CURRENT ISSUES IN COMMUNITY RESIDENTIAL SERVICES

FOR PEOPLE WITH DEVELOPMENTAL DISABILITIES

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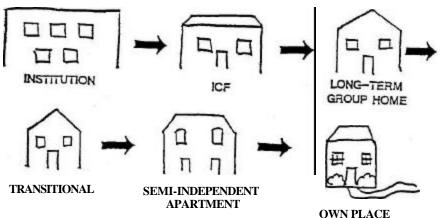
February 25, 1988

I. CURRENT STATE OF HOUSING FOR PEOPLE WITH DEVELOPMENTAL DISABILITIES

A. Philosophy:

Perhaps the most profound change that is occurring in our field is a re-thinking of the notion of a continuum of services as being the most appropriate and best way to meet a person's needs. As shown below, for a long time in our field ft was thought that it was best for people to learn skills and then once those skills were attained, to move to a different environment. Therefore, an individual would enter the system into a building where they would live with people, in most cases, in a homogeneous environment. Skills would be taught in this environment that supposedly were to prepare someone for the next "step" toward independence. Then, the few, the proud and the brave made it through the system and on to the final and ultimate goal of independence.

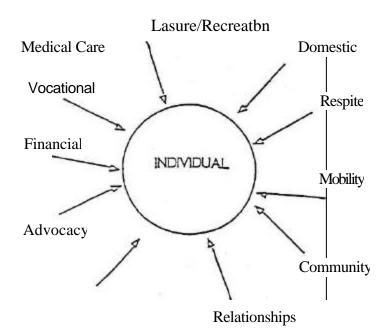
THE "CONTINUUM"



In recent years, it has been found that much of the thoughts upon which the continuum have been based are a myth. In addition, it puts people with developmental disabilities into a caste system where we have the "watchers" and the "doers." The "doers" are the people that make it through the system and have the skills and competencies, in total, necessary in most cases, to move on to the next step. The "watchers" are the people who get to watch the "doers" move through the system. Particularly in the case of people who are non-verbal, have behavior problems, or are severely or profoundly retarded, it is almost impossible to move through the system. As a result, these people become "stuck" or need to "get ready" to move to the next level of independence. For many, it is an infinite delay.

In recent years, there has been a body of thinking that has said perhaps what we need to do is build an array of services for people. In this approach, we begin by focusing on the individual and his/her needs. After completing a functional assessment of strengths and needs, personal preferences and a community supportive environment needed, then a home is provided for the individual in the community. This may range from adult family care to a small group home to an apartment program. The key here is that we are looking for a home. In an array of services, the services are brought to the individual in his/her home or in the surrounding community. If and when it turns out that a less intensive staff-supported environment is needed, then it is the staff, rather than the individual, that moves.

ARRAY OF SERVICES



New Concepts has been advocating this approach for some time and is in the process of down-sizing and restructuring our service system. In the past four years, we have closed eight group homes and have expanded our array of services into a number of apartments and other small, specialized homes in the community. This fundamental belief on the part of New Concepts and others that values must preced decisions about funding and service models, are key to any subsequent discussion with regard to housing options.

B. Housing Issues/Options:

1. Use of Apartments versus Group Homes as Housing Option:

In the array of services, the use of apartments as opposed to group homes is a growing model being used nationally as a service option. It is, in most cases, a far preferable option for several reasons:

- a. the ready availability of apartments;
- b. by-passing local zoning issues;
- c. service dollars go mostly toward individual needs rather than building maintenance;
- d. flexibility;
- e. possibility of Section 8 or other rental subsidies; and
- f. ability to expand or contract number of apartments without having to think about restructuring entire services.

2. Decline in Use of HUD 202 or "Specialized Use Facility":

In addition to the expansion of the apartment program, more and more providers are finding that while somewhat financially attractive, from a programmatic and integration standpoint, HUD 202 and other federal programs are no longer desirable funding options. There are many reasons for this, but a few include:

- a. tie-in to long-term financing required 30-40 year commitment to a building;
- b. significant regulatory and planning difficulties and long lead time required to make projects come on line;
- c. very difficult to fund small, integrated setting because of cost-effectiveness and regulatory issues; and
- d. requires ongoing paperwork for recertification of tenants and HUD reports.

While none of these in and of themselves are insurmountable obstacles, more and more providers are questioning whether or not, given available housing stock and other financing options, it makes sense to embrace this federal funding as a means to provide additional housing in the community for people with disabilities.

