, states, communities and neighborhoods to "target" housing resources to their clientele - based on diagnosis, instead of *relative need*.

If "targets" are to be determined at the federal level, it will be the well-funded, well-organized service provider and housing industry groups who will lobby HUD to "target" their markets (e.g. individuals with psychiatric disabilities, persons with AIDS, persons with mental retardation) and who will be successful. These groups already have HUD in their back pockets - it won't even take much effort on their part. Other individuals with disabilities who do not have well-paid lobbyists in Washington do not stand a chance to dissuade the duped HUD staff that others with equal or greater need for housing do exist.

In order to successfully tap into housing resources through the "consolidated planning process", it is necessary to attend meetings, present a persuasive case, influence decisionmakers, and bring political pressure to bear. Those who have the most political and financial clout will get the most housing resources.

Allowing "targeting" through the consolidated planning process means that those persons with disabilities who have diagnoses that happen to be the ones that have been chosen as "markets" of the housing and service providers will be the people who will most likely get housing resources, because there will be entire industries with real incentives and significant

resources to persuade decisionmakers that their industries' markets are the "neediest".

Meanwhile, those persons with disabilities who have diagnoses that have not been chosen as "markets" by the industry will be the least likely to get housing funds "targeted" to them because they will not have the resources - the money, the access to support staff, photocopiers, phones, computers, research material - nor the political clout to effectively make a case for their need for housing. The consolidated planning process places the burden for ensuring that needs are recognized and appreciated on those in need - those most disenfranchised, those least able to attend meetings, to participate in a formal process that is often alien, usually in English only, rarely accessible to persons with needs for communication accommodations, rarely with the provision of child care, attendant support, transportation assistance, and rarely conducted in ways that attempt to ameliorate such inequalities.

People with "non-market" disabilities will be denied access to housing, not because their need for housing is any less than those who will receive assistance, but because they don't happen to have a diagnosis that is popular with the housing and service industries.

It is the responsibility of the federal government to ensure that the needs of the most seriously disenfranchised in this country, those who are shunned even by their own communities, are addressed. Targeting will results in scarce resources being dominated and depleted by the politically powerful, not necessarily the neediest. Consequently, the least politically powerful are denied housing -not because they have less of a need for housing, but - because of their disability, because they have the "wrong" disability: a disability without lobbyists working in Washington, at the state level, or at the local level to persuade the decisionmakers that their "market" deserves special favors. By advocating "targeting" that is based on diagnosis rather than housing need, HUD is abdicating its fundamental responsibility to ensure that those in greatest need are provided housing assistance.

In addition, for purposes of this section, all persons covered by paragraph (3) shall be considered persons with disabilities.[Sec. 6, pg. 14]

NO - see comments on this issue under the definition of the term "person with disabilities", Section 4(b).

Title I – PERFORMANCE FUNDS

"The purposes of this title are...to devolve responsibility in a manner which maximizes choice and dignity for families...expands the commitment to America's most vulnerable populations, complies with Federal fair housing laws..." [Sec. 101(b)(2), pg. 20]

1. The only way to "maximize choice and dignity" for persons with disabilities is to:
 - require structural and programmatic access,
 - prohibit "targeting" of resources on the basis of diagnosis, - require integration of persons with disabilities in all activities of the Performance Funds,
 - prohibit service linkages with housing,
 - enforce fair housing and civil rights laws.
2. "...to devolve responsibility in a manner which... expands the commitment to America's most vulnerable populations". [This is probably a typographical error and should read "commitment OF persons with disabilities, meaning: HUD's desires to ensure that more persons with disabilities - especially with psychiatric disabilities - get "committed" to institutions like psychiatric hospitals and nursing homes.] If this were to accurately reflect what actions HUD is actually advocating in this section of the proposed bill, this would say: "to devolve responsibility in a manner which...expands the commitment to always respond to the lobbying efforts of America's housing and services industries."
3. "...to devolve responsibility in a manner which ... complies with Federal fair housing laws". Why start now? Why require states and communities to start complying now with fair housing laws when HUD itself hasn't complied and continues to not comply with the fair housing laws? Nothing in this title ensures compliance with federal fair housing laws.

