

Homeless With AIDS

A System Built On No Permanent Solution

BY BENJAMIN RYAN

HIV-positive since the spring of 1998, 40-year-old Lisa Faison suffers from pelvic inflammatory disorder, is anemic, has pancreatic cancer, and is bipolar. A self-described "street walker," Faison has been hospitalized frequently during her life.

In September 2000, Faison first wandered into the bureaucratic maze of New York City's HIV/AIDS Service Administration (HASA), the first step in a journey that has provided little in the way of greater stability in her life. Since that time, HASA has placed her in more than 20 different single room occupancy (SRO) hotels.

HASA doles out \$1,600 a month in taxpayer dollars for her bare, 150-square-foot room at the Royal York Hotel, an SRO on West 97th Street where she has lived for nearly a year. Standing over a hot plate of grits in the kitchen-less room, Faison, heavy-set and more than a little disheveled, spoke in a child's whining voice about life at the bottom.

"I want a room with a bathroom," she almost whispered.

Half the bathrooms in her building are under renovation and she currently shares one with 13 other tenants who live on the same floor. When she complained that she wanted a refrigerator in her room, she said that the hostile building manager told her to "get a lawyer," and he later told her that running an air conditioner would cost her \$50 a month.

Despite her difficulties at the Royal York, Faison has one patron saint there, her non-HASA neighbor, Mildred Ortega, a 39-year-old professional housekeeper and longtime resident who pays \$595 in rent. The Venezuelan immigrant arranged for Faison to obtain a refrigerator and air conditioner and helped her stay at the Royal York beyond the 28-day limit that SRO landlords often enforce in order to keep the HASA clients from becoming legal residents.

Ortega has declared war against a building which she said exploits

Temporary Fixes Only: HOMELESS with AIDS

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its lucrative HASA clients while abusing the low-paying regulars, and against a city agency which turns a blind eye to the often horrifying conditions of SRO hotels where HASA daily places about 1,600 HIV-positive clients. While fending off the management's attempts to evict her, Ortega pursues a mission best characterized as weeding the good from the bad: protecting peaceful HASA placements from those who have created an unsafe bedlam of drug dealing, prostitution, constant fighting, and police intervention.

Across New York City, Ortega is but one soldier in a disparate army of AIDS advocates, community members, and abused HASA clients waging a losing battle against the recklessly disorganized HASA. Numerous civil lawsuits against the city as well as studies commissioned both by former Mayor Rudy Giuliani's administration and by former Comptroller Alan Hevesi have made abundantly clear that systematic and careless violation of the laws established to protect HASA clients is commonplace within the SRO housing system.

A 1998 report from Hevesi's office condemned the city for illegally doing business with SROs without formal contracts, and found that many of the SROs were unfit for habitation by immune-compromised HASA clients. A study the previous year, commissioned by the Giuliani administration itself, found similar horror stories of unfit living conditions.

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The Human Resources Administration, which oversees HASA, declined to comment for this article and no phone calls to the owners of buildings mentioned were returned.

A 1997 law passed by the City Council to mitigate systematic and chronic mistreatment of HASA clients spelled out the services to which they have a right. In brief, HASA must conduct intensive case management, with a client to manager ratio not exceeding 34 to 1. Hotels and other temporary shelter units must provide "medically appropriate" housing, including a refrigerator, clean linens once a week and one adequate bathroom for every five residents.

The city systematically violates this law and other civil rights protections for homeless people with AIDS. According to advocates and city officials, this record stemmed from the institutional hostility of the Giuliani administration toward the homeless and, specifically, HASA's steadfast unwillingness to bend under the pressure of class action suits.

"It was really a war," said City Councilmember Margarita Lopez of the Council's attempts to negotiate changes at HASA with Giuliani. "It was not a conversation. It was literally a war between us and the mayor. The conflict was simply that Mayor Giuliani refused to provide the care that was needed."

Originally called the Division of AIDS Services, HASA was established within HRA in 1985. The agency provides housing assistance to approximately 25,000 HIV-positive New Yorkers. The vast majority of clients, about 20,000, receive rental subsidies for their own apartments. The city is also able to make placements in about about 4,000 long term housing units that provide varying degrees of services and care for people with AIDS.

