Housing Choice Voucher Tenant Accessibility Study:

2001-2002





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PREFACE

The tenant-based housing choice voucher (HCV) program provides rental assistance on behalf of eligible low-income families and individuals. It allows program participants to find and lease housing in private rental markets, affording them more housing and locational choices as compared to tenants in the conventional public housing program.

Some HCV program participants are considered by HUD to be hard-to-house. Among them are family members with disabilities. For persons with disabilities, finding accessible housing in the HCV program can be a major challenge. In some markets, such housing is scarce. Many newer accessible units may be expensive and not eligible for the HCV program, or require upward adjustments in payment standards or rent. Remaining housing stock may be old, in poor condition, or difficult to modify. These are all problems compounded by the inherently complicated logistics that persons with disabilities face in the search for affordable housing.

This HUD-commissioned study, funded by the Office of Public and Indian Housing, evaluates the feasibility of conducting a nationwide survey of persons with physical disabilities in the housing choice voucher (HCV) program. The proposed national survey would collect data on the experiences of persons with physical disabilities in finding assisted housing that meets their accessibility requirements. Such a survey can offer valuable insight into how well the HCV program, through its participating public housing authorities (PHAs) and landlords, is responding to the needs of persons with disabilities and is meeting its statutory obligations under certain Federal civil rights laws. It can also identify ways to improve program delivery to HCV tenants with physical disabilities.

In assessing the survey's feasibility, a draft six-page mail survey instrument was developed and pretested among a random sample of 400 HCV tenants served by six PHA jurisdictions across the country. Additionally, case studies at the same six PHA sites examined in-depth the issues facing voucher holders in their search for accessible housing. Focus group discussions were conducted with tenants who had physical disabilities, as well as with landlords who participate in the HCV program. PHA staffers were also interviewed. These case studies provided context for the mail survey pretest results.

The report concluded that a nationwide mail survey of persons with physical disabilities is practical. During the pretest, the survey instrument generally performed well, and only a couple of questions needed revision. Additionally, the pretest achieved a response rate of 69 percent. The results of the survey pretest and the six case studies, while not nationally representative, revealed interesting insights about the experiences of persons with physical disabilities in the HCV program. Most survey respondents were either somewhat or very satisfied with their landlords, homes and neighborhoods, as well as PHA support in locating accessible housing. However, some tenants in the focus groups experienced some difficulties in the search process and lacked some of the accessibility features they would like. Discussions with PHAs and landlords suggested low-cost ways that PHAs can assist persons with physical disabilities in their housing search, as well as strategies PHAs could adopt to encourage more landlords to join the HCV program and rent accessible housing to persons with physical disabilities.

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EXECUTIVE SUMMARY

E.1 Research Objectives and Issues

The Department of Housing and Urban Development (HUD) has carried out this Housing Choice Voucher (HCV) Tenant Accessibility Study in order to determine the feasibility of conducting a nationwide mail survey of successful voucher enrollees with physical disabilities about their experience in searching for accessible units. Another goal for HUD is to study the quality of experiences that successful voucher program enrollees with physical disabilities have had in their search for accessible units including the following:

- Explore how and in what ways public housing authorities (PHAs) assist enrollees with physical disabilities in finding accessible units (24 CFR 8);
- Determine how PHAs carry out their roles and responsibilities in assisting enrollees with physical disabilities who seek accessible units (24 CFR 8); and,
- Examine the experiences of landlords who rent accessible units to enrollees with physical disabilities.

The research issues in this study focus on three main groups at the local level; HCV tenants with physical disabilities, PHAs, and landlords.

E.2 Research Design

In collaboration with HUD's Office of Policy Development, the Westat team selected six sites and conducted case studies with PHAs, landlords, and tenants with disabilities in different regions of the country. The six sites were selected based on several criteria, including: geographic location, the percentage of HCV tenants with disabilities (two high, medium, and low performing agencies were selected), a mix of urban, rural, and suburban PHAs, and participation in the mainstream program (both participants and nonparticipants were selected), and the size of the PHA. The team conducted site visits in the following locations:

1. Housing Authority of the City of San Luis Obispo, California: San Luis Obispo received a high Section 8 Management Assessment Program (SEMAP) rating and is a fairly high performer serving a 25.83 percentage population with disabilities.

- 2. Housing Authority of the City Of Pueblo, Colorado: Pueblo is a medium PHA in terms of the percentage served with 19.92, but has a high performance score from SEMAP.
- 3. Montgomery Housing Authority, Montgomery, Alabama: Montgomery serves 4.91 percent of the population, but is rated a high performing PHA in SEMAP.
- 4. Marion Metropolitan Housing Authority, Ohio: Marion is a fairly high performer serving 28.63 percent and has a standard rating from the SEMAP system. Marion serves a partly rural population.
- 5. Lowell Housing Authority, Massachusetts: Lowell is a medium performer at 18.05 percent and has a standard rating from HUD on the SEMAP score. Lowell is a mainstream grantee.
- 6. Greensboro Housing Authority, North Carolina: Greensboro has a low percentage served with 6.7 percent and has a standard rating from SEMAP.

Westat developed, tested, and verified three types of instruments:

- 1. A two-page mail survey for HCV tenants with physical disabilities;
- 2. In-depth instruments for PHAs that provide services to tenants with a physical disability and for nonprofit or governmental partner agencies and nonprofit service providers who assist the PHAs in addressing the needs of tenants with physical disabilities; and
- 3. Focus group guides for HCV tenants with a physical disability and two types of private landlords those that rent to HCV tenants with physical disabilities and those that rent to HCV tenants but not tenants with physical disabilities.

The study team developed a six-page mail questionnaire and conducted a cognitive review of the questionnaire using focus groups in the six study sites with HCV voucher tenants who have a physical disability. We stat also conducted a more substantial and accurate mail pretest with about 400 respondents. The full mail pretest focused on the same six sites and constituted a full survey "dress rehearsal" to help ensure that the questionnaire was ready for fielding by HUD's contractor.

E.3 Site Visits and Results

The Westat team visited six sites as part of the process of developing a mail questionnaire for HUD. In each of the site visits, the Westat team conducted four major activities:

- A detailed interview with PHA staff using an interview guide that was focused on the problems people with physical disabilities have in participating in the HCV program;
- A focus group with HCV tenants with physical disabilities on the difficulties they have had participating in the HCV program;
- A focus group on the experiences of landlords who participate in the HCV program and house HCV tenants with physical disabilities; and
- A focus group with landlords who participate in the HCV program but do not house HCV tenants with physical disabilities on why they do not house HCV tenants with physical disabilities.

While the results of the mail survey, interviews and focus groups are not nationally representative, they have some value in revealing interesting insights about the experiences of persons with physical disabilities who participate in the HCV program.

PHA Interview

In general, the six PHAs did not think that there was a need for exception rents to encourage accessibility modifications. None of the PHAs said they provided funding for accessibility modifications by tenants. In several of the sites, partner agencies provided funding for accessibility modifications. Several of the PHAs received and used mainstream funding for vouchers and not for staffing.

The six PHAs did not feel that there was a shortage of accessible units for tenants with physical disabilities, although when there were advocacy organizations in the city, the advocacy organizations said that there was a shortage of accessible units (Marion, Greensboro, and Pueblo). The advocacy organizations had no documentation on the shortage of accessible units.

Tenant Focus Group

Many of the HCV tenants who had physical disabilities and were in wheelchairs rented in place rather than try to find new units, although many of these units did not meet their needs. Some PHAs offered public housing accessible units as an option.

Most of the tenants in the focus group said that they did not have a difficult time finding a unit under the HCV program. A number of HCV tenants with fairly severe physical disabilities lived in units without any major modifications. Many of the tenants with physical disabilities lived in units with minor modifications such as ramps and wider doorways. Very few of the units used by tenants with wheelchairs had modifications such as wheel-in showers or lowered kitchen counters. Most of the tenants with physical disabilities "leased in place" with vouchers.

The HCV tenants said that PHAs did provide the names of landlords who rent to tenants with physical disabilities. Most of the HCV tenants said that they received none or limited help in the search process from the PHA, although some tenants received help from a partner agency. The tenants usually negotiated the rent with the landlords, but in a couple of cases they received negotiating support from a partner agency. None of the tenants felt that they were discriminated against in the search process either because of their physical disability or because of race.

Focus Group with Landlords Who House HCV Tenants with Disabilities

Focus groups with landlords who house HCV tenants with physical disabilities were conducted in six cities. Some of the landlords owned a number of units that they managed while other landlords managed units for a larger company. Many of the landlords have been participating in the HCV (Section 8) program for a number of years and have been housing HCV tenants with physical disabilities for years. Many of the landlords said that they made fairly minor modifications to units including wider doorways and ramps on the outside of the unit.

A majority of the landlords said that the HUD HCV payment standards were not high enough. The original contact for most landlords regarding housing for tenants with physical disabilities came from the tenants. Landlords received some contacts from PHAs and intermediary organizations about providing housing for tenants with physical disabilities. The six PHAs did not make any special outreach efforts to recruit landlords to provide housing for tenants with physical disabilities.

Most of the landlords said that they would like to recover the investment cost of their unit's accessibility modification within one year because that was the lease period. Landlords also said that they had no problems with tenants or others making modifications to the units if they were quality improvements. A number of landlords did express a concern about re-renting a unit if extensive modifications were made to the unit; e.g., the unit would only be marketable to other tenants with physical disabilities. Most landlords were willing to make extensive modifications to a unit if a grant or low interest loan were available from HUD or the PHA.

Focus Groups with HCV Landlords Who Do Not House Tenants with Disabilities

Most of the HCV landlords who do not house tenants with physical disabilities have been in the program for several years, but not as long as the other group of landlords. Most of the HCV landlords who do not house tenants with physical disabilities say that they were never asked to house this type of tenant. These same landlords said that they would be willing to make small modifications to units in order to house tenants with physical disabilities.

The landlords said that if they could not provide housing for persons with physical disabilities, many of them would refer these voucher holders to other landlords who do provide accessible housing. Many of the landlords in the focus groups own older, two-story units that are difficult to modify for wheelchair accessibility.

A number of landlords in the focus groups said that they have housed tenants with physical disabilities in the past, but they have not housed anyone with a wheelchair. This landlord group also expressed a concern about making major modifications to a unit and then not finding tenants with physical disabilities to rent the unit after the initial tenant leaves.

Westat conducted six case studies at the sites and these case studies are contained in the Appendix.

E.4 Cognitive Analysis of Mail Questionnaire

Cognitive testing was conducted during June 2002 to ensure that the questions used in the survey were interpreted as the researchers intended and that the questions flowed in a logical sequence. Participants for the cognitive testing were all Section 8 tenants recruited through local housing agencies. Several were interviewed over the telephone and one completed a mail questionnaire. The cognitive testing resulted in several changes in questions and formatting in the mail questionnaire.

E.5 The Survey Process

The HUD Housing Choice Voucher Accessibility Study, Survey of Tenants with Physical Disabilities, was mailed to 400 tenants randomly selected from six public housing authorities (see Table E-1).

Table E-1. Number of tenants selected by public housing authority

Public Housing Authority	Number of tenants selected
San Luis Obispo Housing Authority, San Luis Obispo, CA	80
Pueblo Housing Authority, Pueblo, CO	80
The Housing Authority of the City of Montgomery, Montgomery, AL	60
Lowell Housing Authority, Lowell, MA	60
Greensboro Housing Authority, Greensboro, NC	60
Marion Housing Authority, Marion, OH	60

The surveys were mailed on July 12, 2002, in a HUD envelope with a letter on HUD stationery, signed by Paul K. Gatons, Associate Deputy Assistant Secretary for Research, Evaluation, and Monitoring. The text of the letter explained that the survey was completely voluntary. The return envelope was also a HUD envelope, with a Westat return address.

A second mailing, scheduled for three weeks later, was sent on August 7, 2002. A total of 271 surveys were sent to respondents from whom we did not have a response or a return by the post office at the time of the mail out.

In order to increase the response rate, Westat also decided to call respondents who had not returned completed surveys (or returns by the post office for incorrect address). Therefore, the same 271 names and addresses were sent for matching for telephone numbers on August 15, 2002. Westat was able to get telephone numbers for 145 respondents from our matching services.

Westat also did an Internet search on September 5, 2002. The search included any names and addresses for which we had not obtained a telephone number as well as those for whom the telephone numbers we had were disconnected or wrong numbers (and from whom we had not received a response). Westat was able to find 8 more numbers (plus correct numbers for nine others) for a total of 153 telephone numbers.

Yellow postcards (3" x 5") were sent to 194 people on September 9, 2002. These 194 people included those for whom Westat was not able to obtain a telephone number, and those for whom Westat found a disconnected or wrong number when we did call (and from whom we had not received a response as of September 9, 2002).

As of September 26, 2002, Westat still had not received completed surveys or return mail for 171 respondents (including those who requested new surveys and who had not returned them). These respondents were sent the survey via Federal Express (166) or Priority Mail (5--for those for whom we only had a post office or rural route address).

The response rate for the survey was calculated by dividing the respondents for whom we received responses by the total surveys mailed. For the purposes of response rate calculation, overall surveys where responses were received totaled 276. The surveys where responses were received were defined as those that answered the first question "yes," indicating the respondent or a family member has a disability (155), those that answered the first question "no," indicating the respondent or a family member did not have a disability (70), and as those surveys that were partially completed (13); i.e., the first question was not answered. Also included in this figure were the respondents who were deceased (2), those who did not receive Section 8 (2), and those for whom we were not able to obtain a correct address (34). (Note that all of the "ineligibles" are treated as "responses" in the response rate calculation.) Therefore, the overall response rate for this survey is 69.0 percent (276/400).

E.6 Survey Results from the Six Sites

This section describes the data collected in the mail survey questionnaire from the pretest of the questionnaire in six sites. The data from the six sites have been weighted for analysis across the six sites, but are not representative of HCV tenants with physical disabilities across the United States.

The HCV tenants with physical disabilities tend to live in older units, which is a potential problem because older units are less accessible than newer units. Many newer units are built to meet accessibility requirements. The respondents were asked how old their rental unit was. Thirty-eight percent said that they did not know and 44 percent said that the unit was over 10 years old. Only 8 percent said that the unit was 1 to 5 years old and another 8 percent said the unit was 6 to 10 years old.

The HCV tenants described the building they lived in as not primarily for elderly or persons with disabilities. Fifty-two percent said that the building was not primarily for either the elderly or persons with disabilities. Twenty percent said that their building was both for elderly and persons with disabilities. Only 4 percent said they lived in a building primarily for the elderly and only 3 percent said they lived in a building primarily for persons with disabilities.

When asked how they the first found out about the Section 8 program, the three highest responses were a relative, friend, or neighbor (44%), a local housing agency (30%), and a local community center or service agency (26%).

When they applied for the Section 8 program, 31 percent said that they had trouble getting to the local housing agency and 26 percent said that they had trouble filling out the forms. Other problems cited were getting landlords to accept the Section 8 voucher and finding available units to rent.

The most significant reasons for living in their current unit were location in a better neighborhood, close to family and friends, and location near shopping. A less expensive unit was another important factor. In the other specify category, the main reasons cited were already in the unit, met my desires, and like the landlord

The HCV tenants were asked about the role of the local housing agency in helping them find a rental unit that would meet their needs. Twenty-three percent said that the housing authority gave them a list of rental units with features for persons with disabilities. Ten percent said that they were given

additional time to find a unit; 5 percent said that they were allowed to select a unit with rent that was higher than usual. Fifty-six percent said that they did not get any assistance specified in the question from the housing agency.

When the HCV tenants were asked if the local housing agency told them about any special Section 8 assistance for persons with disabilities, 58 percent said that they were not told about any special assistance. Twenty-four percent said that they were told about additional time to find a unit, and 14 percent were told that they could choose a unit with higher rent than usual. Fifteen percent were told that they could rent a unit outside the normal area.

The HCV tenants were asked if they requested information on supportive services from the local housing agency or their landlord. Seventy-one percent said that they did not know about or request information on supportive services. The supportive services that were the most requested included health services, assistance with personal activities such as bathing, dressing, cooking, or cleaning, and transportation.

The HCV tenants were asked about their satisfaction level with a number of factors. In general, the great majority of the HCV tenants were either somewhat satisfied or very satisfied with all of the factors listed. The highest very dissatisfied factors were the support provided by the local housing agency in finding a unit that met their needs and using the bathroom at 12 and 10 percent respectively.

Question 8 should be eliminated. It is not necessary because of question 5 and very few respondents answered the question. Question 21 should be broken into two questions: Have you requested any of these modifications and has your landlord or housing agency given you permission to make these modifications?

E.7 Sample Design for a National Survey

The quality and usefulness of survey data for analysis will depend largely on the procedures to be used to select the samples. Because surveying every HCV tenant in each PHA is usually impractical and unnecessary, a nationally representative sample of the entire population should be used for the proposed mail survey. Although the sample can be selected in many ways, the results from a properly designed "probability" sample can be generalized to the entire tenant population from which the sample

was drawn. A probability sample is one in which each eligible respondent in the population has a known probability of selection. Inferences from a nonprobability sample (e.g., a convenient or purposive sample) are not generalizable since they are limited to those tenants who participate in the study.

In addition to being generalizable, a probability sample should be efficient. An efficient sample design is one that is cost effective with respect to achieving the precision goals specified for the study. The more precise the sample results, the more confidence one can have in them. An efficient sample design depends on both sample size and the procedures used to select the sample.

The Multifamily Tenant Characteristics System (MTCS) file will be used to define the sampling frame (i.e., universe file) from which the sample of HCV tenants with disabilities will be drawn for the mail survey. Almost 4 million tenants (in about 1.5 million families/households) are currently listed in the file. Of these, 534,000 (approximately 13 percent) are coded as having a disability. In addition to disability status, the MTCS includes person-level information on race, Hispanic origin, sex, age, family status, and income that can be used for stratification. However, the available disability code does not distinguish between physical/communication and mental disabilities. Since persons with only mental disabilities are not eligible for the mail survey, allowance must be made in sampling to compensate for the resulting ineligibility losses. According to the U.S. Census Bureau's *Current Population Reports: Americans with Disabilities* (P70-73), an estimated 10 percent of persons with disabilities have mental disabilities only. Although this estimate applies to the general U.S. population, we expect that the percentage of disabled persons residing in HCV housing who have only mental disabilities will be roughly the same. Thus, for initial planning purposes, we will assume that 10 percent of the disabled population in the MTCS will be ineligible for the survey.

Although a linked design of the type described in the previous section offers both operational advantages and enhanced analytic potential, its ability to provide an efficient sample for the proposed mail survey is severely limited by the structure of the existing monthly customer satisfaction samples. As indicated in the analysis above, for moderate to large sample sizes, the linked design will require substantially more sample persons than an independent sample of equal precision. Even with relatively small sample sizes, the cost savings associated with the linked design are expected to be minimal. On the other hand, an independent sample design offers the maximum flexibility for designing efficient samples for both national and subgroup analysis. Thus, unless there are overriding reasons for linking the mail survey respondents with households selected for the monthly customer satisfaction surveys, an independent sample design is recommended for the mail survey. The sample design will

include stratification to improve sampling precision and to target selected subgroups for over sampling if desired.

E.8 Conclusions in regard to a National Survey

A national survey is very feasible. The mail questionnaire generally worked very well and a fairly high response rate can be achieved. HUD was originally considering the idea of appending the mail survey to an existing mail satisfaction survey of a sample of all HCV tenants. Westat recommends a separate national survey for HCV tenants with physical disabilities. Conducting a separate survey would be much more efficient than appending the new survey on to an existing survey with different objectives.

1. INTRODUCTION AND OVERVIEW OF THE STUDY

1.1 Introduction

The purpose of the Housing Choice Voucher (HCV) Tenant Accessibility Study is to determine the feasibility of conducting a nationwide mail survey of successful voucher enrollees with physical disabilities about their experience in searching for an accessible unit. This study also examines the housing search experiences of people with physical disabilities, including:

- How public housing authorities (PHAs) assist enrollees with physical disabilities in finding accessible units;
- How PHAs carry out their roles and responsibilities in assisting enrollees with physical disabilities who seek accessible units; and,
- The experiences of landlords who rent accessible units to enrollees with physical disabilities.

In collaboration with HUD's Office of Policy Development, the Westat team selected six sites and conducted case studies with PHAs, landlords, and tenants with disabilities in different regions throughout the country. The six sites were selected based on several criteria, including geographic location; the percentage of HCV tenants with disabilities (two high, medium, and low performing agencies were selected); a mix of urban, rural, and suburban PHAs; and participation in the mainstream program (both participants and nonparticipants were selected); and the size of the PHA. The team conducted site visits in the following locations:

- 1. Housing Authority of the City of San Luis Obispo, California: San Luis Obispo received a high Section 8 Management Assessment Program (SEMAP) rating and is a fairly high performer serving a 25.83 percentage population with disabilities.
- 2. Housing Authority of the City Of Pueblo, Colorado: Pueblo is a medium PHA in terms of the percentage served with 19.92, but has a high performance score from SEMAP.
- 3. Montgomery Housing Authority, Montgomery, Alabama: Montgomery serves 4.91 percent of the population, but is rated a high performing PHA in SEMAP.
- 4. Marion Metropolitan Housing Authority, Ohio: Marion is a fairly high performer serving 28.63 percent and has a standard rating from the SEMAP system. Marion serves a partly rural population.

- 5. Lowell Housing Authority, Massachusetts: Lowell is a medium performer at 18.05 percent and has a standard rating from HUD on the SEMAP score. Lowell is a mainstream grantee.
- 6. Greensboro Housing Authority, North Carolina: Greensboro has a low percentage served (6.7%) and has a standard rating from SEMAP.

Through these site visits, the Westat team developed and tested three types of instruments: (1) a six-page mail survey for HCV tenants with physical disabilities; (2) in-depth instruments for PHAs that provide services to tenants with a physical disability and for nonprofit or governmental partner agencies; and (3) focus group guides for HCV tenants with a physical disability and two types of private landlords - those that rent to HCV tenants with physical disabilities and those that rent to HCV tenants but not tenants with physical disabilities.

The study team developed a six-page mail questionnaire and conducted a cognitive review of the questionnaire using focus groups in the six study sites with HCV voucher tenants who have a physical disability. Westat has also conducted a more substantial and accurate mail pretest with about 400 respondents. The full mail pretest focused on the six sites and constituted a full survey "dress rehearsal" to help ensure that the questionnaire was ready for fielding by HUD's contractor.

The study team conducted in-depth interviews of PHA staff in the six study sites using a detailed interview guide. The study team also interviewed nonprofit service providers who assist the PHAs in addressing the needs of tenants with physical disabilities. They also prepared focus group topic guides and conducted focus groups with three types of constituencies in each site: (1) tenants with physical disabilities; (2) landlords who currently house HCV tenants with physical disabilities, and (3) landlords who house HCV tenants but do not house tenants with physical disabilities.

1.2 Summary of the Housing Choice Voucher Program

The housing choice voucher program is the Federal government's major program for assisting very low-income families, the elderly, and people with disabilities to afford decent, safe, and sanitary housing in the private market. Housing assistance is provided to the family or individual, enabling participants to find their own housing, including single-family homes, townhouses, and apartments. The participant is free to choose any housing that meets the requirements of the program and is not limited to units located in subsidized housing projects.

Housing choice vouchers are administered locally by public housing agencies (PHAs). The PHAs receive Federal funds from the U.S. Department of Housing and Urban Development (HUD) to administer the voucher program. An individual or family that is issued a housing voucher is responsible for finding a suitable housing unit of his or her choice where the owner agrees to rent under the program. This unit may include the family's present residence. Rental units must meet minimum standards of health and safety, as determined by the PHA. A housing subsidy is paid to the landlord directly by the PHA on behalf of the participating individual or family. The individual or family then pays the difference between the actual rent charged by the landlord and the amount subsidized by the program.

The PHA determines an individual or family's eligibility for a housing voucher based on the total annual gross income and family size. Eligibility is limited to U.S. citizens and specified categories of non-citizens who have eligible immigration status. In general, the family's income may not exceed 50 percent of the median income for the county or metropolitan area in which the family chooses to live. By law, a PHA must provide 75 percent of its vouchers to applicants whose incomes do not exceed 30 percent of the area median income. Median income levels are published by HUD and vary by location.

Since the demand for housing assistance often exceeds the limited resources available to HUD and the local housing agencies, long waiting periods are common. In fact, a PHA may close its waiting list when it has more people on the list than can be assisted in the near future. PHAs may establish local preferences for selecting applicants from its waiting list. For example, PHAs may give a preference to a family who (1) is homeless or living in substandard housing, (2) has a member with a disability who needs accessible housing, or (3) is involuntarily displaced. Individuals or families who qualify for any such local preferences move ahead of others on the list who do not qualify for any preference. Each PHA has the discretion to establish local preferences to reflect the housing needs and priorities of its particular community.

1.3 Prevalence of Physical Disabilities in the United States

Estimates of the number and percentage of individuals with disabilities vary, depending upon the definition of disability. The 1997 Survey of Income and Program Participation (SIPP) shows that 19.7 percent of the U.S. population has some type of disability and 12.3 percent has a severe

disability. National studies reveal that disability prevalence rates vary considerably according to many demographic factors, including income and poverty, age, gender, and race and ethnicity. About 28 percent of all persons in the U.S. population with a severe disability belong to a minority group; according to the Census Bureau approximately 12 percent of the White/non-Hispanic population in the U.S. reported having a severe disability, compared to nearly 16 percent for the African American population.²

Of particular significance is the high correlation between disability and poverty, which means that many people with disabilities will need both accessible and affordable housing. Depending on age and definition of disability, the poverty rates of people with disabilities range from 50 percent to 300 percent higher than the general population. One survey found that more than one-third (34%) of people with disabilities live on a household income of less than \$15,000 per year, compared to 12 percent of people without disabilities (Harris, 1994, 1998). Another survey found that, among the population aged 25 to 64 with a severe disability, 28 percent have incomes below the poverty level compared to 8.3 percent for persons in this age group without a disability (SIPP). Still another study found that among the total household population with a severe disability between the ages of 25 and 64, 42 percent had total household incomes below \$20,000 per year, and 53 percent of those persons 65 and over had this level of income.³ A significant cause of poverty is the unemployment of individuals with disabilities. The 2000 Harris Poll commissioned by the National Organization on Disability found that only 32 percent of individuals with severe disabilities between the ages of 18 to 64 worked full time or part time compared to 81 percent of people without disabilities.--a difference of 49 percent.

