

A Study of Tenants in State-Funded Elderly/Disabled Housing:

Final Report Including Public Comments



Submitted to: The Housing Committee of the Connecticut Legislature

Prepared By: Connecticut Department of Housing and

The Connecticut Fair Housing Center

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Introduction

On July 10, 2017, the Connecticut Legislature enacted Special Act 17-19 which required the Connecticut Department of Housing (“DOH”) to conduct a study of three state-funded housing complexes that provide housing to elderly tenants and younger tenants with disabilities (“mixed population housing”). Discussions with Representative Larry Butler, the author of legislation and the Chair of the Legislature’s Housing Committee, revealed that the purpose of the study was to understand areas of conflict between tenants who are elderly and tenants who are young and disabled, best practices for addressing areas of conflict, and the resources needed to ensure that all tenants can use and enjoy state-funded elderly/disabled housing. The legislation did not specify which state-funded projects should be studied. That designation was left to the Commissioner of the Department of Housing in consultation with Chairs of the Legislature’s Housing Committee.

Methodology

Partners in Completing the Study

Connecticut Department of Housing (“DOH”)-- DOH works in concert with municipal leaders, public agencies, community groups, local housing authorities, and other housing developers in the planning and development of affordable homeownership and rental housing units, the preservation of existing multi-family housing developments, community revitalization and financial and other support for our most vulnerable residents through our funding and technical support programs. Special Act 17-19 requires DOH to undertake this study and to report on its findings to the Housing Committee.

The Connecticut Fair Housing Center (“the Center”)—DOH contracted with the Center to work with its staff to complete the study. The Center’s Executive Director Erin Kemple worked with DOH staff to gather the information required by S.A. 17-19, analyze it, and create a report which summarizes the information required. She also worked with all of the partners who are part of this effort to ensure that information was gathered, and the study was presented to stakeholders and legislators.

The Connecticut Housing Finance Authority (“CHFA”)—As the manager of the state-funded housing portfolio, CHFA has access to some of the information required by the study. CHFA has agreed to provide the tenant census information, tenant demographic data, and financial data required by S.A. 17-19 Section 1(b)(subsections 1 – 3).

Department of Social Services (“DSS”)—One mission of the Department of Social Services is to empower older adults to live full independent lives, and to provide leadership on aging issues on behalf of older adults, families, caregivers, and advocates. This agency has been concerned about conflicts between people who are elderly and people who are younger and disabled for some time. In addition, the Department of Social Services may provide some support services for elders living at the complexes being studied.

Agencies mandated for inclusion by S.A. 17-19:

Department of Mental Health and Addiction Services (“DMHAS:)—DMHAS promotes the overall health and wellness of persons with behavioral health needs through an integrated network of holistic, comprehensive, effective, and efficient services and supports that foster dignity, respect, and self-sufficiency. As a result, DMHAS provides services to many of the people living in the properties participating in this study, both people who are elderly with mental disabilities and those that are younger with mental disabilities.

Department of Developmental Services (“DDS”)—DDS is responsible for the planning, development and administration of complete, comprehensive and integrated statewide services for persons with intellectual disabilities and persons medically diagnosed as having Prader-Willi Syndrome. They are included in this study because some of the people who live in elderly/disabled housing receive services from DDS. In addition, DDS may investigate allegations of abuse or neglect at the properties being studied.

Disability Rights Connecticut (“DRCT”)—DRCT is a nonprofit organization established to be the successor to Connecticut’s Office of Protection and Advocacy for Persons with Disabilities. DRCT’s mission is to advocate, educate, investigate and pursue legal, administrative, and other appropriate remedies to advance and protect the civil rights of individuals with disabilities to participate equally and fully in all facets of community life in Connecticut.

Mixed Population Housing Chosen for Review

When determining which mixed population housing to choose for the study, the Executive Director of the Center met with one of the Chairs of the Housing Committee, Representative Larry Butler, who was the author of this legislation. Representative Butler expressed a desire to include elderly/disabled buildings that had between 75 and 100 housing units as well as a desire to have the complexes be located in different parts of the state. Given those parameters, the Center reviewed the list of all elderly/disabled state-funded housing. The state provides funding for 6,451 elderly/disabled housing units in 182 buildings. The largest number of units in one building is 130 in the George Washington Carver building in New London and the smallest is the Wright’s Village building with 10 units in Mansfield. The average building size is 34 units.

In addition to reviewing the data on the number of elderly/disabled housing units, Ms. Kemple met with staff at CHFA to determine what information they compiled that would assist with this analysis. During that meeting, Ms. Kemple learned that each housing authority with state-funded elderly/disabled housing has a unified budget for all of its elderly/disabled units. Therefore, it is not possible to determine the income and expenses for one building. As a result, the properties chosen for in-depth examination are all of those owned by a particular housing authority, not just one building.

Based on the information gathered, the Commissioner of DOH recommended examining the elderly/disabled housing owned and managed by the following:

Brookfield Housing Authority (BHA) — The Town of Brookfield is located in Fairfield County. The BHA owns and manages 35 units of state-funded housing in one building for people who are elderly and people who are young and disabled. This is the only housing owned and operated by the BHA. As a housing authority with 35 units of elderly/disabled housing, this housing provider has dealt with many of the issues which larger housing authorities have dealt with but on a smaller scale. In addition, this housing authority may not have the income and resources of other housing authorities which may be more typical of the housing authorities which manage elderly/disabled housing. The BHA is the only housing authority in this study without a resident service coordinator.

Manchester Housing Authority (MHA)—The City of Manchester is located in Hartford County. The Manchester Housing Authority manages 80 units state supported elderly/disabled housing distributed throughout 15 buildings. The MHA manages a total of 397 federal and state supported housing units of which 91% are designated as mixed population housing.

Wallingford Housing Authority (WHA)— Wallingford is located in New Haven County. The WHA owns and manages four state portfolio communities of elderly/disabled housing which total 155 units of housing. The largest community has 50 units while the smallest has 30 units. The WHA manages a total of 317 state portfolio housing units of which 58% are for people who are elderly or disabled.

In total, this report includes 4.43% of all of the elderly/disabled state affordable¹ housing in the state.

