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Foreclosures Mean Crises for H.I.V. Positive Renters

By APRIL DEMBOSKY

Sabrina Wilson did not know she would have to move out of her Brooklyn apartment until she saw the “for sale” sign outside the building.

Mrs. Wilson, whose H.I.V. was diagnosed 18 years ago, had always dreaded the thought of having to find another landlord who would accept her rental subsidy from the city. But this time, because her current landlord faced foreclosure, the sense of urgency landed her in the hospital.

“I got sick because of the stress,” said Mrs. Wilson, who is 51 but moves at the pace of an octogenarian. “I cried day in and day out. Where am I going to stay? Where am I going?”

At least 50 H.I.V.-positive renters have complained to city housing organizations in the past months of being forced out or threatened with eviction because of foreclosures. The agencies say they do not know the exact number of families in housing trouble because there is no centralized system for tracking them, but all say that H.I.V.-positive renters are in a particular squeeze.

High rental rates, combined with insufficient public benefits and ineffective antidiscrimination laws, can extend their housing search to a year or more. Unless the landlord is forthcoming, or the bank is diligent in notifying them, tenants may not learn of a foreclosure until they have just a few months to move, putting them in a crisis situation.

For people with children, the most common option is a home or small building in a poor neighborhood, properties that tend to be susceptible to foreclosure. Between 2004 and 2007, foreclosure rates in New York City doubled, with the highest rate of increase seen in two- and three-family buildings, according to a study by the Furman Center for Real Estate and Urban Policy at [New York University](#). Renters in these types of foreclosed houses have little to no defense against eviction, even if they have a lease.

But the problems of H.I.V.-positive tenants begin long before the eviction date, when landlords with nothing else to lose stop paying the utilities.

One such tenant, a 49-year-old woman who asked not to be identified by name because she fears discrimination for being H.I.V. positive, lives in a three-bedroom apartment in Queens with three of her children and two grandchildren.

In June, the woman’s gas, which was included in her rent, was shut off. Then she received a legal document in her mailbox, saying the owners of the building she lived in were facing foreclosure.

When she called the gas company, she said they told her the bill was thousands of dollars overdue.

“I couldn’t heat a bottle for my grandson,” she said. “I couldn’t cook hot food. You can’t buy hot food with food stamps.”

The woman paid the gas bill for June, July, and August with her Social Security check, leaving only a few hundred dollars to live on each month. Though she is not sure where things stand with her landlord’s foreclosure proceedings, she makes calls almost every day looking for a new place.

“I’m really trying to move before they tell me, O.K., you have 30 days,” she said. “I want the kids to be stable before school starts come September, but it doesn’t look like it’s going to happen that quick.”

For their part, owners and landlords are so preoccupied with trying to renegotiate their mortgage, or having to move themselves, that little energy is left for the tenants.

“It’s beyond my control,” said Femi Adeyeye, one of the owners of the building the woman lives in.

The city’s H.I.V./AIDS Services Administration, known as HASA, provides rental assistance to people with the illness. Though assistance levels are reviewed on an individual basis, the agency pays about \$940 for a one-bedroom apartment, not including gas and electricity, \$1,069 for a two-bedroom, and \$1,348 for a three-bedroom, the same guidelines since 2003. In addition to the HASA benefit, tenants are expected to contribute 30 percent of their income, usually from federal benefits, but cannot be left with less than \$330 a month.

“HASA pays 20 percent less than Section 8,” said Sean Barry, a co-director of the New York City AIDS Housing Network, referring to the federal rental subsidy program. “If a landlord has multiple clients applying with Section 8 or HASA, they know they can play around with the regulations and get more money from Section 8.”

Advocates and clients are sure that discrimination is a factor that limits housing options.

“People don’t want me because I’m living with AIDS,” Mrs. Wilson said. “I think they’re scared.”

Mrs. Wilson, who also has hepatitis C, diabetes and depression, said she was turned down by one real estate broker after another. “I lost eight pounds,” she said of her housing search. “I ran and I ran and I ran.”

The City Council amended the city’s housing code in March, making it illegal for landlords to discriminate against potential tenants who receive federal, state or local housing benefits like Section 8 or HASA. But the amendment applies only to buildings with six units or more, not private homes, and it carries no penalty for those who violate it.

“There are no consequences, no monetary fines,” said Hannah Thorne, a case manager for Housing Works, a nonprofit group that helps people who are H.I.V. positive or have AIDS find housing and other services. “We look for apartments with clients, and the landlords say, ‘No programs, no programs, no programs.’ ”

It was months before Mrs. Wilson even looked at a place she could afford. She recently found a three-bedroom apartment in Brooklyn for \$900, a big break from the \$1,650 she pays now. She has stacks of moving boxes in her current apartment in the hope that her application is chosen from the pile, and that she; her husband, who has been unemployed since October; and two sons will be able to move soon.

The city provides same-day emergency housing to evicted tenants with AIDS who have not been able to find new homes. The temporary solution, a shelter or a single-room occupancy hotel, can become a long-term solution.

“Housing is a health care issue,” Ms. Thorne said. “A person is more likely to take their medication regimen if properly housed.”

A 52-year-old woman, who asked not to be identified by name because her family does not know she is H.I.V. positive, could not find a new place when her landlord went into foreclosure. Her biggest fear was that she, her two daughters and two grandchildren would end up in a shelter.

“They don’t give you your own place, you have to be there at a certain time of day, you have to sleep with one eye open because they steal your property,” she said.

Real estate brokers kept telling her they did not have any three-bedrooms in her price range. Once she found one, it took months before HASA inspected and approved it as medically appropriate, she said. Meanwhile, her old landlord refused to deal with a rodent and cockroach infestation, leaking ceilings and the peeling paint in her grandchildren’s closet.

“It was so overwhelming,” she said. “I thought I was never going to get out of there.”
