

THE ROOFTOPS PROJECT

Photo: Barrier Free Living



Profiles

Barrier Free Living

What if you were homeless, a victim of domestic violence, and perhaps were also struggling with physical or mental disabilities? Where would you go? Christopher Whalen and Professor James Hagy of The Rooftops Project visit with **Paul Feuerstein**, founder, President, and CEO of Barrier Free Living, which has served these needs in New York City through a unique program established almost 40 years ago.

On a recent late winter afternoon, we found Barrier Free Living's founder and CEO, Paul Feuerstein, sitting at his desk in the subsurface level of the organization's supportive housing project in the South Bronx. The building, along with another back-to-back building on an adjoining street, comprise multiunit housing facilities newly developed for the singles and families that Barrier Free Living serves every day.

Barrier Free Living operates these two properties. The properties are owned by an outside investment entity for technical purposes to facilitate a tax-credit structure that enabled the project to be financed. When the financing arrangement is retired, Barrier Free Living will own the properties outright. The organization owns a property on Second Street, as well as Freedom House, an emergency shelter for victims of domestic violence, the location of which is not made public.

Barrier Free Living engages a third-party firm to manage these properties, collect the rents, and assure regulatory compliance with Section 8, the now familiar shorthand for the Housing Choice Voucher program established by the Housing and Community Development Act of 1978. Paul comments that the property management firm was one of Barrier Free Living's two partners in the development of the buildings.

"Barrier Free Living has been working with people with disabilities since we started in 1978 as a federally funded research and development program to work with newly-disabled people," Paul explains. "There were people who had been homebound for upwards of 20 years, because they had become disabled and were placed in walk-up apartments. The only time they ever got out was when an ambulette company would come and carry them down the stairs to go to a hospital appointment. A care attendant would shop for them and do basic things. We thought, 'What if we engaged people right out of the hospital to see about homebound prevention?'"

In its earliest days, what would become Barrier Free Living was funded under the then HEW [the federal Department of Health, Education, and Welfare, a cabinet post at the time.] "When I was hired, I was the associate director of the homebound prevention community outreach project. A little too big to put on the stationary," Paul notes with a chuckle. "We called ourselves Project Outward Bound."

The federal funding environment changed, which had a dramatic effect on the programs Paul was leading. In listening to him talk about this period almost 40 years later, Paul's passion and advocacy are still evident. "We were cut off. We were penniless," he says. "We had a demonstration at Federal Plaza, which was a wonderful thing. We had people in wheelchairs picketing with signs in English, Spanish, Chinese, and Yiddish, because we had those communities represented. We got covered [in the] news. We had a group come forward and give us some interim funding to get us started and to provide us with a lawyer to get our 501(c)(3) status and to get our incorporation done.

"Then, we began a process of making the case for our services. The original model was, 'Okay, we are going to hire from the community, visit people with disabilities, do a little light housekeeping, help them get their social security, or help them along, and they will ride happily off into the sunset.' What we found was that, with the level of trauma they were going through, they were not in a place where they could even think about vocational stuff for at least a year, if not longer. And so we had to look at a different model."



Capitalizing on the organization's proximity to New York University, Paul began to hire its graduate students. "We were able to get some really good people that way," he notes. "We began doing individual therapy, group therapy, and some family intervention. I made the case with the city to create the first new mental health clinic in New York City in about 10 years. We started as a satellite clinic for a local settlement house with the understanding that in three years of apprenticeship we would learn the business: learn how to do treatment plans, learn how to bill, learn what we needed to know, and then we would spin off and be on our own. Ultimately it worked out that way. We started our own clinic."

Paul traces the history of the supportive housing movement during this period and its eventual connections with Barrier Free Living's mission. "Supportive housing started with what was called *New York/New York I*," Paul explains. "A group of people who worked with mentally ill individuals in essence recreated the SROs [single room occupancy apartments], a sort of long-term hotel-type accommodation that had been around 40 or 50 years ago, where individuals were able to get a room at a reasonable cost. Supportive housing was designed to take people out of institutions that are much more expensive and, for a flat fee, provide them with support services and permanent housing."

"*New York/New York I* was an agreement between New York City and New York State that created a certain number, several thousand [5,225] units. *New York/New York II* expanded the number of singles but also began working with the chronically homeless and people with AIDS, another population that really needed it if they were in failing health, couldn't work, and couldn't find a place to be. When that was filled up, there was a third agreement between New York City and New York State that began to look at families in need. Then someone got interested in youth aging out of foster care, a group of people who, when they turned 18, were told, 'You are free; we are no longer responsible for you.' Some could move on, go to college, or do whatever. But others were just sinking. So youth aging out of foster care also became part of *New York/New York III*. But they added another category: families with a head of household with a disabling medical condition. I said, 'That's us!'"