Information to be Gathered

S.A. 17-19 mandated that the following information for the mixed population housing studied be included in the report:

- A census of elder occupants to be provided by CHFA
- A census of young-disabled occupants to be provided by CHFA
- The amount of rent charged to elderly tenants to be provided by CHFA
- The amount of rent to be charged to young/disabled tenants to be provided by CHFA
- Operating costs for the mixed population housing to be provided by CHFA
- The percent of operating costs covered by tenant rents to be calculated from data provided by CHFA
- Use of municipal services by elders to be provided by the municipalities in which the housing is located
- Use of municipal services by young/disabled tenants to be provided by the municipalities in which the housing is located

¹ As noted in the section below entitled “Finances” calculation of the rent paid by occupants of mixed population housing is complex and varies by income, unit size, and other factors. The States pays a subsidy for some units in mixed population housing but not for all units depending on the income of the occupant. For ease of reference, all of the housing examined here will be referred to as “affordable units.”

- The support services available at each housing project to be provided by the Resident Service Coordinator (“RSC”) and/or the housing authority’s executive director;
- Gaps in support services as identified by the RSC or the housing authority’s executive director;
- Recommendations for additional support services as identified by the RSC or the housing authority’s executive director;
- An estimate of appropriations needed for support services to be calculated based on recommendations by the RSC and the housing authority’s executive director;
- The number of evictions initiated by landlord in last five years to be found in the Judicial Department’s eviction records;
- The number of evictions initiated against elderly tenants in last five years provided by the housing authority;
- The number of evictions initiated against young/disabled tenants in last five years provided by the housing authority;
- The number of evictions initiated against young/disabled as a result of incident with elderly in last five years provided by the housing authority;
- The number of evictions initiated against elderly as a result of incident with young/disabled in last five years provided by the housing authority; and
- The number of summary process judgments issued against elderly tenants or young/disabled tenants in the last five years to be provided by the housing authority.

To gather the information required by S.A. 17-19, the Center did two things. First, it contacted CHFA, the agency which oversees all of the pre-2003 state public and assisted housing. CHFA was able to provide in-depth information on the following:

- A census of elder occupants to be provided by CHFA
- A census of young-disabled occupants to be provided by CHFA
- The amount of rent charged to elderly tenants to be provided by CHFA
- The amount of rent to be charged to young/disabled tenants to be provided by CHFA
- Operating costs for the housing projects to be provided by CHFA
- The percent of operating costs covered by tenant rents to be calculated from data provided by CHFA

In addition, the Center sent each housing authority the information that was received from CHFA along with a request for additional information. In particular, since CHFA’s information was from 2017, the housing authorities were asked to correct and update the information provided by CHFA. In addition, each housing authority was asked to provide the following information:

- Use of municipal services by elders to be provided by the municipalities in which the housing is located
- Use of municipal services by young/disabled tenants to be provided by the municipalities in which the housing is located

- The number of evictions initiated by landlord in last five years to be found in the Judicial Department's eviction records;
- The number of evictions initiated against elderly tenants in last five years provided by the housing authority;
- The number of evictions initiated against young/disabled tenants in last five years provided by the housing authority;
- The number of evictions initiated against young/disabled as a result of an incident with elderly in last five years provided by the housing authority;
- The number of evictions initiated against elderly as a result of an incident with young/disabled in last five years provided by the housing authority; and
- The number of summary process judgments issued against elderly tenants or young/disabled tenants in the last five years to be provided by the housing authority.

The spreadsheets and instructions sent to each housing authority is attached as Appendix A. The response of each housing authority is attached as Appendix B.

The Center also attended a meeting of resident service coordinators on March 21, 2018. There were more than 25 resident service coordinators in attendance the majority of whom worked at mixed population housing sites. The resident service coordinators were asked to comment on the following issues:

- The support services available at each housing project to be provided by the Resident Service Coordinator ("RSC") and/or the housing authority's executive director;
- Gaps in support services as identified by the RSC or the housing authority's executive director;
- Recommendations for additional support services as identified by the RSC or the housing authority's executive director;
- An estimate of appropriations needed for support services to be calculated based on recommendations by the RSC and the housing authority's executive director;

To enable the resident service coordinators to speak freely without fear of retaliation, the Center did not request their names or the name of the complexes at which they worked. Over the course of more than one and half hours, the resident service coordinators talked about what they did for tenants, both young and old, and what they saw as the challenges with regard to mixing both older people and people who are young. A summary of the discussion is included below.

Background and History

The history and background of the existence and ongoing creation of housing for people who are elderly or disabled, commonly referred to as "mixed population housing," is set out in the 2004 report put out by the Legislative Program Review and Investigations Committee, "Mixing Populations in State Elderly/Disabled Housing Projects" (hereinafter "2004 Housing

Populations Report”).² The full report is included here as Appendix C. According to that report, while people who are young and disabled have been eligible to reside in mixed population housing since the 1960s, the complexes were occupied chiefly by people who were elderly until the 1980s. At that time, elderly housing complexes began experiencing increased vacancies because of the growth of assisted living services which allowed people who were elderly to remain in their own homes leading to a rise of persistent vacancies in elderly housing with few or no people on the waiting lists. At the same time, deinstitutionalization of people with disabilities resulted in an increase in the number of people who were young and disabled who needed affordable housing.³ As a result of these dual forces and a decrease in the investment in new affordable housing units, federal and state housing providers began to increase the number of housing units in elderly developments available to people who were young and disabled.

Who Needs Affordable Mixed Population Housing Today?