Subtitle A – COMMUNITY OPPORTUNITY FUND

(a) ELIGIBLE ACTIVITIES..."(4) clearance...demolition, removal, reconstruction, and rehabilitation (including rehabilitation that improves energy efficiency) of buildings..." [Sec. 104 (a)(1), pg. 23]

Add "accessibility for persons with disabilities" somewhere under "eligible activities". For example: "...and rehabilitation (including rehabilitation that improves energy efficiency and rehabilitation that improves accessibility for persons with disabilities..."

"(19) provision of fair housing services designed to further the objective of the Fair Housing Act ... [Sec. 104 (a)(3), pg. 24]

Add "...to further the objectives of the Fair Housing Act, and where appropriate, the objectives of Section 504 of the Rehabilitation Act and the Americans with Disabilities..."

Specifically, include the requirement that any recipient of "community opportunity funds" must ensure that all new residential construction be monitored for compliance with applicable federal building requirements of the Fair Housing Act, the Americans with Disabilities Act, and Section 504 of the Rehabilitation Act.

SET-ASIDE. – Section 107(a)(1) of the Housing and Community Development Act of 1974 is amended to read as follows:...amounts shall be set aside for grants...for the following purposes:... 0.1%... for grants [in Guam, the Virgin Islands, American Samoa, etc.]; ... 0.5% ... for technical assistance...; .4% ... for management information systems... [Section 106 (a), pg. 27]

If HUD can justify setting aside amounts for general purposes such as technical assistance and management information, HUD should likewise see the need for a general 10% base set-aside for persons with disabilities.

SELECTION CRITERIA ... the extent of low-income targeting by the grantee, with particular emphasis on job creation for persons of low-income [Section 107, "Sec. 112 (d)(3)", pg.31]

We agree with this type of income targeting, but believe it should be "the extent of VERY low-income targeting" along with determination of greatest housing need.

SUBTITLE B -- AFFORDABLE HOUSING FUND

PURPOSES OF THE AFFORDABLE HOUSING FUND... OVERALL PURPOSE
– The overall purpose of the Affordable Housing Fund under this subtitle is to expand and ensure the supply of decent, safe, accessible, affordable housing for low-income families... [SEC. 111 (b)(2) and (3), pg. 33]

1. Good to mention "accessible" here, but this commitment is not supported by specific language elsewhere in this subtitle.
2. The overall purpose should be to "expand and ensure" the supply of housing **primarily** for persons of VERY low-income and, secondarily, for persons of low-income.

SPECIFIC PURPOSES... (2) to assist State and local governments in providing housing for persons with special needs, including persons with disabilities and the frail elderly, to help these individuals live with dignity and independence in their communities; (3) to promote housing affordability and choice for low- and very low-income families and deconcentration of affordable housing. [Section 111 (b)(2) and (3), pg. 33]

1. Why does HUD refer to persons with disabilities (which includes "frail elderly") as persons with "special needs"? What "special needs"? The only "special" housing need some persons with disabilities have is for structurally accessible housing units.

HUD is apparently referring to other, non-housing "needs". But **everyone** who is eligible for HUD housing programs, people with and without disabilities have non-housing needs: many need assistance with obtaining food stamps, many need assistance with child care, many need transportation assistance, many need assistance obtaining medicaid and medicare. HUD does not appear to consider these "special needs" - yet these sorts of non-housing related needs of many of HUD's "customers" are the same as the non-housing-related needs of persons with disabilities. That HUD treats the non-housing related needs of persons with disabilities differently than the non-housing related needs of persons without disabilities is one more example of HUD's deeply rooted and widespread bias against persons with disabilities.