The national 1995 American Housing Survey (AHS) had a special supplement that asked whether members of households had permanent physical activity limitations and, if so, whether home modifications were present. The supplement also asked about the types of activity limitations that household members experienced. Households that reported at least one member who had a physical activity limitation were asked about the presence of certain home modifications. Last, regardless of whether or not they had home modifications present, these households were asked if they needed home modifications.

Based on the survey, it is estimated that in 1995, almost 8.9 million housing units in the United States had at least one occupant who had a physical activity limitation—approximately 9.1 percent

¹ Jack McNeil, "Americans with Disability:1997", Current Population Reports P70-73, U.S. Census Bureau, February 2001, p. 1.

² Ibid.

³ Ibid.

of the 97.7 million occupied housing units that year. About 3.4 million homes had some type of home modification (such as grab bars and ramps) present. (This constitutes 38.4 percent of homes with at least one occupant with activity limitations.) Handrails and grab bars were the most common home modifications and were present in more than 2 million households or 22.6 percent reporting members with activity limitations. Widened doors or hallways were present in 756,000 or 8.5 percent of the households reporting a member with activity limitations. Ramps were present in 736,000 homes, and easy-access bathrooms were present in 713,000 homes; each modification accounted for approximately 8 percent of the homes of households with activity limitations. Approximately 5.1 million (57.4 percent of the households in which a member had an activity limitation) had no home modifications present.

Table 1-1 shows the number and percentage of home modifications present in rental and owner occupied units. Table 1-2 shows the level of stated unmet need for modifications in rental and owner occupied units.

Table 1-1. Presence of home modifications, by type of tenure

Home modification	Total (%)	Owner-occupied (%)	Renter-occupied (%)
Home modification(s) present	3,400,000 (38.4)	2,325,000 (37.5)	1,075,000 (40.4)
Handrails or grab bars	2,002,000 (22.6)	1,395,000 (22.5)	608,000 (22.8)
Widened doors or hallways	756,000 (8.5)	380,000 (6.1)	376,000 (14.1)
Ramps	736,000 (8.3)	508,000 (8.2)	227,000 (8.5)
Easy-access bathrooms	713,000 (8.0)	395,000 (6.4)	318,000 (11.9)
Easy-access kitchens	544,000 (6.1)	278,000 (4.5)	266,000 (10.0)
Door handles instead of knobs	495,000 (5.6)	271,000 (4.4)	225,000 (8.4)
Push bars on doors	148,000 (1.7)	52,000 (0.8)	95,000 (3.6)
Elevators or stair lifts	340,000 (3.8)	83,000 (1.3)	257,000 (9.6)
Modified sink faucets or cabinets	262,000 (3.0)	115,000 (1.9)	147,000 (5.5)
Modified wall sockets or light switches	258,000 (2.9)	110,000 (1.8)	148,000 (5.6)
Specially equipped telephones	547,000 (6.2)	399,000 (6.4)	148,000 (5.6)
Flashing lights	150,000 (1.7)	82,000 (1.3)	68,000 (2.6)
Raised lettering or Braille	81,000 (0.9)	30,000 (0.5)	50,000 (1.9)
Other modifications	97,000 (1.1)	72,000 (1.2)	25,000 (0.9)
Incomplete reporting	375,000 (4.2)	242,000 (3.9)	132,000 (5.0)
No home modifications present	5,087,000 (57.4)	3,631,000 (58.6)	1,457,000 (54.7)

Table 1-2. Unmet needs for home modifications, by type of household

Home modification	Total (%)	Owner-occupied (%)	Renter-occupied (%)
Handrails or grab bars	788,000 (8.9)	518,000 (8.4)	270,000 (10.1)
Widened doors or hallways	297,000 (3.4)	200,000 (3.2)	97,000 (3.6)
Ramps	612,000 (6.9)	389,000 (6.3)	223,000 (8.4)
Easy-access bathrooms	566,000 (6.4)	358,000 (5.8)	208,000 (7.8)
Easy-access kitchens	318,000 (3.6)	169,000 (2.7)	149,000 (5.6)
Door handles instead of knobs	231,000 (2.6)	122,000 (2.0)	109,000 (4.1)
Push bars on doors	171,000 (1.9)	69,000 (1.1)	102,000 (3.8)
Elevators or stair lifts	309,000 (3.5)	171,000 (2.8)	137,000 (5.1)
Modified sink faucets or cabinets	286,000 (3.2)	157,000 (2.5)	129,000 (4.8)
Modified wall sockets or light switches	134,000 (1.5)	74,000 (1.2)	60,000 (2.3)
Specially equipped telephones	297,000 (3.4)	194,000 (3.1)	103,000 (3.9)
Flashing lights	130,000 (1.5)	76,000 (1.2)	54,000 (2.0)
Raised lettering or Braille	72,000 (0.8)	36,000 (0.6)	36,000 (1.4)
Other modifications	85,000 (1.0)	58,000 (0.9)	27,000 (1.0)

1.4 Prevalence of Disabilities and Accessibility Problems among HCV Tenants

Prevalence

For purposes of eligibility for HUD assisted programs, the definition of a person with a disability (used throughout 24 CFR) is a person who—

- (a) Has a disability as defined in Section 223 of the Social Security Act (42 U.S.C. 423):⁴
- (b) Is determined to have a physical, mental, or emotional impairment that—
 - (1) Is expected to be of long-continued and indefinite duration,
 - (2) Substantially impedes his or her ability to live independently, and
 - (3) Is of such a nature that such ability could be improved by more suitable housing conditions; or

⁴ The person has a disability as defined in Section 223 of the Social Security Act: An inability to engage in any substantial gainful activity because of any physical or mental impairment that is expected to result in death or has lasted or can be expected to last continuously for at least 12 months; or, for a blind person at least 55 years old, inability because of blindness to engage in any substantial gainful activities comparable to those in which the person was previously engaged with some regularity and over a substantial period.

(c) Has a developmental disability as defined in Section 102 of the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C. 6001(5)).⁵

The term "person with a disability" includes persons who have the disease of acquired immunodeficiency syndrome or any conditions arising from the etiologic agent for acquired immunodeficiency syndrome. Receipt of veteran's disability benefits does not automatically qualify a person as disabled because the Veterans Administration and Social Security Administration define the term disability differently. Applicants who meet Social Security's definition of disabled are considered disabled even if they do not receive Social Security benefits.

As part of our current evaluation of the Family Self-Sufficiency (FSS) program, Westat has analyzed the disability and demographic profile for all HCV tenants. One interesting distinction between all HCV tenants and those with a disability is the dramatically different family composition. For example, over half of all family members in HCV are children under the age of 18, compared to only about 7 percent for HCV family members with a disability. We know that age and disability are highly correlated, and 23 percent of HCV tenants with a disability are age 62 and over, compared to only 7 percent for HCV tenants, overall. Consistent with these patterns, over half (54.7 percent) of HCV tenants with a disability live in single-parent families, versus about one-half (53.4 percent) for tenants overall. Beyond issues of accessibility, this age and family profile may have an impact on the different types of housing needed by families with and without a disability.

Also, we found that the racial profile of HCV tenants, overall, differs substantially for tenants with disabilities. While the White/Black breakdown is about 50 versus 46 percent, respectively, for all HCV tenants, this pattern changes to 63 versus 33 percent, respectively, for Whites/Blacks with a disability. Nationwide patterns do not help explain these differences, for overall, White/Black disability

(c) Is likely to continue indefinitely;

AND

(e) Reflects the person's need for a combination and sequence of special, interdisciplinary, or, generic care, treatment, or other services that are of lifelong, or extended duration and are individually planned and coordinated.

⁵ An adult who has a developmental disability is someone with a severe, chronic disability which:

⁽a) Is attributable to a mental and/or physical impairment or combination of mental and physical impairments;

⁽b) Was manifested before age 22;

⁽d) Results in substantial functional limitations in 3 or more of the following areas of major life activity: self-care; receptive and responsive language; learning; mobility; self-direction; capacity for independent living; and economic self-sufficiency;

prevalence rates are similar, at 14.4 versus 16.3 percent, respectively.⁶ We see a similar but less pronounced pattern for tenants of Hispanic origin.

Of particular significance for HUD's low-income constituency is the correlation between disability and poverty. This suggests that persons who are eligible for HCV rental assistance have a far greater disability prevalence rate than does the general population. For example, according to one survey, while 14 percent of all persons in the U.S. household population have a disability, this rate climbs to 29 percent for persons in families with annual incomes under \$10,000 and 23 percent for incomes between \$10,000 and \$20,000 per year. HUD researchers have found that about 11 percent of HCV tenants have a disability.

Accessibility and Availability

Finding accessible, affordable housing is still a major barrier to self-sufficiency and independence for people with disabilities in cities, suburbs, and rural areas. Housing for individuals with disabilities means more than simply finding a place to live. The individual with a disability who seeks housing must juggle finances, physical accessibility, personal assistance and other in-home services, access to community facilities such as shopping, and transportation, depending upon the disability. Low-income people with a physical disability must identify a unit that is affordable and meets their physical access requirements. Section 504 of the Rehabilitation Act requires that a minimum of five percent of new housing units be accessible; the Fair Housing Amendments Act requires that all housing units constructed since 1988 be "adaptable" to people with physical disabilities, but these newer housing units are often unaffordable under the Section 8 voucher program. They are often located outside the central city, in suburbs away from available jobs and other services. Public transit is often not readily available near accessible housing units. Paratransit service can be very limited, since it is linked to the availability of public transit service. Identifying someone to serve as a personal assistant—a low-wage, low-status occupation—can be extremely difficult in suburban locations.

People with sensory impairments, especially people with visual impairments who do not drive, must find housing that is on a bus line and convenient to shopping and employment opportunities.

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⁶ P.F., Adams, G.E. Hendershot, and M.A. Marano. Current Estimates from the National Health Interview Survey, 1996. National Center for Health Statistics. *Vital and Health Statistics*, 10(200), 1999, Tables 67 and 68.

⁷ Ibid.

They feel a heightened sense of vulnerability living in unsafe neighborhoods where low-income housing is located, but find it difficult to live in more suburban areas owing to lack of sidewalks, transportation, and nearby shopping.

The availability of housing and services could worsen as the Olmstead Supreme Court decision is implemented. This decision requires states to provide services to individuals with disabilities in the most integrated setting. States must engage in long-term planning to establish services to enable people in state hospitals to live in a more integrated setting.

Another factor is that some housing that was designated as "elderly and disabled" (E&H) has been designated as "elderly only". While most residents with disabilities were not excited about living in E&H housing, the loss of this option has been a further decrease in the accessible, affordable housing stock. HUD has replaced many of the units that were lost to the disability population through the "Designated Housing" and "Certain Development" voucher programs. However, these programs depend upon the availability of existing accessible housing—still in short supply especially in rural areas.

Through the Fair Share program, HUD allocated 60,000 new housing vouchers in FY 2000, 79,000 in FY 2001, and 18,000 in FY 2002. PHAs could score points under two selection criteria related to disabled persons to increase their chances of receiving funding for these vouchers. One criterion specified that the PHA must agree to issue not less than 15 percent of the awarded vouchers to families with disabilities and the other criterion specified that the PHA must agree to issue not less than 3 percent of awarded vouchers to disabled families covered by a waiver under Section 1915c of the Social Security Act (the Medicaid Home and Community Based Waiver Programs). Some PHAs scored points under both of these selection criteria, obligating themselves to issue not less than 18 percent of the new vouchers to disabled families; other PHAs scored under only one of the two criteria and were obligated to designate 15 percent or 3 percent of their vouchers to disabled families. Some PHAs scored points under neither criterion and thereby were not obligated to issue any of their awarded vouchers to disabled families. Local housing authorities may need to open up their waiting lists to enable people with disabilities to have access to these vouchers.

Voucher program applicants with disabilities can seek approval of an exception payment standard to allow them to lease a unit with special features or accessibility modifications as a reasonable accommodation for a person with disabilities. Request for reasonable accommodation must be submitted to the local public housing agency for their consideration.

The recent Supreme Court Olmstead decision and accompanying Federal regulations requiring services in the least-restrictive setting increase the likelihood that persons with disabilities, including persons in the HCV program, will live in the community with their disabilities, rather than move to institutions, and rely on home care and other supportive services to do so. To assist people with severe disabilities to maintain independence in HCV rental housing, PHAs are building relationships with other state and community programs that provide support services for persons with disabilities. HUD also allows the use of HCV vouchers to pay the housing portion of assisted living programs for persons with disabilities.

1.5 Summary of Applicable Laws and Regulations

The Fair Housing Amendments Act of 1988, Section 504 of the Rehabilitation Act of 1973, as amended, and Title II of the Americans with Disabilities Act, as amended, are the three primary laws of concern to the HCV program. These laws are summarized below:

The Fair Housing Act (Title VIII of the Civil Rights Act of 1968; 42 U.S.C. 3601, et seq; 24 CFR Parts 100, 103, and 104.)

The Fair Housing Amendments Act (FHAA) prohibits discrimination in the sale, rental or advertising of dwellings, in the provision of brokerage services or in the availability of residential real estate related transactions because of race, color, national origin, religion, sex, familial status (including children under the age of 18 living with parents or legal custodians, pregnant women and people securing custody of children under 18), or disability.

Definitions under the Fair Housing Act are located at 24 CFR Sec.100.201: The term "Handicap" (disability) under the Act means, with respect to a person, a physical or mental impairment that substantially limits one or more major life activities; a record of such an impairment; or being regarded as having such an impairment

The FHAA covers most housing, however in some circumstances, the Act exempts owneroccupied buildings with no more than four units, single-family housing sold or rented without the use of a broker, and housing operated by organizations and private clubs that limit occupancy to members. The following actions are prohibited in the sale and rental of housing, based on race, color, national origin, religion, sex, familial status or disability:

- Refuse to rent or sell housing after a bona fide offer has been made;
- Refuse to negotiate for the sale or rental of housing;
- Discriminate in the terms, conditions or privileges of sale or rental housing;
- Engage in conduct which denies housing or makes housing unavailable;
- Set different terms, conditions or privileges for sale or rental of a dwelling;
- Provide different housing services or facilities;
- Falsely represent that housing is unavailable for inspection for sale or rental when in fact it is available;
- Engage in blockbusting practices in connection with the sale or rental of dwellings; or
- Deny anyone access to or membership in a facility or service (such as a multiple listing service) related to the sale or rental of housing.

Section 504 of the Rehabilitation Act of 1973

Section 504 of the Rehabilitation Act of 1973 states that no otherwise qualified individual with disabilities shall, solely on the basis of a disability, be excluded from participation in, be denied the benefits of, or otherwise be subjected to discrimination under any program or activity that receives Federal funding assistance. It adopts the concept of "programmatic accessibility." This means that all programs receiving Federal funds must not deny qualified people with disabilities the right to participate in or benefit from any such programs. Section 504 mandates that a recipient of Federal money must afford people with disabilities equal opportunity to obtain the same result and gain the same benefit as those individuals without disabilities.

HUD's Section 504 regulations defines an individual with a disability as any person who has a physical or mental impairment that substantially limits one or more major life activities; has a record of such impairment; or is regarded as having such an impairment (24 CFR 8.3). Major life activities include caring for one's self, performing manual tasks, walking, speaking, hearing, seeing, breathing, learning, and working. A person who meets this definition, and who is otherwise qualified for the program, service

or activity, is covered under Section 504. To be otherwise qualified means the individual meets the essential eligibility requirements, including, for example, requirements for tenancy if the program is a housing program.

Section 504 contains design requirements applicable to all housing that receives Federal financial assistance. It applies both to new construction and to existing housing. In new construction of multifamily housing projects with five or more units, a minimum of five percent of the units must be fully accessible to persons with mobility impairments and an additional two percent of the units must include features that make the units accessible by persons with sensory impairments. In addition, the entrances, routes of travel, services, and non-housing facilities must be "readily accessible to and usable by individuals with disabilities." The Uniform Federal Accessibility Standards (UFAS) spell out the accessibility requirements for Section 504 covered housing (24 CFR Sec. 8.21, 8.22).

Existing housing that was built with HUD assistance or that is currently subsidized with HUD assistance must meet the Section 504 "program accessibility" standard. That is, the housing program as a whole must be "readily accessible to and usable by individuals with disabilities" (24 CFR Sec. 8.24). If a housing provider alters existing housing, the alterations may trigger accessibility requirements, depending on the size of the housing project, the nature of the alterations and their cost.

The 504 regulations require that providers respond to requests for reasonable accommodations. A "reasonable accommodation" is a change, adaptation or modification to a policy, program, service, or workplace, or other structural changes, which will allow a qualified person with a disability to participate fully in a program, take advantage of a service, or perform a job. The regulations call reasonable accommodations "housing adjustments" (24 CFR Sec. 8.33). However, the courts have repeatedly used the term "accommodations," rather than "adjustments," as have HUD documents. The most important distinction between the Fair Housing Act and Section 504 is that under Section 504, providers must pay for any costs of providing the accommodations, including what the Fair Housing Act calls a "reasonable modification." Since the Fair Housing Act includes purely private housing that includes no government subsidies, the Congress placed the cost burden of reasonable modifications on the tenant, rather than the provider. If a provider receives government subsidies, both the requirements of the Fair Housing Act and Section 504 apply, and the provider pays.

The Americans with Disabilities Act (Title II)

The Americans with Disabilities Act gives civil rights protections to individuals with disabilities similar to those provided to individuals on the basis of race, color, sex, national origin, age, and religion. Under Title II, persons with disabilities are guaranteed equal opportunity in all programs, activities and services provided by State and local governments. It additionally extends the prohibition of discrimination on the basis of disability established by Section 504 of the Rehabilitation Act of 1973, as amended, to all activities of State and local governments, including those that do not receive federal financial assistance.

1.6 Housing Modifications and/or Accommodations for People with Disabilities

The Fair Housing Amendments Act of 1988

The Fair Housing Amendments Act of 1988 (FHHA) as it relates to persons with disabilities, made it unlawful to discriminate in the sale, rental or advertising of dwelling units.

If an individual or someone associated with that individual:

- Has a physical or mental disability that substantially limits one or more major life activities,
- Has a record of such a disability, or
- Is regarded as having such a disability

A housing provider may not:

- Refuse to make reasonable accommodations in rules, policies, practices or services
 if necessary for the disabled person to use the housing.
- Refuse to let an individual with a disability make reasonable and necessary modifications to the dwelling or common use areas, at the individual's expense. Where reasonable, a landlord may permit changes only if the resident agrees to restore the interior of the dwelling to its original condition when they vacate the premises.

A modification means any change to the public or common use area of a building or any change to a dwelling unit. Reasonable modifications can be requested when an individual with a disability is making application to rent a unit or at any time during the term of the tenancy. All necessary modifications are those that afford the person with a disability full enjoyment and use of the premises.

Example: A building with a "no pets" policy must allow a visually impaired resident to keep a guide dog.

Example: An apartment complex that offers tenants ample, unassigned parking must honor a request from a mobility-impaired tenant for a reserved space near her apartment if necessary to assure that she can have access to her apartment.

However, housing need not be made available to a person who is a direct threat to the health or safety of others or who currently uses illegal drugs.

Section 504 of the Rehabilitation Act of 1973

Section 504 provides that no otherwise qualified individual with a disability shall, solely by reason of his or her disability, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance.

In general, with respect to housing, it means that a housing provider may not deny or refuse to sell or rent to a person with a disability, and may not impose application or qualification criteria, rental fees or sales prices, and rental or sales terms or conditions that are different than those required of or provided to persons who are not disabled.

Housing providers may not require persons with disabilities to live only on certain floors, or to all live in one section of the housing. Housing providers may not refuse to make repairs, and may not limit or deny someone with a disability access to recreational and other public and common use facilities, parking privileges, cleaning or janitorial services, or any services, which are made available to other residents.

Section 504 requires that in making an accommodation, a federally assisted housing provider will be required to bear costs, which do not amount to an undue financial and administrative burden. In application, this means that such a housing provider may be required to spend money to provide legally required reasonable accommodations. Such a housing provider is only obligated to provide an accommodation if s/he is on notice of the request.

If the housing provider believes the requested accommodation is unreasonable, the housing provider may, but is not required to, propose a substitute accommodation. In doing so, the housing provider should give primary consideration to the accommodation requested by the tenant or applicant because the individual with a disability is most familiar with his or her disability and is in the best position to determine what type of aid or service will be effective. If the housing provider suggests an alternative accommodation, the tenant may reject it if s/he feels it does not meet his or her needs.

2. RESEARCH ISSUES

The study team divided the research issues into three categories: tenant issues, public housing authority (PHA) issues, and landlord issues. These issues are described below.

2.1 Tenant Issues

A significant issue for this study is how tenants with disabilities locate an appropriate unit and what services and supports are most helpful in their housing search. Finding the unit is the most significant challenge faced by tenants with disabilities. A number of factors must be considered, depending upon the individual's disability and the family situation. Individuals with physical disabilities, including mobility impairments, must identify a unit that is accessible and usable to that individual. Many individuals with mobility impairments, including wheelchair users, would prefer a unit that meets the physical access requirements spelled out in HUD's implementation regulations for Section 504 of the Rehabilitation Act, or at least a unit that meets the universal access requirements in regulations for the Fair Housing Amendments Act. These units have kitchens and bathrooms with large enough turning radiuses to permit an individual with a disability to maneuver, raised sinks and other bathroom modifications, and wider doors with lowered handles. However, there are a limited number of units available that are accessible to persons with disabilities. Much of the newer housing stock is located outside the city or in suburbs where transportation and support services are unavailable. If the individual cannot drive to employment, shopping, recreation, medical, or support services, a suburban location may not be appropriate. Individuals who use wheelchairs must often wait for extensive periods of time or move to specialized housing units for persons with disabilities to find housing they can use.

Identification of the barriers people with disabilities face in making reasonable modifications is another study issue. People with less severe mobility impairments attempt to find a unit that is usable, albeit it does not meet the physical access requirements described above. These individuals will either "make due" with an inaccessible unit or request that landlords allow them to make the reasonable modifications they need. Landlords may be reluctant to make these modifications for fear that the unit will not be marketable after the tenant with a disability leaves, or that restoring the unit to its original condition will be costly. Another issue is that the unit may be structurally inaccessible and cannot

appropriately be modified; e.g., the bathroom is too small or the bedroom is upstairs. In addition, the tenant may not have the financial resources, assistance, or expertise, to appropriately modify the unit.

The study also explores the extent to which people with disabilities face discrimination in the rental of housing. The survey planned for Phase Two of this study will provide this information. HUD is initiating a paired housing discrimination study, where individuals with disabilities are matched with individuals with like characteristics but who do not have a disability. Both seek to rent the same housing unit and any differential treatment is noted.

Landlords must make reasonable accommodations to individuals with disabilities who seek rental housing. For example, a landlord who does not allow pets must make an exception for an individual with a disability who uses a guide dog or service animal. The experiences of people with disabilities regarding the extent to which landlords comply with this requirement are unknown. This study will provide preliminary information on these issues.

2.2 Public Housing Authority Staff Issues

This study explores the policies and procedures of the PHAs and the assistance they provide to applicants through interviews with PHA staff. For example, what direct and indirect assistance do PHAs provide in searching for units. Do they provide lists of landlords who accept vouchers for their units or lists of landlords who have accessible units? Do they negotiate for accessible units with landlords on behalf of voucher enrollees? Do they assist housing choice voucher (HCV) tenants by providing transportation to examine the unit?

HUD has provided special funding allocations through the mainstream program to assist people with disabilities in using the HCV program. HUD has also provided special allocations to cover administrative costs incurred in assisting disabled voucher holders in their housing search. Interviews with HCV staff provide information about their perceptions of these programs.

One method of providing assistance to tenants with disabilities is to develop cooperative agreements or memoranda of understanding with service providers, such as centers for independent living, ARCs, or agencies that support people with psychiatric disabilities in the community. These organizations can provide a variety of functions, including matching people with disabilities to

appropriate housing units and assisting with the housing search, assisting with recruitment and payment of personal assistants, providing on-site support, or assisting tenants with housekeeping, money management, or other daily activities. A significant change in recent years has been the separation of funding for support services from funding for the housing units. This separation has some distinct advantages, including enabling the individual to access different services at different stages of the disability without having to move and allowing the individual more freedom to choose the service provider. Experiences of PHAs and the collaborating disability organizations are explored through indepth interviews.

PHAs can also modify their policies to assist people with disabilities who use housing vouchers. One policy strongly supported by disability advocates is providing exception payment standards for participants with physical disabilities to cover higher leasing costs for accessible units. This would enable renters who need a physically accessible dwelling to obtain one, even if the rent exceeds the usual HCV rent cap. HCVs can also grant a longer search period for households with members with a physical disability. They can provide funding for home modifications, or can require landlords to sign a non-discrimination certification. We explore the extent to which PHAs have adopted these policies.

2.3 Landlord Issues

Landlord issues were explored through two focus groups; landlords who have experience renting to individuals with disabilities and landlords who do not have this experience. Issues explored include how well landlords understand nondiscrimination, accessibility, and reasonable modification requirements of the Fair Housing Amendments Act and other related laws; how they feel about these requirements; and what have been their experiences in implementing these requirements.

