

MEMORANDUM

Date: November 9, 2020

To: Marisa A. Zapata, PhD
Director, PSU-HRAC

From: Lauren E. M. Everett
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Subject: Updates on COVID-19 response, housing, and people experiencing homelessness nationwide, November 2 - 8.

News

1. [Los Angeles](#) City Council voted Wednesday to find ways to expand their local version of Project Roomkey. *Los Angeles Magazine* explores the complexities of the city's political climate around unsheltered homelessness, including [a pending lawsuit](#) that aims to determine where unhoused Angelenos should and shouldn't be allowed to live.
2. [Portland, OR](#) has managed to keep COVID numbers relatively low among people experiencing homelessness. Officials credit this to a combination of emergency preparedness and luck.
3. A look at how [Vermont](#) has been using CARES Act money to bolster housing supply.
4. In [the United Kingdom](#), the government has announced a second lockdown for England, as well as £15 million in funding for people experiencing homelessness. This sum is only a fraction of what the government allocated in March, under the Everyone In initiative.
5. The plight of one [Monterey, CA](#) renter's eviction illustrates the danger of housing insecurity during a pandemic. In addition to being at a higher risk of contracting COVID, [other impacts](#) include a decline in mental health, strain on familial relationships, and critical stress levels.
6. Legal Aid is calling on [New York](#) Governor Cuomo to extend the order pausing default judgements¹ in eviction cases. For months tenants have been told not to answer their court summons and await further instructions, the Office of Court Administration reversed their decision and failed to notify tenants of the change, leading to thousands of evictions by default.
7. The federal government defended its eviction ban in court on Friday, arguing that [the moratorium had helped prevent the spread of COVID](#) and did not overstep Congress' authority.
8. About 285 households in [Annapolis, MD](#)'s public housing face eviction if they do not sign up for a repayment plan or start paying rent.

¹ A judgement against a defendant due to a failure to appear. These were common in eviction cases even before COVID.

National Low-Income Housing Coalition (NLIHC) weekly call and updates (November 2)

Siobhan Kelly, Associate Director, Office of Multifamily Analytics and Policy, Federal Housing Finance Agency: We just released a brand new [FAQ sheet](#) for tenants living in properties that are backed by federal loans, during COVID. It includes information about the forbearance program and the CDC moratorium, as well as penalties for violating the tenant protections in these rules. It also links to the Tenants Declaration form. Our research shows that many property owners and tenants are unaware of the protections, so this FAQ aims to increase awareness. The FAQ also addresses info about their rights if the landlord has a forbearance. If a landlord decides to move forward with an eviction filing, they must provide the tenant with 30 days notice. Landlords are required to inform tenants about their rights. We also have a link to the lookup tool so a renter can look up their home and see if it has one of these federally backed mortgages.

Q: One of the biggest changes between this FAQ sheet and what FHFA has done before is noting that any landlord with this type of loan can be moved into default if they violate the CDC order. What would that mean?

A: It's a default threat that could potentially happen, and it's a can-by-case basis, but the point is we're trying to make sure landlords are complying.

Q: Director Calabria mentioned that if we hear of tenants whose landlords are violating the order, we can refer them to FHFA. But is there a process by which renters can report it directly?

A: Because we're not consumer-facing or an enforcement agency, there's no specific process or online form, but renters can reach out to us if they are experiencing that.

Q: How would renters know if their landlord is receiving forbearance?

A: We're requesting that they let the tenants know, but don't have any specific mechanism for ensuring that.

Leading Age: We represent the majority of HUD assisted senior housing providers. There are about 2.5 million seniors who receive some form of housing assistance. We know that 80% of COVID deaths are people over 65. COVID aside, older adults with housing assistance are more likely to need help with activities, have chronic health conditions, and need help with personal care. In October we surveyed our senior housing providers. Our key findings are: of the respondents, 60% said they are aware of confirmed cases in some or most of their senior communities (20% in most, 38% in some, 40% in none). These are really open buildings because they're set up to let residents age in community. We've been urging more testing availability for residents, as a lot of residents are having difficulty accessing testing. We have a lot of members who have successfully partnered to bring testing on-site. We also asked providers what their top challenge is currently. A lot of them chose 'resident social isolation and access to services' as a top concern (84%). A lot of residents don't have wifi in their units either. Only half of HUD senior buildings even have a service coordinator to assist residents in gaining access to resources. Mental health challenges and

depression are widely reported - among both residents and staff. We also asked about maintenance, and 44% report maintenance backlogs of between 1-6 months. Many are now back on track (55% reported no delays). The final question was about cost strain, and 69% of providers described themselves as cost-burdened.

Q: Who were the respondents?