2. On the one hand, HUD says its purpose is "to help *these* individuals live with dignity and independence", but then HUD designs and adamantly defends segregated mini-institutions - like group homes, "supportive housing", single room occupancy projects, congregate housing - housing designs that are never used for persons without disabilities. Being segregated in a group home is neither dignified nor independent - if it were, this housing design would be used for everyone - regardless of disabilities. The only explanation for HUD's contradiction between its word and its action is that HUD must be using a different standard of "independence" and "dignity" for persons with disabilities - i.e. it is undignified for a person without a disability to live in facilities where bathrooms and kitchens must be shared with persons not of one's choosing, where "staff" control the living environment, where participation in services is required, where there is no true privacy or control, but because HUD apparently considers persons with disabilities as less than human, HUD apparently believes that people with disabilities, like dogs, do not have the need for the same basics of privacy, control, and choice and, therefore, like dogs, should be treated kindly, but certainly

not equal to humans.

3. It is interesting that HUD refers to independence and dignity with regard to persons with disabilities, but refers to choice and deconcentration only with regard to "low-income" families (obviously without disabilities).

The term "nonprofit organization" means.....[Sec. 112 (5), pg. 35]

It should be clearly stated that an organization that serves only a specific subpopulation of any group related to race, color, religion, gender, nationality, family status or disability do **NOT** qualify as a "nonprofit organization" for purposes of receiving HUD funds for housing development and/or management.

The term "very low-income families" means low-income families whose incomes do not exceed 50% of median family income...[Sec. 112 (9), pg. 38]

Very low-income should be 30% or less of median family income. The vast majority of persons with disabilities, homeless individuals, and many families with children have incomes that are at 30% or less of MFI. In order to ensure that these individuals and families who have the greatest housing needs will have access to housing resources, it is necessary to: (1) lower the eligibility threshold, and (2) require all programs to target at least 50% of resources to VERY low-income families and individuals.

The term "low-income families" means families whose incomes do not exceed 80% of the median income... [Sec. 112 (10), pg. 38]

Low-income should be 50% or less of MFI. (See earlier comment re "very low-income.")

ELIGIBLE USES OF INVESTMENT...to provide project-based rental assistance...[Section 115 (a)(1)(D), pg. 41]

For the same reasons that HUD gives for replacing project-based public housing assistance with certificates, HUD should not allow project-based assistance under the affordable housing fund. In "reinvention" documents, HUD says it is necessary to withdraw project-based assistance in public housing because (1) concentrating low-income housing has resulted in ghettos, (2) subsidizing projects eliminates the important element of "choice" of where to live, and (3) that "vested interests", rather than reality, have been driving and controlling HUD's

project-based programs.¹⁰

1. Project-based assistance concentrates, rather than de-concentrates, persons of low-income.

Similarly, project-based assistance results in the segregation, rather than integration of persons of low-income and, especially, persons with disabilities.

As one of the purposes of the Affordable Housing Fund, HUD says it is important to promote "deconcentration of affordable housing"¹¹. Providing project-based assistance promotes the opposite: by its very nature, project-based assistance results in the concentration of affordable housing units, and therefore the concentration and segregation of persons eligible for such housing: persons of low-income and, especially, persons with particular disabilities. This is another example of HUD contradicting itself: on the one hand saying the purpose of this fund is to de-concentrate housing, and, on the other hand, not only allowing, but (later, in section 131) *requiring* set-asides for providers of project-specific housing¹².

2. Project-based assistance, by definition, denies choice about where to live and choice about whether to rent or own.

As with the issue of concentration/de-concentration, HUD again contradicts itself. On the one hand, HUD repeatedly states in "reinvention" materials that the new HUD programs are intended to provide eligible individuals with maximum choice in determining where they will live and whether they will rent or pursue homeownership.¹³ Project-based assistance precludes both of these types of choices. Persons who live in projects do not have choice about where to live - they live in the project, period. And if they choose to move, they lose the assistance does not go with them - they remain prisoners of the project for as long as they need assistance.