Landlord attitudes about renting to individuals with disabilities were explored in the focus groups. Separating landlords with experience renting to people with disabilities from those who have not had this experience enabled us to note differences in attitudes between the two groups.

Finally, we explored attitudes of landlords about the HCV program generally and whether these attitudes varied from one locale to another. We also noted any suggestions landlords have for improving the HCV program.

3. SITE VISITS AND RESULTS CROSS-SITE ANALYSIS

The Westat team visited six sites as part of the process of developing a mail questionnaire for HUD. In each of the site visits, the Westat team conducted four major activities:

- A detailed interview with public housing authority (PHA) staff using an interview guide that was focused on the problems people with physical disabilities have participating in the housing choice voucher (HCV) program.
- A focus group with HCV tenants with physical disabilities on the difficulties they have had participating in the HCV program.
- A focus group with landlords who participate in the HCV program and house HCV tenants with physical disabilities on their experiences.
- A focus group with landlords who participate in the HCV program but do not house HCV tenants with physical disabilities on why they do not house HCV tenants with physical disabilities.

During the site visits, Westat also obtained comments on the draft mail questionnaire from the focus group with HCV tenants with physical disabilities.

In the site selection process, HUD provided a listing of HCV agencies ranked by the percentage of all HCV tenants with disabilities served by the agency. The six sites were selected by Westat and HUD using a set of criteria that included:

- Geographic dispersion;
- Two high performing agencies (high percentage of HCV tenants with disabilities);
- Two medium performing agencies;
- Two low performing agencies but not troubled;
- At least one agency serving a rural population, and;
- At least one agency in the mainstream program.

The sites selected and their percentage of persons with disabilities served in the HCV program is displayed in Table 3-1 below.

Table 3-1. Sites selected for the study

		Percentage with	
City name	Region	disabilities	SEMAP score
San Luis Obispo, CA	West	26	High
Marion, Ohio	Mid-West	55	High
Pueblo, CO	West	20	High
Lowell, MA	East	18	Standard
Montgomery, AL	South	5	High
Greensboro, NC	South	7	Standard

3.1 The PHA Interviews

The six PHAs that were visited are not a representative sample of PHAs in the United States and no national statistics should be inferred from the data presented in this report. In the PHA interviews, the PHAs were all very cooperative in completing the interviews and in providing support for the focus groups. The data source used to determine HCV tenants with disabilities is the Multifamily Tenant Characteristics System (MTCS). The MTCS asks PHAs to identify tenants with disabilities, but the PHAs and system do not specify whether the tenants have physical or mental disabilities. The PHAs do not have any records on site that provide information on what type of disability the HCV tenants have.

All of the PHAs granted additional search time for the HCV tenants with disabilities if required by the tenants (see Table 3-2 below). None of the PHAs has a specific disability policy for working with tenants with disabilities, but Lowell has a preference for persons with disabilities in awarding HCV vouchers. All of the six PHAs maintained a listing of landlords and most of the PHAs knew landlords that provided units to HCV tenants with physical disabilities.

Table 3-2. PHA search periods

City name	Initial search period	Additional search period
San Luis Obispo	60 Days	120 Days
Marion	120 Days	30 Days
Pueblo	60 Days	Extensions possible
Lowell	60 Days	120 Days
Montgomery	60 Days	60 Days
Greensboro	60 Days	120 Days

PHAs conducted minimal negotiations with landlords on behalf on tenants with physical disabilities on rent issues or modifications of the unit. The PHAs leave the negotiating to either the tenant or caseworker from another agency. The six PHAs said that they only had a very small number of requests for accessibility modifications by tenants with physical disabilities.

None of the PHAs we visited received HUD funding for administrative costs to assist tenants with physical disabilities or to assist in the search process. The six PHAs that were visited do not provide transportation to units for tenants with physical disabilities in the search process but several referred tenants to partner agencies that assisted in the search process. Three of the PHAs have active partnerships with agencies that assist tenants with physical disabilities. Partnerships were all informal agreements between the PHA and the partner agency.

None of the six PHAs used exception rents specifically for HCV tenants with physical disabilities, although several PHAs set their payment standard at 110 percent of the Fair Market Rent (FMR) for all units, and one PHA used exception rents for all of their units. Two of the PHAs provided larger bedroom sizes to compensate for higher rental costs.

In general, the six PHAs did not think that there was a need for exception rents to encourage accessibility modifications. None of the PHAs provided funding for accessibility modifications by tenants, but in several of the sites, partner agencies provided funding for accessibility modifications. Several of the PHAs received and used mainstream funding for vouchers and not for staffing.

The six PHAs did not feel that there was a shortage of accessible units for tenants with physical disabilities, although when there were advocacy organizations in the city, the advocacy organizations said that there was a shortage of accessible units (Marion, Greensboro and Pueblo). The advocacy organizations had no documentation on the shortage of accessible units.

Many of the HCV tenants with physical disabilities who were in wheelchairs rented in place rather than trying to find a new units, although many of these units did not meet their needs. Some PHAs offered public housing accessible units as an option.

The PHAs all had a reasonable understanding of the applicable laws:

- Section 504 of the Rehabilitation Act of 1973.
- Title II of the ADA, and
- Fair Housing Act of 1968 Amended.

All of the PHAs said that would fill the 5f question in the 50058 form with a no answer for any requests for modifications, because they received no requests for modifications. It appears that HUD will not get much useful information from adding questions 5f and 5g to the HCV application form.

3.2 Focus Groups with HCV Tenants with Physical Disabilities

The HCV tenant focus groups were conducted in six sites. The tenants were a mixture of current and newly enrolled HCV tenants, and had a wide variety of physical disabilities. The majority of HCV tenants with physical disabilities lived in one unit during that lease term, and did not move to a new unit during that lease term. The tenants in the focus group also offered few comments on the draft mail questionnaire.

Most of the tenants in the focus group said that they did not have a difficult time finding a unit under the HCV program. A number of HCV tenants with fairly severe physical disabilities lived in units without any major modifications. Many of the tenants with physical disabilities lived in units with minor modifications such as ramps and wider doorways. Very few of the units used by tenants with wheelchairs had modifications such as wheel-in showers or lowered kitchen counters. Most of the tenants with physical disabilities 'leased in place" with vouchers.

The HCV tenants said that PHAs did provide the names of landlords who rent to tenants with physical disabilities. Most of the HCV tenants said that they received none or limited help in the search process from the PHA, although some tenants received help from a partner agency. The tenants usually negotiated the rent with the landlords, but in a couple of cases they received negotiating support from a partner agency. None of the tenants felt that they were discriminated against in the search process either because of their physical disability or because of race.

The HCV tenants were not very knowledgeable about the applicable laws. The tenants found the landlords very accepting of modifications made to units although most modifications were minor. The modifications were usually paid for by the tenants although partner agencies or churches paid for more modifications such as ramps.

Suggestions for improving the HCV program by HCV tenants included eliminating the waiting list for persons with physical disabilities and providing more funding for vouchers for persons with physical disabilities.

3.3 HCV Landlords Who House HCV Tenants with Physical Disabilities

Focus groups with landlords who house HCV tenants with physical disabilities were conducted in six cities. Some of the landlords owned a number of units that they managed while other landlords managed units for a larger company. Many of the landlords have been participating in the HCV (Section 8) program for a number of years and have been housing HCV tenants with physical disabilities for years.

Many of the landlords said that they made fairly minor modifications to units including wider doorways and ramps on the outside of the unit. The landlords said that the cost of the ramps ranged from \$1,200 in one community to \$7,500 in another. Landlords estimated that a full set of modifications to a unit for wheelchair accessibility would cost \$25,000 to \$30,000.

A majority of the landlords said that the HUD HCV payment standards were not high enough. Landlords said that the payment standards for accessible units needed to go up 150 to 160 percent of the FMR to cover the costs of extensive modifications.

The original contact for most landlords regarding housing for tenants with physical disabilities came from the tenants. Landlords received some contacts from PHAs and intermediary organizations about providing housing for tenants with physical disabilities. The six PHAs did not make any special outreach efforts to recruit landlords to provide housing for tenants with physical disabilities.

Most of the landlords said that they would like to recover their unit modification investment cost within one year because that was the lease period. Landlords said that they had no problems with tenants or others making modifications to the units if they were quality improvements. A number of landlords did express a concern about re-renting a unit if extensive modifications were made to the unit, e.g., the unit would only be marketable to other tenants with physical disabilities. Most landlords were willing to make extensive modifications to a unit if a grant or low interest loan were available from HUD or the PHA.

A number of landlords said that they would be happy to build new units for tenants with physical disabilities if they could be assured of a market for the units. Landlords also suggested a grant or other type of funding for accessible units open for tenants with physical disabilities rather than renting to families with no disability. Landlords said that they rented accessible units to families with no physical disability because they could not afford to keep the units vacant.

A few of the landlords were familiar with the applicable laws on accessibility, but most were not familiar with the laws. None of the landlords thought that it was more difficult to house minorities with a physical disability than nonminorities with a physical disability.

Landlords said that their tenants with physical disabilities make better tenants because they:

- Pay on time;
- Take better care of the units, and;
- Stay in the units longer.

3.4 HCV Landlords Who Do Not House Tenants with Physical Disabilities

Most of the HCV landlords that do not house tenants with physical disabilities have been in the program for several years but not as long as the other group of landlords. Most of the HCV landlords that do not house tenants with physical disabilities say that they were never asked. These same landlords said that they would be willing to make small modifications to units in order to house tenants with physical disabilities.

The landlords said that if they could not provide housing for persons with physical disabilities, many of them would refer these voucher holders to other landlords that do provide accessible housing. Many of the landlords in the focus groups own older, two-story units that are difficult to modify for wheelchair accessibility.

A number of landlords in the focus groups said that they have housed tenants with physical disabilities in the past but they have not housed anyone with a wheelchair. This landlord group also expressed a concern about making major modifications to a unit and then not finding tenants with physical disabilities to rent the unit.

Many of the landlords in these focus groups do not know about the applicable accessibility laws.

3.5 Observations from the Site Visits

PHAs can take a number of low cost actions that can assist persons with physical disabilities in their search for housing. These include:

- Provide a list of landlords that have accessible units;
- Recruit landlords with accessible units to the HCV program;
- Partner with a local agency that serves a population with physical disabilities to learn more about the problems and identify the need for accessible housing; and
- Either provide assistance in the search process or partner with an agency that can provide support.

HUD can provide information to the PHAs that they can use to recruit landlords to provide accessible units. Our focus groups with landlords revealed that many landlords said that tenants with physical disabilities make better tenants because they:

- Pay on time;
- Take better care of the units, and;
- Stay in the units for longer periods of time.

PHAs generally had the perception that they were meeting the needs of persons with physical disabilities while the tenants said that they had some difficulties in the search process for units and they did not have all of the accessibility modifications they would like. Advocacy agencies said that the accessible housing need was not being met, but PHAs did think that the need was being met.

Landlords could use more information and training on the accessibility laws and the PHA could conduct the training and provide handouts.

3.6 Case Studies for Each Site

Case studies were prepared for each of the six site visits. They provide a more detailed discussion of the PHA interviews and focus group discussions at each site. The case studies can be found in Appendix A of this report.

4. COGNITIVE ANALYSIS OF DRAFT QUESTIONNAIRE

4.1 Introduction

Cognitive testing was conducted during June 2002 to ensure that the questions used in the survey were interpreted as the researchers intended and that the questions flowed in a logical sequence. Participants for the cognitive testing were all Section 8 tenants recruited through local housing agencies. Several were interviewed over the telephone and one completed a mail questionnaire. The following sections present the methodology and the results of the cognitive testing.

4.2 Methodology

The goal of cognitive testing is to ensure that respondents clearly understand the questions asked and that the response alternatives are appropriate. Cognitive testing has become increasingly popular over the last decade as a technique for testing survey instruments. Cognitive instruments are intensive, semi-structured administrations of the instrument designed to yield insights into the cognitive sources of potential response errors. Cognitive testing addresses concerns such as the following:

- Do participants in the cognitive testing adequately comprehend the instrument items?
- Do these respondents recall information that is necessary for answering the items?
- Are the response choices understood? Are the choices mutually exclusive and exhaustive?

The most common strategy for these interviews is to present a survey item to a respondent, allow the person to answer and immediately probe for the basis of the response or the interpretation of the question. The types of probes that are used in cognitive interviews vary by the types of questions that are being tested. Two generic followups are:

- "What did X mean to you" where "X" is a word or phrase in the question being tested.
- "Could you repeat the question in your own words."

The first probe determines whether a particular phrase or term is interpreted as intended. The second probe determines if the entire question is understood. For example, if a person repeats back a long

question and leaves out a critical phrase (e.g., a reference period), it may be an indication that the point was not taken into consideration in making the response. The majority of the probing procedures are developed prior to the cognitive testing, so as to have a measure of standardization across interviews. However, it is important for cognitive interviewers to probe spontaneously in response to unanticipated difficulties in answering questions suggesting respondent confusion. In addition, respondents may be encouraged to "think aloud" while considering the question and generating their answer. These techniques are highly effective at detecting questionnaire problems that might otherwise go unnoticed in a standard field pretest (e.g., a respondent's interpretation of a question differs from the researcher's intent).

This procedure was followed in the cognitive testing of the survey instrument in this study. Respondents provided important insights into their understanding of the questions, and several were revised as a result of their input.

4.3 Results

Respondents interpreted the majority of the questions as intended. However, there were several that respondents either misunderstood or were cumbersome to administer. The following presents the issues that were encountered during the cognitive testing and how each one was resolved.

Issue: The participants in the cognitive testing misunderstood the question: "Please give

your best estimate of when your building was constructed or underwent a major

renovation."

Revision: The question was simplified: "How old is your rental unit (e.g., apartment or

house).

Issue: The response options for the question about the make-up of the residents in

respondents' Section 8 housing did not capture all response options.

Revision: Additional response options were added to the question as follows:

Which of the following statements best describes your building or complex

It is primarily for the elderly.

It is primarily for persons with disabilities.

It is for both the elderly and persons with disabilities.

It is not primarily for he elderly or persons with disabilities.

Don't know.

Issue:

Based on internal discussions, we decided to revise the question about the relationship of a physical disability to the degree of difficulty in applying for a Section 8 rental voucher. In the revised version of the question specific problems were included.

Revision:

The question was revised as follows:

When you applied for a Section 8 housing voucher, did you have difficulty with any of the following?

Getting to the public agency to apply

Filling out the forms Other (please specify)

Issue:

Respondents indicated that the questions on unmet needs were confusing; furthermore, they were difficult to administer.

Revision:

The response options for the question that probed for the reasons why a particular unit was chosen were shortened. In addition, the response options were all changed to the affirmative.

Please circle the reasons why you chose your current rental unit, even if you did not move?

More features for persons with disabilities than other available units

Located in a better neighborhood Shorter waiting list than other units

Less expensive

Located near schools

Close to family and friends

Issue:

The question on needs was difficult to administer, and were not readily interpretable by respondents. The original question probed for unmet needs. The original question follows:

Which of the following features or home modifications do you need but are not available in your building or unit?

Revision: A revised

A revised question was used to probe for needs. An additional question was added to probe for features that existed whether or not they were needed."

Issue:

The question about which entity paid for any improvements was difficult for respondents to follow.

Revision.

A simple yes/no question was added: "Have you requested and has your landlord or the housing agency given you permission to install any of the features."

Issue:

Questions asking for satisfaction with a variety of housing features were added to the original questionnaire. These questions were derived from the Fair Housing Act accessibility requirements and HUD guidelines specifying specific aspects of rental housing that must be accessible to persons with disabilities. The following satisfaction questions were among those on the survey instrument:

How satisfied are you with:

The Section 8 voucher application process

Your current landlord

Your current apartment

5. THE PRETEST AND SURVEY PROCESS

The HUD Housing Choice Voucher Accessibility Study, Survey of Tenants with Physical Disabilities, was mailed to 400 tenants randomly selected from six public housing authorities (see Table 5-1).¹

Table 5-1. Number of tenants selected by public housing authority

Public Housing Authority	Number of tenants selected
San Luis Obispo Housing Authority, San Luis Obispo, CA	80
Pueblo Housing Authority, Pueblo, CO	80
The Housing Authority of the City of Montgomery, Montgomery, AL	60
Lowell Housing Authority, Lowell, MA	60
Greensboro Housing Authority, Greensboro, NC	60
Marion Housing Authority, Marion, OH	60

The surveys were mailed on July 12, 2002, in a HUD envelope with a letter on HUD stationery, signed by Paul K. Gatons, Associate Deputy Assistant Secretary for Research, Evaluation, and Monitoring. The text of the letter explained that the survey was completely voluntary. The return envelope was also a HUD envelope, with a Westat return address.

Questionnaires that had a "yes" response to the first question were coded as "complete with a disability." Those with a "No" response to the same question were coded as "complete-no disability." That question was:

Do you or a family member have a long-term physical condition that makes it difficult to see, hear, walk, climb stairs, drive a car, or go out to shop for groceries? (by long-term, we mean any condition expected to last at least 6 months).

A questionnaire was coded as a partial complete if the above question was not answered, but the rest of the survey was completed. A refusal was coded when a survey was returned through the mail, and it was blank.

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¹ See Chapter 7, Section 7.3 for a description of how the sample size was determined by public housing authority.

The final results of the initial mailing of the questionnaire were:

Completed surveys received		103
Includes:	Complete with a disability	(78)
Includes:	Complete-No disability	(25)
Partially completed surveys received		7
Refusal (Defined as a blank survey return	ed)	2
Deceased		1
Incorrect address		
Includes:	Called housing authority, obtained new address and resent July 24, 2002	4
Includes:	Called housing authority, obtained new address and resent August 20, 2002	7
Includes:	Called housing authority, obtained new address and resent August 24, 2002	1
Includes:	Unable to resolve address problem	9

A second mailing, scheduled for 3 weeks later, was sent on August 7, 2002. Two hundred seventy-one surveys were sent to respondents from whom we did not have a response or a return by the post office at the time of the mailout. The second mailing of the questionnaire resulted in the following:

Completed surveys		36
Includes:	Complete with a disability	(27)
Includes:	Complete-No disability	(9)
Partially completed		3
Refusal		2
Unable to resolve address problem		6

In order to increase the response rate, Westat also decided to call respondents who had not completed surveys (or returns by the post office for incorrect address). Therefore, the same 271 names and addresses were sent for matching for telephone numbers on August 15, 2002. Telephone numbers for 145 respondents were obtained from our matching services.

Westat also did an Internet search on September 5, 2002. The search included any names and addresses for which we had not obtained a telephone number as well as those for whom the telephone numbers on hand were disconnected or wrong numbers (and from whom we had not received a response). Eight more numbers were found (plus correct numbers for nine others) for a total of 153 telephone numbers.

During calls to these respondents, Westat asked them to return the survey. If needed, they were sent another copy of the survey. The final results of those 153 calls were:

Received completed survey prior to telephone call (no call madeincluded in	(16)
results of 8/7/2002 mailing above)	
Received partially completed survey prior to telephone call (no call made—	(1)
included in results of 8/7/2002 mailing above)	
Completed surveys	32
Includes: Complete with a disability	(22)
Includes: Complete-No disability	(10)
New survey sent per respondent's request/ not returned	28
Refused (via telephone)	15
Wrong number/disconnected	34
Does not receive Section 8	2
Deceased	1
Unable to reach (ring no answer; left 4 messages, fax number, etc)	24

Yellow postcards (3' x 5") were sent to 194 people on September 9, 2002. These 194 people included those for whom Westat was not able to obtain a telephone number, and those for whom Westat found a disconnected or wrong number when we did call (and from whom we had not received a response as of 9/9/2002). Those postcards produced (final results):

Completed surveys		10
Includes:	Complete with a disability	(6)
Includes:	Complete-No disability	(4)
Requested new survey to be sent		5
Unable to resolve address problem		11

The same postcards were mailed on September 10, 2002 to 28 people who, during the telephone call, had agreed to return the survey, but who had not as yet returned it. Those postcards produced seven more completed surveys (one with a disability and six without a disability).

As of September 26, 2002, Westat still had not received completed surveys or return mail for 171 respondents (including those who requested new surveys and who had not returned them).² These

² Please note: Totals will exceed 400 because this was an evolving response process, and completed surveys came in while other contact procedures were being implemented.

respondents were sent the survey via Fedex (166) or Priority Mail (5--for those for whom we only had a post office or rural route address). The results of the Fedex and Priority mail out were:

Returned complete		37
Includes:	Complete with a disability	(21)
Includes:	Complete-No disability	(16)
Partially completed		3
Refused / returned blank		1
Unable to resolve address problem		8

Overall, 238 questionnaires have been returned completed. One hundred fifty-five answered the first question "yes," indicating they or a family member have a disability. Another 70 respondents answered the first question "no," indicating they or a family member do not have a disability. In addition, 13 did not answer the first question. Twenty respondents refused, either by returning the questionnaire blank through the mail or by verbally refusing on the telephone when Westat called to ask them to return the survey.

Therefore, the final results of the mailed questionnaire are:

Returned complete		225	
Includes:	Complete with a disability	(155)	
Includes:	Complete-No disability	(70)	
Partially completed		13	
Refused (returned blank/ via telephone)			
Unable to resolve address problem		34	
Not Section 8		2	
Deceased		2	
No response		104	

Table 5-2 shows the final results by location of the public housing authority. The San Luis Obispo Housing Authority, CA, and the Pueblo Housing Authority, CO, had sample sizes of 80 respondents. The number of completed surveys received were 47 and 44, respectively (with and without a disability combined). The numbers of surveys that fell into the other categories (address problems, refusals, etc) were also similar. The other four housing authorities: Montgomery, AL; Lowell, MA; Greensboro, NC and Marion, OH, had sample sizes of 60 respondents. Respondents served by the Lowell, MA housing authority responded at a lower rate for respondents with physical disabilities, but at about the same rate for people without physical disabilities as the other three housing authorities with a sample size of 60 respondents.

Table 5-2. Results by public housing authority

-					Unable			
					to			
					resolve		Not	
				Partially	address		Section 8/	No
	Results	Returned	complete	completed	problem	Refused	deceased	response
	Number							
Public Housing	of tenants	With a	Without a					
Authority	selected	disability	disability					
San Luis Obispo	80	32	15	1	8	4	0	20
Housing								
Authority, San								
Luis Obispo, CA								
Pueblo Housing	80	35	9	8	7	3	2	16
Authority,								
Pueblo, CO								
The Housing	60	28	10	1	3	3	0	15
Authority of the								
City of								
Montgomery,								
Montgomery, AL								
Lowell Housing	60	14	13	1	9	4	0	19
Authority,								
Lowell, MA								
Greensboro	60	25	9	0	4	1	1	20
Housing								
Authority,								
Greensboro, NC								
Marion	60	21	14	2	3	5	1	14
Housing								
Authority,								
Marion, OH								

The response rate for the survey was calculated by dividing the respondents for whom we received responses by the total surveys mailed. For the purposes of response rate calculation, overall surveys where responses were received totaled 276. The surveys where responses were received were defined as those that answered the first question "yes," indicating the respondent or a family member has a disability (155), those that answered the first question "no," indicating the respondent or a family member did not have a disability (70), and as those surveys that were partially completed (13) (i.e., the first question was not answered). Also included in this figure were the respondents who were deceased (2), those who did not receive Section 8 (2), and those for whom we were not able to obtain a correct address (34). (Note that all of the "ineligibles" are treated as "responses" in the response rate calculation.) Therefore, the overall response rate for this survey is 69.0% (276/400). Table 5-3 shows response rates

for each public housing authority. The response rates for each housing authority were calculated following the same logic as the overall response rate.

Table 5-3. Response rates by public housing authority

Public Housing Authority	Number of tenants selected	Surveys where information was received	Response rate
San Luis Obispo Housing Authority, San Luis Obispo, CA	80	56	70.0%
Pueblo Housing Authority, Pueblo, CO	80	61	76.3%
The Housing Authority of the City of Montgomery, Montgomery, AL	60	42	70.0%
Lowell Housing Authority, Lowell, MA	60	37	61.7%
Greensboro Housing Authority, Greensboro, NC	60	39	65%
Marion Housing Authority, Marion, OH	60	41	68.3%
Total	400	276	69.0%

6. SURVEY RESULTS FROM THE SIX SITES

6.1 Survey Results

This chapter describes the data collected in the mail survey questionnaire from the pretest of the questionnaire in six sites. The data from the six sites have been weighted for analysis across the six sites, but are not representative of housing choice voucher (HCV) tenants with physical disabilities across the United States. The weighting allows us to discuss the aggregated data across the six sites.

The draft mail questionnaire was sent to a sample of 400 across the six sites as described in Chapter 5. The questionnaire was sent to respondents who were listed as having a disability in the Multifamily Tenant Characteristics System (MTCS). The respondents could have either a mental or physical disability. For respondents that answered the survey, 72 percent said that they had a physical disability.

The respondents were then asked how long they have lived in their current home. Table 6-1 displays the results. The largest group lived in their current home 1 to 4 years followed by 5 to 10 years.

Table 6-1. Length of time in current home

Response category	Percentage
Less than six months	7
6-11 months	8
1-4 years	50
5-10 years	23
More than 10 years	11
Don't know	1

The HCV tenants with physical disabilities tended to live in older units, which is a potential problem because older units are less accessible than newer units. Many newer units are built to meet accessibility requirements. The respondents were asked the age of their rental unit. Thirty-eight percent said that they did not know and 44 percent said that the unit was over 10 years old. Only 8 percent said that the unit was 1 to 5 years old and another 8 percent said the unit was 6 to 10 years old.