But there remains a significant gap, affecting about 1,600 HASA clients on average. HASA will spend about \$25 million in rent this year providing these clients with "emergency, temporary housing" in approximately 47 different SROs citywide—and, if there is no other space, for short stays in luxury hotels. In these hotels and SROs, people living with AIDS rub up against often unwelcoming tourists and long-time tenants.

It is the most destitute New Yorkers with AIDS who use this temporary housing system, which, contrary to its name, is a long term trap that does little to lift indigent clients out of drug addiction and city welfare dependency, and into permanent housing and self-sufficiency.

"We've always contended that the people with the most needs, are in the grips of substance abuse, and who are severely mentally ill are the people the city's welfare administration serves the least," said Jennifer Flynn, co-director of the New York City AIDS Housing Network, a non-profit advocacy group. "And those are the people who end up in the places that are the most dangerous."

These people have few champions. Because not only are HASA clients like Lisa Faison HIV-positive and homeless, but they also often come saddled with drug addiction, mental illness, criminal records, and chronic unemployment, and are almost exclusively black or Latino. Political discourse prevailing in the city, and the country, expends precious little energy on considering the needs of this population.

Still early in a new mayoral administration, advocates are testing the wind for signs that past cold shoulders are beginning to thaw. Mayor Michael Bloomberg, who has until recently remained an enigma on this issue, gave reason to worry with his recent decision to turn a lead paint-laced former jail into a homeless shelter.

But more detailed evidence of Bloomberg's inclinations may be at hand. His HRA commissioner, Verna Eggleston, will soon announce a replacement for the recently ousted HASA deputy commissioner Gregory Mark Caldwell. The firing was widely applauded by AIDS advocates who saw Caldwell as an ineffectual, out of touch micro-manager, one who maintained a stubborn reluctance to meet with community leaders during his five-year tenure.

HIV-positive City Councilmember Philip Reed, for one, is willing to entertain the possibility of upside potential.

"Anybody's going to be more receptive than Giuliani," he said.

Reed argued that there is evidence in Bloomberg of a general empathy for the poor, a group Giuliani seemed to despise.

"[Bloomberg] has been in office eight months. I haven't heard anybody tell me how many people we've pushed off welfare this week," Reed said. "That was Rudy's mantra. That's not Bloomberg's."

However effective and committed to fixing HASA the Bloomberg team proves to be, the task is mammoth and daunting. Their job is to dismantle and re-create an institution that currently fosters a self-perpetuating economy grounded in desperation, corruption, and illegal activity.

One integral component of the problem is the role of the SRO owners themselves, who maintain non-contractual "gentlemen's agreements" with HASA and are not required to provide any services to clients. Many profit royally off the agency, dwarfing ordinary rents of as little as \$400 a month with fees usually ranging between \$1,000 and \$2,500 a month.

"It's a market, a complete market," reflected long-time Royal York resident Leslie Comes, who hasn't paid her \$433 rent since the gas was shut off in the building in November, requiring a recent visit to court in a vain attempt to force the building to fix the problem. (The West Side SRO Project continues to litigate this issue.) "People getting paid off of other people's suffering. It's very sad."

It has long been the custom of SROs to take the extra city dollars that HASA placements provide and use them to renovate their buildings into higher class tourist hotels, clearing the building of tenants when they are ready to convert. During this process, the HASA clients conveniently scare away the regular tenants, some of whom fear for their safety when a once tranquil building becomes a drug haven. Others simply are prejudiced against people with HIV or AIDS. According to Cynthia Doty, former special assistant to Assemblymember Ed Sullivan, landlords have other means of forcing regular tenants out of their building, such as switching their room assignments so that they lose legal residency.

"The bathrooms were filthy and particularly dangerous for tenants with compromised immune systems: feces, urine, and vomit went uncleaned for days."

—Housing Works affidavit

After September 11, a dramatic drop in tourism trimmed the scope of many SRO business plans. Now the buildings are more inclined to rely on HASA clients to fill rooms vacated by the tourist bust in order to recoup financial losses from the downturn. They are even more desperate to flush out the low paying tenants. The result is that there is now an even greater influx of HASA placements within the hotels.