3. Consumer-Owned Housing/Co-Ops, etc.:

A growing concept involves making it possible for consumers to own their own homes, apartments, coops, etc. This can be done in a variety of ways which include:

- a. consumer owning the house and sharing it with several other roommates and leasing the house back to the corporation that provides services;
- b. the consumer buying into a co-op or condominium project where the consumer owns his/her apartment or share of the building; and
- c. the consumer living in a concept of shared living where the consumer may live in with other non-handicapped, non-paid roommates.

In any or all of these options, the focus is on the consumer moving from rentor or receiver of services toward property owner and building assets. There have been several approaches which have been very innovative in this regard, which has included a local county board getting a bank to accept the county's contract as collateral for a loan and the consumer, through their monthly SSI and earnings, qualifying for the ongoing payment of the mortgage.

The additional advantage of this approach is that according to SSI rules, an individual may own a home and not be disqualified from SSI under the cash asset limitations (in 1988 - \$1,900). In this particular case, it makes it possible for parents to look at -rather than leaving their son or daughter money - the possibility of leaving them their home or transferring title of the home to the individual themselves, which does not disqualify them from Medicaid.

There are several issues that need to be considered in this regard, particularly when involved in family situations. The individual independence of the individual in making decisions, who will be the roommates, if any, and how leasing arrangements are worked with the agency that provides the supportive services all need to be considered. Nevertheless, this is an exciting and innovative concept that needs further exploration in the housing field.

C. Low Income Housing Credit:

In recent years, the federal government has looked at ways to cut back, or in some cases eliminate, housing subsidies and other funding sources for people with disabilities. As part of the Tax Reform Act of 1986 the federal government did, however, put in place for a three year period, a proposal known as the Low Income Housing Credit LIHC. This credit provides a dollar-for-dollar reduction in federal taxes for individuals, partnerships and corporations that lease property to low income individuals. Certainly a majority of people with disabilities would fall into this category.

While there is currently debate as to the applicability and eligibility of this credit for people with disabilities, many strong advocates with a history of involvement in federal programs believe that this program is certainly available to people with disabilities. The advantage of the use of a low income housing credit is multi-faceted:

- a. It allows a credit for either existing or new construction.
- b. It makes it possible for investors to develop small, integrated housing and still receive a rate of return when combined with rent and the tax credit that fosters housing development.
- c. Many providers have been able to lower rents over what they would normally be because of the tax credit to the investor being part of his/her return on investment.
- d. It does not require additional federal subsidies or specialized housing to create expanded community integration opportunities.

1988 will be a telling year for the decision with regard to the Low Income Housing Credit applicability to people with, disabilities. It is important that advocates follow-up on this important issue to ensure that people with disabilities have equal access to this tax credit.

II. ADDITIONAL IDEAS TO EXPAND HOUSING A.

State Section 8 Program:

I begin my statements with the bias that there is currently in existence throughout this country, enough housing to serve the needs of people with disabilities without having to build specialized programs. The one exception I would make to this belief involves houses for people with physical

disabilities, which are in very short supply. Except for this case, I do not believe it is necessary for us to be creating new housing stock and specialized facilities that drive up costs and in many ways, deter community integration.

One of-the difficulties with the use of existing housing stock is affordability. In many parts of this country, even apartments are beyond the scope and reach of many people with disabilities because of their monthly cost. In addition, Federal Section 8 certificates are in short supply and people with disabilities find themselves competing with folks who are elderly all the time.

One idea which I have had for some time is the idea of the creation of the equivalent of a state Section 8 program. Rather than pour additional dollars into capital investment on an ongoing basis, if a state could even set aside a pilot program of providing a limited number of people, say \$200 per month in subsidies, it would be possible to have people with disabilities, in many cases, live in nicer apartments in close proximity to shopping, work and other amenities that we all desire and strive for. At the equivalent of \$2,400 per year, a state could set aside "x" amount of dollars per person that they want to use for this type of approach. This would then make it possible to expand the number of people that can live in apartments and also live in nice apartments.

B. Providing Down Payments for Consumer-Owned Housing:

There have been a few attempts at the state assisting people with disabilities by providing down payments for consumer-owned housing. The state would essentially | provide a grant to the individuals to be able to provide the down payment, which would be repaid at the time the house is re-sold. This makes it possible for consumers to own their own homes or condominiums, etc., and at the same time, provide somewhat of a revolving pool that can be utilized to expand housing further at the time at which such homes are ever sold.

III. SUMMARY

The future in meeting the housing needs of people with disabilities will move away from buildings and more toward services. The sooner providers, advocates, state policy makers and planners realize that we need to focus on people rather than buildings, the sooner we will realize that the only limitations are our own creativity and commitment to making a variety of housing programs work.