The HCV tenants described the building they lived in as not primarily for elderly or persons with disabilities. Fifty-two percent said that the building was not primarily for either the elderly or persons with disabilities. Twenty percent said that their building was both for elderly and persons with disabilities. Only four percent said they lived in a building primarily for the elderly and only three percent said they lived in a building primarily for persons with disabilities.

When asked how they first found out about the Section 8 program, the three highest responses were a relative, friend, or neighbor (44%), a local housing agency (30%), and a local community center or service agency (26%).

When they applied for the Section 8 program, 31 percent said that they had trouble getting to the local housing agency and 26 percent said that they had trouble filling out the forms. Other problems cited were getting landlords to accept the Section 8 voucher and finding available units to rent.

Respondents were asked how long they were on the waiting list before they received their voucher. Twenty-six percent were on the waiting list for less than 6 months, 22 percent for 6 months to 1 year, and 17 percent for 1 to 2 years. Seventeen percent said that they were on the waiting list for more than 2 years. Ten percent said that did not know and 5 percent said the question was not applicable.

When asked about their main source of information on units available for rent, the HCV tenants said that the building manager was the source three percent of the time and community organizations were responsible for two percent. Ninety-three percent did not answer the question.

The respondents were asked how long it took to find the rental unit that they moved into with their voucher. Twenty-seven percent said that they rented in place, and 32 percent said that they found a new unit in less than 30 days. Twenty-four percent found a new unit in 31 to 60 days. Only 5 percent said that it took up 120 days and another 4 percent said that it took them from 4 to 6 months. In general, the tenants either rented in place or found a new unit within 60 days.

Twenty-six percent said that they had difficulty getting to the unit to look at it and another 18 percent said that the units provided by the PHA were inappropriate. Of the respondents who specified their answer, 18 said that they had trouble finding a landlord that accepted Section 8 vouchers.

When asked how many units they visited before finding one, 34 percent said three or more and 14 percent said one unit. Twenty-seven percent said they visited no units and 13 percent said that they did not search for a new unit. When asked how many units they wanted to rent of the units visited, 33 percent said one unit and 17 percent said two units. Fourteen percent said that they did not want to rent any of the rental units and 25 percent said that they did not search for a new unit.

The sampled tenants were asked if a landlord ever selected another tenant over them because of their disability. Thirteen percent felt that they were not selected because of their disability. Twenty percent said that they were not selected by a landlord because of their income or credit history.

The tenants were asked how many times they moved since selecting their first Section 8 rental unit. Forty-two percent said that they have not moved at all and 21 percent said that they had moved once. Sixteen percent moved two times and 20 percent moved three or more times.

When asked to list all of the reasons that the tenants selected their current unit, they listed the reasons in Table 6-2.

Table 6-2. Reasons why current unit was selected

Reasons	Percentage
More features for persons with disabilities than other available units	10
Located in better neighborhood	39
Shorter waiting list than other units	18
Less expensive	27
Located near shopping	33
Located near transportation	26
Located near schools	16
Close to family and friends	34
Other specify	29

The most significant reasons cited for selection were located in a better neighborhood, close to family and friends, and near shopping. Another important factor was that the unit selected was less expensive than their current unit. In the other specify category, the main reasons cited were already in the unit, met my desires, and like the landlord.

The HCV tenants were asked about the role of the local housing agency in helping them find a rental unit that would meet their needs. Twenty-three percent said that the housing authority gave them a list of rental units with features for persons with disabilities. Ten percent said that they were given additional time to find a unit and 5 percent said that they were allowed to select a unit with rent that was higher than usual. Fifty-six percent said that they did not get any assistance specified in the question from the housing agency.

When the HCV tenants were asked if the local housing agency told them about any special Section 8 assistance for persons with disabilities, 58 percent said that they were not told about any special assistance. Twenty-four percent said that they were told about additional time to find a unit and 14 percent were told that they could choose a unit with higher rent than usual. Fifteen percent were told that they could rent a unit outside the normal area.

The HCV tenants were asked if they needed additional items to help them accommodate their disability. The results are listed in descending order in Table 6-3. The top items, including larger bathroom, larger kitchen, and lowered cabinets, are all expensive modifications; the items lower on the list are fairly inexpensive. In the other specify category, the two top needs were bathroom modifications and improvements to outside accessibility.

Table 6-3. Additional items needed in rental unit

Additional items needed	Percent
Larger bathroom	26
Larger kitchen	19
Lowered cabinets and counter tops	14
Lever rather than knob sink faucets	12
Raised toilets	12
Raised or lowered wall sockets or light switches	9
Raised sinks	4
Other specify	29

The HCV tenants were also asked if their units already had the features listed in table above. The percentages that have these features are listed in Table 6-4 and are fairly evenly spread across the features. The largest percentage in other specify was outside accessibility improvements.

Table 6-4. Features in current units

Additional items needed	Percent
Larger bathroom	14
Larger kitchen	16
Lowered cabinets and counter tops	10
Lever rather than knob sink faucets	15
Raised toilets	10
Raised or lowered wall sockets or light switches	17
Raised sinks	8
Other specify	18

When asked whether they had requested these modifications and had permission to install the modifications, 93 percent said no and only 7 percent said yes. The group of tenants that proceeded with modifications said that the landlord paid for the modification 15 percent of the time, the local housing agency paid 5 percent of the time, and they paid for the modifications 5 percent of the time (75 percent did not provide a response).

The HCV tenants were asked if they requested information on supportive services from the local housing agency or their landlord. Seventy-one percent said that they did not know about or request information on supportive services. The supportive services that were the most requested included health services, transportation, and assistance with personal activities such as bathing, dressing, cooking, or cleaning.

HCV tenants were asked if they ever received a Section 8 voucher that expired because they could not find a unit. Only one percent said they had a voucher expire. The survey only surveyed families that successfully used their vouchers. If unsuccessful voucher holders were surveyed, the percent who had their vouchers would be much higher.

The HCV tenants were asked about their satisfaction level with a number of factors. The satisfaction level with each factor is displayed in Table 6-5. In general, the great majority of the HCV tenants were either somewhat satisfied or very satisfied with all of the factors listed. The range of percentages in the very and somewhat satisfied response categories was narrow, with a high of

Table 6-5. Satisfaction levels

How satisfied are you with	Very dissatisfied	Somewhat dissatisfied	Neither satisfied nor dissatisfied	Somewhat satisfied	Very satisfied
The Section 8 voucher application process	7	5	10	24	55
The support provided by the housing agency to locate a unit that met your needs	12	7	18	16	47
Your current landlord	8	10	9	17	56
Your current apartment	7	9	5	23	55
Your current neighborhood	10	7	12	25	47
Getting to your building from the parking lot, bus stop, or other location you use	7	8	9	17	60
Using other areas of your building or complex, such as the laundry room, garbage or trash receptacles, mailboxes, hallways, or park benches	6	6	16	19	53
Getting into your building and unit from the outside	5	8	8	16	63
Getting around inside your unit	3	6	11	19	61
Using your kitchen	7	7	9	19	58
Using the bathroom	10	6	15	16	53
Getting around the community for grocery shopping, medical services, or other purposes	7	6	12	23	51

80 percent and a low of 63 percent. The mean of all of the responses indicated that 74 percent were either somewhat or very satisfied. The 63 percent satisfaction refers to the housing authority's provision of support to help find housing that would meet their needs. The highest very dissatisfied factors concerned

the support provided by the local housing agency in finding a unit that met their needs and using the bathroom, at 12 and 10 percent respectively.

6.2 Questions in the Mail Questionnaire That Can Be Modified

Question 8 should be eliminated. It is not necessary because of question 5 and very few respondents answered the question. Question 21 should be divided into two questions: Have you requested any of these modifications? Has your landlord or housing agency given you permission to make these modifications?

7. SAMPLE DESIGN FOR THE NATIONAL SURVEY

The quality and usefulness of survey data for analysis will depend largely on the procedures to be used to select the samples. Because surveying every housing choice voucher (HCV) tenant in each public housing authority (PHA) is usually impractical and unnecessary, a nationally representative sample of the entire population will be used for the proposed mail survey. Although the sample can be selected in many ways, the results from a properly designed "probability" sample can be generalized to the entire tenant population from which the sample was drawn. A probability sample is one in which each eligible respondent in the population has a known probability of selection. Inferences from a nonprobability sample (e.g., a convenient or purposive sample) are not generalizable since they are limited to those tenants who participate in the study.

In addition to being generalizable, a probability sample should be efficient, that is, cost effective with respect to achieving the precision goals specified for the study. The more precise the sample results, the more confidence one can have in them. An efficient sample design depends on both sample size and the procedures used to select the sample.

The following sections contain a description of our general approach to designing an efficient sample for the proposed mail survey of HCV tenants with physical disabilities. We begin with a discussion of the levels of precision than can be achieved with simple random sizes of various sizes. The purpose of this section is to provide some guidance on the levels of precision that may be useful for HUD analysts. Section 7.2 is a description of the sampling frame that will be used to select tenants for the mail survey. Section 7.3 presents some alternative approaches for selecting the tenant samples. Finally, Section 7.4 has estimates of the expected levels of precision for subgroup analysis.

7.1 Levels of Precision under Simple Random Sampling

Table 7-1 provides examples of the sampling precision that can be achieved based on simple random samples of various sizes. The entries in the table are 95 percent confidence limits on the estimate for a point prevalence and for a comparison between two estimates. In this table we assume that the percentage of persons selecting any particular response item on a survey questionnaire is roughly 50 percent. For example, this assumes that for a specific question of interest, half the respondents will

answer "yes" and half will answer "no." This is a "worst-case" scenario, where the response pattern is most difficult to predict, but we assume that such a pattern will be the case for at least some of the survey items we analyze.

Note that if detailed analysis of selected subgroups is required (in addition to overall national estimates), the total sample size must be increased accordingly. For example, if HUD would like to compute separate estimates for two different racial groupings with the same stated level of precision, the sample size for each would have to meet the size requirements indicated in the first column of Table 7-1. However, when comparing these two estimates, the level of precision associated with the estimated difference will be less than for each point estimate. For example, as Table 7-1 shows, for a sample size of 400, the 95 percent confidence limits for a particular response item will be plus or minus 5 percent of the point estimate. If we wanted to compare this estimate with the corresponding estimate for another subgroup of roughly the same sample size, the 95 percent confidence limits would be plus or minus 7 percent of the estimated difference. Thus, Table 7-1 provides a useful starting point for deciding on the minimum sample sizes needed to satisfy HUD's precision requirements. In developing the final sample design, we will work closely with the GTR to ensure that the mail survey results will support the full range of analyses HUD anticipates.

Table 7-1. 95 percent confidence limits for an estimated prevalence of 50 percent, based on simple random sample of various sizes

	Reliability of the estimate expressed in terms of 95% confidence limits				
Sample size (n)	Point prevalence Comparison*				
100	±10%	±14%			
200	±7%	$\pm 10\%$			
400	±5%	±7%			
800	±3.5%	±5%			
1,600	±2.5%	±3.5%			

^{*} Sample size refers to the sample size in each group being compared.

7.2 Sampling Frame

The Multifamily Tenant Characteristics System (MTCS) file will be used to define the sampling frame (i.e., universe file) from which the sample of HCV tenants with disabilities will be drawn

for the mail survey. As summarized in Table 7-2, almost 4 million tenants (in about 1.5 million families/households) are currently listed in the file. Of these, 534,000 (approximately 13 percent) are coded as having a disability In addition to disability status, the MTCS includes person-level information on race, Hispanic origin, sex, age, family status, and income that can be used for stratification. However, the available disability code does not distinguish between physical/communication and mental disabilities. Since persons with only mental disabilities are not eligible for the mail survey, allowance must be made in sampling to compensate for the resulting ineligibility losses. According to the U.S. Census Bureau's *Current Population Reports: Americans with Disabilities* (P70-73), an estimated 10 percent of persons with disabilities have mental disabilities only. Although this estimate applies to the general U.S. population, we expect that the percentage of disabled persons residing in HCV housing who have only mental disabilities will be roughly the same. Thus, for initial planning purposes, we will assume that 10 percent of the disabled population in the MTCS will be ineligible for the survey.

Table 7-2. Number of families and persons with disabilities in the MTCS universe file by size of PHA

Size of PHA (No. families)	Number of PHAs	Number of families	Number of persons	Number of persons with disability	Percent of persons with disability*
Less than 216	1,351	120,092	294,147	39,526	13.4%
216 to 699	691	273,603	682,075	97,887	14.4%
700 to 1,499	269	271,355	719,597	96,049	13.3%
1,500 to 3,499	125	280,662	757,901	104,345	13.8%
3,500 to 9.999	56	323,697	898,926	114,129	12.7%
10,000+	11	229,089	624,487	82,131	13.2%
Total	2,503	1,498,498	3,977,133	534,067	13.4%

^{*}Includes physical and mental disabilities.

7.3 Options for Sample Selection

The discussion in Section 7.1 suggests that a sample size of at least 400 respondents will provide adequate sampling precision for most national estimates. To the extent that subgroup analysis is also desired, the total sample size must be increased accordingly. For example, to achieve a margin of error of ± 5 percent on point estimates for each of two subgroups, a total sample size of 800 would be required. For four subgroups, a total sample size of 1,600 would be required. Thus, for the purposes of the following discussion, we consider alternative sample sizes of 400, 800, and 1,600 respondents.

7.3.1 Independent Samples

Ordinarily, the most straightforward design for the mail survey would be to select independent systematic samples of disabled persons directly from the most current MTCS universe file. Such a sample could be designed to be "self weighting" where every sampled person has the same probability of selection. The sample would be "unclustered" in the sense that, at most, one disabled person would be selected from each family/household. The latter is desirable because including more than one disabled household member in the sample will tend to increase sampling errors, although in practice the resulting loss in precision may be small. Table 7-3 illustrates the allocation of independent samples designed to achieve 400, 800, and 1,600 respondents. These three sample sizes may be viewed as corresponding to designs with relatively "low," "moderate," and "high" degree of precision, respectively. As indicated in the table, the samples would be distributed across the various size classes of PHAs in proportion to the number of disabled persons. Note that the sample sizes given in Table 7-3 have been adjusted to reflect anticipated losses due to both nonresponse and ineligibility. Thus, for example, an estimated 741 disabled persons must be selected from the MTCS to obtain 400 completed questionnaires from disabled respondents.

If desired, stratification can be employed to improve the sampling precision of estimates for subgroups that would otherwise be underrepresented in the sample. For example, if a goal is to obtain equally precise estimates for subgroups defined by characteristics available in the MTCS such as race/ethnicity, age group, or gender, it will be feasible to stratify the frame by the specified characteristics in order to allocate the samples equally to the desired subgroups. However, depending on how much the resulting sample distribution differs from the corresponding population distribution, the sampling variance of overall estimates will be inflated by a factor, D, referred to as the "unequal weighting design effect." This loss in precision can also be expressed in terms of the "effective" sample size, n_{eff} , which is the actual sample size, n_{eff} , divided by D.

The size of the design effect, *D*, resulting from the equal (and thus disproportionate) allocation of the sample to various subgroups is illustrated in Table 7-4. In the first column of the table, selected subgroup analyses involving pairwise comparisons are indicated. For example, the first set of comparisons would involve comparisons between two racial groups: white vs. nonwhite. The second set of comparisons would involve comparisons between Hispanics and nonHispanics, and so on. Each pair of comparisons given in the table is intended to illustrate the impact that disproportionate allocation of the sample to subgroups will have on overall estimates. For example, for the first set of comparisons between

white and nonwhite tenants, the design effect would be 1.00 for both subgroups as long as persons within each subgroup are sampled at the same rate. This would also be true for the other subgroups listed in the table. Thus, while the effective sample size for each subgroup would be the same as the actual sample size, this would not be true for overall estimates. As can be seen in Table 7-4, the design effects for overall (total) estimates are all greater than 1. For example, if nonwhite residents were over sampled to the extent indicated in the table, the resulting design effect for overall estimates would be 1.07. This implies that if the total sample size is 400 (200 white and 200 nonwhite), the effective sample size for overall estimates would be $n_{eff} = 400/1.07 = 374$. On the other hand, if instead of oversampling nonwhite residents, Hispanic residents are oversampled (200 Hispanic and 200 nonHispanic), the resulting effective sample size for overall estimates would only be $n_{eff} = 400/1.58 = 253$. Thus, it can be seen in Table 7-4 that the more a subgroup is oversampled, the greater will be the reduction in effective sample size for overall estimates. Oversampling to enhance subgroup analysis is an option that will depend on the analytic requirements for the study.

Table 7-3. Distribution of independent samples of disabled persons by size of PHA

Size of PHA	Number of	Number of Number of persons in persons with		Number to be sampled to obtain specified number of completes*		
(No. families)	PHAs	MTCS	disability	n = 400	n = 800	n = 1,600
Less than 216	1,351	294,147	39,526	55	110	219
216 to 699	691	682,075	97,887	136	272	543
700 to 1,499	269	719,597	96,049	133	266	533
1,500 to 3,499	125	757,901	104,345	145	289	579
3,500 to 9.999	56	898,926	114,129	158	317	633
10,000+	11	624,487	82,131	114	228	456
Total	2,503	3,977,133	534,067	741	1,481	2,963

^{*}Assumes 10 percent of disabled persons have mental disabilities only and a mail survey response rate of 60 percent.

Table 7-4. Design effects and effective sample sizes for selected subgroup analyses assuming equal sample sizes per subgroup

	Percent of		Effective	Effective sample size based on total		
	disabled persons	Design	actual sample size of:			
Subgroup analysis	in MTCS	effect*	n = 400	n = 800	n = 1,600	
White	63%	1.00	200	400	800	
Nonwhite	37%	1.00	200	400	800	
Total	100%	1.07	374	748	1,495	
Hispanic	12%	1.00	200	400	800	
NonHispanic	88%	1.00	200	400	800	
Total	100%	1.58	253	506	1,013	
Male	34%	1.00	200	400	800	
Female	66%	1.00	200	400	800	
Total	100%	1.10	364	727	1,455	
Income <10K	68%	1.00	200	400	800	
Income 10K+	32%	1.00	200	400	800	
Total	100%	1.13	354	708	1,416	
Age under 65	82%	1.00	200	400	800	
Age 65+	18%	1.00	200	400	800	
Total	100%	1.40	286	571	1,143	

^{*}Design effects for subgroups will be 1.00 if all persons within the subgroup are sampled at the same rate.

7.3.2 Linked Sample Design

To take advantage of data collection operations currently in place, it is possible to "piggy back" the sample for the proposed disability study onto the existing sample for HUD's ongoing monthly customer satisfaction surveys. Under a linked design, a subset of disabled persons within the households selected for the customer satisfaction survey would be identified and subsampled for the disability survey. Unlike the proposed disability study where the unit of analysis is the tenant (person), the unit of sampling and analysis for HUD's customer satisfaction surveys is the "family/household." As summarized in Table 7-5, more than 30,000 families are selected for the customer satisfaction surveys each month, for a total annual sample size of more than 360,000 families/households. Each monthly sample of 30,000 families households will include more than 81,000 residents (persons), of who roughly 10,000 (about 13 percent) will be persons with disabilities (see last column of Table 7-5). The large sample size specified

for the customer satisfaction survey is driven by the need to obtain precise estimates for each of the more than 2,500 PHAs in the MTCS.

As indicated in Table 7-5, in PHAs with 215 or fewer families, all families are selected for the customer satisfaction survey. Among the remaining PHAs, 215 families are sampled per PHA per year. As a consequence of fixing the sample size at 215 per PHA, the annual sampling rates vary from a low of 1 in 100 (1 percent) in the largest PHAs to a high of 1 in 1 (100 percent) in the smallest PHAs. Such a design, while approximately optimal for PHA-level comparisons, is relatively inefficient for overall national estimates. In particular, the design effect for national estimates is roughly 6.0, which implies that the effective size of each monthly sample is roughly one-sixth of the nominal monthly sample size of 30,000 families. In other words, the use of a fixed sample size per PHA seriously underrepresents the largest PHAs in the total sample; e.g., while the 67 largest PHAs account for more than one-third of all families in the population, they account for only 4 percent of the estimated 10,600 persons with disabilities in the sample. Although the sample is unbiased with proper weighting, this disparity results in a significant loss in precision for overall national estimates.

Table 7-5. Distribution of families in MTCS and corresponding sample sizes for the monthly customer satisfaction survey

	Number of	Number of families in	Number of families in	Average annual		Expected number of disabled
Size of PHA	PHAs in	MTCS	annual	sampling	Monthly	persons in
(No. families)	MTCS	population	sample	rate	sample size	monthly sample
Less than 216	1,351	120,092	120,092	1.0000	10,008	3,294
216 to 699	691	273,603	148,565	0.5430	12,380	4,429
700 to 1,499	269	271,355	57,835	0.2131	4,820	1,706
1,500 to 3,499	125	280,662	26,875	0.0958	2,240	833
3,500 to 9.999	56	323,697	12,040	0.0372	1,003	354
10,000+	11	229,089	2,365	0.0103	197	71
Total	2,503	1,498,498	367,772		30,648	10,686

The last column of Table 7-5 summarizes the distribution of the estimated 10,000 disabled persons available in the monthly customer satisfaction sample by size of PHA. However, because of the inefficiencies mentioned above, the effective sample size will be much lower than these sample counts suggest. In Table 7-6, a comparison of the sample allocations under the independent and linked sample designs is presented for three levels of sample size (representing various degrees of sampling precision).

Under each of the designs, the number of persons to be sampled, the expected numbers of completed questionnaires, and the effective sample sizes are shown. For samples designed to achieve a relatively low degree of precision, it can be seen that the sample allocation under the linked design is only marginally greater than that for the independent sample. However, to achieve a moderate degree of precision, the total sample size for the linked design must be increased by 50 percent in order to achieve the same level of precision as the independent sample. In this case, a sizable increase in sample size in the smaller PHAs is needed to offset the insufficient sample sizes available from the large PHAs. Finally, for a relatively high degree of precision, it can be seen from Table 7-6 that even if all 10,000 disabled persons in the monthly customer satisfaction sample were included in the disability survey, the effective sample size would still be about 37 percent less than that of the independent sample. These results suggest that while it will be feasible to link the disability sample to the ongoing customer satisfaction surveys, it will only be efficient to do so for designs with relatively low levels of precision. For moderate to high levels of precision, we expect that an independent sample for the disability survey will be more cost effective.

Table 7-6. Comparison of sample allocation under independent and linked sample designs by desired degree of precision of sample

	Degree of precision of sample					
	Lo	W	Mod	lerate	Н	igh
Size of PHA (No. families)	Indep.	Linked	Indep.	Linked	Indep.	Linked
Less than 216	55	62	110	217	219	3,294
216 to 699	136	154	272	538	543	4,429
700 to 1,499	133	151	266	528	533	1,706
1,500 to 3,499	145	164	289	574	579	833
3,500 to 9.999	158	179	317	354	633	354
10,000+	114	71	228	71	456	71
Total sampled	741	780	1,481	2,282	2,963	10,686
Number of completes	400	421	800	1,232	1,600	5,771
Effective sample size	400	400	800	800	1,600	1,004

Note that the linked designs described above assume that persons to be selected for the disability survey will be members of families/households in a given monthly customer satisfaction sample. This will maximize the overlap between the samples, which is desirable from an operational perspective as well as from an analytical perspective. However, because of the inherent inefficiencies associated with the existing customer satisfaction samples, a hybrid approach involving features of both independent and linked samples will also merit consideration. For example, it may be possible to

supplement the existing HUD samples in the larger PHAs in a way that will significantly reduce the total overall sample size, while maintaining as much overlap with the existing sample as possible.

7.4 Recommended Design for the Mail Survey

Although a linked design of the type described in the previous section offers both operational advantages and enhanced analytic potential, its ability to provide an efficient sample for the proposed mail survey is severely limited by the structure of the existing monthly customer satisfaction samples. As indicated in the analysis above, for moderate to large sample sizes, the linked design will require substantially more sample persons than will an independent sample of equal precision. Even with relatively small sample sizes, the cost savings associated with the linked design are expected to be minimal. On the other hand, an independent sample design offers the maximum flexibility for designing efficient samples for both national and subgroup analysis. Thus, unless there are overriding reasons for linking the mail survey respondents with households selected for the monthly customer satisfaction surveys, an independent sample design is recommended for the mail survey. The sample design will include stratification to improve sampling precision and to target selected subgroups for oversampling if desired.

7.5 Expected Levels of Precision for Subgroup Analysis

In Table 7-7, we provide estimates of precision for selected subgroups. The results are based on a self-weighting design in which no subgroups are oversampled. In other words, the resulting sample sizes by subgroup reflect the corresponding distributions in the MTCS universe file. The purpose of this table is simply to provide an indication of the levels of precision that can be achieved for the disability survey, and to identify subgroups that HUD may wish to supplement for analysis purposes. For simplicity, the results are given for an independent sample design. As indicated in the table, estimates for subgroups defined by sex, major racial groups, and major family-type categories should be reasonably precise under a self-weighting sample design. On the other hand, it can also be seen that if precise estimates are desired for rare groups (e.g., groups representing less than 20 percent of the total sample), considerable supplementation (oversampling) will be necessary.