Several class action suits filed against the city by Housing Works, a not-for-profit which assists homeless HIV-positive New Yorkers, have alleged that many SRO hotels provide housing which is medically inappropriate for people with AIDS. Four major cases have wound their way through the courts over the past five years, two of them still drawn out in bitter legal wrangling. Victories by Housing Works in the others have assured HASA clients of stronger protection under the Americans with Disabilities Act; required the city to find housing for clients the same day they apply; and helped streamline the tangled HASA bureaucracy by removing some of the hurdles welfare applicants face.

Speaking about one of the cases currently under litigation, Armen Merjian, Housing Works' attorney, said, "Papers contain allegation after allegation, fact after fact, story after story of petitioners housed chronically and repeatedly in terrible conditions that lack the basic amenities and protections required by law, by basic standards of decency."

Affidavits in *Winds vs. Turner*—filed against former HRA commissioner Jason Turner—describe seven petitioners who in 2001 lived in hotels plagued with rat and roach infestation. According to the affidavits, the bathrooms were filthy and particularly dangerous for tenants with compromised immune systems: feces, urine, and vomit went uncleaned for days. Some HASA clients had to keep their HIV medications on windowsills in cups of ice because they lacked the legally mandated refrigerator; or they just stopped taking that particular medication altogether. One woman who had severe problems walking was placed on the third floor of a building without an elevator and was unable to convince the unsympathetic management to switch her to the ground floor. She would often stay in her room for days on end, in fear of a return journey in which she would have to get down on all fours and crawl up the stairs, resting as long as 25 minutes on the second floor before climbing any higher.

The case has stalled in court, according to Housing Works, as HASA drags its feet, ever unwilling to settle. Merjian said that a judge's decision is imminent, which will more than likely return the two sides to their drawn out court battle as HASA appeals.

"I just am outraged," said Doty, who is running for the 69th district Assembly seat her former boss, Sullivan, is vacating. "The city shouldn't conduct business with these landlords. If you're going to take the responsibility of being a real estate owner, the least you can do is follow the law."

Separate from the problems posed by lack of HASA oversight and landlord indifference and greed, drug addiction fuels disorder in the SROs. The 1997 study commissioned by Giuliani's administration and conducted by the National Development and Research Institutes, the conclusions of which the city initially attempted to keep a secret, found that a drug, sex-work, and loan-sharking economy thrives within the hotels. Drug addicted HASA clients discover a haven within a free housing program that provides them with both easy access to drugs and ways to get the money to pay for them. This in turn creates a structural dependency in the clients, or "hotel addiction," as the report called it. So instead of serving as a launching pad toward permanent housing and a sober lifestyle, the program actually keeps clients in drug-addicted limbo on the taxpayer's hefty tab.

Untreated mental illness also contributes to the cycle.

"I would say one out of every three new clients that comes into this agency overall has emotional problems, if not as severe, or more severe, than their HIV status at that particular time," said Rick de Ariaz, a HASA supervisor who currently manages a satellite unit in Harlem and who spoke without the knowledge of his superiors. "We have never done housing for those type of clients. And we need it badly. Because of course if you put in someone mentally ill, still possibly abusing, what do you think's going to happen? He's going to get in fights, he's going to get thrown out, then we have to re-house him."

HASA clients looking to stay off drugs wage an uphill battle and the clean tenants—both the city placements and the others—often live in fear for their lives.

Joseph Rizzio, 46, who attends a day treatment program for drug addiction, complained that he doesn't want to live around other addicts.

"It's hard to keep your sobriety up," he said, standing outside HASA's Midtown satellite location at Eighth Avenue and 30th Street—one of the places where clients wait for Manhattan SRO placements as well as their food stamps or supplemental security income checks. "Like right now I'm going to drink a beer, I'm aggravated."

The oppressive glare of the midday summer sun revealed a bottle shoved into his pants.