A: I would say 80% are HUD-assisted providers like nonprofits who run programs through the Section 202 and Section 8 programs. Probably some public housing agencies are in there too.

Q: Did you give them a definition of cost-burden?

A: No we let them define in.

Q: Is there anything in the HEROES Act that would help this?

A: Yes, providers can't use CARES Act funding to pay for meals and that's been a big issue. It's also a big issue that so many of these buildings don't have a residential services coordinator. Then there's an additional provision introduced by Senator Waters to pay for wifi.

Scott Landes, Associate Professor of Sociology, Syracuse University: I'm focusing most of my attention right now on COVID-related outcomes for people with developmental disabilities (e.g. Downs Syndrome). We were concerned going into the pandemic because this group already has a higher instance of respiratory issues. Estimate where that 17%-20% of this population lives in congregate settings (e.g. a group home) with staff rotating out in shifts. Staff are usually low-paid and low-wages, having to work a few jobs to get by. These are often Medicaid homes. We've been tracking COVID data, and we've seen that these residents are four times more likely to contract COVID, and three times more likely to die from it. Our feeling is that it's the congregate settings that are the driver. The US is unique in how we serve this population, in that the approach is centered around group homes, whereas in Europe the state funds people in independent living situations with a roommate commonly. The way that we've structured support in this country is quite harmful for this population, and that can be seen in the disparate fatality rates by location. Senators Warren and Murray and Hassan [wrote to CMS](#) asking them to require states to report COVID outcomes for this population. They replied that they don't collect this data, and the response was that they should.

Q: This is similar to what people have seen in other congregate settings, and I'm wondering if there's a shift away from that model?

A: There's a real disconnect between what advocates and people with lived experience are asking for, and what's offered in terms of budget. The fear we have in this field is that in the economic downturn, there will be more institutional models to save money.

Lisa Sloane, Technical Assistance Collaborative: To follow up on what Scott said, these things are all true, and there are also some great tools available to address these issues. CMS has been pushing for smaller group homes, which means one is less likely to have a roommate, would have a better staff ratio, etc. However, many people in this population still live in larger homes. A research

group called Mathematica found that almost 190,000 non-elderly people with disabilities, over 77,000 people with intellectual or developmental disabilities, and over 34,000 with psychiatric disabilities live in Medicaid-supported nursing homes and similar settings. Additionally there are over 80,000 people experiencing both sheltered and unsheltered homelessness from this population. The data shows that lots of people with disabilities live in congregate settings, and also shows that people with disabilities prefer not to live in these facilities. The problem is that you can't de-congregate without affordable housing and supporting services. Some COVID challenges in nursing facilities are lack of PPE, lockdowns, the housing application process has slowed, and Medicaid-funded services have expanded but HCBS slots have not. The HEROES Act would make a big difference here with rental assistance, HCVs, etc. The disability community has experienced challenges in figuring out how to de-congregate with the resources available. HUD recently put out a notice that there are additional Mainstream Vouchers available, and the local housing authority needs to request that funding. The other funding source is the Money Follows the Person funded transition program - there is up to \$5 million in MFP grant funds available for participating jurisdictions.

Kate Baulk, Senior Staff Attorney, National Housing Law Project: There have been four cases challenging the CDC's eviction moratorium. Last Thursday a court in Atlanta denied a motion for preliminary injunction against the CDC order. In this case the court made several helpful findings. First, they found that Congress gave the CDC the power to issue this type of order. They also found that the issuance of this moratorium was necessary during a global health pandemic. The court also said specifically that it was not their job to render a judgement, and that the CDC should have taken other measures to protect the public health. They also said in the absence, 30 million -40 million Americans could be subject to eviction. Unfortunately the court order also relies on the CDC's FAQ, which states that it does not bar the issue or termination or even judgement, but that it just delays the actual physical eviction. We disagree with the FAQ and believe that the CDC is trying to determine how evictions work, which is beyond their expertise. Since they don't know how evictions work, there will likely be a huge volume of evictions in January. However the court order does note that the moratorium allows landlords to collect fees and back rent. The court notes that in the two state eviction moratoriums that were challenged and upheld, they barred landlords from filing evictions at all. There was a case challenging not the order, but how it was being implemented in Missouri. It was brought by the ACLU and tenant activists ([KC Tenants](#)).

Q: What do you think the effect of this decision will be on other landlords lawsuits?

A: I don't know how much effect it will have as they plan to pursue a multi-state effort, but it could go a long way in helping other courts come to a similar conclusion. In some of the other cases where state eviction moratoriums have been challenged or the closure of gyms or churches, this establishes that the CDC has the authority to make those determinations.