Unlike persons who will have certificates, persons who live in projects will not be able to use that assistance for homeownership. Homeownership options are non-existent for people in project based.

Again, HUD is speaking out of both sides of its mouth and, in the process, contradicting itself.

3. It is surprising, and refreshing, that, even though only for a brief moment, HUD has admitted that "vested interests", rather than reality, have been driving and controlling HUD's project-based programs.

"At the same time, HUD must acknowledge its failures. This means abandoning failed housing and community development policies that have contributed to the current crisis... It means ending

¹⁰ HUD Reinvention: From Blueprint to Action, pages 27 - 29.

¹¹ ACPA, Section 111 (b) (3), page 33.

¹² ACPA, Section 131, page 82

¹³ HUD Reinvention: From Blueprint to Action e.g. pages 6, 16, 28

policies that ... support projects over people..." ¹⁴ [emphasis added]

"A central element of HUD's mission is to increase opportunities for all Americans to obtain decent, affordable housing. The Department must pursue the most effective avenue to carry out this mission, based on a clear understanding of the real causes of housing problems in America and without regard to vested interests in existing and potentially outmoded programs."¹⁵ [emphasis added].

Project-based assistance supports the industry, not the individual. And, especially when it comes to housing programs for persons with disabilities, there is a very powerful and greedy industry that is demanding to be fed HUD dollars. This industry does not care about issues of choice, control and homeownership that benefit individuals and the community. This industry of special interest nonprofits that have developed wretched dungeons. Why treat these providers of so-called housing any differently than the public housing authorities? Instead of providing project-based assistance that goes directly to the industry, provide the assistance to eligible individuals and let them decide where they want to live. Let the market forces take come to bear. If these pits called group homes and supportive housing are really what people want, people will choose and support them. If not, just like the public housing authorities, the providers of group homes and the like have the option of developing the type of housing that people really want. The question remains: why doesn't HUD treat these non-profits like other providers of housing for individuals and families with low-income?

The most obvious reason is: something needed to be done to appease the politically powerful and money-hungry non-profit industry. HUD has been laying vast amounts of money at the doorsteps of, for example, the AIDS, ARC, and mental disability housing/service industries for years. This industry was not happy about such radical heresy as "tenant choice", "tenant control" and "homeownership" - because it meant that dollars that would have gone to feed the dungeon industry would instead go to free the individuals. The industry flexed its political muscles, and reminded HUD of the facts of life that the industry had been brainwashing HUD with for years: when it comes to people with disabilities, basic rights like choice, control and homeownership are really not within their abilities - people with disabilities are subhuman and must be warehoused, watched over, taught appropriate behavior, and serviced in the most economical way by those who know how to do these things the best: the dungeon industry.

HUD, in a clear indication of the lack of its conviction to put people before projects, not only exempted these non-profits from the anti-project sentiment, HUD included a requirement that communities set-aside 30% of funds awarded under the affordable housing fund for the dungeon industry¹⁶. In essence, it was decided that persons with disabilities are the sacrifice to be thrown to feed the wolves. Since requirement to give percentage to "traditional" providers of institutions - persons with disabilities be denied homeownership, will be concentrated and segregated and denied choice.

ELIGIBLE USES OF [AFFORDABLE HOUSING FUND]...to provide supportive services and service coordinators in connection with the acquisition, reconstruction, rehabilitation or construction of supportive housing for the frail

¹⁴ HUD Reinvention: From Blueprint to Action, page 6.

¹⁵ HUD Reinvention: From Blueprint to Action, page 27

¹⁶ ACPA, Section 131 (a), page 82.

elderly, at-risk elderly, and persons with disabilities... [Section 115 (a)(1)(F), page 42]

"Supportive housing" is a euphemism for a treatment ghetto and housing blackmail. A "service coordinator" is a euphemism for a management spy and the hatchetperson who, through deceptive "helpfulness" arranges for what are actually illegal evictions of tenants who are viewed as "problems" by the management.