However, the Housing Populations Report was published in 2004 and Connecticut’s population and housing needs have changed considerably since then. First, Connecticut’s population is getting older. In 2010, 14% of Connecticut’s population was 65 years or older. With a median age of 40.0 years, Connecticut is the 7th oldest state in the country. As can be seen in Figure 1 below, from 2010 to 2025, the state’s population age 65 and older is projected to grow by 54.5% resulting in 21% of Connecticut’s population who will be over 65 in 2025. As a result, there is currently a need for housing for people who are elderly, and this need will continue to grow at least until 2025.⁴

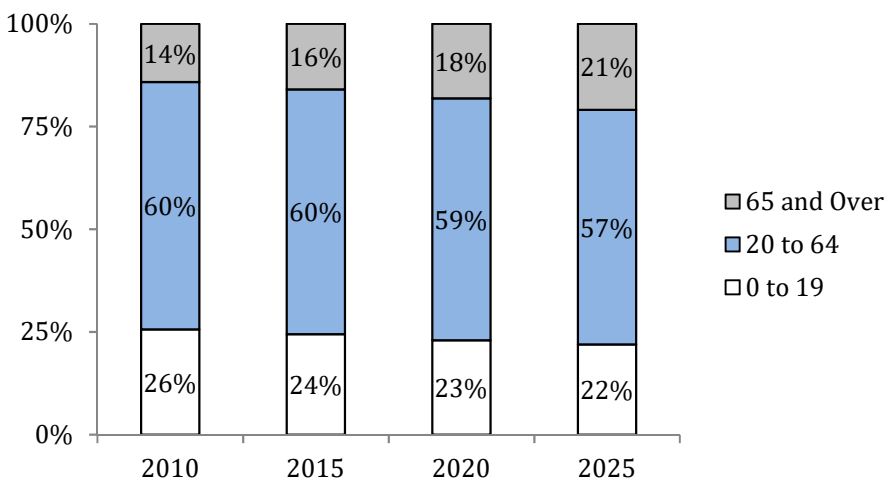


Figure 1: Connecticut population by age⁵

² https://www.cga.ct.gov/2004/pridata/Studies/pdf/Housing_Populations_Final_Report.pdf.

³ https://www.cga.ct.gov/2004/pridata/Studies/pdf/Housing_Populations_Final_Report.pdf at p. 4.

⁴ https://www.ct.gov/doh/lib/doh/analysis_of_impediments_2015.pdf at p. 43. Although this information is nearly a decade old, on-line research reveals that the age statistics cited here are accurate.

https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_17_1YR_S0101&prodType=table

⁵ https://www.ct.gov/doh/lib/doh/analysis_of_impediments_2015.pdf at p. 43ff.

Second, Connecticut’s population of people who are disabled also continues to grow. According to the 2017 American Community Survey of the U.S. Census Bureau, approximately 11.1% of Connecticut’s total population has a disability.⁶ In fact, between 2010 and 2018, Connecticut residents between the ages of 18 and 64 had a 3.17% growth in the number or people with a disability while people over 65 had a .25% growth in the number of people with a disability.

Age Group	Count		% Within Age Group	
	2010	2018	2010	2018
Age 0 to 17	28,732	29,814	3.50%	3.86%
Age 18 to 64	179,340	185,907	8.00%	11.17%
Age 65 and Over	159,485	168,804	31.40%	31.65%

Figure 2: Number of disabled residents by age⁷

Because the number of people who are disabled is growing, there is also a growing need for housing for people who are disabled.

Finally, not everyone who is elderly or disabled will qualify for mixed population affordable housing. Some people with disabilities and some people who are elderly are not income-eligible for such housing.⁸ Therefore, determining the need for mixed population housing depends not just on the number of people who are categorically eligible (people who are elderly or people who are young and disabled) but also on the number of people who are income eligible. As evidenced by Figure 3 below, people between the ages of 18 and 64 have four times the need for affordable housing when compared with people who are elderly.

Age Group	Number living below the poverty level	Percentage living below the poverty level
Age 0 to 17	92,583	2.66%
Age 18 to 64	200,502	5.76%
Age 65 and Over	41,043	1.18%

Figure 3: People living below the poverty level by age

Looking at the categorical qualifiers (people who are elderly or people who are young and disabled) and financial qualifiers (must have an annual income no more than 80% of the area median income) for mixed population housing, it is clear that people who are young and disabled have the greatest need for affordable housing. In fact, 11.7% of people between the ages of 18 and 64 who are disabled are living below the poverty level compared to only 4.4% of

⁶ https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_17_1YR_S1810&prodType=table

⁷ https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_5YR_B18101&prodType=table

⁸ See, 2004 Mixed Populations Report at 8 - 9.

people over the age of 65 who are disabled. People who are young and disabled have almost three times the need for affordable housing compared to people who are elderly and disabled.

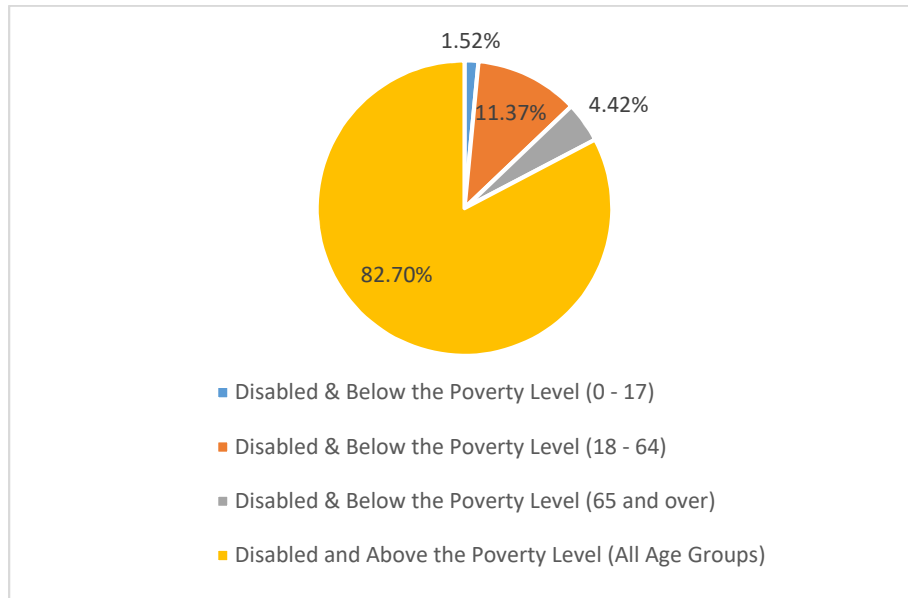


Figure 4: Age by disability by poverty level

Overview of Mixed Population Housing in Connecticut

The following is an overview of the state affordable mixed population housing portfolio. Since Connecticut also has federal affordable mixed population housing, this is not a complete picture of all of the mixed population housing in Connecticut. Over the years, many housing authorities have alleged that people who are young and disabled are overpopulating housing compared to people who are elderly. As evidenced below, this does not appear to be the case as demonstrated by Figure 7, below.