7-7. Expected levels of precision for selected subgroups and self-weighting samples of various sizes

	Percent in	Total sample size (eligible disabled respondents)					
	pop. with	n =	= 400	n =	= 800	n =	1,600
Characteristic of	specified	Exp.	95% conf.	Exp.	95% conf.	Exp.	95% conf.
subgroup	character.	sample	limits	sample	limits	sample	limits
Sex							
Male	34%	136	$\pm 8.4\%$	272	$\pm 5.9\%$	544	$\pm 4.2\%$
Female	66%	264	$\pm 6.0\%$	528	$\pm 4.3\%$	1,056	$\pm 3.0\%$
Race							
White	63%	252	$\pm 6.2\%$	504	$\pm 4.4\%$	1,008	$\pm 3.1\%$
Black	33%	132	$\pm 8.5\%$	264	$\pm 6.0\%$	528	$\pm 4.3\%$
All others	4%	16	$\pm 24.5\%$	32	$\pm 17.3\%$	64	$\pm 12.3\%$
Ethnicity							
Hispanic	12%	48	$\pm 14.1\%$	96	$\pm 10.0\%$	192	$\pm 7.1\%$
Nonhispanic	88%	352	$\pm 5.2\%$	704	$\pm 3.7\%$	1,408	$\pm 2.6\%$
Age group							
Under 18 years	7%	28	$\pm 18.5\%$	56	±13.1%	112	±9.3%
18 to 34 years	14%	57	$\pm 13.0\%$	114	$\pm 9.2\%$	229	$\pm 6.5\%$
35 to 44 years	21%	84	$\pm 10.7\%$	168	$\pm 7.6\%$	336	$\pm 5.3\%$
45 to 54 years	22%	88	$\pm 10.4\%$	176	$\pm 7.4\%$	352	$\pm 5.2\%$
55 to 64 years	19%	76	$\pm 11.2\%$	152	$\pm 7.9\%$	304	$\pm 5.6\%$
65+ years	18%	72	$\pm 11.5\%$	144	$\pm 8.2\%$	288	$\pm 5.8\%$
Family type							
Single parent	25%	100	$\pm 9.8\%$	200	±6.9%	400	$\pm 4.9\%$
Single adult	55%	220	±6.6%	440	$\pm 4.7\%$	880	±3.3%
All other types	20%	80	$\pm 11.0\%$	160	$\pm 7.7\%$	320	$\pm 5.5\%$
Family income							
Under \$10,000	68%	272	±5.9%	544	$\pm 4.2\%$	1,088	±3.0%
\$10,000 to							
\$14,999	20%	80	$\pm 11.0\%$	160	$\pm 7.7\%$	320	$\pm 5.5\%$
\$15,000+	12%	48	$\pm 14.1\%$	96	$\pm 10.0\%$	192	$\pm 7.1\%$

8. CONCLUSIONS

8.1 Results from the Site Visits

The Westat team visited six sites as part of the process of developing a mail questionnaire for HUD. In each of the site visits, the Westat team conducted four major activities:

- A detailed interview with public housing authority (PHA) staff using an interview guide that was focused on the problems people with physical disabilities have in participating in the housing choice voucher (HCV) program;
- A focus group with housing choice voucher (HCV) tenants with physical disabilities on the difficulties they have had participating in the HCV program;
- A focus group on the experiences of landlords who participate in the HCV program and house HCV tenants with physical disabilities; and
- A focus group with landlords who participate in the HCV program but do not house HCV tenants with physical disabilities on why they do not house HCV tenants with physical disabilities.

All of the PHAs said that they would respond "No" to question 5f in the 50058 form, asking if there were any requests for modifications, because they had received no requests for modifications. It appears that HUD will not get much useful information from adding questions 5f and 5g to the HCV application form.

According to pretest results, HCV tenants thought that the PHAs had not been as helpful as they could have been in regard to assistance in housing searches. PHAs have a number of low cost actions they can take to assist persons with physical disabilities in their search for housing, including the following:

- Provide a list of landlords who have accessible units:
- Recruit landlords with accessible units to the HCV program;
- Partner with a local agency that serves a population with physical disabilities to learn more about the problems and identify the need for accessible housing; and
- Either provide assistance in the search process or partner with an agency that can provide support.

HUD can provide information to the PHAs that they can use to recruit landlords to provide accessible units. Our focus groups with landlords revealed that many landlords said that tenants with physical disabilities make better tenants because they:

- Pay on time;
- Take better care of the units, and;
- Stay in the units for longer periods of time.

PHAs generally had the perception that they were meeting the needs of persons with physical disabilities; the tenants said that they had some difficulties in the search process for units and they did not have all of the accessibility modifications they would like. Advocacy agencies said that the accessible housing need was not being met, but PHAs did think that the need was being met.

Landlords could use more information and training on the accessibility laws and the PHA could conduct the training and provide handouts.

8.2 Results from the Pretest

Westat pretested a mailout questionnaire in six sites. The data from the six sites have been weighted for analysis across the six sites, but are not representative of HCV tenants with physical disabilities across the United States. The six-page survey instrument generally worked well and only a couple of questions should be changed. Westat achieved a 69 percent response rate with this mail questionnaire.

The HCV tenants with physical disabilities tend to live in older units, which is a potential problem because older units are less accessible than newer units. Many newer units are built to meet accessibility requirements. The respondents were asked how old their rental unit was. Thirty-eight percent said that they did not know and 44 percent said that the unit was more than 10 years old. Only 8 percent said that the unit was 1 to 5 years old; another 8 percent said the unit was 6 to 10 years old.

The HCV tenants described the building they lived in as not primarily for elderly or persons with disabilities. Fifty-two percent said that the building was not primarily for either the elderly or persons with disabilities. Twenty percent said that their building was both for elderly and persons with

disabilities. Only four percent said they lived in a building primarily for the elderly and only three percent said they lived in a building primarily for persons with disabilities.

When asked how they first found out about the Section 8 program, the three highest responses were a relative, friend, or neighbor (44%), a local housing agency (30%), and a local community center or service agency (26%).

When they applied for the Section 8 program, 31 percent said that they had trouble getting to the local housing agency and 26 percent said that they had trouble filling out the forms. Other problems cited were getting landlords to accept the Section 8 voucher and finding available units to rent.

The most significant reasons for living in their current unit were location in a better neighborhood, close to family and friends, and location near shopping. A less expensive unit was another important factor.

The HCV tenants were asked about the role of the local housing agency helping them find a rental unit that would meet their needs. Twenty-three percent said that the housing authority gave them a list of rental units with features for persons with disabilities. Ten percent said that they were given additional time to find a unit; 5 percent said that they were allowed to select a unit with rent that was higher than usual. Fifty-six percent said that they did not get any assistance specified in the question from the housing agency.

When the HCV tenants were asked if the local housing agency told them about any special Section 8 assistance for persons with disabilities, 58 percent said that they were not told about any special assistance. Twenty-four percent said that they were told about additional time to find a unit, and 14 percent were told that they could choose a unit with higher rent than usual. Fifteen percent were told that they could rent a unit outside the normal area.

The HCV tenants were asked if they requested information on supportive services from the local housing agency or their landlord. Seventy-one percent said that they did not know about or request information on supportive services. The supportive services that were the most requested included health services, transportation, and assistance with personal activities such as bathing, dressing, cooking, or cleaning.

The HCV tenants were asked about their satisfaction level with a number of factors. In general, the great majority of the HCV tenants were either somewhat satisfied or very satisfied with all of the factors listed. The range of percentages in the very and somewhat satisfied response categories was narrow, with a high of 80 percent and a low of 63 percent. The mean of all of the responses was 74 percent who were either somewhat or very satisfied. The 63 percent is in the area of the housing authority providing support to help them find a housing that would meet their needs. The highest very dissatisfied factors were the support provided by the local housing agency in finding a unit that met their needs and using the bathroom at 12 and 10 percent respectively.

Changes to the Mail Questionnaire

Question 8 should be eliminated. It is not necessary because of question 5 and very few respondents answered the question. Question 21 should be divided into two questions: Have you requested any of these modifications and has your landlord or housing agency given you permission to make these modifications?

8.3 Conclusions in regard to a National Survey

A national survey is very feasible. The mail questionnaire generally worked very well and a fairly high response rate can be achieved. HUD was originally considering the idea of appending the mail survey to an existing mail satisfaction survey of a sample of all HCV tenants. Westat recommends a separate national survey for HCV tenants with physical disabilities. Conducting a separate survey would be much more efficient than appending the new survey on to an existing survey with different objectives.

The quality and usefulness of survey data for analysis will depend largely on the procedures to be used to select the samples. Because surveying every HCV tenant in each PHA is usually impractical and unnecessary, a nationally representative sample of the entire population should be used for the proposed mail survey. Although the sample can be selected in many ways, the results from a properly designed "probability" sample can be generalized to the entire tenant population from which the sample was drawn. A probability sample is one in which each eligible respondent in the population has a known probability of selection. Inferences from a nonprobability sample (e.g., a convenient or purposive sample) are not generalizable since they are limited to those tenants who participate in the study.

In addition to being generalizable, a probability sample should be efficient, that is, the sample design is one that is cost effective with respect to achieving the precision goals specified for the study. The more precise the sample results, the more confidence one can have in them. An efficient sample design depends on both sample size and the procedures used to select the sample.

The Multifamily Tenant Characteristics System (MTCS) file will be used to define the sampling frame (i.e., universe file) from which the sample of HCV tenants with disabilities will be drawn for the mail survey. Almost 4 million tenants (in about 1.5 million families/households) are currently listed in the file. Of these, 534,000 (approximately 13 percent) are coded as having a disability. In addition to disability status, the MTCS includes person-level information on race, Hispanic origin, sex, age, family status, and income that can be used for stratification. However, the available disability code does not distinguish between physical/communication and mental disabilities. Since persons with only mental disabilities are not eligible for the mail survey, allowance must be made in sampling to compensate for the resulting ineligibility losses. According to the U.S. Census Bureau's *Current Population Reports*: *Americans with Disabilities* (P70-73), an estimated 10 percent of persons with disabilities have mental disabilities only. Although this estimate applies to the general U.S. population, we expect that the percentage of disabled persons residing in HCV housing who have only mental disabilities will be roughly the same (in the sample of 400 used in the pretest, 27 percent said that they had mental disabilities). Thus, for initial planning purposes, we will assume that ten percent of the disabled population in the MTCS will be ineligible for the survey.

Although a sample design linked to the existing national HUD survey of HCV customer satisfaction offers both operational advantages and enhanced analytic potential, its ability to provide an efficient sample for the proposed mail survey is severely limited by the structure of the existing monthly customer satisfaction samples. As indicated in the analysis above, for moderate to large sample sizes, the linked design will require substantially more sample persons than an independent sample of equal precision. Even with relatively small sample sizes, the cost savings associated with the linked design are expected to be minimal. On the other hand, an independent sample design offers the maximum flexibility for designing efficient samples for both national and subgroup analysis. Thus, unless there are overriding reasons for linking the mail survey respondents with households selected for the monthly customer satisfaction surveys, an independent sample design is recommended for the mail survey. The sample design will include stratification to improve sampling precision and to target selected subgroups for over sampling if desired.

HOUSING CHOICE VOUCHER TENANT ACCESSIBILITY STUDY: 2001-2002 GREENSBORO HOUSING AUTHORITY GREENSBORO, NORTH CAROLINA FEBRUARY 28 AND MARCH 1, 2002

Sponsoring Agency: U.S. Department of Housing and Urban Development

Office of Policy Development and Research

451 Seventh Street, SW Washington, D.C.

Contract Number: C-OPC-21761

Contract Persons: Mike Shea Connie M. Campos

Westat Johnson, Bassin & Shaw, Inc. 1650 Research Blvd. 8630 Fenton Street, 12th Floor Rockville, MD 20850-3120 Silver Spring, MD 20910

1. Background

The Greensboro Housing Authority (HA) is located in Greensboro, NC. Its jurisdiction includes Guilford County except for the City of Highpoint, which has its own public housing authority (PHA). The area is both urban and rural. Greensboro HA has 2,448 housing choice vouchers (155 mainstream vouchers were recently awarded), public housing, and new construction units. Its waiting list has been closed since December 2001. It has approximately 2,300 persons on the housing choice voucher (HCV) waiting list.

	Greensboro Housing Authority	
Hous	sing Choice Voucher Program Wait	ing List
	Number of families	Percentage of total families
Waiting list total	2,358	
Extremely low income	1,903	80.1
Very low income	433	18.4
Low income	22	.9
Families with children	1,530	64.9
Elderly families	74	3.14
Families with disabilities	106	4.5
Black	2,173	92.2
White	169	7.1
Other	16	.7

Source: GHA FY 2002 Annual Plan

2. Profile of Housing Choice Voucher Tenants with Physical Disabilities in the Public Housing Authority

The Greensboro HA does not have any way of distinguishing between persons with a physical disability and those with a mental disability because of the requirement that prohibits the PHA from asking about the nature of the disability. The PHA does have a preference for elderly and disabled people plus a new preference for mainstream-eligible families referred by partner agencies.

3. Model for Serving Tenants with Physical Disabilities

The PHA does not have a specific program in the housing choice voucher program for persons with a disability; however, the new allocation of funding for mainstream vouchers will allow its partner agency to provide services directly to these families. The PHA does provide lists of landlords who rent to voucher holders. The PHA form requesting owner participation collects information on accessibility features, but the referral list does not indicate which owners have accessible units.

4. Operation of the Program for Families with Physical Disabilities

The PHA has a case manager on staff that works with the mainstream program and the Shelter Plus Care rental program to provide Housing Search Assistance for these families. Although the PHA has received three funding rounds of mainstream housing to provide services to these families, they do not have any additional funding to cover costs. The PHA does not provide transportation for families to search for units, but their partner agencies provide transportation services.

The payment standard for a two-bedroom unit is \$578 (established payment standard is 110% of FMR), and the area exception payment standard is \$674 for certain census tracts. These rents have been acceptable for housing disabled families. The PHA does not provide exception rents to assist persons with disabilities to cover the costs of leasing higher cost accessible units. The PHA provides an initial 60-day search period with an additional 120 days if needed, and has noticed that physically disabled persons on the program use fewer than 120 days. In addition, the lease up rate is better for persons with disabilities than for those without disabilities.

The PHA does not provide for a separate source of funding for accessibility modifications because they have never had any requests from landlords.

5. Housing Choice Voucher Tenant Comments on the Search Process

The tenant focus group was very small with only three persons and one family member showing up for a focus group meeting. Tenants reported that it took them from 2 to 3 months to find a suitable unit and had no problem getting an extension on search time from the PHA. Family members or partner agencies assisted tenants with finding a unit. The PHA provided a list of landlords willing to participate in program but not identified as having accessible units.

6. Housing Choice Voucher Tenant Comments on Support from the Public Housing Authority and from Other Community Agencies

The average stay in the program for the three tenants who attended the focus group was 2.8 years, and all of them have been living in the same unit since they came on the program. The tenants expressed appreciation for the program and were, for the most part, very happy with their units; however, all of them felt there could have been more done to the unit to make it more accessible. One tenant who has difficulty in climbing stairs said he still can get in and out of unit but with some effort. Another tenant has two bathrooms in the unit, but is only able to get into one with his wheelchair. Also another tenant stated that rails were installed in her bathroom, but she has difficulty cleaning the bathroom (specifically the tub) because she can't easily get into bathroom.

The modifications provided to units were done by the Independent Living Program. The landlord was given the plans for the modification, and the owner and the PHA approved them. The estimated cost for the modifications was around \$5,000.

The Advisory Board provided information regarding disability rights to tenants.

Suggestions for improvements to the HCV/HCV program included:

- Provide more funding for HCV;
- Educate and notify the public about the HCV program;
- Refer disabled tenants to the Advocacy Program immediately to receive services;
- Explain housing quality standards (HQS) to landlords, new owners, and builders/developers; and
- Stress that a disabled family will take care of unit if it is modified for them (they feel that it is their home).

7. Focus Group with Landlords Who House Housing Choice Voucher Tenants with Physical Disabilities

The landlords' experience with the HCV program ranged from 2 months to 12 years. Their biggest concern with the program is the number of moves people are allowed to make during the program, but did express that the turnover for persons with a disability was less. Also, those tenants with a disability seemed to take better care of the unit.

The modifications that were made to units were mostly ramps and grab bars. Although making major and costly modifications was of great concern, the owners mentioned that the tenant or partner agency paid for most of the modifications. Landlords stressed that a one-year contract with the PHA is not enough to justify the costs of modification and that a three-year contract is more reasonable.

Owners mentioned that once a unit has been modified, it is difficult to rent to non-disabled tenants both because of appearance and structure preference. Owners seemed to know the partner agencies and what services they provided. One of the owners stated that he was willing to build new accessible units, but wanted some assurance from the PHA that he would have no problem leasing them.

8. Focus Group with Landlords Who Do Not House Housing Choice Voucher Tenants with Physical Disabilities

Only one owner attended the focus group. He stressed that his biggest concern in housing tenants with physical disabilities was the cost to make modifications and how he could recoup costs. He suggested that the PHA or government provide financial incentives such as grants, low-interest loans, or matching funds to owners to participate. He said he has never been contacted by the PHA to house a person with a disability. He also mentioned that re-renting or selling units after modifications could be an issue.

The owner stated that the HCV program has a good reputation for the most part. However, he offered the following suggestions for improvement:

- Implement better landlord and PHA communication;
- Develop a seminar for owners to explain program requirements and how rent is calculated and allowable rent increases for owners;
- Suggest ways to treat damage caused by tenants; and
- Provide options to owners on how to fund modifications.

9. Unique Public Housing Authority or Partner Agency Programs to Serve and House Persons with a Physical Disability

The two main partner agencies are the Advocacy Project and the Greensboro Housing Coalition. The Advocacy Project is formally the Joy A. Shabazz Center for Independent Living, a nonprofit that receives funding from the Department of Education and State Vocational Rehabilitation for vocational rehabilitation services. The four core services include advocacy, information and referral, independent living, and peer support. The group provides advocacy on consumer and community issues, housing issues, SSI/SSDI issues, and barriers to physical and attitudinal barriers. Their independent living program covers money management, resources in community, and ADA knowledge.

The Advocacy Project is a member of the Greensboro Housing Coalition, a 30-member group that supports housing issues for low-income, homeless, and disabled persons. The Advocacy Project provides services for the PHA mainstream program except for eligibility. The PHA provides

housing and the Advocacy Project provides assistance with security deposits and negotiates rents and modifications to unit and other services.

The biggest concern is the need for additional accessible units in the community. The Advocacy Project provides some assistance for tenants in accessible units, but relies on the PHA for more information. Suggestions for improvements to the HCV program include more search time beyond 120 days.

The Greensboro Housing Coalition is an advocacy group for housing low-income, homeless, and special needs persons. The group provides information on community resources and a hotline for consumers. Some of the services include information on homeownership and tenant rights education. The program has provided service to more than 200 physically disabled persons per year. The Coalition provides a list of landlords and a list of other resources such as transportation, case management, etc. The Coalition does not provide the service directly, but is strictly a resource and referral information service. A representative from the Coalition stressed that the Coalition is supportive of the PHA and its programs, and believed it was well run and provided necessary services.

HOUSING CHOICE VOUCHER TENANT ACCESSIBILITY STUDY 2001-2002 LOWELL HOUSING AUTHORITY LOWELL, MA FEBRUARY 12-13, 2001

Sponsoring Agency: U.S. Department of Housing and Urban Development

Office of Policy Development and Research

451 Seventh Street, SW Washington, D.C.

Contract Number: C-OPC-21761

Contact Persons: Michael Shea Andrea E. Hallett

Westat Johnson, Bassin & Shaw, Inc. 1650 Research Blvd 8630 Fenton Street, 12th Floor Rockville, MD 20850-3120 Silver Spring, MD 20910

1. Background

The Lowell Housing Authority (LHA) serves Lowell, Massachusetts, an urban community northwest of Boston. The LHA serves 1,073 HCV program families and 1,639 public housing families. In addition, the LHA has been operating a mainstream housing program since 2000 and administers 75 mainstream vouchers under the program. Lowell has a waiting list preference for families with disabilities.

	Lowell Housing Authority			
Housing Choice Voucher Program Waiting List				
	Number of families	Percentage of total families		
Waiting list total	756			
Extremely low income	659	87		
Very low income	80	11		
Low income	14	2		
Families with children	317	42		
Elderly families	38	1		
Families with disabilities	401	53		
Black	19	3		
White	495	265		
Asian	41	5		
Hispanic	201	27		

Source: LHA FY 2001 Annual Plan

2. Profile of Housing Choice Voucher (HCV) Tenants in the Public Housing Authority with Physical Disabilities

In accordance with state and Federal privacy and fair housing regulations, public housing authorities (PHAs) are prohibited from asking applicants about the nature of their disability. Therefore, PHAs do not have information concerning the number of current tenants with physical disabilities as opposed to those with mental disabilities. The LHA, however, based upon its experience with its Section 8 applicants and tenants, estimates that higher proportions of its HCV tenants suffer from mental than from physical disabilities. The LHA has 359 current disabled HCV tenants and 401 families with disabilities on the waiting list. This constitutes 53 percent of total waiting list families.

3. Model for Serving Tenants with Physical Disabilities

The LHA's Administrative Plan contains several guidelines for assisting persons with disabilities in the HCV program. The LHA states that it may not compel any applicant to reveal information about the nature of the applicant's disability as a routine part of the application process. However, the LHA may ask all applicants if they need a special location for the unit, special features in the unit, or a reasonable accommodation because of a disability. The LHA states that it may ask all applicants whether the head or spouse is a person with a disability for the purposes of qualifying the family for the \$400 disabled family deduction from income and, if an elderly or disabled family, the deduction of non-reimbursed medical expenses. The LHA may ask all applicants claiming deduction of non-reimbursed medical expenses for documentation of the disability. In addition, the LHA requires all applicants claiming disability status to verify this by providing proof from the Social Security Administration (SSA), Veterans Administration (VA), or doctor certification.

The LHA will provide a disabled HCV participant with up to 180 days to search for a suitable unit. For all other participants without disabilities, only 60-day search periods are permitted. In addition, LHA states that it is willing negotiate on behalf of a participant with a physical disability in order to have a unit made accessible by the landlord. The LHA also provides lists of landlords who provide wheelchair or otherwise accessible units. The LHA has use of an accessible van for people with physical disabilities, but does not use it to assist HCV program participants with their housing search.

According to the LHA, there are other service providers in the city of Lowell such as Massachusetts Commission of Rehabilitation, which provides search assistance to disabled applicants.

The LHA has operated a mainstream program with a 75 voucher funding level since 2000. The LHA works in conjunction with the Massachusetts Department of Retardation and the Massachusetts Department of Mental Health to coordinate applicant-briefing sessions and provide housing search and supportive living services.

4. Operation of the Program to Serve Physically Disabled Persons

The LHA received funding from HUD to develop a mainstream housing program in 2000. The LHA opened its waiting list in April 2001 to accept applications for 75 one- to five-bedroom mainstream vouchers. The LHA then established working relationships with the Massachusetts Department of Mental Retardation (DMR) and the Massachusetts Department of Mental Health (DMH) to coordinated supportive services for mainstream voucher recipients. DMR and DMH case managers work in conjunction with LHA staff to assist mainstream voucher participants with intake sessions, briefing sessions, the housing search process, reasonable accommodation requests, and supportive living services.

The LHA has experienced some problems in housing its physically disabled HCV program participants due to a very low (4%) vacancy rate in the city of Lowell. Because the housing stock is older, physically disabled HCV program participants find themselves limited to three newer apartment buildings with accessible units. Massachusetts Mills, Appleton Mills, and Riverplace Towers are the primary housing source for the Lowell's physically disabled population.

The LHA does not make special efforts to recruit landlords who provide units accessible to the physically disabled. The LHA states that its physically disabled HCV program participants are primarily housed by the three main apartment complexes mentioned above and, due to low turnaround of the accessible apartments, availability is scarce.

5. Housing Choice Voucher Tenant Comments on the Search Process

The physically disabled HCV tenants who participated in the focus group stated that their search for an accessible unit was not difficult. Several of the participants obtained their units by networking with family and friends who provided housing referrals. Some residents simply leased the unit they were residing in at the time they received their voucher. Others cited the Lowell Housing Authority staff as their resource for locating and leasing an accessible apartment.

One tenant waited nearly three months for an accessible apartment to become available. The tenant reports that he is very satisfied with the apartment, but wishes the counters and stove could be lowered. He said that it is difficult to fry food on the stove when his face is level with the frying pan.

The tenants reported that the perceived "stigma" of the HCV program among landlords in their community could hamper the search process. They stated that the low vacancy rate in the area has caused landlords to be less likely to rent to an HCV tenant because they could charge a higher rent to a market rate tenant. In addition, the tenants believed that landlords unfairly stereotype HCV tenants as those who will not respect the property and fail to pay the rent on time.

Disabled HCV tenants suggested that the HCV program change to allow an unlimited time period for disabled participants to look for an apartment. This would prevent a disabled tenant from taking an apartment that is inaccessible to them simply because their search time was due to expire and they didn't want to lose their voucher. Other tenants requested HUD assistance with apartment security deposits.

6. Housing Choice Voucher Tenant Comments on Support from the Public Housing Authority and from Other Community Organizations

The physically disabled LHA tenants who participated in the focus group were very positive about their experiences with the LHA and with the HCV program. The participant's involvement with the HCV program ranged from several months to over 10 years. Several participants stated that the LHA actively sought accessible apartments for them by contacting landlords and/or referring the participants to landlords with accessible units.

The disabled HCV tenants stated that they were not assisted by any community organizations in their housing search.

7. Focus Group with Landlords Who House Housing Choice Voucher Tenants with Physical Disabilities

Landlords with tenants who are physically disabled stated that the benefits of housing this population were a lower turnover rate and a higher tendency to pay the rent in a timely manner compared to their market rate tenants. In order to fill accessible units with appropriate tenants, several landlords reported being contacted by advocacy organizations such as the Northeast Independent Living and the Middlesex North Resource Center. If there are no available units, several landlords place the participant on their waiting list or attempt to refer them to another landlord who may have an accessible apartment available for persons with physical disabilities.