Federal housing funds should not be used for supportive services nor for service coordinators because:

1. People with disabilities do not need and do not want services or service coordinators that are controlled by the provider of their housing.

People with disabilities want any services they may need "linked" to them, not their housing, so that if they move the services go with them; and people with disabilities do not want an employee of the housing provider (e.g. a "service coordinator") to have information about the nature or severity of their disabilities or any other confidential information that has absolutely nothing to do with terms of tenancy.

This should be reason enough to eliminate "supportive housing" and "service coordinators. Unfortunately, however, HUD doesn't care what persons with disabilities need or want - HUD funds supportive housing and service providers because that is what the housing and service industries want.

2. There is a desperate need for housing among persons with disabilities. Precious federal housing dollars are now being spent on discriminatory and unwanted services when every penny of those dollars could and should be spent on housing.

3. Because of outright bias, disability-bigotry - equivalent to blatant racism - toward persons with disabilities, HUD, housers and service providers have concocted an image of persons with disabilities as tenants who, without "services" and supervision, are a danger to other and themselves. It is to the service providers' benefit to perpetuate this myth because it keeps funds flowing their way to provide "necessary supports". It is to the housers' benefit to fuel this lie because it allows them to argue for diagnosis-specific housing to steer "subpopulations" toward, and it is to the housers' benefit to sustain the "dangerous" and "different" image of persons with disabilities because it keeps HUD funds flowing their way for "service coordinators" who are specialists who know how to handle these special problems (i.e. to do managements' dirty work of getting rid of "trouble makers" who can't be evicted outright because they have not violated the lease.) And, finally, it is to HUD's advantage to defend this blatantly discriminatory image because that makes the housing and service industries happy (for reasons noted) - which is HUD's singular goal.

4. When "supportive services" are incorporated into a housing project, a person's diagnosis - not housing need - ends up controlling access to the housing. The argument is made by housers, service providers, and HUD that, since services can and should be tailored for a certain population based on diagnosis, only those

applicants for housing who have the "correct" diagnosis are eligible for the housing. This amounts to segregating on the basis of diagnosis, and denying housing to applicants because of their disability, establishing special terms and conditions because of disability, and making prohibited inquiries about the nature and severity of disability - all (and more) of which are violations of our civil rights.

5. When "supportive services" are incorporated into a housing project, service need and use - not housing need - end up controlling access to the housing. The argument is made by housers, service providers, and HUD that, since there are "specialized" services now associated with the housing, only persons who need such services and will use such services are eligible for the housing - because allowing just anyone in who didn't need or refused to use the services would be "wasting" the resources. Consequently, individuals who are fully eligible and would otherwise receive housing assistance are, instead, denied housing for reasons related to non-housing services. Tenants and tenant-eligible households without disabilities are not denied housing for reasons related to non-housing service issues - so neither should persons with disabilities. Eligibility criteria related to services are special terms and conditions that are imposed because of the fact that the applicants have disabilities - which is a violation of civil rights laws.

For purposes of this part, the term "affordable housing" includes permanent housing for disabled homeless persons, transitional housing, single room occupancy housing, supportive housing for the elderly, supportive housing for persons with disabilities (including persons with a particular type of disability)... [SEC. 115 (a), page 42, lines 21 - 26]

1. Why does HUD refer to "permanent housing for disabled homeless persons" and does not refer to the permanent housing that is received by homeless persons without disabilities as "permanent housing for nondisabled homeless persons"? What is the difference? This is just one more example of HUD's disability-bigotry: an image of persons with disabilities as "different", not "normal". Of course the fact that the "permanent" nature of the housing is noted reveals the fact this type of housing is to be distinguished from the temporary, "transitional", discriminatory type of housing HUD usually provides to the "problem" homeless persons - i.e. those with disabilities. To have some "permanent" housing for persons without disabilities, and different permanent housing for persons with disabilities is discriminatory. There should not be a distinction, and it should be available on an equal basis to all - regardless of disability status.