Number of Mixed Population Housing Units

Connecticut has 6,451 units of mixed population state-subsided housing spread out over 182 building and managed by 96 housing authorities.⁹ The largest number of units in one building is 130 in the George Washington Carver building in New London and the smallest is the Wright's Village building with 10 units in Mansfield. The average number of units managed is 78. As described above, the Center was asked to focus on housing managed by three housing authorities. Therefore, this section also includes information on each housing authority chosen for analysis.

⁹As noted above, the Center requested information from the three housing authorities studied. All of the information in this section which references the Brookfield Housing Authority, the Manchester Housing Authority and the Wallingford Housing Authority came from the housing authority itself. All of the information about the mixed population state housing portfolio was provided by CHFA. See Appendix D.

	# of Units Managed	# of Buildings Managed
Statewide	6,451	182
BHA	35	1
MHA	80	2
WHA	155	45

Figure 5: Mixed population housing census

All of the state mixed population units are either efficiencies or one bedroom, with the majority of units being efficiencies. As a result of the apartment configurations, most units are occupied by one or at most two people. According to data collected by CHFA, there are a total of 7,346 people living in mixed population state housing.

	% of Efficiency Units	% of 1 BR
Statewide	62.7%	37.1%
BHA	77.1%	22.9%
MHA	95.0%	5.0%
WHA	59%	41%

Figure 6: Unit configurations

Age

As can be seen from Figure 7 below, the majority of people living in mixed population units are elderly. One of the solutions recommended by the 2004 Mixed Populations Study was to limit the number of people who were young and disabled who could live in mixed population housing. In Massachusetts, up to 86.5% of mixed population housing is designated for people who are elderly and up to 13.5% are for people who are young and disabled.¹⁰ Figure 7 demonstrates that when looking at all mixed population housing, people who are elderly occupy 82% of the units while people who are young and disabled occupy 18% of the units. In fact, the median percentage of people who are young and disabled living in mixed population housing is 17%, while the median percentage of people who are elderly is 83%.

	% Elderly Tenants	% Young/Disabled Tenants	% Elderly on Waiting List	% Young/Disabled on Waiting List
Total Units	82.0%	18.0%	59.0%	41.0%
BHA	88.6%	11.4%	86.2%	13.8%
MHA	47.5%	52.5%	26.7%	35.8% ¹¹
WHA	64%	36%	35%	65%

Figure 7: Housing units and waiting lists by age

¹⁰ 2004 Mixed Populations Study at 81, 84ff.

¹¹ MHA reports that 37% of the people on their waiting list did not respond to a request for information or may not be eligible for the mixed population housing.

As noted above, the population of people who are young and disabled has more than three times the need for affordable housing as people who are elderly. However, this is not reflected in the waiting lists kept by most housing authorities. Figure 7 shows that there are more people who are elderly on the waiting lists for mixed population housing than people who are young and disabled.

Race/National Origin

S.A. 17-19 did not ask for information about the race or national origin of the people living in mixed population state housing. However, the Center wondered if one of the reasons for the problems reported by housing providers had to do with the race and national origin of the two populations. As Figure 8 below demonstrates, the majority of people living in the mixed population housing managed by the three housing authorities studied is occupied by people who are White regardless of whether they are young and disabled or elderly. However, the majority people of color in the mixed population complexes are young and disabled. There are 16 people of color who are young and disabled and 10 people of color who are elderly. CHFA did not have information about the race and national origin of the people living in all of the mixed population housing in Connecticut. Given the few people of color living in the mixed population housing studied, it is impossible to know if race or national origin play a role in the any perceived conflicts between the populations.

	MHA	WHA	BHA	Totals
Elderly White	31	86	31	148
Young disabled White	37	53	4	94
Elderly Black	0	0	0	0
Young disabled Black	1	3	0	4
Elderly Latino	2	6	0	8
Young disabled Latino	4	8	0	12
Elderly Asian	0	2	0	2
Young disabled Asian	0	0	0	0

Figure 8: Number of mixed population tenants by race and national origin

Finally, it is surprising that the people who are young and disabled living in mixed population housing are not more racially and ethnically mixed. As can be seen from Figure 9 below, the population of people over the age of 64 are 87% White but the majority of the population of people between the ages of 18 and 64 are people of color.¹² It is not clear why so few people of color live in mixed population housing. However, recent HUD guidance regarding the use of criminal records to screen tenants may help explain this. In April 2016, HUD noted that “[a]cross the United States, African Americans and Hispanics are arrested, convicted, and incarcerated at rates disproportionate to their share of the general population.”¹³ To ensure

¹² https://www.ct.gov/doh/lib/doh/analysis_of_impediments_2015.pdf at p. 43. Although this information is nearly a decade old, on-line research reveals that the age statistics cited here are accurate.

https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_17_1YR_S0101&prodType=table

¹³ https://www.hud.gov/sites/documents/HUD_OGCGUIDAPPFHASTANDCR.PDF

that people of color are not unnecessarily disqualified from public housing, HUD recommends a case-by-case analysis of any criminal record. If housing authorities are not using the case-by-case analysis to review criminal records as recommended by HUD, it is possible this tenant selection tool is disqualifying a disproportionate number of people of color.

Similarly, Matthew Desmond, in an article published three years before his seminal work *Evicted: Poverty and Profit in the American City*, stated: “In poor black neighborhoods, eviction is to women what incarceration is to men: a typical but severely consequential occurrence contributing to the reproduction of urban poverty. . . . These twinned processes, eviction and incarceration, work together—black men are *locked up* while black women are *locked out* . . .”¹⁴ Based upon the findings in his book and his work with eviction records across the country, Mr. Desmond has concluded that people of color are evicted at a disproportionate rate to their general share of the population. If housing authorities are disqualifying all tenants who have eviction records, it is possible this tenant selection tool is disqualifying a disproportionate number of people of color.