The costs of reasonable accommodations are a source of concern for the landlords. Landlords stated that they have provided numerous reasonable accommodations to disabled HCV tenants such as grab bars in the bathrooms, a lower peephole on the front door, installation of special fire alarms for the hearing impaired, roll-in showers, and lowered countertops. Several landlords guessed that a disabled tenant with a wheelchair would be difficult and expensive to house. One landlord recalled an instance when a tenant requested an automatic door opener, which would have cost \$11,000 to install. The landlord looked for grants from the Northeast Independent Living Center and the University of Massachusetts with no success.

8. Focus Group with Housing Choice Voucher Landlords Who Do Not House Housing Choice Voucher Tenants with Physical Disabilities

HCV program landlords who do not house a tenant with a physical disability expressed satisfaction with the HCV program as a whole and stated that the LHA is very easy organization to deal with. The landlords stated that the LHA helped them to resolve problems with tenants and was fair about holding tenants responsible for nonpayment of rent and damage to their units.

The landlords stated that they have been contacted in the past by DMH and DMR to house a disabled tenant; however, most of the landlords owned older housing stock in Lowell that could not easily be renovated to assist a tenant with a physical disability. Due to the low vacancy rate in Lowell, the landlords could make more money by renting to a market rate tenant instead of an HCV tenant. There were no incentives for these landlords to rent to an HCV tenant. The landlords surveyed stated that if there were incentives such as higher rents, monetary and technical assistance to provide reasonable accommodations for a disabled HCV tenant, they would be more likely to rent to this population. The landlords stated that they were aware of several units for physically disabled persons that were filled with a non-physically disabled family because at the time it was available there was not a physically disabled person to fill it. The landlords stated that if the HCV program would pay the rent on an empty building until there was a disabled tenant to fill, there would be more accessible units available when they are needed.

9. Unique Public Housing Authority or Partner Agency Programs to Serve and House Persons with a Physical Disability

The LHA works with the Massachusetts Department of Mental Health, Massachusetts Department of Retardation, Middlesex North Resource Center and the Northeast Independent Living Center to assist physically disabled HCV tenants.

HOUSING CHOICE VOUCHER TENANT ACCESSIBILITY STUDY 2001-2002 MARION METROPOLITAN HOUSING AUTHORITY MARION, OH APRIL 2-3, 2001

Sponsoring Agency: U.S. Department of Housing and Urban Development

Office of Policy Development and Research

451 Seventh Street, SW Washington, D.C.

Contract Number: C-OPC-21761

Contact Persons: Michael Shea Andrea E. Hallett

Westat Johnson, Bassin & Shaw, Inc. 1650 Research Blvd 8630 Fenton Street, 12th Floor Rockville, MD 20850-3120 Silver Spring, MD 20910

1. Background

The Marion Metropolitan Housing Authority (MHA) serves Marion City, Ohio, a rural community outside of Columbus. The MHA serves 336 HCV program families. In addition, the MHA has been operating a mainstream housing program since 1998 and has received two mainstream grants totaling \$238,093 for 95 HCV units. The HCV waiting list is currently open to new applicants, and the MHA anticipates an expected turnover of 222 units in the HCV program and 63 units in the mainstream program this year. The MHA provides a waiting list preference to veterans only.

	Marion Housing Authority			
Housing Choice Voucher Program Waiting List				
	Number of families	Percentage of total families		
Waiting list total	403			
Extremely low income	246	61		
Very low income	157	39		
Low income	0	0		
Families with children	241	60		
Elderly families	17	4		
Families with disabilities	156	39		
Black	58	14		
White	343	85		
Indian	2	1		

Source: MHA FY 2002 Annual Plan

2. Profile of Housing Choice Voucher Tenants with Physical Disabilities in the Public Housing Authority

In accordance with state and Federal privacy and fair housing regulations, public housing authorities (PHAs) are prohibited from asking applicants the nature of their disability. Therefore, PHAs do not have information concerning the number of current tenants with physical disabilities as opposed to those with mental disabilities. The Marion Housing Authority (MHA) has 251 disabled housing choice voucher (HCV) tenants and, currently, 95 mainstream units.

3. Model for Serving Tenants with Physical Disabilities

The MHA provides all persons with physical disabilities an extra 30 days of housing search time above and beyond the standard 4-month period given to all HCV program participants. In addition, the MHA will mail applications and materials to a disabled applicant, allow a disabled program participant to rent a unit from a relative, and attempt to connect disabled persons with landlords who can provide an accessible unit.

The MHA states that most disabled applicants who come to the HCV program are already in place in an accessible unit. Thus, the MHA has not needed to negotiate for accessible units with landlords on behalf of voucher enrollees. The MHA does provide 110 percent of Fair Market Rent and will provide a disabled HCV participant with an extra bedroom as an accommodation.

The MHA does not make available any funds for accessibility modifications and states that there have been no requests for modifications to HCV units. The MHA does not provide housing search assistance in the form of transportation to view available units. The Marion area transit system is accessible to people with physical disabilities.

Through its mainstream program, the MHA provides counseling to disabled program participants to determine if they require assisted living services. Participants who require services are then referred to MHA's Family Self-Sufficiency (FSS) Coordinator.

4. Operation of the Program to Serve Physically Disabled Persons

The MHA received funding from HUD to develop a mainstream housing program in 1998. The MHA then received additional mainstream grants in 2001 and 2002 to total 95 mainstream units. The MHA then established working relationships with MARCA Industries, Community Action, the Ohio State Department of Job and Family Services, and RHAM to coordinate supportive services for mainstream voucher recipients. The MHA FSS Coordinator works in conjunction with MHA staff to assist mainstream voucher participants with intake sessions, briefing sessions, the housing search process, reasonable accommodation requests, and supportive living services.

5. Operation of the Program for Physically Disabled Persons

The MHA has experienced very few problems in housing its physically disabled HCV program participants despite a very low vacancy rate in Marion. Because of older housing stock, physically disabled HCV program participants find themselves limited in their choice of housing, and many will lease the unit they reside in at the time of acceptance to the HCV program. In addition, most disabled HCV program participants are already connected with one or more supportive service agencies before they are involved with the HCV or mainstream programs.

The MHA makes special efforts to recruit landlords who provide units accessible to physically disabled persons. The MHA states that it asks every landlord associated with the HA to report accessible units. In addition, the MHA refers landlords to the Marion City Regional Planning Commission, which provides grants to landlords to make their units accessible to physically disabled persons.

6. Housing Choice Voucher Tenant Comments on the Search Process

The physically disabled HCV tenants who participated in the focus group stated that their search for an accessible unit was fairly difficult due to a lack of accessible units in Marion. Several of the participants obtained their units because they knew of a landlord with an available unit. Others reported assistance from a social service worker, relative, or friend who knew of an available unit. Most residents leased the unit they were residing in at the time they received their voucher.

A tenant who transferred to Marion from another jurisdiction said that he knew of a landlord with a unit available, and the landlord built a ramp for the tenant and made minor modifications to the kitchen and bathroom before he moved in. One tenant reported that his landlord provided him with a ramp for his wheelchair and adjustments to his bathroom, but he is currently unable to get into his kitchen because it is too small to accommodate him. In both cases the landlord covered the costs of the accommodations.

Tenants expressed the need for additional accommodations to their units such as lowering the kitchen counters, widening the doorways and installing grab bars but stated that they were willing to live without them. Some tenants made their own modifications, such as installing new door handles, at their own expense.

7. Housing Choice Voucher Tenant Comments on Support from the Public Housing Authority and from Other Community Organizations

The physically disabled MHA tenants who participated in the focus group were very positive about their experiences with the MHA and with the HCV program. The tenants requested that the MHA conduct more stringent criminal background checks before allowing people into the program. A tenant suggested that the community become further educated on the challenges of those with physical disabilities and the resources available to help them. There were complaints about the accessibility of the Marion van for physically disabled persons. Each trip on the van has to be planned 48 hours in advance, which the tenants found to be extremely inconvenient, and the van was often late and unreliable. The tenants suggested that the waiting list be eliminated for persons with disabilities. Because of the lack of accessible units in Marion, the tenants requested a brand new complex be built especially to accommodate physically disabled persons.

None of the focus group participants reported working with any of MHA's partner agencies to receive supportive services.

8. Focus Group with Landlords Who House Housing Choice Voucher Tenants with Physical Disabilities

MHA landlords with HCV tenants with physical disabilities reported making accessibility modifications to the units at their own expense. Types of modifications include bathrooms, ramps, and widening of hallways and doorways. The landlords estimated that the cost of such modifications ranges from \$3,000 to \$30,000 depending on the extent of the modifications. The landlords reported that several state and private grants are available to provide reimbursement for accessibility modifications.

The landlords reported that the high percentage of disabled MHA HCV program participants is due to the fact that MHA is an effective and caring housing authority that takes good care of the clients and is concerned with their welfare.

Landlords stated that the cost of remodeling the 1920s and 1930s houses, typical in Marion, to make them accessible to people with physical disabilities is prohibitive. The hallways are often too narrow and the bathrooms and kitchens are very small. Landlords stated that, above all, they are conducting a business, and it does not make sense for them to spend money on accommodations that will decrease their profit margin.

The landlords suggested that additional grants be made available to provide accessibility modifications to units. Additional funds for modifications would be an incentive to landlords to rent to a physically disabled tenant. Furthermore, a higher voucher payment standard specifically for a disabled participant would act as an additional incentive to landlords to rent to this population. These landlords said that there is a high demand for accessible apartments for physically disabled persons in their community, and they would have no problem renting their accessible units should they become available. The benefits to renting a unit to a physically disabled tenant include a low turnover rate and, most often, a responsible and conscientious tenant.

9. Focus Group with Housing Choice Voucher Landlords Who Do Not House Housing Choice Voucher Tenants with Physical Disabilities

HCV program landlords, participating in this focus group, who do not house a tenant with a physical disability, have been participating in the HCV program between one and seven years. These

landlords reported that they believe it would be a challenge to house a tenant with a physical disability as most of their units are in two-story houses that are older and would be difficult to modify. One landlord stated that a potential tenant in a wheelchair looked at her available apartment but there was no way to widen the hallways to accommodate her and thus the landlord could not rent her the unit.

The landlords were not aware of any grants or funding sources to modify a unit for disabled persons and the landlords were not aware of exception rents provide by MHA for disabled HCV tenants. They have been contacted by MHA who inquired if they have units available, however, none of the units they have available are accessible to physically disabled persons.

The landlords expressed frustration with HCV tenants who destroy the property and break the lease. The landlords also reported making special efforts to keep responsible and trustworthy tenants happy in their units so they would stay in place. They suggested that the HCV program attract landlords by increasing the community awareness of the program and increasing funding for vouchers and accessibility modifications.

10. Unique Public Housing Authority or Partner Organization Programs to Serve and House Physically Disabled Persons

The MHA provides supportive services to its physically disabled HCV program participants primarily through MARCA Industries, which serves all residents of Marion City. MARCA Industries serves developmentally disabled mentally retarded persons by providing rehabilitation services such as life skills workshops, job placement, and transportation. They receive funding through county taxes, Medicaid, and state funds. Each MARCA client receives a service plan, which details the individual's rehabilitation or residential services and tracks their progress. MHA HCV clients are referred to MARCA as part of the intake process, and MARCA service coordinators are made available to assist the participant with the application process, intake meetings and the housing search.

HOUSING CHOICE VOUCHER TENANT ACCESSIBILITY STUDY 2001-2002 MONTGOMERY HOUSING AUTHORITY, MONTGOMERY, AL FEBRUARY 7–8, 2001

Sponsoring Agency: U.S. Department of Housing and Urban Development

Office of Policy Development and Research

451 Seventh Street, SW Washington, D.C.

Contract Number: C-OPC-21761

Contact Persons: Michael Shea Andrea E. Hallett

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1. Background

The Montgomery Housing Authority (MHA) is a multi-county agency serving a mixture of urban, suburban, and rural areas in central Alabama including Montgomery, Autauga, and Elmore counties. The MHA has provided affordable housing to eligible low-income families through its public housing programs since 1939. The MHA employs a staff of four housing specialists, one housing inspector, and a clerk/typist to administer 1,200 vouchers under the housing choice voucher (HCV) program.

	Montgomery Housing Authority	
Н	ousing Choice Voucher Program Waiti	ing List
	Number of families	Percentage of total families
Waiting list total	226	C
Extremely low income	215	95
Very low income	11	5
Low income	0	0
Families with children	175	77
Elderly families	19	8
Families with disabilities	73	32
Black	221	98
White	5	2
Asian	0	0
Native American	0	0

Source: MHA FY 2000 Annual Plan

In addition, the MHA operates 3,037 public housing units. The HCV waiting list is currently closed to new applicants, and the lease-up rate for the MHA HCV program averages 97 percent. The waiting list has no preferences for families with disabilities.

2. Profile of Housing Choice Voucher Tenants with Physical Disabilities in the Public Housing Authority

In accordance with state and Federal privacy and fair housing regulations, public housing authorities (PHAs) are prohibited from asking applicants about the nature of their disability. Therefore, PHAs do not have information concerning the number of current tenants with physical disabilities as opposed to those with mental disabilities. The MHA, however, based upon its experience with its Section 8 applicants and tenants, estimates that a higher proportion of its HCV tenants suffer from mental disabilities. The MHA has 73 families with disabilities on its waiting list, which constitutes 32 percent of total families.

3. Model for Serving Tenants with Physical Disabilities

The MHA does not have a formal model for serving applicants and participants in the HCV program who have physical disabilities; however, the MHA attempts to accommodate those with physical disabilities in order to make the HCV program accessible. For example, the MHA will provide a disabled HCV participant with up to 120 days to search for a suitable unit. For all other participants without physical disabilities, only 60-day search periods are permitted. In addition, MHA states that it is willing to negotiate on behalf of a participant with a physical disability in order to have a unit made accessible by the landlord. The MHA also provide lists of landlords who provide wheelchair or otherwise accessible units.

Because the MHA does not receive special funding, such as the mainstream program, for persons with disabilities, it relies on state and Federal fair housing laws such as the Americans with Disability Act (ADA), The Fair Housing Act, and Section 504 upon which it bases its disability rights policy. The MHA staff is trained regularly on laws applying to disability rights, and copies of the ADA, the Fair Housing Act, and Section 504 are distributed to all staff and HCV program landlords.

4. Operation of the Program for Families with Physical Disabilities

The MHA has no formal program to serve physically disabled HCV program participants. Because of the higher proportion of mentally disabled HCV program participants, the MHA has not developed any formal agreements with partner agencies that serve physically disabled persons. The MHA does have an affiliation with the Montgomery Mental Health Authority to provide counseling and other services to its mentally disabled HCV program participants.

The MHA has experienced remarkably little problem in housing its physically disabled HCV program participants. This may be due to two new apartment buildings, St. Jude's and Rosa Parks Place, which were recently renovated solely for use by the elderly and people with a physical disability. In addition, landlords working with MHA HCV program participants have routinely taken care of minor accessibility modifications at their own expense. For example, one landlord installed a strobe light fire warning system for a hearing impaired tenant at no cost to the tenant.

The MHA does not make special efforts to recruit landlords who provide units accessible to physically disabled persons. The MHA states that its physically disabled HCV program participants have little trouble locating and renting a suitable unit; thus, services such as providing transportation to view units and exception payment standards to cover higher leasing costs and accessible unit modification costs are not necessary.

5. Housing Choice Voucher Tenant Comments on the Mail Questionnaire

The MHA HCV program tenants commented that the font size on the questionnaire is too small and the spacing is too close together for a disabled person to easily read and comprehend. The tenants did not have any substantive comments.

6. Housing Choice Voucher Tenant Comments on the Search Process

The physically disabled focus group participants stated it took them from two days to two years to find a suitable unit. The participant who found a unit in two days knew his landlord well, and thus was able to lease-up quickly. The participant who took two years was holding out for a house as she has a husband and two children and desired more space. One participant, who is blind, received help from a MHA caseworker and located her unit within two weeks. Most participants made use of the landlord list provided by the MHA and were successful in finding a suitable unit. Others received assistance from family and friends. None received assistance in finding a unit from a partner agency or supportive service agency. The PHA did not offer help in the search process other than providing the landlord list.

7. Housing Choice Voucher Tenant Comments on Support from the Public Housing Authority and from Other Community Organizations

The physically disabled MHA tenants who participated in the focus group were very positive about their experiences with the MHA and with the HCV program. Five of the 10 focus group participants have been receiving HCV program assistance for 5 or more years. Several suggestions for improvement expressed the desire for additional accessible apartments for people with physical disabilities to be built in low-crime areas.

Tenants also expressed satisfaction with their landlord's sensitivity to their physical disabilities and the landlord's willingness to make accessibility modifications. Several of the participants reside in one of two recently rehabilitated apartment complexes outfitted expressly for the elderly and people with physical disabilities. These units are equipped with roll-in showers, wider doorways, grab bars, and ramps. These participants report being especially pleased with the MHA's efforts to assist physically disabled persons.

8. Focus Group with Landlords Who House Housing Choice Voucher Tenants with Physical Disabilities

In a focus group composed of landlords with tenants who are physically disabled, landlords cited both the challenges and benefits of housing this population. Several landlords stated that the

advantage of having a tenant with a physical disability is that these tenants tend to stay in place for a long period of time, thus decreasing turnover in the units. In addition, landlords praised this population for being exemplary tenants who do not create excessive noise, violate the lease, or cause costly damage to the units. Because of these benefits, these landlords were willing to make minor adjustments to the units to accommodate the needs of the physically disabled tenants. Commonly cited accommodations were ramps, grab bars, emergency call systems, wider doorways, night-lights, lever handle doorknobs, smoke detector and doorbell lights for the blind, and lowered mailboxes.

Landlords stated that they would be willing to allow a tenant to modify the unit to accommodate their disability if there was a high quality of workmanship and if the tenant agrees to return the unit to its original condition upon leaving the unit.

9. Focus Group with Housing Choice Voucher Landlords Who Do Not House Housing Choice Voucher Tenants with Physical Disabilities

HCV program landlords who do not house a tenant with a physical disability voiced concern about renting to this population under the HCV program. Landlords stated that the HVC program standard one-year lease term was too short to be an incentive for a landlord to make changes to a unit to accommodate a physical disability. The tenant could move after one year and the landlord would not have had enough time to make up the cost of alterations. In addition, landlords complained that the HCV program did not require tenants to account for damage to a unit, and the landlords could not collect from the housing authority for damage to a unit. Landlords stated that the HCV program, instead of the landlords, should be responsible for altering a unit to provide an accommodation for a physically disabled tenant.

Landlords without a physically disabled tenant stated that they were open to the prospect of renting a unit to a disabled tenant if the HCV program would provide them with a grant or stipend to recoup the cost of renovations to accommodate the tenant. They were hesitant, however, to allow tenants to make the renovations themselves, as they were concerned that the work would not be done correctly and decrease the value of the unit.

10. Unique Public Housing Authority or Partner Agency Programs to Serve and House Persons with a Physical Disability

The MHA does not work directly with any partner organizations that serve physically disabled persons. There is a Center for Independent Living in Birmingham, Alabama, which the MHA could attempt to partner with in the future.

HOUSING CHOICE VOUCHER TENANT ACCESSIBILITY STUDY: 2001-2002 HOUSING AUTHORITY OF THE CITY OF PUEBLO PUEBLO, COLORADO FEBRUARY 20-21, 2002

Sponsoring Agency: U.S. Department of Housing and Urban Development

Office of Policy Development and Research

451 Seventh Street, SW Washington, D.C.

Contract Number: C-OPC-21761

Contract Persons: Robert Ficke

Westat

1650 Research Blvd.

Rockville, MD 20850-3120

Connie M. Campos

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1. Background

The Housing Authority of the City of Pueblo is located in Pueblo, Colorado, approximately 120 miles south of Denver, Colorado. The Housing Authority serves the entire county of Pueblo including the city of Pueblo. The area is rural, suburban, and urban. The Housing Authority of the City of Pueblo's mission is to provide low-income families, the elderly and individuals with a physical disability with decent, safe and affordable housing. In addition, a strong effort will be made to:

- *Ensure equal opportunity in housing;*
- *Promote family self-sufficiency;*
- Continue on-going collaborative efforts with other local agencies and the City of Pueblo to improve the quality of life within the community; and
- Strive to provide job training, employment and homeownership opportunities for public housing and Section 8 residents.

The PHA received funding over the years for the Public Housing Operating Fund, Public Housing Capital Fund, HOPE VI Revitalization, HOPE VI Demolition, Section 8 (HCV) program, Public Housing Drug Elimination Program, Resident Opportunity and Self-Sufficiency Grants, Community Development Block Grant, HOME, Section 8 New Construction, Rural Development, Section 8 Moderate Rehabilitation, Replacement Housing, and HOPE I funds.

The Housing Authority of the City of Pueblo is both a "high performer" under the Public Housing Assessment Program (PHAS) for public housing and under the Section 8 Management Assessment Program (SEMAP) for the housing choice voucher program.

I	Housing Authority of the City of Puc	eblo
Hou	sing Choice Voucher Program Wait	ing List
	(No Preferences)	-
	Number of families	Percentage of total families
Waiting list total	1,287	100
Extremely low income	895	70
Very low income	336	26
Low income	56	4
Families with children	785	61
Elderly families	142	11
Families with disabilities	258	20
Caucasian	449	35
African-American	54	1
American Indian	1	.001
Asian	2	.002
Hispanic	781	60

Source: Housing Authority of the City of Pueblo's FY 2002 Annual Plan

Currently, both the public housing and HCV waiting list are open and the PHA accepts applications twice a week for the general population and five times a week for elderly and disabled applicants. The waiting list is a community-wide list. The PHA does not have any preferences other than date and time of application for the HCV program. Applications are taken at the main office of the PHA, but can be processed by mail if needed for families unable to reach the office.

The average wait for HCV is 9 months to 1 year and the turnover is 25 to 30 units per month in the HCV program. The utilization rate for the HCV program is at 97 percent.

The Housing Authority of the City of Pueblo has approximately 1,400 housing choice vouchers and 900 public housing units.

2. Profile of Housing Choice Voucher Tenants with Physical Disabilities in the Public Housing Authority

The Housing Authority of the City of Pueblo does not differentiate between physical and other disabilities; therefore, they were unable to determine the number of families with a "physical" disability. The PHA does not have a specific office or policy on disabilities. All PHA policies for persons with physical disabilities are included in the PHA Annual Plan. The PHA staff responsible for the HCV program includes the Executive Director, Deputy Director, Section 8 Director, and occupancy staff, including intake and occupancy clerks.

3. Model for Serving Tenants with Physical Disabilities

The Housing Authority of the City of Pueblo does not have a specific program for tenants with physical disabilities. The PHA provides a list of landlords who rent to all HCV tenants, which includes landlords with either accessible units or those willing to rent to families with disabilities. The PHA also provides specialized units under public housing that are scattered site units for families with disabilities. The PHA applied for "mainstream" units, but has not heard if they have been approved.

Housing Search. The PHA has not set aside any separate funding for assisting voucher holders with a physical disability in their housing search since they have not received any reports from families that they were unable to locate appropriate units. In addition, the PHA has not needed to use or request "exception rents" for families with a disability. The PHA has not provided transportation assistance because family members or outside agencies have assisted them in transporting them to visit units. There is a van used primarily for elderly that can provide assistance to disabled tenants needing transportation assistance. The PHA's housing search time is the standard 60-day period with extensions for certain circumstances: demonstration of extenuating circumstances; did not refuse a suitable unit; and extension will result in approvable lease.

Assistance for Cost of Accessible Unit Modifications. The PHA has not received any requests to pay for the cost of modifications to a unit to improve accessibility.

Payment Standards/Exception Rents. The payment standard for the PHA is at 100 percent of the Fair Market Rent (FMR). Payment standards are reevaluated on an annual basis. The payment standards are as follows:

■ One bedroom \$476

■ Two bedroom \$580

The PHA may approve higher rents for landlords who rent to a family with physical disabilities to cover the cost of accessibility modifications. But as stated before there have not been requests for this.

4. Process of Setting up the Program to Serve Physically Disabled Persons

The PHA does not have an official program to serve persons with a disability under the housing choice voucher (HCV) program. The PHA relies on its partnerships with other agencies for assisting in serving this population.

Identification of Families with Physical Disabilities. The PHA expressed concern that it was not able to inquire about the nature of the disability when an applicant applied. Unless the disability was apparent (wheelchair-bound), the PHA staff was unable to distinguish between physical disabilities and mental or other disabilities.

Partnerships with Agencies Who Serve Families with Physical Disabilities. There are no formal agreements with agencies that serve families with a physical disability; however, the PHA works with many agencies that do provide assistance to families with disabilities in general. The main agencies that serve families with disabilities include:

- Colorado Blue Sky Enterprises, Inc.
 115 W. 2nd Street
 Pueblo, CO 81003
- Sangre de Cristo Independent Living Center 803 W. 4th Street, Suite D & F Pueblo, CO 81003
- SRDA

5. Operation of the Program for Families with Physical Disabilities

The PHA does not have any specific type of program for HCV tenants with disabilities except for referral to other partner agencies. The Housing Authority of the City of Pueblo does, however, have an innovative program for housing persons with disabilities in the public housing program. They received funding for 18 single-family scattered site units throughout the city to house families with disabilities.

6. Housing Choice Voucher Tenant Comments on the Search Process

HCV tenants stated that the search process involved contacting the PHA to get a list of landlords willing to rent to HCV tenants and then visiting the unit. The majority of tenants believed that they were to look for units on their own and the PHA played very little role in this. However, some tenants who worked with partner agencies had some help from these partner agencies.

Some HCV tenants stated that they would like assistance from the PHA in their search process, but others stated that their families provided this support. Other families stated that they could use help with transportation during the search process get to and from units.

HCV tenants suggested that the PHA keep a separate list for landlords who house persons with disabilities.

Some HCV tenants expressed difficulty in their search process due to the Section 8 HCV stigma.