2. "Transitional housing", "single room occupancy housing", and "supportive housing for the elderly or persons with disabilities" is NOT housing - these are second-class, substandard, inhumane institutional treatment warehouses. These "models" are not used for persons without disabilities because they are such horrid living conditions and few, if anyone, would choose to live in one unless their only other option was worse - like an psychiatric institution or a nursing home. And since persons without disabilities have much better options, they never choose to live in such dungeons. People with disabilities, however, are told that their only options are the treatment warehouses or back into the other institutions. Persons with disabilities deserve the same housing options as persons without disabilities and HUD must stop allowing second-class, substandard reformatory to be called "housing" for the purposes of warehousing persons with disabilities - when those same substandard conditions are not

considered housing for persons without disabilities.

PROGRAM TARGETING – ... each participating jurisdiction shall invest funds made available under this part within each fiscal year so that – with respect to rental assistance and rental units – not less than 90% of ... the families receiving such rental assistance are families whose incomes do not exceed 60 percent of the median family income... with respect to homeownership assistance 100% of such funds are invested with respect to dwelling units that are occupied by households that qualify as low-income families... [Sec. 117 (a)(1)(A) and (a)(2)]

1. These percentages are too high. Program targets, with respect to rental assistance, should be: not less than 50% of the families receiving assistance are families whose incomes do not exceed 30% of MFI, and not less than 30% should be families whose incomes are between 30% and 60% of MFI.

2. Program targets, with respect to homeownership, should be: not less than 30% of the families receiving assistance are families whose incomes do not exceed 30% of MFI, and not less than 50% should be families whose incomes are between 30% and 60% of MFI. There should be an added requirement that at least 10% of the funds should be set-aside as a base for removing barriers (both programmatic and structural) that are preventing persons with disabilities from having equal access to and enjoyment of homeownership programs.

QUALIFICATION AS AFFORDABLE HOUSING. RENTAL HOUSING. QUALIFICATION –Housing that is for rental shall qualify as affordable housing under this subtitle only if the housing ... is not refused for leasing to a holder of a voucher or certificate of eligibility under section 8 of the United States Housing Act of 1937 ... because of the status of the prospective tenant as a holder of such voucher or certificate of eligibility. [Sec. 118 (a)(1)(D), page 50]

Although this may help, some, with the problem of housers refusing to accept certificates or vouchers, it does not go nearly far enough. A federal law requiring all housers to treat certificates and vouchers as income and to prohibit any discrimination on the basis of status as a holder of such certificate/voucher is necessary.

FORMULA ALLOCATION. IN GENERAL. BASIC FORMULA. The Secretary shall establish an allocation formula that reflects each jurisdiction for an increased supply of affordable housing for very low-income and low-income families of different size, as identified by objective measures of inadequate housing supply, substandard housing, the number of low-income families in housing likely to be in need of rehabilitation, the costs of producing housing, poverty, and the relative fiscal incapacity of the jurisdiction to carry out

housing activities.... [Sec 120 (b)(1)(A), page 60]

1. What "objective measures" will be used to obtain information about all of the different areas mentioned?
2. What is included in "substandard"? Should include: group homes; supportive housing; transitional housing; congregate; structurally inaccessible; etc.
3. "Poverty" should specifically include a measure of number of households at 30% or below of FMI.

TENANT SELECTION. The owner of rental housing assisted under this subtitle shall adopt written tenant selection policies and criteria that ... provide for .. the selection of tenants from a written waiting list in the chronological order of their application, insofar as is practicable... [Sec. 128 (d)(3), page 76]

To select tenants on the basis of chronological order does not necessarily allow for the neediest to be assisted first. The federal preferences that are now in place (being homeless - which includes being in a nursing home or other substandard environment, paying more than 50% of income for rent, or being involuntarily displaced) should be retained and an "enhancer" of "disability" should be available for anyone who qualifies. Tenants should be selected on the basis of the preferences and, if applicable, the disability "enhancer", then in chronological order.