	Median Age in 2010	Percentage of Racial Group’s Population in 2010				Percentage of Age Group’s Population in 2010			
		Age 0 to 17	Age 18 to 24	Age 25 to 64	Age 65 and Over	Age 0 to 17	Age 18 to 24	Age 25 to 64	Age 65 and Over
Connecticut	40.0	22.9%	9.1%	53.8%	14.2%				
Non-Hispanic White	44.6	19.6%	8.1%	54.9%	17.4%	61.2%	62.9%	72.7%	87.5%
Non-Hispanic Black	33.3	26.6%	11.8%	52.8%	8.8%	10.9%	12.1%	9.2%	5.8%
Non-Hispanic Asian	32.7	25.1%	9.4%	59.6%	5.9%	4.1%	3.9%	4.2%	1.6%
Hispanic	27.4	33.4%	12.5%	49.5%	4.6%	19.6%	18.3%	12.3%	4.3%

Figure 9: Median Age by Race and Ethnicity¹⁵

Gender

Again, S.A. 17-19 did not ask for information about the gender of the people living in mixed population state housing. However, the Center wondered if one of the reasons for the problems reported by housing providers had to do with the genders of the two populations. As can be seen from Figure 9 below, the slight majority of people living in mixed population housing are women, 136 women v. 128 men, yet the number of young disabled men exceeds the number of young disabled women. The reason for this is unclear. In Connecticut, women head 78.5% of single-parent families with children.¹⁶ Given that the majority of units in mixed

¹⁴ Desmond, “Eviction and the Reproduction of Urban Poverty”, Harvard University, (2012); <https://scholar.harvard.edu/files/mdesmond/files/desmond.evictionpoverty.ajs2012.pdf>

¹⁵ https://www.ct.gov/doh/lib/doh/analysis_of_impediments_2015.pdf

¹⁶ 2015 Connecticut AI at 48.

population housing are studios or one-bedrooms, it is possible, that disabled women with children have households that are too big for mixed population housing.

	MHA	WHA	BHA	Totals
Elderly Male	21	37	7	65
Young disabled male	29	31	3	63
Elderly Female	16	56	24	96
Young disabled female	12	27	1	40

Figure 10: Type of tenant by gender

Finances

S.A. 17-19 did request information about the finances in mixed population state housing. The 2004 Housing Populations Report explains how rents are calculated in mixed population housing.¹⁷ As noted there, rents in the mixed population housing portfolio vary widely depending on several factors including the housing’s financial condition, the amount of funding received from the State and the types of utilities included in the monthly rental charge. The Report concludes that the policy of mixing age populations in housing has a financial impact because residents who are young and disabled tend to be very low income and will have a longer tenure in the housing due to their age.¹⁸

The financial income gathered in this study does not change the conclusion drawn by the 2004 Mixed Populations Report. Figures 12 and 13 reveal that tenants who are elderly pay more rent than tenants who are young and disabled. In addition, tenants who are elderly pay a higher percentage of the complex’s operating costs when compared with people who are young and disabled. This information makes sense given that, as explained above, more people who are young and disabled live below the poverty level compared to people who are elderly. To address this discrepancy, CHFA and DOH have recommended that housing authorities implement rent stratification. This is a strategy that allows PHAs to have multiple base rents for a unit type and will result in an increase in rental income. The negative consequences of rent stratification may be that the number of qualifying applicants who are young and disabled may fall because their income may be too low to qualify. Further discussion and research are needed to determine if rent stratification will actually result in a declining eligibility for tenants who are young and disabled.

¹⁷ 2004 Mixed Population Report at 52 - 54. See also, Regs. Conn. Agencies §8-119kkff.

¹⁸ Id. at 5.

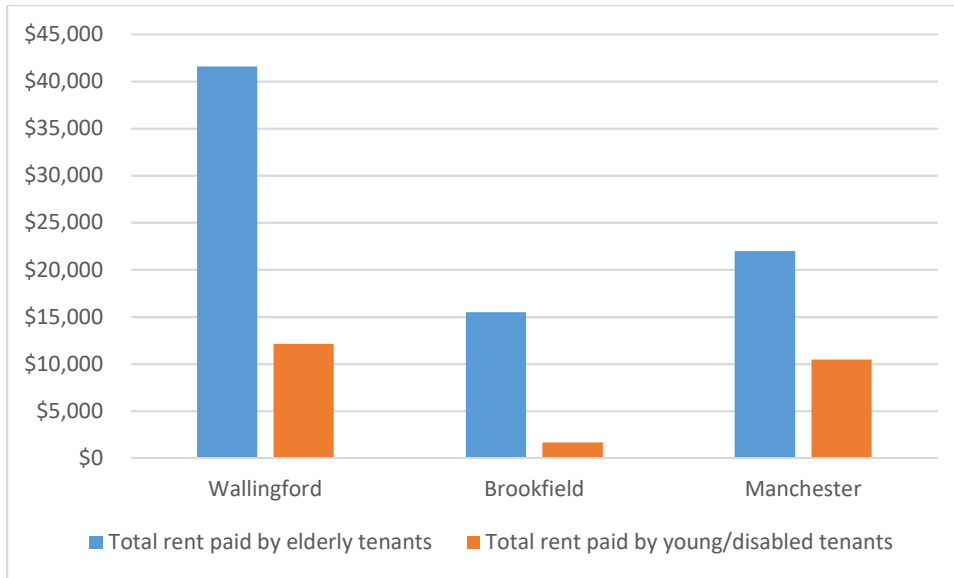


Figure 11: Rental income paid to housing authority by type of tenant

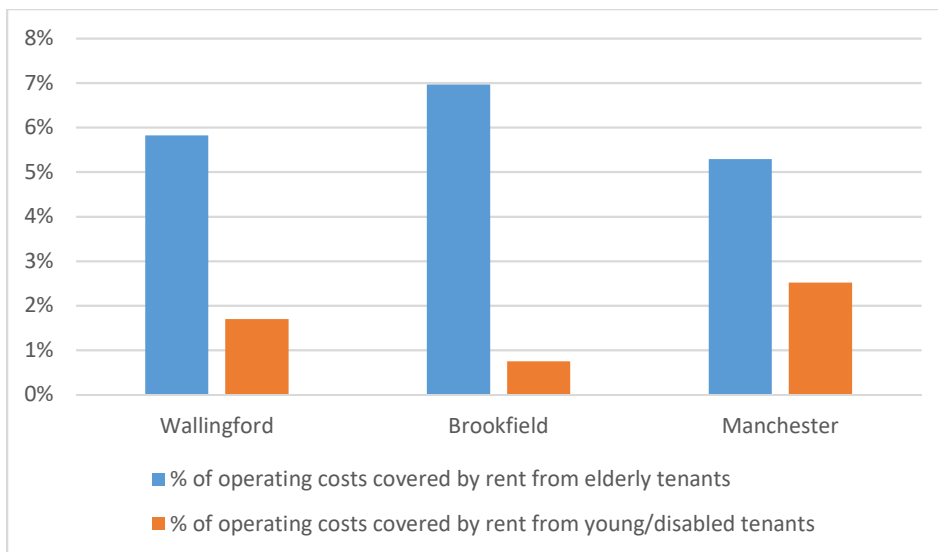


Figure 12: % of rent covered by tenant type

Tenant Behavior in Mixed Population Housing

While the statistics above may explain who needs and who lives in mixed population housing, this information does not address whether including people who are young and disabled in housing with people who are elderly is good for either population. When addressing this issue, the 2004 Housing Populations Report found:

Over the years, there has been much discussion, although little documentation, of problems between the two tenant groups, ranging from lifestyle clashes and fears based

on misconceptions about mental illness, to actual physical conflicts, disruptive behaviors, and criminal activities.¹⁹

Unfortunately, there has been little scientific research on this issue. The most recent study which could be found was from 1996 and looked at a congregate living facility which required tenants to interact during meals among other times, not one in which residents had their own apartments.²⁰ It is unclear if this study has anything to add to the debate about whether tenants with their own self-contained apartments are benefitted or harmed by living in mixed population housing.

Evictions

The final pieces of information which S.A. 17-19 required be collected had to do with the potential problems for housing providers caused by each population. With regard to evictions, S.A. 17-19 asked for a report on:

- The number of evictions initiated against elderly tenants in last five years provided by the housing authority;
- The number of evictions initiated against young/disabled tenants in last five years provided by the housing authority;
- The number of evictions initiated against young/disabled as a result of an incident with elderly in last five years provided by the housing authority;
- The number of evictions initiated against elderly as a result of an incident with young/disabled in last five years provided by the housing authority; and
- The number of summary process judgments issued against elderly tenants or young/disabled tenants in the last five years to be provided by the housing authority.

The Center requested eviction information from each participating housing authority. In addition, the Center has access to eviction records filed in the Superior Court going back to 1997. Based on the information collected in Figure 13 below, eviction does not seem to have been widely used by the housing authorities.

Total number of Evictions			
	Total	Elderly	Young and disabled
BHA	0	0	0
MHA	4	0	4
WHA	12	5	7

Figure 13: Total Number of Evictions

Court records reveal that all of the summary process actions brought by the housing authorities included in this study ended in a judgement of possession for the housing authority.

¹⁹ https://www.cga.ct.gov/2004/pridata/Studies/pdf/Housing_Populations_Final_Report.pdf.

²⁰ <https://www.tandfonline.com/doi/abs/10.1080/10511482.1996.9521229>

Use of Municipal Services

In addition to information on evictions, S.A. 17-19 required information about the use of municipal services. The information to be gathered included:

- Use of municipal services by elders to be provided by the municipalities in which the housing is located
- Use of municipal services by young/disabled tenants to be provided by the municipalities in which the housing is located

None of the housing authorities participating in the study had this information. The Center attempted to gather this information from police departments, fire departments, and senior service departments in each municipality. However, none of the agencies from whom information was requested provided any information.

Resident Service Coordinator Input

Finally, S.A. 17-19 asked for information from resident service coordinators. The resident services coordinator program was created in 1998 and their duties and responsibilities are codified at General Statutes §8-114d.²¹ The Center attended a meeting of resident service coordinators on March 21, 2018. There were more than 25 resident service coordinators in attendance, the majority of whom worked at housing for people who are elderly and disabled. The resident service coordinators were asked to comment on the following issues:

- The support services available at each housing project to be provided by the Resident Service Coordinator (“RSC”) and/or the housing authority’s executive director;
- Gaps in support services as identified by the RSC or the housing authority’s executive director;
- Recommendations for additional support services as identified by the RSC or the housing authority’s executive director;
- An estimate of appropriations needed for support services to be calculated based on recommendations by the RSC and the housing authority’s executive director;

To enable the RSCs to speak freely without fear of retaliation, the Center did not request their names or the name of the complexes at which they worked. Over the course of more than one and half hours, the RSCs talked about what they did for tenants, both young and old, and what they saw as the challenges with regard to mixing both older people and people who are young and disabled. Two of the three housing authorities participating in this study, the MHA and the WHA, have resident service coordinators, the BHA does not.

The RSCs summarized the services they provide to the tenants with whom they work as follows:

²¹ For a detailed description of the program and distribution of resident service coordinator funds, see 2004 Mixed Population Final Report at 41 – 46.

- Assisting in getting services like health care, getting transportation to health care appointments, and getting help with activities of daily living
- Assisting the Tenant Council with planning and budgeting
- Assisting residents with understanding letters and other materials
- Assisting with preparations for extermination and services related to hoarding
- Assisting with utility shut off notices
- Assisting residents in applying for and securing benefits such as SNAP, Health Insurance Connecting with families to coordinate care/address issues
- Educating residents on services and programs available to them
- Eviction prevention services
Helping with conservatorship applications
- Maintaining contact with Case Managers and other support staff
- Collaborating with providers to ensure resident needs are met
- Mediating issues between residents
- Planning and facilitating site based and agency events
- Reporting abuse and other issues as needed
- Talking to family members
- Translation

When asked if they spent the majority of their time helping people who are elderly or people who are young and disabled, the RSCs said the time spent between the two groups was equal. When discussing mediating between tenants, there was no consensus among the RSCs on whether the majority of tenant conflicts were between tenants of different age groups or tenants of the same age groups. Most agreed they had seen both situations.

The WHA sent a list of complaints and incidents that have arisen in their mixed population housing. Those complaints and incidents reveal that both the behavior of people who are elderly and people who are young and disabled have caused problems in the mixed population housing with neither group predominantly the aggressor nor the victim.

With regard to the gaps in services which the resident service coordinators see, these include:

- Assistance in planning for the next stage whether transition to more care or planning for after death;
- Working on communication issues between populations
- Programming on a variety of services
- Delayed responses from social service providers;
- Lack of State-funded homemaking assistance and on-site health services for people who are young and disabled;
- Lack of social services for people who are young and disabled;

- Lack of a State department for people who are young and disabled similar to the Office of Elderly Protective Services.