Jennie Rodgers, VP & Denver Market Leader, Enterprise (Colorado): Since March our governor has issued a series of anti-eviction orders including a moratorium, legal funding, and preventing utility shut offs. The governor appointed a task force to look into eviction prevention. One of the groups missing are service providers that work with people on the ground, so we realized we

needed to engage with and try and represent those perspectives. We and our partners put together a policy platform:

ENTERPRISE

Statewide Eviction Prevention Policy Priorities



 Enterprise 2

We've been working for the past few years to advance a tenant protection program at the state level. We also realized while putting together this platform that we needed to address landlord concerns and stabilize them as well. As you can see in the fifth bucket we have a recommendation to track evictions and allocate resources in an equitable way. Our task force made fourteen recommendations for the governor. We pushed for a state moratorium that mirrors the federal order out of concern that the federal one might be struck down. We also talked about long-term interventions, like a statutory limit on the amount of fees landlords can charge tenants over time. I am happy to report that since we've issued our report, we've had three executive orders issued by the governor. One was to reiterate the CDC order and mandate that landlords provide the information and the form to tenants. The other two were expanding the moratorium to cover month-to-month leases, and a restriction on charging late fees for tenants. In the meantime, our governor has found the resources to provide \$375 per individual who has been collecting unemployment. Our governor announced that he's proposing \$50 million in rental assistance in 2021. We've lined up work for ourselves in the 2021 legislative session, including allocating resources for rental assistance and making some of these wins permanent.

Jesse Rabinowitz, Advocacy and Campaign Manager, Miriam's Kitchen (Washington DC): We're working around the clock to make sure people experiencing homelessness have everything they need during the pandemic, while continuing our advocacy efforts to end homelessness in the District. Nearly 7,000 households experienced homelessness before COVID, and between 40,000-70,000 households struggled to pay rent. DC has the highest intensity of gentrification in the

country, and nearly 88.4% of people experiencing homelessness are Black. We've developed a comprehensive advocacy platform rooted in many things that are happening at the same time:

Fall and winter advocacy priorities

- ▶ Increase funding to end homelessness and stop cuts to existing funding
- ▶ Stop evictions
- ▶ Ensure DC's COVID-19 response meets the needs of our unhoused neighbors
- ▶ Stop encampment evictions/ clearings
- ▶ Ensure adequate, socially distant hypothermia resources (both daytime and shelter)
- ▶ Lessen the time it takes to move into housing by fixing discriminatory barriers and roadblocks at the DC Housing Authority

We know all of these areas are interrelated, but we've found it helpful to break it up into these different aspects.

Q: Are there any efforts to coordinate responsibility in the jurisdictions around DC?

A: Yes there's a Metro Regional Council that coordinates between the various localities.

Q: Can you share more about the discriminatory roadblocks?

A: One is a barrier on the part of landlords, and the other are housing authorities. There are a number of tactics including discriminatory application processes.

Sakinah Hoyte, Homlessness Czar, City of Newark, New Jersey: I was appointed to this position about a month ago, and directed the Office of homeless services. Our COVID numbers have been increasing substantially, so the mayor has been instructing us to go back to the basics, because the strategy we were using at the previous peak was working. We're particularly concerned about the most vulnerable population, which is unsheltered individuals. The mayor directed us to increase our outreach to the homeless. We started recruiting volunteers to assist us with our existing efforts. There were many people in the community who were able to assist. The mayor also required that we had a shelter for these individuals and people at risk of homelessness. Ultimately this became a hotel shelter with a capacity of 325 individuals. In addition to this shelter, the Department of Health and Community Wellness set up an isolation and quarantine facility for those who have tested positive. We also connected with shelter operators in the city to increase our capacity. We issued shelter guidance based on the CDC recommendations and met frequently with shelter

operators to discuss best practices. You can't force people to shelter in place, so coming up with incentives has been tough.

We also embarked on a COVID-19 testing campaign throughout all the city's shelters, and we instituted COVID-19 weekly site visits at all the shelters, to ensure they're following CDC guidelines. Through these efforts we've avoided a mass outbreak in the homeless population. For the unsheltered community, we've requested that all shelters update their COVID mitigation plans, and they are being reviewed. We've also requested that they identify their most vulnerable residents and isolated spaces within their shelters. We like to proactively segregate those folks. We're working with the Department of Health on testing both sheltered and unsheltered. As a result of the pandemic, we were able to place more than 600 folks in shelter. We developed a citywide collaborative that consists of many entities, and the goal is to ensure that everyone who's placed in a hotel or motel will be placed in permanent housing. Thus far 50 folks from the hotel and motel program have been placed.

Other resources:

1. A [state-by-state guide](#) to eviction and foreclosure policies.