SET-ASIDE FOR COMMUNITY HOUSING DEVELOPMENT ORGANIZATIONS, COMMUNITY-BASED PRIVATE NONPROFIT ORGANIZATIONS, AND OTHER NONPROFIT ORGANIZATIONS. (a) IN GENERAL The jurisdiction shall reserve not less than 30% of funds ... for investments in eligible activities to be carried out by nonprofit organizations. (b) Not less than half of the amount specified in subsection (a) shall be made available to nonprofit organizations that are community housing development organizations (CHDOs) or community-based private nonprofit organizations. [Sec. 131 (a) and (b), page 82]

This should read that: no more than 20% of funds shall be reserved for investment in eligible activities to be carried out by community housing development organizations and community-based private nonprofit organizations. "Other nonprofit organizations" should not be included in the reserved amount - they should have to compete for it like everyone else. All this section does is ensure that the coffers of the disability-bigoted will be kept full - even if a community doesn't want them.

TENANT PARTICIPATION PLAN. A community housing development organization (CHDO) or other community-based private nonprofit organization that receives assistance under this part shall provide a plan for and follow a program of tenant participation in management decisions and shall adhere to a fair lease and grievance procedure approved by the participating jurisdiction.

[Sec. 134 (a), page 92]

All private nonprofits that receive assistance should be held to these requirements - not just the community-based.

NONDISCRIMINATION. No person in the United States shall on the grounds of race, color, national origin, or sex be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity under this subtitle. Any prohibition against discrimination on the basis of age under the Age Discrimination Act of 1975 or with respect to an otherwise qualified person with disabilities as provided in section 504 of the Rehabilitation Act of 1973 shall also apply to any such program or activity.
[Sec 152, page 98]

This is outrageous and is a sickening example of HUD's hostile disability-bigotry. Not only does HUD seem to be oblivious to the fact that the Fair Housing Act also applies to all that HUD and other housers do, but HUD blatantly refused to include "disability" in the initial, blanket nondiscrimination sentence.

SUBTITLE C – AFFORDABLE HOUSING TRANSITION

FINDINGS ... the different needs within the homeless population argue for a continuum of a continuum of care system which encompasses the need for outreach and assessment, emergency assistance, transitional housing and services (where needed), and permanent housing or permanent supportive housing to help homeless persons become more self-sufficient... [Sec. 170 (a)(3), page 107]

1. "The different needs within the homeless population argue for a continuum of care system..." The only argument for a "continuum of care" is coming from the self-important, arrogant, medical-model, paternalistic, disability-bigoted minds of Community Planning and Development staff. People who are homeless do not need nor want to be "cared for". We do not need a "continuum of care", we need housing resources from HUD, period. Although some in CPD appear to think that they are god, it is neither required nor appropriate for HUD to be trying to save the world by "fixing" homeless people with HUD's version of "care". "Transitional housing", "services", and "permanent supportive housing" perpetuate and intensify the problems homeless individuals must contend with. These types of "programs" are based on the disability-bigoted premise that people with disabilities are homeless because they are irresponsible and so they need to get into "programs" that teach them "responsibility". In HUD's own words at the end of the section: "to help homeless persons become more self-sufficient" - as if homeless individuals who are managing to survive in the harshest of environments, are managing to find food, find warmth, avoid danger, find some shelter from the elements aren't the EPITOME of "self-sufficiency". It would be interesting to see how self-sufficient some of those ivory tower social-worker types in CPD would be if they were on the streets for a week.
2. "...permanent housing or permanent supportive housing..." That HUD uses both terms is HUD's own admission that there is a difference between the two. The difference, service-related requirements, is discriminatory and illegal.