As a result of the gap in services the RSCs identified, they agreed they are performing the following tasks which keep them from doing work with tenants that might prevent conflicts:

- Lining up transportation to doctors' appointments;
- Keeping track of doctors' appointments;
- Translation for things other than housing issues;
- Assistance with recertifications for benefits other than housing;
- Looking for social services as opposed to having a roster of people who can help;
- Helping with conservatorship applications.

Before concluding the discussion with the resident service coordinators, the Center asked what they believed caused the problems among tenants in mixed population housing. All of the RSCs agreed that undiagnosed and untreated mental illness along with addiction issues in both the elderly and the young disabled populations were the cause of most of the clashes. They also agreed that the problems with tenants, regardless of age, have gotten worse as mental health and addiction services have been cut.

Finally, neither the housing authorities participating in the study nor the RSCs had any sense as to how much additional services would cost.

Conclusions

Based on the information gathered, it is clear that the need for housing for people who live below the poverty level and are elderly or young and disabled has grown since the 2004 Housing Populations Report and will continue to grow. However, the need for housing for people who are young and disabled has grown more quickly than the need for housing for people who are elderly.

The 2004 Housing Populations Report concluded that the policy of mixing different age populations in housing has a financial impact because residents who are young and disabled tend to be very low income and will have a longer tenure in the housing due to their age. To address this discrepancy, CHFA and DOH have recommended that housing authorities implement rent stratification. The negative consequences of rent stratification may be that the number of qualifying applicants who are young and disabled may fall because their income may be too low to qualify. Further discussion and research are needed to determine if rent stratification will actually result in a declining eligibility for tenants who are young and disabled.

The perception that people who are young and disabled cause more problems for housing management than people who are elderly is not borne out by the information supplied by the housing authorities or the RSCs. In fact, the RSCs agree that the problems are not caused by

conflicts between people who are elderly and people who are young and disabled. Problems in mixed populations housing may be the result by undiagnosed and untreated mental illness along with addiction issues. These problems have grown as access to mental health and addictions services have diminished.

Recommendations

The 2004 Housing Populations Report included four options for changes to mixed population housing to resolve some of the perceived problems with the housing programs:

- Continue to include people who are elderly and people who are young and disabled in the same housing complexes but provide management enhancements that include better tenant screening, stronger lease enforcement, more effective eviction, trained resident service coordinators, further collaboration with social service agencies, and resident education and awareness of disability issues.
- Designate entire projects or parts of projects (e.g., specific floors) for elderly-only or disabled-only;
- Establish priority percentage goals for each population group in state elderly/disabled housing as is done in Massachusetts; or
- Exclude individuals under 62 years of age completely from this type of housing. To do this, the legislature would have to “grandfather” the existing housing population mix and fill vacancies as they occur with persons 62 years old and over.²²

It is unclear if any of these options were implemented. However, none of the options address all of the issues raised by this report. For example, while enhanced management may prevent some tenant conflicts, it does not address the financial problems caused by the growing need of people who are young and disabled for affordable housing nor the financial problems for housing authorities who provide this type of housing who face a falling rent roll. The option of designating entire projects as being either elderly-only or young and disabled-only does not address the financial issues nor does it address the need for housing by both the elderly and young disabled population. It is also unclear how the decision to designate some units as elderly-only and some as young and disabled-only could be made in a way that was legal and fair to both populations.

The percentage priority option like the one in Massachusetts suffers from the same issues as designating projects as either elderly-only or young and disabled-only—it does not address the conflict between tenants, nor does it address the financial problem. Finally, excluding people younger than 62 from all current mixed population housing does not address the disproportionate need for affordable housing for people who are young and disabled. In addition, none of these options addresses what the RSCs said was the most pressing issues that

²² 2004 Mixing Populations Report at 84ff.

they see, which are undiagnosed and untreated mental health and addiction issues caused by a drop-in access to services.

Despite its limitations, the best option for addressing the issues raised in this report is the first option set out in the 2004 Housing Population Report. Because of the disproportionate need for affordable housing for people who are young and disabled, the State should continue to include people who are elderly and people who are young and disabled in the same housing complexes.

However, the following changes should be implemented by all housing authorities managing this type of housing:

- Review tenant screening and tenant selection policies to ensure they are not keeping people of color out of mixed population housing. In particular, housing authorities should individually screen applicants' past criminal, credit and eviction histories as opposed to using landlord screening services or a blanket prohibition on tenants with such histories;
- Research the effect of rent stratification on the eligibility of tenants who are young and disabled;
- Research the effect of rent stratification to determine the amount of increased income which can be expected when such policies are implemented;
- Provide additional training for resident service coordinators that includes information on how to address sexual, racial, and ethnic harassment and information on how to address undiagnosed, untreated mental health and addiction issues, among other issues;
- Enhance collaboration with social service agencies to include not just the RSCs but management of both housing authorities and social service agencies;
- Resident education and awareness of disability issues.

The following changes should be implemented by DMHAS, DDS, and DSS:

- Determine if there are enhanced services that can be provided for people who are young and disabled to cover the gaps in services identified by the RSCs;

The following changes should be implemented by DOH:

- Request increased funding for RSCs so that all housing authorities with housing for mixed populations have access to an RSC;
- Continue to prioritize creation of mixed population affordable housing;

Public Forums

DOH and the Center held public forums that reported on the outcome of this study and sought public input. The forums were held on:

- Tuesday, December 4, 2018 from 1 – 3 p.m.
Hagaman Memorial Library, East Haven
- Thursday, December 6, 2018 from 10 a.m. – 12 p.m.
Legislative Office Building, Room 1B, Hartford
- Friday, December 7, 2018 from 1 – 3 p.m.
Darien Public Library, Darien

The Center and DOH sent invitations to more than 500 agencies and individuals including all of the housing authorities and the subsidized housing providers in the State, all of the resident service coordinators, all of the Coordinated Access Network members, ConnNAHRO, the Commissioners of the Department of Mental Health and Addiction Services, the Department of Social Services, Department of Rehabilitation's Aging Services, the Department of Consumer Protection, Disability Rights Connecticut, the Commission on Human Rights and Opportunities, all Connecticut legislators and their aides, and all of the legal services programs throughout the State. At the public forums, a DOH employee spoke to outline the work that was required by S.A. 17-19 followed by a PowerPoint (PPT) presentation from an employee of the Connecticut Fair Housing Center. A copy of the (PPT used at the public forums is attached as Appendix E. In total, 135 people attended and approximately 50 people spoke at the hearings or submitted written comments.