When HASA placed Ed Watkins, 40, at the Royal York last December, he was promptly robbed of all his possessions and money. Two drug dealers terrorized him at gunpoint and threatened to rape him over a period of 90 minutes. He now keeps a "Riker's Island-trained" pit bull in his \$1,050 a month, 80-square-foot room; the pale and gaunt computer programmer's face still advertises the hollow, sorrowful expression of a wounded puppy.

His neighbor, 39-year-old HASA client Donna Russo, is a spitfire of a native New Yorker and doesn't stand for trouble from two-faced addicts.

"They present themselves one way," she said. "But then, as the weeks go by and that's when you realize, hey, something's wrong here. But then, 30 days are up and it's friggin' too late and we're stuck with these drug

addicts here. It's sad."

Russo relentlessly reports the numerous incidents of prostitution and drug use to the management. She worries that, if she doesn't, one of the addicts will storm into her room and kill her. And that no one will care: she'll become nothing more than "just another Jane Doe."

Other community members who live in and around the buildings are also aggravated by the drug problem.

Sherm Parsons runs the Lotus Garden, a community garden that borders the Royal York. She said food, clothing, magazines, a bottle of urine, lit cigarettes, and papers have all flown out of windows and into the green space. This spring, a four-year-old boy stepped on a dirty hypodermic needle and had to be treated with anti-HIV post-exposure prophylaxis.

Parsons said HASA has been "totally unresponsive" to her calls for action.

While Parsons also expressed concern for the lack of services provided to HASA clients, other neighbors put a greater emphasis on their own personal agendas.

Michael Oulette is the head of the tenant association at the Malibu Hotel on 103rd Street and Broadway, which has housed HASA clients for three months. He has made it his business to nail the building's owner to the ground for myriad building violations, recently demanding \$100,000 in settlement in order to get him out of his 120-square-foot room, as well as lesser payments for the other members of his tenant group.

Paul Reid, who is a paralegal and a seven-year resident of the Malibu, complained of "intimately shared breathing space" with the HIV-positive residents.

"It's interesting that the city unnecessarily segregates the AIDS patients from the rest of the homeless shelters," he said. "Well, first of all, that's putting them in here with us. You're going to have lots of close encounters with other tenants, unavoidably."

HASA does rare on-site monitoring of the SROs. And since case managers do little when it comes to assisting the SRO clients with keeping off drugs, finding work, or elevating them into permanent housing, several non-profit groups have made it their business to do so. According to de Ariaz, HASA sees them as "the enemy."

"The city isn't providing anything except the money to the landlords to house people here," said Daliah Heller, executive director of City Wide Harm Reduction, which is privately funded with a budget of about \$1.5 million. The group gives referrals to drug treatment programs, provides skills-building workshops, mental wellness programs, and case management, and offers on-site primary care services and clean syringes.

Services for the Underserved provides case management, housing placement, bleach kits, and even toilet paper to clients.

Jennifer Flynn's New York City AIDS Housing Network assists HASA clients with finding permanent housing by training them to negotiate with the HASA bureaucracy. At a recent visit to the Eighth Avenue HASA office, she passed out her card to applicants and assisted others with filling out grievance forms, which are among the scant positive changes HASA has made under the pressure of lawsuits from Housing Works.

Flynn has observed what she views as HASA management's critical inability to delegate responsibility. She reported late nights at the Eighth Avenue location when numerous front line workers were idly playing Scrabble while Doreen Malliet, director of housing with HASA, and an assistant would man the phones by themselves in search of placements.

"A lot of the problem [with HASA] stems from them not doing their job of doing administrative check-ups and to check in to alternative housing solutions, always just throwing them into the easy SRO," said Darryl Ng, director of government relations at Gay Men's Health Crisis, which provides case management to HASA clients.

In fact, according to Housing Works, the legally required 34 to 1 ratio for case managers is consistently violated, with averages as high as 42 to 1 at some satellite locations. And the reality is that, on the whole, case managers don't make house calls. The HASA clients interviewed for this piece said they either have no case manager to their knowledge or have had minimal contact with him or her. And all said that no case manager has ever visited them.

There was a time when HASA supervisors actually maintained offices inside the SROs. But former HASA deputy commissioner Caldwell dismantled the program in 1999.