ESTABLISHMENT OF THE HOMELESS ASSISTANCE FUND. [SEC. 171, page 109 and 110]

This entire section is filled with references to "continuum of care", "appropriate services", "transitional housing", "supportive housing", "subpopulations ... persons with mental illness, persons with chronic problems with alcohol, drugs...."

Rather than go through every section, suffice it to say that the entire approach is dripping with paternalism, elitism, the medical model, and constitutes violations of the civil rights of persons with disabilities.

SUBTITLE D – HOUSING CERTIFICATE FUND

DEFINITIONS ... The term "adjusted income" means the income which remains after excluding: ... (C) the amount by which the aggregate of the following expenses of the household exceeds 3 percent of annual household income: (i) medical expenses for any elderly or disabled household; and (ii) reasonable attendant care and auxiliary apparatus expenses for each family member who is a person with a disability, to the extent necessary to enable any member of such household (including such member who is a person with disabilities) to be employed; (D) child care expenses to the extent necessary to enable another member of the household to be employed or to further his or her education... [Sec. 183 (1)(C) and (D), page 170]

1. It is not fair that in order for disability-related expenses to be excluded from consideration of "adjusted-income", the expenses have to exceed 3 percent of annual household income, while child care expenses are not held to the same standard. The "3%" requirement should be deleted.
2. What is meant by "reasonable" attendant care and auxiliary apparatus expenses? This should be determined by the individual and her/his medical professionals.
3. It is not fair that child care expenses are deductible if they are necessary to enable another member of the household to be employed or to further her/his education. People with disabilities should have the same "education" exemption.

HOUSEHOLD CHOICE... ASSISTANCE FOR HOUSEHOLDS IN PROJECTS FOR THE ELDERLY AND PERSONS WITH DISABILITIES CONVERTED TO THE HOUSING CERTIFICATE FUND ... In the case of eligible households residing in housing that has been converted to assistance under this subtitle ... and that is housing predominantly for elderly or disabled households (or both), if a majority of the eligible households elect to remain, the agency, in order to assure the continued viability of the housing, shall establish a waiting list for determining when an eligible household may move with a housing certificate issued under this subtitle. In establishing the waiting list, the agency may provide a priority for non-elderly, disabled households who desire to move. However, if a majority of the eligible households desire to move, the agency need not establish a waiting list and shall permit each eligible household to do so. [Sec 185 (c)(1)]

It is absolutely unfair that tenants who live in housing that is predominately for persons with disabilities or for a mix with elderly persons have to win a majority VOTE in order to get certificates when people who do not have disabilities will automatically get certificates no matter what the majority in their building want. Although it is patently wrong to impose this requirement on anyone, this will be especially difficult for younger persons with disabilities who are in the minority in a building with elderly tenants who want to stay in the project.

These projects should be treated like all others and everyone should be offered a certificate and those who want to use their certificates to stay where they are may do so, and those who want to leave may do so.

PREFERENCES. – A public housing agency may establish one or both of the following preferences, but no others – (1) for up to 50% of the total number of eligible households admitted by the agency in any fiscal year of the agency, a preference for eligible households with children that contain at least one adult who is working or who demonstrates, through such evidence as successful participation in a job training or educational program, that the person is preparing for work; and (2) for up to 50% of the total number of eligible households admitted by the agency in any fiscal year of the agency, a preference for eligible households with urgent needs, consistent with needs identified in the applicable consolidated plan, if any. However, for at least 10% of the eligible households admitted in each fiscal year of the agency, the agency shall select eligible households in the order that they have applied for assistance or by some impartial random method. [Sec. 187 (a)(1) and (2), page 179]

1. These should not be the only preferences permitted. The current federal preferences plus disability "enhancer" should be the primary preferences (possibly encompassing the "urgent need" category) and the "working households with children" should be the last preference.