Summary of Feedback as the Result of Public Forums

General comments

- The selection of housing authorities was appropriate for analysis since no large cities were included in the analysis;
- Small town doesn't have enough affordable housing. Community idea resonates. Unclear if the state funds mixed income housing;
- Concerned because they cannot ask what disability a person has in order to get them treatment.
- Difficult to get police to do a 72 hour hold to get someone into system;
- Need police to work with housing authority;
- There are police departments getting crisis intervention training. Know your local PD and request the crisis intervention team officer. Also, liaise with your local emergency departments;

- All towns have a local mental health authority, and many have crisis teams;
- Cannot assume someone has a mental illness;
- There is no place in the world without conflict. The idea we can get rid of “those” people is wrong;
- Take exception to the Report’s inference that leads the report reader to draw the conclusion that screening applicants for criminal records is negative;
- People should remember that some of the people about whom we are speaking are victims of their own mental illness.

Comments on whether people who are elderly or people with disabilities are appropriate for mixed age housing

- Focus should be on educating the elderly. They are only tolerant of people with visible, physical disabilities and females. They are intimidated by young men with disabilities;
- Focus should be on increasing tolerance/acceptance;
- Problem is people refuse to take their medications and that frightens the elderly. They need to take their medications. There are some services available but that won’t help if people refuse to take medications;
- Age restricted units promote age segregation. Non-restricted units are the best for promoting vibrant communities;
- Elderly people prefer elderly people and families prefer families;
- Part of the problem is advocacy disappears after people are housed.
- Fundamental challenge with multi-generational living is different mindsets and ways of living.

Comments on sustainability of mixed population housing

- Regarding rent stratification, one problem is that people aging into elderly housing will have lower incomes as a result of a lack of pensions and other retirement accounts than their predecessors, and so income stratification may not be helpful;
- If more people living in mixed age housing had joined the work force, two income households will have higher Social Security benefits;
- Returning to stratification, no one knows what it is. Don’t explain it now. Footnote it in the report.
- We disagree with the Report’s characterization of rent stratification as having a negative consequence by reducing the number of young and disabled applicants that would qualify for housing.

Comments on information that should have been included in the report

- Sexual orientation of tenants;
- Records of police calls regarding mixed aged housing;

- The absence of any organization focused on advocating for the needs of the elderly among the official “Partners in Completing the Study.” While the non-profit advocacy organization Disability Rights Connecticut was invited to participate, there was no commensurate advocacy voice for the elderly at the table;
- Residents of the PHAs selected for the study were not consulted for their input;
- With respect to the group meeting conducted with the Resident Services Coordinator, additional breakdowns and information related to those conversations would be useful;
- While we understand that the limited number of PHAs studied was pursuant to the authorizing legislation, the limited sample size does make it difficult to draw conclusions;
- Focusing solely on mental health shortfalls will not solve current and future issues;
- The numbers regarding the prevalence of children who are disabled in the report is inaccurate. According to a new report from the CDC, approximately 1 in 40 children aged 3 – 17 have Autism Spectrum Disorder (ASD). This means the total number of children living with a disability is far higher than the number included on page 8 of the report;
- We are facing an epidemic regarding people with Autism Spectrum Disorder which will reach a crisis point once these children become adults and are in need of assistance from the government and elsewhere—including housing assistance.

Additional recommendations

- Better trainings for RSCs and property managers would be helpful because we don’t see complaints from certain areas e.g., New London.
- Develop best practices for RSCs;
- There should be people on site to do interventions;
- The activities that RSCs provide are increasing tolerance. More activities/interactions reduce judgmental behavior and frivolous complaints.
- Focus resources on identifying real vs. imaginary crises;
- CARSH and CARCH are working on training on issues, developing conference training for RSCs, borrowing best practices from Massachusetts;
- There is a need for on-site service providers;
- Police departments should do more to help;
- There should be some provision for housing people with ASD as they get older;
- There should be more emphasis on mental health coordination e.g., New London, DMHAS interventions help reduce evictions;
- Improve relations between housing authorities and local mental health providers.
- RSC grant is not enough money. There should be supportive services on site 1-2 days per week;
- Agree that the lack of appropriate support services for residents suffering from mental health and addiction issues is a serious issue for residents and that funding to provide

adequate mental health, addiction and supportive services need to be provided for residents in public housing;

- There is a need for renovation funding;
- Tax credits must be non-age restricted.

Revised Recommendations After Public Comment Period

Despite its limitations, the best option for addressing the issues raised in this report is the first option set out in the 2004 Housing Population Report. Because of the disproportionate need for affordable housing for people who are young and disabled, the State should continue to include people who are elderly and people who are young and disabled in the same housing complexes.

Recommendations for housing providers:

- Review tenant screening and tenant selection policies to ensure they are not keeping people of color out of mixed population housing. In particular, housing authorities should individually screen applicants' past criminal, credit and eviction histories as opposed to using landlord screening services or a blanket prohibition on tenants with such histories;
- Work with local social service providers to provide on-site services;
- Enhance coordination between multiple public sectors including police, community intervention teams, and state and local benefits providers such as food stamps, heating assistance, etc.

Recommendations for DOH and other agencies who oversee resident service coordinators

- Work with CARSH and CARCH on training on issues for RSCs, developing conference training for RSCs, creating best practices;
- Provide additional training for resident service coordinators that includes information on how to address sexual, racial, and ethnic harassment and information on how to address undiagnosed, untreated mental health and addiction issues, among other issues;
- Enhance collaboration with social service agencies to include not just the RSCs but management of both housing authorities and social service agencies;
- Resident education and awareness of disability issues.

Recommendations for DOH and CHFA

- Research the effect of rent stratification on the eligibility of tenants who are young and disabled;
- Research the effect of rent stratification to determine the amount of increased income which can be expected when such policies are implemented.

Recommendations for DMHAS, DDS, and DSS:

- Provide enhanced services that can be provided for people who are young and disabled to cover the gaps in services identified by the RSCs.

Recommendations for DOH:

- Work with the Legislature to seek increased funding for RSCs so that all housing authorities with housing for mixed populations have access to an RSC.