While the origins of the charity were in providing field-based services, the absence of supportive housing for people with disabilities was Paul's focus even in those first years. "I saw from very early on that the biggest challenge we had was housing for people with disabilities," he explains.

"People would roll up to our storefront and say, 'I have just been discharged from a hospital today, and I don't have a place to go.'" With [government] cutbacks in funding, hospitals were discharging people into the streets. [Some] people were bouncing back and forth between the shelter and the hospital, which were like literally right next to each other. They didn't have a care attendant. Maybe they would have a friend who would help them get dressed. But the result was that they would end up with medical complications and, lo and behold, back to the hospital. We are sitting there going, 'We could do something about this.'

"The independent living movement was coming to New York City. It came out of the [National Paraplegic Foundation, which began CIDNY [the Center for the Independent Disabled of New York]]. We began collaborating with them and started a coalition on housing for people with disabilities. [Local Law 58], at that point the most progressive building code for people with disabilities in the country, was the result of our advocacy."



Photo: Barrier Free Living

While the Americans with Disabilities Act did not come into effect until 1990, Paul connects his early advocacy for people with disabilities in New York to the Rehabilitation Act of 1973, which, among other things, provided that agencies accepting federal government funding were to make their programs accessible. "And if your program is housing, five percent of it has to be accessible for mobility-impaired people, and two percent has to be accessible for sensory impaired individuals," Paul adds.

"That had some bite to it, because if you didn't do it, you could lose your funding," Paul continues. "So, when Andrew Cuomo was secretary of HUD [the U.S. Department of Housing and Urban Development], he put NYCHA's [the New York City Housing Authority's] feet to the fire. NYCHA [worked to make] its properties accessible. When we started, we would say, 'I've got somebody in the hospital right now who can't go back to his old apartment. He needs something that is more accessible,'" and the [NYCHA] 504 coordinator would find us an apartment. But we couldn't just jump the line to find an accessible apartment. There were rules and regulations to make sure NYCHA was meeting its court responsibilities."

"[Mayor] Ed Koch put millions into housing for the homeless. We competed. We found an old abandoned school building on the Lower East Side. It looked like it was going to be big enough for what we wanted to do, and we bought it for a dollar from the city. We had to have a plan for renovating the building, and we had to have a plan for operating the building. We said, 'We are going to cut the hospitalization rate for these people.' We ended up partnering with a homecare agency that provided care attendants, which was our fiscal conduit. So everybody had to go through the process of getting Medicaid before getting into the shelter."

That first program launched Barrier Free Living's involvement in providing residential housing for people with disabilities. The organization also became active in research in the field.

"What are the major causes of family homelessness in New York City?" Paul asks. "Part of it is domestic violence, which is what we address [here at



Barrier Free Living]. People make themselves homeless to escape violence for safety. Then they move to a shelter in a confidential place. We have to be fierce about confidentiality.”

Freedom House, another of Barrier Free Living’s properties, offers a protective environment in a 10-year-old, purpose-built structure in Manhattan, the location of which is carefully guarded. Clients are referred to Barrier Free Living after being screened through a hotline maintained by the non-profit victim assistance organization Safe Horizon. The building is comprised of individual apartments with interconnecting bedroom and living areas that can be adapted to accommodate even large families, combined with common areas for social activities, laundry, computer usage, and even child care. The evening we visited, one of the childcare staff was carefully cleaning toys in the nursery after an active day.

“In theory it is a short-term, very intensive place where people are establishing safety and beginning to say, ‘Where do I go from here?’” Paul explains. “They get counseling, advocacy, and help getting housing. Concrete services. In our case, we are working with people with disabilities.

“Everybody has a different set of skills. Everybody has a different set of challenges. In part, we rely on occupational therapy (OT) to help us with that. I think we are the only domestic violence program in the country that has OT. We might be one of the few homeless programs that has OT as well. We have OT interns working with us to evaluate everybody’s activities of daily living. Barrier Free Living’s present interns are from LaGuardia and York, hometown schools. But there have been times when we have had people from Washington State, California, North Carolina, and other parts of the country.

“OT isn’t specifically about jobs, but about evaluating people’s ability to do [the tasks] of daily living. Can you tie your shoes? Can you dress yourself? Can you make a grocery list? Can you comparison shop? We are involved in helping people do all of these things, so they are better equipped to manage their lives and their money when they move out to the community.

We want to evaluate people, to determine, ‘What can you do?’ and also ‘How do you learn?’ There are cognitive tests, something like those projects you may have done in summer camp. But it is being done so that the occupational therapist can see the learning style of this individual. I can remember things

visually. Does this person learn how to engage in this activity by reading, by listening, or by having to see somebody actually do it so they can repeat what is being done?