7. Housing Choice Voucher Tenant Comments on Support from the Public Housing Authority and from Other Community Agencies

Five people attended the focus group. All but one of the tenants received HCV assistance for more than 5 years (23, 12, 10, and 5 years). They moved between zero and five times during HCV tenancy.

Most HCV tenants said their greatest concern was finding a one-bedroom unit. One tenant expressed concern that the landlord had discriminated based on the tenant's ethnicity, not disability.

HCV tenants encouraged more training for landlords regarding Section 8 policies, tenant rights, and accommodations policies for persons with disabilities. HCV tenants stated that they found out about the Section 8 (HCV) program from the Department of Social Services, family members, and ads in the newspapers.

Assistance they received from partner agencies included assistance with security deposits, moving costs, LEAP, furniture (Salvation Army), and assistance with utilities (Sangre de Cristo Independent Living Center).

Suggestions for improving HCV program included:

- 1. Screen landlords (create separate list of landlords willing/able to house persons with disabilities.
- 2. Need more single-family housing in county with one-bedroom units.
- 3. The PHA should exert power over landlords to encourage them to work with tenants with disabilities.
- 4. The PHA should allow funding for tenants to pay for renovations or be able to take it off rent.
- 5. The PHA should accompany tenant during inspection of unit before leasing.
- 6. Allow tenants to make minor repairs with stipends around \$100.
- 7. The PHA should inspect units more often.

8. Focus Group with Landlords Who House Housing Choice Voucher Tenants with Physical Disabilities

Landlords' experience with the Section 8 (HCV) program ranged from one to eight years. Experience in housing tenants with disabilities ranged significantly. One owner personally experienced

difficulty in finding a rental unit for a family member and eventually built a unit. The majority of owners believed that there were not enough units in the community for persons with disabilities.

Types of services/renovations for tenants with disabilities provided by owners included wheelchair ramps, grab bars for tubs and toilets, lowered cabinets, widened doors, lowered light switches, roll-in showers, light sensitive door bell for hearing impaired, and parking for people with physical disabilities. Owners were unable to provide estimates on costs of modifications except for a wheelchair ramp recently installed for around \$2,500.

Owner suggestions for improving HCV program to serve tenants with disabilities are the following:

- Provide assistance to owners to make modifications;
- Educate tenants regarding program policies;
- Reduce tenant moves; and
- Market Section 8/HCV program to owners with vacant accessible units and provide information to tenants,

9. Focus Group with Landlords Who Do Not House Housing Choice Voucher Tenants with Physical Disabilities

Many of the landlords were aware of reasonable accommodations and accessibility features needed in units for persons with disabilities. Some had actually installed these features or had units with these features. The group discussed experiences in providing accommodations for persons with disabilities over the years. Some stated that major modifications to units were of great concern such as widening doorways for wheelchairs and lowering cabinets. Other modifications such as grab bars, rails, etc. were less of an issue. Most stated that they were unable to make these modifications because of the high costs of the modification. Other reasons for not modifying units included not having a steady stream of persons with disabilities who were interested in units. And if modifications changed the unit significantly it was difficult to market the unit to the general public who did not need the modifications.

Suggestions from the landlords who did not house persons with disabilities included:

- Require a longer-term lease, more than 1 year, to ensure that the landlord could recoup costs and reduce the ability for the tenant to move.
- Provide assistance from PHA in marketing the availability of these units.
- Keep a separate list of landlords at the PHA, with vacant accessible units.
- Allow tenant to make modifications if minor and with owner permission.
- Provide a financial incentive for landlord to make modifications such as low interest loan, subsidy, etc.
- Guarantee rent even during a vacant period to ensure that a unit is available when a disabled tenant needs unit (PHA would pay for vacant period of time).
- Lower the standards for modifications.
- Build a specific building for persons who need accessible units.
- Offer tax credits for owners.
- Provide education to owners regarding modifications, law, and how to pay for modifications.
- Link disabled tenant with services in the community to ensure ability to live independently.

10. Unique Public Housing Authority or Partner Agency Programs to Serve and House Persons with a Physical Disability

The two main agencies that the Housing Authority of the City of Pueblo collaborates with are the Colorado Blue Sky Enterprises, Inc., and the Sangre de Cristo Independent Living Center. Colorado Blue Sky is a nonprofit agency that provides vocational and independent living resources. It serves approximately 750 households. This agency also provided specific housing, with HUD funding, for persons with disabilities. Primarily, this comprised a 40-unit building for disabled tenants and another 28 accessible units for physically disabled persons in Baltimore Court. They have 47 regular vouchers and 75 mainstream vouchers for persons with disabilities. The group partners with the PHA by coordinating resources. If they are unable to house families through their program, they refer them to the PHA. In addition, the PHA refers families to this agency for services. The agency at one time had a formal

agreement with the PHA, but it has since expired and the agency is operating on a verbal agreement at this time. Requests for modifications from tenants are paid for mostly by the owner, but Colorado Blue Sky does provide some assistance.

Sangre de Cristo Independent Living Center receives funding from the State Department of Human Services. It also receives vouchers from the state for homeless disabled persons. The group has 32 Section 8 Certificates and 54 vouchers for families with any member who is disabled. They also have an additional 75 vouchers for homeless disabled persons. The Sangre de Cristo Center provides the following services: GED, ABE, computer lab, Deaf Center, Blind or partially blind services, and job training. The Center provides funding for materials for modifications to units and uses volunteer contractors to do wheelchair ramps, or widen doorways. Landlords are also willing to pay for modifications, if minor. There is no formal agreement with the PHA, but the Center does refer people to the PHA if the waiting list is closed and provides services for persons referred by the PHA. The majority of clients have some mental or emotional disability, and the Center partners with the Mental Health Center.

HOUSING CHOICE VOUCHER TENANT ACCESSIBILITY STUDY 2001-2002 HOUSING AUTHORITY OF THE CITY OF SAN LUIS OBISPO SAN LUIS OBISPO, CA MARCH 12-13, 2001

Sponsoring Agency: U.S. Department of Housing and Urban Development

Office of Policy Development and Research

451 Seventh Street, SW Washington, D.C.

Contract Number: C-OPC-21761

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1. Background

The Housing Authority of the City of San Luis Obispo (HASLO) serves the city of San Luis Obispo, California, which is primarily a rural area. The HASLO administers 170 public housing units and 1,749 housing choice vouchers (HCV). Of the voucher recipients, 701 have disabilities. The HASLO waiting list is currently closed; HASLO gives preference to persons who are involuntarily displaced, victims of domestic violence, victims of hate crimes, persons residing in substandard housing, the homeless, veterans, and those who live or work in the jurisdiction.

Housing Authority of the City of San Luis Obispo			
Housing Choice Voucher Program Waiting List			
Number of families Percentage of total familie			
Waiting list total	1,850		
Extremely low income	1,645	89	
Very low income	193	10	
Low income	12	.6	
Families with children	1,667	90	
Elderly families	83	4	
Families with disabilities	100	5	
Black	88		
White	1,178		
Hispanic	500		
Other	82		

Source: HASLO FY 2001 Annual Plan

2. Profile of Housing Choice Voucher Tenants with Physical Disabilities in the Public Housing Authority

In accordance with state and Federal privacy and fair housing regulations, public housing authorities (PHAs) are prohibited from asking applicants about the nature of their disability. Therefore, PHAs do not have information concerning the number of current tenants with physical disabilities as opposed to those with mental disabilities. The HASLO has 701 disabled HCV tenants. It estimated that 50 percent have physical disabilities only.

3. Model for Serving Tenants with Physical Disabilities

In accordance with its administrative plan, the HASLO provides all persons with physical disabilities with 180 days of housing search time. On occasion, the HASLO will extend this time period. In addition, the HASLO will mail applications and materials to a disabled applicant, allow a disabled program participant to rent a unit from a relative, and attempt to connect disabled persons with landlords who can provide an accessible unit. The HASLO maintains several working agreements with partner agencies, and gives a preference to those with disabilities on its waiting list. The HASLO provides lists of landlords who rent accessible HCV units and will negotiate for accessible units with landlords on behalf of voucher program participants.

The HASLO provided exception payment standards for all HCV tenants. The City of San Luis Obispo has a very low vacancy rate (approximately .5%) and the rents are very high.

The HASLO does not make available any funds for accessibility modifications and states that there have been no requests for modifications to HCV units. The HASLO states that it occasionally provided transportation assistance for a participant to view an available unit, but it states that the City has a very good accessible bus system for people with physical disabilities.

The HASLO reports that its staff is knowledgeable regarding laws applying to disability access such as Section 504, Title II of the ADA, and the Fair Housing Act. The HASLO states that it has trained its staff of 35 in these areas within the past 6 months.

4. Process of Setting up the Program to Serve Persons with Physical Disabilities

The HASLO reports that it has a very good relationship with the local community and works closely with the San Luis Obispo Supportive Housing Coalition to provide housing search and residential assistance to clients of the HASLO. The HASLO holds annual landlord briefings at which time it determines if there are landlords with available accessible units. Partner agencies working with HASLO HCV program participants will negotiate with landlords to provide accessibility modifications. The HASLO has observed that the landlords are willing to provide only simple modifications to the units, such as grab bars, and are not as willing to provide more complex modifications such as wheelchair ramps.

The HASLO maintains a partnership with the State of California Department of Social Services (DSS). The DSS provides \$500,000 in tenant assistance funds to cover the security deposits for HCV tenants. In addition, the AIDS Support Network provides grant money to HCV tenants to cover utility costs.

5. Operation of the Program for Families with Physical Disabilities

The HASLO has experienced many problems housing all of its HCV tenants due to the extremely low (.05%) vacancy rate that exists in the City of San Luis Obispo.

Physically disabled HCV program participants are provided with referrals to a number of state and local partner agencies that can provide supportive services. In addition, the HASLO provides exception rents and a longer than standard housing search period.

6. Housing Choice Voucher Tenant Comments on the Search Process

The physically disabled HCV tenants participating in the focus group stated that they had significant difficulties in finding an accessible unit because of the low vacancy rate in San Luis Obispo and the competitive housing market. The tenants housing search time lasted anywhere from one month to three years. Those tenants who found a unit quickly often leased-up in the unit they were residing in at the time of acceptance to the HCV program.

7. Housing Choice Voucher Tenant Comments on Support from the Public Housing Authority and from Other Community Agencies

The physically disabled HCV tenants who participated in the focus group said that they worked with various state and local social service agencies such as Tri-County to obtain supportive services. The tenants report that they lack support from their local community because there is a poor image of the HCV program as being a complex and slow-moving system. The landlords in the community can get market rate rents very easily so there is not an incentive for them to rent to a HCV tenant.

8. Focus Group with Landlords Who House Housing Choice Voucher Tenants with Physical Disabilities

Landlords who rent to HCV tenants with physical disabilities report making extensive modifications to their units in order to accommodate the tenants. The landlords have provided roll-in

showers, ramps, wide doorways, grab bars, lowered countertops and installed new showerheads and door handles. HASLO Partner agencies such as Tri-County and LifeStep routinely refer disabled tenants to them because these agencies are aware that they provide accessible units.

These landlords stated that they would be very interested in information on grants available to them to cover accessibility modifications. In addition, they would like to be able to recover the costs of an accessibility modification through an increase in the rental payment standard for accessible units.

9. Focus Group with Housing Choice Voucher Landlords Who Do Not House Housing Choice Voucher Tenants with Physical Disabilities

HCV program landlords, participating in this focus group, who do not house a tenant with a physical disability, expressed concerns about renting to this population. The landlords were hesitant to allow accessibility modifications to their units because they were not sure the units would be returned to their original condition upon the tenant's departure. The landlords were concerned about damage to a unit that may be caused by a person in a wheelchair.

Several landlords were open to modifications, provided the tenant would pay for them, but wanted the unit to be returned to its original condition because they felt that a modified unit could not be easily rented to a subsequent tenant who was not disabled.

The landlords stated that they would be more willing to rent to a physically disabled tenant if the HA provided a higher rent and a grant to cover any accessibility modifications.

10. Unique Public Housing Authority or Partner Organization Programs to Serve and House Physically Disabled Persons

The HASLO provides supportive services to its physically disabled HCV program participants primarily through the Tri-County Regional Center. The Tri-County Regional Center is funded by the California State Department of Developmental Services and provides housing search assistance, nursing, supportive living services, and personal care services to persons who are developmentally

disabled. Tri-County collaborates with many state and local organizations such as the Housing Consortium, the California Department of Social Services, Social Security, Medicaid and Medicare.

Tri-County coordinates its services with the HASLO and sets up an individualized program plan for each client with details of the services they are to receive and their subsequent progress. Tri-County provides some funding for HCV tenants who require accessibility modifications to their units.



HOUSING CHOICE VOUCHER ACCESSIBILITY STUDY

Survey of Tenants with Physical Disabilities

OMB No. 2528-0221 Expiration Date 06/30/2005

Section 8 Survey of Tenants with Physical Disabilities

Westat is conducting a survey of Section 8 tenants for the U.S. Department of Housing and Urban Development. The purpose of the survey is to better understand how easy or difficult it was for you to locate housing that met your needs. The results of the study will help HUD and your local housing agency improve the Section 8 program. Your answers will not be shared with anyone and your housing or rent payment will not be affected by participation in the survey. If you have any questions, please call 1-800-937-8281, extension 2836. Thank you very much for your participation.

Please circle the number that best answers each question.

	climb stairs, drive a car, or go out to shop for groceries? (By long-last at least 6 months).	•
	-	GO TO THANK YOU ON LAST PAGE AND RETURN QUESTIONNAIRE]
2.	How long have you lived in your current home?	
	Less than 6 months	1
	6-11 months	2
	1-4 years	3
	5-10 years	
	more than 10 years	
	Don't Know	8
3.	How old is your rental unit (e.g., apartment or house).	
3.		
3.	How old is your rental unit (e.g., apartment or house). Less than one year	1
3.	How old is your rental unit (e.g., apartment or house).	1 2
3.	How old is your rental unit (e.g., apartment or house). Less than one year	
3.	How old is your rental unit (e.g., apartment or house). Less than one year One to five years Six to ten years	
 4. 	How old is your rental unit (e.g., apartment or house). Less than one year	
	How old is your rental unit (e.g., apartment or house). Less than one year	
	How old is your rental unit (e.g., apartment or house). Less than one year	
	How old is your rental unit (e.g., apartment or house). Less than one year	
	How old is your rental unit (e.g., apartment or house). Less than one year	

5.	How did you first find out about the Section 8 rental voucher program? From a apply)	(Please circle all that
	Local community center or service agency	
	Relative, friend or neighbor	
	Housing agency	
	Church or other place of worship	
	Newspaper notice or radio announcement	
	Brochure or flyer	
	Other (please specify) 7	
6.	When you applied for a Section 8 housing voucher, did you have difficulty with circle all that apply)	n any of the following? (Please
	Getting to the public housing agency to apply	
	Filling out the forms	
	Other (please specify)3	
7.	After applying for Section 8, how long were you on the waiting list before you	received your rental voucher?
	Less than 6 months	
	6 months to 1 year	
	1 to 2 years	
	More than 2 years	
	Not applicable	
	Don't know	
8.	What was your main source of information on available units for rent? (Circle	one response only)
	Newspaper	
	Local housing agency	
	Local community service agency	
	Building manager	
	Disability agency or organization	
	Not applicable	
	Other (please specify) 7	
9.	After first receiving your rental voucher, how long did it take to select the renta	l unit that you moved into?
	Did not move, stayed were I was living 1	
	Less than 30 days	
	31 to 60 days	
	61 days to 120 days	
	121 days to 6 months	
	Over 6 months	
	Not applicable 7	
	1.1	

10.	when searching for a Section 8 rental voucher unit did you have difficult of the searching for a Section 8 rental voucher unit did you have difficult of the searching for a Section 8 rental voucher unit did you have difficult of the searching for a Section 8 rental voucher unit did you have difficult of the searching for a Section 8 rental voucher unit did you have difficult of the searching for a Section 8 rental voucher unit did you have difficult of the searching for a Section 8 rental voucher unit did you have difficult of the searching for a Section 8 rental voucher unit did you have difficult of the searching for a Section 8 rental voucher unit did you have difficult of the searching for the searchi	culty with any of the following?
	Getting to the unit to look at it	1
	The units provided by the agency were inappropriate	
	Other, specify	
11.	When you first received your Section 8 voucher, how many rental uni	ts did you visit before choosing one?
	None	1
	One	
	Two	3
	Three or more	4
	Did not search for a new home	8
12.	How many of these rental units would you have wanted to rent?	
	None	
	One	2
	Two	
	Three	
	Four or more	
	Did not search for a new home	8
13.	In your opinion, did a landlord ever select another tenant instead of your opinion, did a landlord ever select another tenant instead of your yes	ou because of your disability?
14.	In your opinion, did a landlord ever select another tenant instead of you history?	ou because of your income or credit
	Yes 1	
	No 2	
	Not applicable 7	
15.	How many times have you moved since choosing your first Section 8	rental unit?
	None	1
	One	
	Two	
	Three or more	

16.	Please circle the reasons why you chose your current rental unit, even if you did not move? circle all that apply)	It had (Please
	More features for persons with disabilities than other available units	1
	Located in a better neighborhood	
	Shorter waiting list than other units	
	Less expensive	
	Located near shopping	
	Located near transportation	
	Located near schools	
	Close to family and friends	
	Other (please specify)	
17.	In what way did the local housing agency help you find and move into a rental unit that me housing agency did the following: (Please circle all that apply)	t your needs? The
	Gave me a list of rental housing with features for persons with disabilities	1
	Provided transportation to visit available rental units	
	Moved my furniture and other belongings into my rental unit	
	Gave me additional time beyond the usual 60-day period to find a rental unit	
	Allowed me to select a unit with a rent that was higher than usual	
	Allowed me to rent a unit outside the normal area	
	Gave me other assistance the housing agency provided	
	(please specify)	7
	None of the above	
18.	Has your local housing agency ever told you about any of the following special Section 8 a persons with disabilities, even if you do not use this assistance? (Please circle all that app	
	I could extend the time to find a unit beyond the usual 60 days	1
	I could choose a unit with a higher rent than usual	
	I could choose a rental unit outside the normal area	
	The local housing agency has not told me about special assistance for persons with disabilities	,
19.	Please check if you need any of the following items. (Please circle all that apply)	
	Lever rather than knob sink faucets	1
	Raised or lowered wall sockets or light switches	
	Larger bathroom	
	Larger kitchen	
	Raised sinks	
	Lowered cabinets and counter tops	
	Raised toilets	
	Other (please specify)	
		-

20.	Please check if your nome has these features, regardless of your needs. (Please circle all that	t apply)
	Lever rather than knob sink faucets	1
	Raised or lowered wall sockets or light switches	
	Larger bathroom	
	Larger kitchen	
	Raised sinks	
	Lowered cabinets and counter tops	
	Raised toilets	
	Other (please specify)	
21.	Have you requested and has your landlord or the housing agency given you permission to ins modifications?	tall any of these
	Yes 1	
	No	
	110	
22.	If permission was granted to install any of these features or for you to make these home modi installed and paid for them? (Please circle all that apply)	fications, who
	I paid for the modifications myself	1
	Local housing agency paid for them	
	Landlord paid for them	
	Social Service Agency paid for them	
	Other (please specify)	
23.	Have you requested and has your housing agency or landlord provided you with information following supportive services? (Please circle all that apply)	on any of the
	Transportation	1
	Assistance with personal activities such as bathing, dressing, cooking, or cleaning	
	Help in finding a new or better job	
	Child care	
	Health services	5
	Other services (please specify)	6
	Other services (please specify) I did not request information on supportive services	7
24.	In the past, have you ever received a Section 8 voucher that expired because you could not fit with the features or home modifications you needed for your disability?	nd a rental unit
	Yes (please explain why)	1
	No	2

25. The following questions ask about your satisfaction with various aspects of your apartment and the surrounding area. Please circle the number that best describes your level of satisfaction as it relates to your disability or a family member's disability.

How satisfied are you with:	Very Dissatisfied	Somewhat Dissatisfied	Neither Satisfied nor Dissatisfied	Somewhat Satisfied	Very Satisfied
a. The section 8 voucher application process	1	2	3	4	5
b. The support provided by the housing agency to locate a unit that met your needs	1	2	3	4	5
c. Your current landlord	1	2	3	4	5
d. Your current apartment	1	2	3	4	5
e. Your current neighborhood	1	2	3	4	5
f. Getting to your building from the parking lot, bus stop, or other location you use	1	2	3	4	5
g. Using other areas of your building or complex, such as the laundry room, garbage or trash receptacles, mailboxes, hallways or park benches	1	2	3	4	5
h. Getting into your building and unit from the outside	1	2	3	4	5
i. Getting around inside your unit	1	2	3	4	5
j. Using your kitchen	1	2	3	4	5
k. Using the bathroom	1	2	3	4	5
Getting around the community for grocery shopping, medical services or other purposes	1	2	3	4	5

26.	In what ways could your landlord or the housing agency improve the Section 8 rental voucher program?

Thank you. Please return the questionnaire in the enclosed postage-paid envelope.

HOUSING CHOICE VOUCHER ACCESSIBILITY STUDY

SURVEY OF TENANTS WITH PHYSICAL DISABILITIES

Question Name	Column Number(s)	
ID01	0001-0010	
CARD01	0011-0012	RECORD NUMBER 01 = RECORD NUMBER
SUBCRD	0013-0014	SUBRECORD NUMBER
UPFLAG	0015	UPDATE FLAG
LONGTERM	0016-0017	Q1. DO YOU OR A FAMILY MEMBER HAVE A LONG-TERM PHYSICAL CONDITION THAT MAKES IT DIFFICULT TO SEE, HEAR, WALK, CLIMB STAIRS, DRIVE A CAR, OR GO OUT TO SHOP FOR GROCERIES? (BY LONG-TERM, WE MEAN ANY CONDITION EXPECTED TO LAST AT LEAST 6 MONTHS).
		PLEASE CIRCLE THE NUMBER THAT BEST ANSWERS EACH QUESTION
	*	1 = YES 2 = NO [GO TO THANK YOU ON LAST PAGE AND RETURN QUESTIONNAIRE]
	*	SKIP LIVECUR - GETSHOP (CODE AS INAPPLICABLE)

^[1]

Question Name	Column Number(s)	
LIVECUR	0018-0019	Q2. HOW LONG HAVE YOU LIVED IN YOUR CURRENT HOME? + = INAPPLICABLE, CODED 2 IN LONGTERM 1 = LESS THAN 6 MONTHS 2 = 6-11 MONTHS 3 = 1-4 YEARS 4 = 5-10 YEARS 5 = MORE THAN 10 YEARS 8 = DON'T KNOW 9 = NOT ASCERTAINED
RENTUNIT	0020-0021	Q3. HOW OLD IS YOUR RENTAL UNIT (E.G., APARTMENT OR HOUSE). + = INAPPLICABLE, CODED 2 IN LONGTERM 1 = LESS THAN ONE YEAR 2 = ONE TO FIVE YEARS 3 = FIVE TO TEN YEARS 4 = OVER TEN YEARS 8 = DON'T KNOW 9 = NOT ASCERTAINED
PRIMELD	0022-0023	Q4-1. IT IS PRIMARILY FOR THE ELDERLY. WHICH OF THE FOLLOWING STATEMENTS BEST DESCRIBES YOUR BUILDING OR COMPLEX: (PLEASE CIRCLE ALL THAT APPLY) + = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 8 = DON'T KNOW 9 = NOT ASCERTAINED

Question Name	Column Number(s)	
PRIDISAB	0024-0025	Q4-2. IT IS PRIMARILY FOR PERSONS WITH DISABILITIES. + = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 8 = DON'T KNOW 9 = NOT ASCERTAINED
вотн	0026-0027	Q4-3. IT IS FOR BOTH THE ELDERLY AND PERSONS WITH DISABILITIES. + = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 8 = DON'T KNOW 9 = NOT ASCERTAINED
NOTPRIM	0028-0029	Q4-4. IF IS NOT PRIMARILY FOR THE ELDERLY OR PERSONS WITH DISABILITIES. + = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 8 = DON'T KNOW 9 = NOT ASCERTAINED
Q4DK	0030-0031	Q4-5. IF IS NOT PRIMARILY FOR THE ELDERLY OR PERSONS WITH DISABILITIES. + = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED

2002		Recordui
Question Name	Column Number(s)	
LOCCOMM	0032-0033	Q5-1. LOCAL COMMUNITY CENTER OR SERVICE AGENCY
		HOW DID YOU FIRST FIND OUT ABOUT THE SECTION 8 RENTAL VOUCHER PROGRAM? FROM A (PLEASE CIRCLE ALL THAT APPLY)
		+ = INAPPLICABLE, CODED 2 IN LONGTERM
		1 = YES
		0 = NO
		9 = NOT ASCERTAINED
RELFREN	0034-0035	Q5-2. RELATIVE, FRIEND OR NEIGHBOR
		+ = INAPPLICABLE, CODED 2 IN LONGTERM
		1 = YES
		0 = NO
		9 = NOT ASCERTAINED
HOUSING	0036-0037	Q5-3. HOUSING AGENCY
		+ = INAPPLICABLE, CODED 2 IN LONGTERMO
		1 = YES
		0 = NO
		9 = NOT ASCERTAINED
WORSHIP	0038-0039	Q5-4. CHURCH OR OTHER PLACE OF WORSHIP
		+ = INAPPLICABLE, CODED 2 IN LONGTERM
		1 = YES
		0 = NO
		9 = NOT ASCERTAINED
NEWSPAP	0040-0041	Q5-5. NEWSPAPER NOTICE OR RADIO ANNOUNCEMENT
		+ = INAPPLICABLE, CODED 2 IN LONGTERM
		1 = YES
		0 = NO
		9 = NOT ASCERTAINED

[4]