Rick de Ariaz began working inside the SROs in December 1994. In addition to taking steps in one building to crack down on drug dealing, he used to provide food to clients, and take them on trips out of the city, to museums, the aquarium, and sometimes the movies.

All this stopped when Caldwell, who, de Ariaz said, long vied for complete control of the relatively autonomous on-site managers and did not believe the system needed improvement, said HASA attorneys had interpreted the law to say that the SRO monitoring budget was not restricted to on-site management. Caldwell said that supervisors could work effectively from the HASA offices instead.

"We have management by crisis," de Ariaz explained. "As some disaster occurs, they come up with a plan. As three months go by, I can tell you, it goes out the window, no one checks it."

"We knew that was not true," said de Ariaz, "because you could see that the [HASA] staff was not in the [SROs] a lot."

He and many of his colleagues, some of whom had worked in hotels providing social services for 30 years, protested bitterly over the split, but to no avail.

De Ariaz called the HASA administration "the gang that can't shoot straight," and described a disconnected and poorly managed agency in which staff training "is just a joke" and where upper level management gives little respect or responsibility to mid-level workers like him. Nor do they monitor his work.

"My deputy field director has only been [to the Harlem satellite office] once in almost three years," de Ariaz said. "If you're not out here to see what's going on, how could you be writing the policies? How could you even know if we were doing good or not?"

He said he recently received a memo requesting all case managers to immediately visit their clients in the hotels, which he argued is a clear public relations stunt as HASA prepares to return to court with Housing Works and wants to prove it has its act together.

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Another thing HASA and the city mismanage is their money. New York City is eligible for \$52 million in federal housing funds under the Housing Opportunities for People with AIDS Act of 1990, or HOPWA. In the program's early years, about half, or \$25 million, went to the New York City Department of Housing Preservation and Development (HPD) to build new housing.

In 1999, the city proposed to the federal government that this money be re-appropriated to pay for HASA case manager salaries, because then the HOPWA money would be eligible for state matching funds, which HASA would then commit to building new housing.

But HASA never spent the money it pledged for new housing. And out of the \$25 million from HOPWA, \$10 million went to fill a New York City budget hole, thus missing out on \$10 million in matching funds. The remaining \$15 million went to pay HASA case manager salaries. According to Terri Smith-Caronia, director for New York City policy at Housing Works, the disposition of the matching \$15 million in state funds is unclear because it is not specifically earmarked in public budget documents.

Whatever the case, Smith-Caronia complained that paying city workers with federal funds is "problematic right from the word go. You just can't do that."

The re-appropriation of federal HOPWA funds has further dampened any hope of constructing permanent housing for HASA clients. Instead, exorbitant sums of money are burned up in a temporary solution.

Recently released from prison, HASA client Joshua James, 44, said HASA pays \$1,050 for his current room at the Marion hotel, where he has to sleep with the lights on because of the roaches. But the agency told him they could only give him \$700 to subsidize rent in an \$850 apartment.

"I'm concerned that what we're doing now is penny wise and pound foolish," said City Councilmember Bill de Blasio. "I think we have to look at permanent housing for people with AIDS, not only as the humane and right thing to do, but also ultimately the most cost-efficient."

De Blasio said he is trying to schedule hearings on HASA in the general welfare committee, of which he is the chair. Meanwhile, Councilmember William Perkins said that he recently met with Linda Gibbs, commissioner of the Department of Homeless Services, and that he wants to gather Bloomberg representatives and community and civic representatives to discuss the problem.

HASA client Levine Williams, 50, who currently lives at the Malibu, would like to stay put one of these days.

"Why can't you just get a couple buildings up yourself and just move people in, you know what I'm saying? If you're going to do something, do it right," she said, speaking in a raspy, weary voice, as if simply communicating was a struggle.

She said she worries the transient SRO lifestyle is a detriment to her health.

"You're not supposed to be stressed. That helps the virus," she said. "And yet this moving from place to place, just living like this is stressful, it's very stressful."

Friends have slipped through her fingers and her 17-year-old daughter has to live with the girl's father.

"When you move so much you really can't get close to nobody," she said.

"I've lost a lot."