“Then we find housing for people. Housing subsidies have been a bit too low now to really get people out into housing. One of the things that we saw was the need for supportive housing for people who came into our domestic violence shelter. I would say 20 percent of the people needed a safe place to be, light support, but were going to make it on their own. On the other hand, there were about 20 percent coming in who needed a level of support to help maintain them in the community: help to organize their money and pay rent, help to organize their lives so that their kids would get into school, all kinds of things that need to be done. We knew if they left our shelter, Freedom House, they wouldn’t last very long. So we jumped in to say, ‘We want to provide a continuum of care for individuals and families who would continue to need supports after they left shelter.’”

Shelter residents are a mix of those with and without disabilities, which Paul says is consistent with New York State requirements to qualify as a licensed emergency shelter. “We’ve had able-bodied moms with kids with disabilities,” Paul relates. “We’ve had disabled moms with able-bodied kids. We’ve had disabled moms with disabled kids. Every variation. We’ve had dads, men with disabilities who are being abused by their wives. There are people who chose people with disabilities as their partners because of the power and control. You think of it as domestic violence, you think of it as sexual violence, but it is about totally controlling the life of another person: controlling access to friends, controlling children, controlling money, controlling everything.”

Barrier Free Living’s supportive housing has been designed and outfitted to serve a variety of needs. “We have 50 families in this building now, where we are providing support to a head of household who has some form of disabling medical condition, as well as to children,” Paul says. “We have some who have mental health issues that don’t rise to the level of severely and persistently mentally ill, which is a different category. We have a number of heads of households who are deaf, and we have some who are blind.

“For somebody who is deaf, in our emergency shelter, we literally have kits that we can set up in any apartment so that the doorbell will cause a light inside to flash, or so that if a baby is crying there will be a flashing light or



Photos: Barrier Free Living



the bed will vibrate. We used to have TTY [teletypewriter] that would send an audio code so that it could be read at the other end of a telephone line so you could type back and forth, which was the main means of communication for deaf people. Most deaf people now work with smartphones. I can call a number, get in touch with someone who is a sign language interpreter, and that interpreter can be signing back and forth while speaking to me. Any shelter apartment can potentially have these things put in place immediately when a family with deaf members comes into the facility.”

Paul’s experience in design and construction confirms what we often hear from other organizations, as well as from the design community, about the opportunity to incorporate accessibility, sustainability, and other social aspects of the built environment from the outset in facilities planning. “People complain that making space accessible costs a little bit more,” he says. “Not much when you do it in the design phase. A whole lot if you do it afterwards. Retrofitting is a lot more expensive than doing it right the first time.”

While the location of Freedom House is confidential, the facility is convenient to transportation and amenities for daily living during residents’ transitions. Paul reports that the specific property was the outcome of good fortune.

“We found this property by the grace of God,” Paul states. “I’d been looking all over. For me, the critical things are that I want a place that is relatively flat, I want a place that has access to public transportation, and I want a place that is close to the grocery store.

“Another moment of Grace came when the Supportive Housing Network connected us with Alembic Community Development Corporation. They had an option to buy property in the South Bronx that met those same criteria for access. The two apartment buildings on East 137th Street and East 139th Street were completed and opened in 2015 and, together, offer 120 units of supportive housing. Some of these tenants come there as the next stage in transitioning after Freedom House.

“Our 50 family units are reserved for heads of household with a disabling medical condition who are victims of domestic violence. Eighty-five percent of the [residents] in our singles building are victims of intimate partner violence, whether the intimate partner was a roommate, whether the intimate partner was a spouse. Different stories for different people,” Paul explains. “That is our wheelhouse. We know the population; we have been doing this work for 30 years. We are developing a community around this common theme.”

The apartments in one building have multiple bedrooms and are suitable for families. “We look to design so that all of our spaces can be wheelchair accessible,” Paul describes. “Every apartment is wheelchair-accessible. When somebody is coming with sensory impairments, then other things may be necessary.”

The facility includes areas for socialization and relaxation, too, from a playground in an internal courtyard space to a rooftop volunteer garden. Paul personally decorated the playground walls with airbrushed clouds in preparation for a mural project. “It is a community building,” he says. “For Thanksgiving, we had a play where our kids were the stars.”

Beyond basic housing, Barrier Free Living designs its program to help clients develop life skills that will extend past their time in residence. The apartments have an elected tenant advisory board, for example, which Paul believes is core to the objectives of the experience.

“We are trying to develop a sense of positive interaction in community living,” he notes. “People always talk about making people with disabilities independent. And my response to that is that there is no such thing as independence. I am not independent. You are not independent. None of us is independent. I depend on my wife for certain things; she depends on me for certain things. I depend on my staff for a whole host of things; they depend on me for a number of things. I have spread out my dependencies. There is a dry cleaner down the street that cleans my clothes. There is a grocery store around the corner where I can go and get the food I need to eat. There is an MTA bus driver, or a subway driver, that is going to take my bones to work.