2002		Recordul
Question Name	Column Number(s)	
BROCHURE	0042-0043	Q5-6. BROCHURE OR FLYER + = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED
OTHQ5	0044-0045	Q5-7. OTHER (PLEASE SPECIFY) + = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED
GETAGCY	0046-0047	Q6-1. GETTING TO THE PUBLIC HOUSING AGENCY TO APPLY WHEN YOU APPLIED FOR A SECTION 8 HOUSING VOUCHER, DID YOU HAVE DIFFICULTY WITH ANY OF THE FOLLOWING? (PLEASE CIRCLE ALL THAT APPLY) + = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED
FILFORM	0048-0049	Q6-2. FILLING OUT THE FORMS + = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED

	Recoldul
Column Number(s)	
0050-0051	Q6-3. OTHER (PLEASE SPECIFY)
	+ = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED
0052-0053	Q7. AFTER APPLYING FOR SECTION 8, HOW LONG WERE YOU ON THE WAITING LIST BEFORE YOU RECEIVED YOUR RENTAL VOUCHER?
	+ = INAPPLICABLE, CODED 2 IN LONGTERM 1 = LESS THAN 6 MONTHS 2 = 6 MONTHS TO 1 YEAR 3 = 1 TO 2 YEARS 4 = MORE THAN 2 YEARS 5 = NOT APPLICABLE 8 = DON'T KNOW 9 = NOT ASCERTAINED
0054-0055	Q8. WHAT WAS YOUR MAIN SOURCE OF INFORMATION ON AVAILABLE UNITS FOR RENT?
	+ = INAPPLICABLE, CODED 2 IN LONGTERM 1 = NEWSPAPER 2 = LOCAL HOUSING AGENCY 3 = LOCAL COMMUNITY SERVICE AGENCY 4 = BUILDING MANAGER 5 = DISABILITY AGENCY OR ORGANIZATION 6 = NOT APPLICABLE 7 = OTHER SPECIFY
	0050-0051

9 = NOT ASCERTAINED

Question Name	Column Number(s)	
SELUNIT	0056-0057	Q9. AFTER FIRST RECEIVING YOUR RENTAL VOUCHER, HOW LONG DID IT TAKE TO SELECT THE RENTAL UNIT THAT YOU MOVED INTO?
		+ = INAPPLICABLE, CODED 2 IN LONGTERM 1 = DID NOT MOVE, STAYED WERE I WAS LIVING 2 = LESS THAN 30 DAYS 3 = 31 TO 60 DAYS 4 = 61 DAYS TO 120 DAYS 5 = 121 DAYS TO 6 MONTHS 6 = OVER 6 MONTHS 7 = NOT APPLICABLE 9 = NOT ASCERTAINED
SERRENT	0058-0059	Q10. WHEN SEARCHING FOR A SECTION 8 RENTAL VOUCHER UNIT DID YOU HAVE DIFFICULTY WITH ANY OF THE FOLLOWING?
		+ = INAPPLICABLE, CODED 2 IN LONGTERM 1 = GETTING TO THE UNIT TO LOOK AT IT 2 = THE UNITS PROVIDED BY THE AGENCY WERE INAPPROPRIATE 3 = OTHER, SPECIFY 9 = NOT ASCERTAINED
MANYRENT	0060-0061	Q11. WHEN YOU FIRST RECEIVED YOUR SECTION 8 VOUCHER, HOW MANY RENTAL UNITS DID YOU VISIT BEFORE CHOOSING ONE?
		+ = INAPPLICABLE, CODED 2 IN LONGTERM 1 = NONE 2 = ONE 3 = TWO 4 = THREE OR MORE 8 = DID NOT SEARCH FOR A NEW HOME 9 = NOT ASCERTAINED

Question Name	Column Number(s)		
HWMNYREN	0062-0063	Q12. HOW MANY HAVE WANTED TO	OF THESE RENTAL UNITS WOULD YOU RENT?
		+ 1 2 3 4 5 8 9	= INAPPLICABLE, CODED 2 IN LONGTERM = NONE = ONE = TWO = THREE = FOUR OR MORE = DID NOT SEARCH FOR A NEW HOME = NOT ASCERTAINED
UROPIN	0064-0065		PINION, DID A LANDLORD EVER TENANT INSTEAD OF YOU BECAUSE LITY?
		+ 1 2 7	= INAPPLICABLE, CODED 2 IN LONGTERM = YES = NO = NOT APPLICABLE
INCCRED	0066-0067	SELECT ANOTHER	PINION, DID A LANDLORD EVER TENANT INSTEAD OF YOU BECAUSE OR CREDIT HISTORY?
		+ 1 2 7	= INAPPLICABLE, CODED 2 IN LONGTERM = YES = NO = NOT APPLICABLE
TIMEMOVE	0068-0069	~	TIMES HAVE YOU MOVED SINCE FIRST SECTION 8 RENTAL UNIT?
		+ 1 2 3 4 9	= INAPPLICABLE, CODED 2 IN LONGTERM = NONE = ONE = TWO = THREE OR MORE = NOT ASCERTAINED

Question Column Name___ Number(s) MOREFEAT 0070-0071 Q16-1. MORE FEATURES FOR PERSONS WITH DISABILITIES THAN OTHER AVAILABLE UNITS PLEASE CIRCLE THE REASONS WHY YOU CHOSE YOUR CURRENT RENTAL UNIT, EVEN IF YOU DID NOT MOVE? IT HAD . . . (PLEASE CIRCLE ALL THAT APPLY) $\,$ = INAPPLICABLE, CODED 2 IN LONGTERM = YES = NO 0 9 = NOT ASCERTAINED BETHOOD 0072-0073 Q16-2. LOCATED IN A BETTER NEIGHBORHOOD = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES = NO 0 = NOT ASCERTAINED SHORTWAT 0074-0075 Q16-3. SHORTER WAITING LIST THAN OTHER UNITS = INAPPLICABLE, CODED 2 IN LONGTERM = YES 1 0 = NO = NOT ASCERTAINED 9 LESEXPEN 0076-0077 Q16-4. LESS EXPENSIVE = INAPPLICABLE, CODED 2 IN LONGTERM

1

0

9

= YES

= NOT ASCERTAINED

= NO

Question Name		
NEARSHOP	0078-0079	Q16-5. LOCATED NEAR SHOPPING + = INAPPLICABLE, CODED 2 IN
		LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED
NEARTRAN	0080-0081	Q16-6. LOCATED NEAR TRANSPORTATION
		+ = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED
NEARSCHL	0082-0083	Q16-7. LOCATED NEAR SCHOOLS
		+ = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED
CLOSFAM	0084-0085	Q16-8. CLOSE TO FAMILY AND FRIENDS
		+ = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED
OTHQ16	0086-0087	Q16-9. OTHER (PLEASE SPECIFY_
		+ = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO
		9 = NOT ASCERTAINED

[10]

Question Column Number(s) Name LISTRENT 0088-0089 Q17-1. GAVE ME A LIST OF RENTAL HOUSING WITH FEATURES FOR PERSONS WITH DISABILITIES IN WHAT WAY DID THE LOCAL HOUSING AGENCY HELP YOU FIND AND MOVE INTO A RENTAL UNIT THAT MET YOUR NEEDS? THE HOUSING AGENCY DID THE FOLLOWING: (PLEASE CIRCLE ALL THAT APPLY) = INAPPLICABLE, CODED 2 IN LONGTERM = YES 1 = NO 0 = NOT ASCERTAINED PROTRANS 0090-0091 Q17-2. PROVIDED TRANSPORTATION TO VISIT AVAILABLE RENTAL UNITS = INAPPLICABLE, CODED 2 IN LONGTERM = YES = NO 0 9 = NOT ASCERTAINED MOVEFURN 0092-0093 Q17-3. MOVED MY FURNITURE AND OTHER BELONGINGS INTO MY RENTAL UNIT = INAPPLICABLE, CODED 2 IN LONGTERM = YES 0 = NO = NOT ASCERTAINED 9 ADDTIME 0094-0095 Q17-4. GAVE ME ADDITIONAL TIME BEYOND THE USUAL 60-DAY PERIOD TO FIND A RENTAL UNIT = INAPPLICABLE, CODED 2 IN LONGTERM = YES 1 0 = NO

9

= NOT ASCERTAINED

Question Name	Column Number(s)		
ALOWSEL	0096-0097	Q17-5. ALLOWED	ME TO SELECT A UNIT WITH A RENT
		+	= INAPPLICABLE, CODED 2 IN LONGTERM
		1	= YES
		0 9	= NO = NOT ASCERTAINED
ALOWOUT	0098-0099	Q17-6. ALLOWED NORMAL AREA	ME TO RENT A UNIT OUTSIDE THE
		+	= INAPPLICABLE, CODED 2 IN LONGTERM
		1 0	= YES = NO
		9	= NOT ASCERTAINED
OTHQ17	0100-0101	~	OTHER ASSISTANCE THE HOUSING D (PLEASE SPECIFY)
		+	= INAPPLICABLE, CODED 2 IN LONGTERM
		1	= YES
		0 9	= NO = NOT ASCERTAINED
			101 11001111111111111111111111111111111
NONEABV	0102-0103	Q17-8. NONE OF	THE ABOVE
		+	= INAPPLICABLE, CODED 2 IN LONGTERM
		1	= YES
		0 9	= NO = NOT ASCERTAINED
		-	1.01 1.0001(11111100

Question Name	Column Number(s)		
EXTDTIME	0104-0105	BEYOND THE USU HAS YOUR LOCAL ABOUT ANY OF T ASSISTANCE FOR	HOUSING AGENCY EVER TOLD YOU HE FOLLOWING SPECIAL SECTION 8 PERSONS WITH DISABILITIES, EVEN USE THIS ASSISTANCE? (PLEASE
		+ 1 0 9	= INAPPLICABLE, CODED 2 IN LONGTERM = YES = NO = NOT ASCERTAINED
HIGHRENT	0106-0107	Q18-2. I COULD RENT THAN USUA + 1 0 9	CHOOSE A UNIT WITH A HIGHER L = INAPPLICABLE, CODED 2 IN LONGTERM = YES = NO = NOT ASCERTAINED
OUTNORM	0108-0109	Q18-3. I COULD THE NORMAL ARE + 1 0 9	CHOOSE A RENTAL UNIT OUTSIDE A = INAPPLICABLE, CODED 2 IN LONGTERM = YES = NO = NOT ASCERTAINED
NOTTOLD	0110-0111	~	AL HOUSING AGENCY HAS NOT TOLD AL ASSISTANCE FOR PERSONS WITH = INAPPLICABLE, CODED 2 IN LONGTERM = YES = NO = NOT ASCERTAINED

2002		Recordul
Question Name	Column Number(s)	
LEVER	0112-0113	Q19-1. LEVER RATHER THAN KNOB SINK FAUCETS
		PLEASE CIRCLE IF YOU NEED ANY OF THE ITEMS. (PLEASE CIRCLE ALL THAT APPLY)
		+ = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED
WALLSOCK	0114-0115	Q19-2. RAISED OR LOWERED WALL SOCKETS OR LIGHT SWITCHES
		+ = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED
LGRBATH	0116-0117	Q19-3. LARGER BATHROOM
		+ = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED
LGRKIT	0118-0119	Q19-4. LARGER KITCHEN
		+ = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED
RASSINK	0120-0121	Q19-5. RAISED SINKS
		+ = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED

[14]

Question Name	Column Number(s)	
LOWCAB	0122-0123	Q19-6. LOWERED CABINETS AND COUNTER TOPS + = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED
RASTOIL	0124-0125	Q19-7. RAISED TOILETS + = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED
ОТНQ19	0126-0127	Q19-8. OTHER (PLEASE SPECIFY) + = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED
SINKFAUC	0128-0129	Q20-1. LEVER RATHER THAN KNOB SINK FAUCETS PLEASE CIRCLE IF YOUR HOME HAS THESE FEATURES, REGARDLESS OF YOUR NEEDS. (PLEASE CIRCLE ALL THAT APPLY) + = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED

Question Name	Column Number(s)	
LITESWIT	0130-0131	Q20-2. RAISED OR LOWERED WALL SOCKETS OR LIGHT SWITCHES
		+ = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED
LAGRBATH	0132-0133	Q20-3. LARGER BATHROOM
		+ = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED
LARGKIT	0134-0135	Q20-4. LARGER KITCHEN
		+ = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED
RAISESIN	0136-0137	Q20-5. RAISED SINKS
		+ = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED
LOWCABS	0138-0139	+ = INAPPLICABLE, CODED 2 IN
		LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED

Question Name	Column Number(s)	
RASETOIL	0140-0141	Q20-7. RAISED TOILETS + = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED
OTHQ20	0142-0143	Q20-8. OTHER (PLEASE SPECIFY) + = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED
ISTLMODS	0144-0145	Q21. HAVE YOU REQUESTED AND HAS YOUR LANDLORD OR THE HOUSING AGENCY GIVEN YOU PERMISSION TO INSTALL ANY OF THESE MODIFICATIONS? + = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 2 = NO 9 = NOT ASCERTAINED
PAIDSELF	0146-0147	Q22-1. I PAID FOR THE MODIFICATIONS MYSELF IF PERMISSION WAS GRANTED TO INSTALL ANY OF THESE FEATURES OR FOR YOU TO MAKE THESE HOME MODIFICATIONS, WHO INSTALLED AND PAID FOR THEM? (PLEASE CIRCLE ALL THAT APPLY) + = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 - NO

= NO = NOT ASCERTAINED

1 0 9

Question Name	Column Number(s)	
HOUSPAID	0148-0149	Q22-2. LOCAL HOUSING AGENCY PAID FOR THEM + = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED
LLORDPD	0150-0151	Q22-3. LANDLORD PAID FOR THEM + = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED
AGENPAID	0152-0153	Q22-4. SOCIAL SERVICE AGENCY PAID FOR THEM + = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED
OTHQ22	0154-0155	Q22-5. OTHER + = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED

Question Name	Column Number(s)	
RECTRANS	0156-0157	Q23-1. TRANSPORTATION HAVE YOU REQUESTED AND HAS YOUR HOUSING AGENCY OR LANDLORD PROVIDED YOU WITH INFORMATION ON ANY OF THE FOLLOWING SUPPORTIVE SERVICES? (PLEASE CIRCLE ALL THAT APPLY)
		+ = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED
ASSPERS	0158-0159	Q23-2. ASSISTANCE WITH PERSONAL ACTIVITIES SUCH AS BATHING, DRESSING, COOKING, OR CLEANING + = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED
FINDJOB	0160-0161	Q23-3. HELP IN FINDING A NEW OR BETTER JOB + = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED
CHLDCARE	0162-0163	Q23-4. CHILD CARE

1

0 9

[19]

= INAPPLICABLE, CODED 2 IN

LONGTERM = YES

= NO = NOT ASCERTAINED

Question Name	Column Number(s)	
HELTHSVR	0164-0165	Q23-5. HEALTH SERVICES + = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED
OTHQ23	0166-0167	Q23-6. OTHER SERVICES (PLEASE SPECIFY) + = INAPPLICABLE, CODED 2 IN LONGTEM 1 = YES 0 = NO 9 = NOT ASCERTAINED
NOTREQ	0168-0169	Q23-7. I DID NOT REQUEST INFORMATION ON SUPPORTIVE SERVICES + = INAPPLICABLE, CODED 2 IN LONGTERM 1 = YES 0 = NO 9 = NOT ASCERTAINED
EVRREC	0170-0171	Q24-1. IN THE PAST, HAVE YOU EVER RECEIVED A SECTION 8 VOUCHER THAT EXPIRED BECAUSE YOU COULD NOT FIND A RENTAL UNIT WITH THE FEATURES OR HOME MODIFICATIONS YOU NEEDED FOR YOUR DISABILITY? THE FOLLOWING QUESTIONS ASK ABOUT YOUR SATISFACTION WITH VARIOUS ASPECTS OF YOUR APARTMENT AND THE SURROUNDING AREA. PLEASE CIRCLE THE NUMBER THAT BEST DESCRIBES YOUR LEVEL OF SATISFACTION AS IT RELATES TO YOUR DISABILITY OR A FAMILY MEMBER'S DISABILITY. HOW SATISFIED ARE YOU WITH:

[20]

1 2 9 = INAPPLICABLE, CODED 2 IN LONGTERM = YES (IF YES GO TO Q24-2.) = NO

= NOT ASCERTAINED

Question Name	Column Number(s)		
APPLPROC	0172-0173	Q25A. THE SECT PROCESS	CION 8 VOUCHER APPLICATION = INAPPLICABLE, CODED 2 IN
			LONGTERM
		1	= VERY DISSATISFIED
		2	= SOMEWHAT DISSATISFIED = NEITHER SATISFIED NOR
		3	DISSATISFIED NOR
		4	= SOMEWHAT SATISFIED
		5	= VERY SATISFIED
		9	= NOT ASCERTAINED
SUPPORT	0174-0175	Q25B. THE SUPP	PORT PROVIDED BY THE HOUSING
		AGENCY TO LOCA	ATE A UNIT THAT MET YOUR NEEDS
		+	= INAPPLICABLE, CODED 2 IN LONGTERM
		1	= VERY DISSATISFIED
		2	= SOMEWHAT DISSATISFIED = NEITHER SATISFIED NOR
		3	DISSATISFIED NOR
		4	= SOMEWHAT SATISFIED
		5	= VERY SATISFIED
		9	= NOT ASCERTAINED
GUDI ANDI	0176 0177	OOFG WOUR GUE	NEW LINE AND ADD
CURLANDL	0176-0177	Q25C. YOUR CUR	RENT LANDLORD
		+	= INAPPLICABLE, CODED 2 IN LONGTERM
		1	= VERY DISSATISFIED
		2	= SOMEWHAT DISSATISFIED
		3	= NEITHER SATISFIED NOR DISSATISFIED
		4	= SOMEWHAT SATISFIED
		5	= VERY SATISFIED
		9	= NOT ASCERTAINED

Question Name	Column Number(s)		
CURAPT	0178-0179	1 = 2 = 3 = 4 = 5 = =	INAPPLICABLE, CODED 2 IN LONGTERM VERY DISSATISFIED SOMEWHAT DISSATISFIED NOR DISSATISFIED SOMEWHAT SATISFIED SOMEWHAT SATISFIED VERY SATISFIED VERY SATISFIED NOT ASCERTAINED
CURHOOD	0180-0181	1 = 2 = 3 = 4 = 5 = =	INAPPLICABLE, CODED 2 IN LONGTERM VERY DISSATISFIED SOMEWHAT DISSATISFIED NEITHER SATISFIED NOR DISSATISFIED SOMEWHAT SATISFIED VERY SATISFIED NOT ASCERTAINED
GETBUILD	0182-0183	PARKING LOT, BUS USE + = 1 = 2 = 3 = 4 = 5 = =	YOUR BUILDING FROM THE STOP, OR OTHER LOCATION YOU INAPPLICABLE, CODED 2 IN LONGTERM VERY DISSATISFIED SOMEWHAT DISSATISFIED NOR DISSATISFIED NOR DISSATISFIED SOMEWHAT SATISFIED VERY SATISFIED NOT ASCERTAINED

Question Name	Column Number(s)		
USOTHARE	0184-0185	COMPLEX, SUCH	THER AREAS OF YOUR BUILDING OR AS THE LAUNDRY ROOM, GARBAGE OR LES, MAILBOXES, HALLWAYS OR PARK
		+ 1 2 3 4 5 9	= INAPPLICABLE, CODED 2 IN LONGTERM = VERY DISSATISFIED = SOMEWHAT DISSATISFIED = NEITHER SATISFIED NOR DISSATISFIED = SOMEWHAT SATISFIED = VERY SATISFIED = NOT ASCERTAINED
GETINTO	0186-0187	Q25H. GETTING THE OUTSIDE + 1 2 3 4 5 9	INTO YOUR BUILDING AND UNIT FROM = INAPPLICABLE, CODED 2 IN LONGTERM = VERY DISSATISFIED = SOMEWHAT DISSATISFIED = NEITHER SATISFIED NOR DISSATISFIED = SOMEWHAT SATISFIED = VERY SATISFIED = NOT ASCERTAINED
GETARND	0188-0189	Q251. GETTING + 1 2 3 4 5 9	AROUND INSIDE YOUR UNIT = INAPPLICABLE, CODED 2 IN LONGTERM = VERY DISSATISFIED = SOMEWHAT DISSATISFIED = NEITHER SATISFIED NOR DISSATISFIED = SOMEWHAT SATISFIED = VERY SATISFIED = NOT ASCERTAINED

Question Name	Column Number(s)	
USEKIT	0190-0191	Q25J. USING YOUR KITCHEN
		+ = INAPPLICABLE, CODED 2 IN LONGTERM 1 = VERY DISSATISFIED 2 = SOMEWHAT DISSATISFIED 3 = NEITHER SATISFIED NOR DISSATISFIED 4 = SOMEWHAT SATISFIED 5 = VERY SATISFIED 9 = NOT ASCERTAINED
USEBATH	0192-0193	Q25K. USING THE BATHROOM
		+ = INAPPLICABLE, CODED 2 IN LONGTERM 1 = VERY DISSATISFIED 2 = SOMEWHAT DISSATISFIED 3 = NEITHER SATISFIED NOR DISSATISFIED 4 = SOMEWHAT SATISFIED 5 = VERY SATISFIED 9 = NOT ASCERTAINED
GETSHOP	0194-0195	Q25L. GETTING AROUND THE COMMUNITY FOR GROC SHOPPING, MEDICAL SERVICES OR OTHER PURPOSE
		+ = INAPPLICABLE, CODED 2 IN LONGTERM 1 = VERY DISSATISFIED 2 = SOMEWHAT DISSATISFIED 3 = NEITHER SATISFIED NOR DISSATISFIED 4 = SOMEWHAT SATISFIED 5 = VERY SATISFIED 9 = NOT ASCERTAINED

Question Name	Column Number(s)		
AGENIMPR	0196-0197	HOUSING AGENCY VOUCHER PROGRAM + 0 1 96 THANK YOU. PLE	AYS COULD YOUR LANDLORD OR THE IMPROVE THE SECTION 8 RENTAL A? = INAPPLICABLE, CODED 2 IN LONGTERM = NO COMMENT = COMMENT = COMMENT = Other EASE RETURN THE QUESTIONNAIRE IN DSTAGE-PAID ENVELOPE.
OTHQ5SP	0198-0199	Q5-7. OTHER (PI + 02 03 04 05 96	= INAPPLICABLE, CODED 2 IN LONGTERM = Spanish Peaks = Self = Doctor or other Health Practitioner = Building Buy Out = Other
OTHQ6SP	0200-0201		= INAPPLICABLE, CODED 2 IN LONGTERM = Getting or being on waiting list = Gathering information = Anticipating information = Timeframe = Other
OTHQ8	0202-0203	Q8-7. OTHER (PI + 03 04 96	EASE SPECIFY) = INAPPLICABLE, CODED 2 IN LONGTERM = Self = Relative, friend, neighbor or other person = Other

[25]

OTHQ10SP 0204-02	05 <u>Q10-3.0</u> 5	THER, SPECIFY
	+	= INAPPLICABLE, CODED 2 IN
	03	LONGTERM = Both getting to the unit to look at it and units were
	0.4	<pre>inappropriate = Building manager or landlord</pre>
	05	= Finding units that accept
	03	Section 8 vouchers
	06	= Finding available units to
	96	rent = Other
	96	= Other
OTHQ16SP 0206-02	07 <u>Q16-9. 0</u> 7	THER (PLEASE SPECIFY)
	+	= INAPPLICABLE, CODED 2 IN LONGTERM
	03	<pre>= Already in unit/only one available</pre>
	04	= Met my desires
	05	= Recommended by someone
	06	= Landlord
	07	= Financial Reasons
	0.8	= All of the above
	96	= Other
OTHO17SP 0208-02		AVE ME OTHER ASSISTANCE THE HOUSING
02	~	ROVIDED (PLEASE SPECIFY)
	+	= INAPPLICABLE, CODED 2 IN LONGTERM
	03	= Information about rental units that were available
	04	= Allowed me to stay in my unit
	05	= Filled out paperwork
	06	= Referral
	07	= Answered my questions
	96	= Other

Question Name	Column Number(s)	
OTHQ19SP	0210-0211	Q19-8. OTHER (PLEASE SPECIFY)
		+ = INAPPLICABLE, CODED 2 IN LONGTERM 03 = Bathroom modifications 04 = Kitchen modifications 05 = Accessible from outside(no steps, better outside lighting, etc.) 06 = Accessibility inside 07 = More space or rooms 08 = Maintenance Assistance 96 = Other
OTHQ20SP	0212-0213	Q20-8. OTHER (PLEASE SPECIFY) +
OTHQ22SP	0214-0215	Q22-5. OTHER + = INAPPLICABLE, CODED 2 IN LONGTERM 96 = OTHER
OTHQ23SP	0216-0217	Q23-6. OTHER SERVICES (PLEASE SPECIFY) + = INAPPLICABLE, CODED 2 IN LONGTERM 03 = Passport 96 = OTHER

Question Name	Column Number(s)		
Q24SP	0218-0219	Q24-2. (PLEA: + 96	SE EXPLAIN WHY) = INAPPLICABLE, CODED 2 IN LONGTERM = OTHER, Did Not Specify
OTHQ26SP	0220-0221	~	WAYS COULD YOUR LANDLORD OR THE CY IMPROVE THE SECTION 8 RENTAL RAM?
		+ 03 04 05 06 07 08	= INAPPLICABLE, CODED 2 IN LONGTERM = Handicapped Accessible = Maintenance Issues = Financial Issues = Application Assistance/Efficiency = Information Assistance = More Options (more units, transportation, more space, lst floor, appliances, etc. = Buy a Home or Purchase Unit = Timeframe

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