“We need to help people develop a model of interdependence, in other words, networking. What we are trying to do is get people to develop natural community. An ideal example of this, which happened, is a woman who has some severe asthma problems who literally died. She stopped breathing in one of our buildings. We train our staff in CPR. One of our staff kept her alive. The ambulance came and took her to the hospital. She was in intensive care for days. She had two little kids, a son who is maybe 10 and a daughter who is 5 or 6. A couple of neighbors who had moved in from the same shelter came to us and said, ‘We know this family. We lived through this before. We’ll take care of the kids.’ The two kids spent a couple of nights with those families, and eventually grandma took care of them. But, that is to me an ideal interdependence of people creating relationships, creating community—the small ‘c’ community. People who take care of each other in a variety of ways because they’ve shared history together and get to know each other. That’s how interdependence happens.”

While residents may come together to support each other in times of crisis, in Paul’s mind and in his programs, this sense of community is applicable for his clients every day. All of these are techniques, proxies, for trust building that clients may not have experienced in the past.

“One of the biggest pains we have is that people, particularly our singles, lose their keys or leave their keys in their apartments,” Paul explains. “They were only given one key. I have a brother-in-law who lives [nearby me]. He has a set of my keys. I’ve got a set of his keys. If he ever drops his keys down a grate in the subway, he can come to my house and I can get him in. Everybody here should have that same ability to network. We are now working to say, ‘Everybody needs a second key. They should not live to a higher standard than I do.’ We are in the process of having keys made, and for our social workers to sit with that person and say, ‘What are you going to do with this? Who do you trust to keep this for you so that if, God forbid, you ever leave your key in the apartment or you lose it, you have an alternative that doesn’t involve having to go to a staff member with a master key?’”

Paul’s experience also led him to include ceiling fans in every unit, so that occupants would have a choice between fans and air-conditioning since they pay for their own electricity consumption. It is part economics and part preparing for the future. “I learned from our experience at Freedom House. Nobody gives me my electricity for free. That’s real-world stuff.” The common areas of the building have motion sensors to reduce energy consumption, too.

Barrier Free Living also continues to provide non-residential services to some clients citywide who are disabled and victims of domestic violence. “It’s the number one issue of women with disabilities nationwide,” Paul says. “We began the work when we had the mental health clinic. We provided mental health services to disabled victims of domestic violence, using Post Traumatic Stress Disorder as our main diagnosis.”



Barrier Free Living has adopted a series of value statements about its mission and work, one of which is striving for an environment in which its clients' needs are met in ways that are culturally appropriate. We asked Paul how he sees this aspect of the organization's work in practice.

"What we found is that different cultures have different attitudes toward disability," Paul tells us. "It depends on cultural experience and familial experience. There are some cultures in which to be unable to work is such a source of shame that to ask for help in any way, shape, or form is very difficult. Helping people come to terms with that is a challenge. The term 'handicap' came from [someone with a cap, asking for spare change]. It's a term we don't use anymore. Others [may have] lived in cultures of dependence, where people need [to be encouraged] to take responsibility for their lives. Everybody is a unique individual who is impacted by culture, by abilities, by disability. We are looking to treat everyone as a unique individual who has a unique plan."

Next door to Barrier Free Living's 138th Street property is St. Luke Parish, which now serves the Ghanian community. The monsignor, who passed away in his 90s, was a long-time supporter of Barrier Free Living. "He was a wonderful guy," Paul recalls. "You know, I use the faith community to help us gain acceptance for this program. I am an Episcopal priest, so I went to the South Bronx Council of Churches for support, and they were great."

"We are working for the soul of our community. There will be a certain small number of people who will test us by getting involved in drugs or other illegal activity. Others will say, 'This is our community; we want to invest in it.' We are trying to support those folks so that the group of people that is caught between the bad actors and the community-builders moves more towards the community-building side. That takes time. People in our permanent housing are coming out of years in shelter, and we're looking for how can we best engage them."

Through its reputation and appearances at national conferences, Barrier Free Living also attracts clients from other parts of the world. Paul cites an example in which three Paralympic champions, who had competed in the London Games, shared their stories of domestic violence and abuse. They sought sanctuary in the United States while on a goodwill tour.

"They ended up being referred to Sanctuary for Families, the biggest domestic violence program in New York City," Paul says. "The director of their legal services called me the day before Thanksgiving a year ago and said, 'Paul, have I got a story for you. And you are the only guys who can help us with this.' She explained the story of these three women, and, by the end of that weekend, they were in Freedom House."

"New York is a city that brings people from all over the world. If people get to New York, we are well known in the domestic violence community. I have been around 30 years, a lot longer than many people who are in the field. Somebody said to me in a meeting yesterday, 'You should be retired by now.' And I said, 'Eventually I hope to be, but I still have some work to do.'"



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